



Special Event Application

*Application must be submitted, and requirements met three (3) weeks
 PRIOR to the scheduled event.*

CITY USE ONLY: PERMIT NO. 2024.3

Person/Organization that will be present at the Event/Parade

Name:	Jansen Art Center
Street Address:	321 Front Street
City, State, ZIP	Lynden, WA 98264
Contact Phone No.:	360-354-3600

Person/Chair in Charge of Event - *NOTE:* If applying on behalf of a person or organization, applicant must provide a written statement authorizing the applicant to apply for the permit on the person/organization's behalf.

Name:	Amanda Slusser
Street Address:	321 Front Street
City, State, ZIP	Lynden, WA 98264
Contact Phone No.:	360-354-3600

Availability

Date(s) of the Event/Parade: July 27, 2024			
Hours of duration?	Start <u>10</u>	A.M. <input checked="" type="radio"/> P.M. <input type="radio"/>	Finish <u>8</u>
		A.M. <input type="radio"/> P.M. <input checked="" type="radio"/>	
Detailed Description of Event/Parade: Front Street Arts Festival. An arts festival with booths, live art demos, beer garden, food trucks, music, and a kids interactive art area. We will order street barricades the two weeks prior to the event from Public Works.			
Location to be held or the route to be traveled; the starting point and the termination point: 150ft in front of Jansen Art Center. Between 4th street and the parking lot in between Jansen and Syros. Plus the parking lot across the street by the public restrooms.			
Specify whether the Event/Parade will occupy all or only a portion of the width of any streets to be used: Festival will occupy the full width of Front street			
Anticipated Number of Persons: 500			
Number of Animals: 0		Type of Animals:	
Number of Vehicles: 0		Type of Vehicles:	

Location, by Streets of any assembly areas for event, and the time such assembly will begin:

Assembly will take place at 6am at 321 Front Street

Insurance:

Will Alcohol be sold at this event? Yes _____ or No X

The required insurance must be obtained and attached to this application before permit can be issued.

Vendor agrees to maintain, at their own expense, for the benefit of the City of Lynden, as additional insured, insurance against liability for damage or loss and against liability for personal injury or death, arising from acts or omissions of vendor, its agents, and employees. Such policy or policies shall contain a provision whereby the City of Lynden must receive at least thirty (30) days prior written notice of any cancellation of Vendor's insurance coverage. Prior to the commencement of the Agreement, Vendor shall deliver to the City of Lynden certificates or binders evidencing the existence of the insurance required herein indicating the City as an additional insured. Failure to provide proof of the insurance at any time to the satisfaction of the City of Lynden shall be grounds for termination of this Agreement.

Vendor shall provide insurance coverage in amounts not less than the following:

- a. Combined single limit of one million dollars; or
- b. One million dollars per occurrence/two million dollars aggregate

Annual Permits:

In order to obtain a reoccurring/annual permit, the applicant must notify the City Administrator in writing no less than sixty days prior to the event. In addition to providing the current date upon which the event will be held, the applicant must inform the City Administrator, on an annual basis, of any changes between the previous year and the current year.

Is this Event:

One-time Occurrence

Annual Permit

Special Event Intake Checklist

When applicable - Attach copies of:	Applicant to Submit	City Received
Special Event Application	<input type="checkbox"/>	<input type="checkbox"/>

Application Fee

\$25 Upon Submittal	<input type="checkbox"/>	<input type="checkbox"/>
\$75 Upon Approval	<input type="checkbox"/>	<input type="checkbox"/>
Site Diagram	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Route Map	<input type="checkbox"/>	<input type="checkbox"/>
Security Plan (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>
City of Lynden Business License	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fire Department Permit(s)	<input type="checkbox"/>	<input type="checkbox"/>
Applicable Parks Fee (Varies)	<input type="checkbox"/>	<input type="checkbox"/>
Right-of-Way / Street Use Permit	<input type="checkbox"/>	<input type="checkbox"/>
Temporary Structure Permit (Including Inflatable Insurance)	<input type="checkbox"/>	<input type="checkbox"/>
Proof of Insurance Certificate with Endorsement Naming the City of Lynden as additional insured	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Private Property Event –Letter from property owner acknowledging their approval of the event	<input type="checkbox"/>	<input type="checkbox"/>
Washington State Liquor Control Board Permit (45 days prior to Event). A copy is required, and the applicant/vendor must display the permit.	<input type="checkbox"/>	<input type="checkbox"/>
Whatcom County Health Department Food Permit - A copy is not required. The Applicant/vendor must display the permit.	<input type="checkbox"/>	<input type="checkbox"/>

For City Use Only- Applicant Do NOT Complete

Approved Denied

Fire Chief Signature _____ Date _____
Comments/Requirements: _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

Police Chief Signature _____ Date _____
Comments/Requirements: _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

Public Works Department Signature _____ Date _____
Comments/Requirements: _____

Mark Samdal

April 24, 2009

- ① All food trucks shall have ^{City} vendor permits.
- ② Access to public bathrooms cant be obstructed
- ③ Access to parking lot east of Jansen cant be obstructed

For City Use Only- Applicant Do NOT Complete

Approved Denied

Other Department Signature _____ Date _____
Comments/Requirements: _____

④ PW cant approve special event closure

⑤ Detour shall stand at 3rd

⑥ Provide traffic control plan for review of approval

For City Use Only- Applicant Do NOT Complete

Approved Denied

City Administrator Signature _____ Date _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

Fire Chief Signature _____ Date _____
Comments/Requirements: _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

Steve Taylor _____ Date *4/16/25*
Police Chief Signature _____
Comments/Requirements: *Double checked w/ Amanda Slusser - there will be no Alcohol/Beer Garden.*

For City Use Only- Applicant Do NOT Complete

Approved Denied

Public Works Department Signature _____ Date _____
Comments/Requirements: _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

Other Department Signature _____ Date _____
Comments/Requirements: _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

City Administrator Signature _____ Date _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

Mike Billie 4/15/24

Fire Chief Signature Date

Comments/Requirements:

For City Use Only- Applicant Do NOT Complete

Approved Denied

Police Chief Signature Date

Comments/Requirements:

For City Use Only- Applicant Do NOT Complete

Approved Denied

Public Works Department Signature Date

Comments/Requirements:

For City Use Only- Applicant Do NOT Complete

Approved Denied

Other Department Signature Date

Comments/Requirements:

For City Use Only- Applicant Do NOT Complete

Approved Denied

City Administrator Signature Date

For City Use Only- Applicant Do NOT Complete

Approved Denied

Fire Chief Signature _____ Date _____
Comments/Requirements: _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

Police Chief Signature _____ Date _____
Comments/Requirements: _____

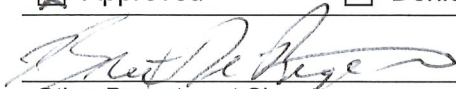
For City Use Only- Applicant Do NOT Complete

Approved Denied

Public Works Department Signature _____ Date _____
Comments/Requirements: _____

For City Use Only- Applicant Do NOT Complete

Approved Denied

 PARKS DEPT. 4/16/24
Other Department Signature _____ Date _____
Comments/Requirements: _____

*EVENT SHOULD PROVIDE THEIR OWN TRASH RECEPTACLES AND
REMOVAL WITHOUT USING NEAREST TRASH RECEPTACLES IN CENTENNIAL PARK.*

For City Use Only- Applicant Do NOT Complete

Approved Denied

City Administrator Signature _____ Date _____



STATE OF WASHINGTON

BUSINESS LICENSE

Nonprofit Corporation

JANSEN ART CENTER
321 FRONT STREET
LYNDEN WA 98264-1918

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE

Issue Date: Apr 04, 2024
Unified Business ID #: 603134771
Business ID #: 001
Location: 0001
Expires: Aug 31, 2024

CITY/COUNTY ENDORSEMENTS:
LYNDEN GENERAL BUSINESS - ACTIVE

LICENSING RESTRICTIONS:
Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:
JANSEN ART CENTER

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 603134771 001 0001

Expires: Aug 31, 2024

JANSEN ART CENTER
321 FRONT STREET
LYNDEN WA 98264-1918

UNEMPLOYMENT INSURANCE - ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE
LYNDEN GENERAL BUSINESS - ACTIVE

IMPORTANT!

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BEFORE POSTING THIS LICENSE

General Information

Post this Business License in a visible location at your place of business.

If you were issued a Business License previously, **destroy the old one and post this one in its place.**

Login to My DOR at dor.wa.gov if you need to make changes to your business name, location, mailing address, telephone number, or business ownership.

Telephone: 360-705-6741

Endorsements

All endorsements should be renewed by the expiration date that appears on the front of this license to avoid any late fees.

If there is no expiration date, the endorsements remain active as long as you continue required reporting. Tax Registration, Unemployment Insurance, and Industrial Insurance endorsements require you to submit periodic reports. Each agency will send you the necessary reporting forms and instructions.

For assistance or to request this document in an alternate format, visit <http://business.wa.gov/BLS> or call (360) 705-6741. Teletype (TTY) users may use the Washington Relay Service by calling 711.

BLS-700-107 (07/27/20)



SPECIAL EVENTS FUN RUN SAFETY QUESTIONS

The City of Lynden Police Department is glad to assist you with your event as our workforce and call load allow. There are a few questions that may help you and the city prepare as you organize your event. We would like to ensure that race day goes very smoothly and safely for everyone.

- 1) If the route crosses another roadway at the beginning or the end of a race, how will traffic be controlled as the distance between stragglers/runners might be extended significantly?
- 2) How will traffic be controlled as runners cross intersecting roadways?
- 3) How will runners be instructed to remain out of the roadway, and how will the instruction be enforced?
- 4) Will there be spotters moving along the route on bikes at the front, and the rear as stragglers begin to spread the field?
- 5) Will the intersections along the course of the run be staffed with volunteers/flaggers wearing traffic vests?
- 6) Will there be cones or other delineators marking the course in order to help contain the runners from gradually moving into the roadway?
- 7) If a roadway contains an "S" curve, runners will commonly try and straighten the curves by crossing the roadway. This obviously becomes a safety concern. How will this issue be addressed?
- 8) Will there be stations for refreshments as the runners move along the course that may cause a group to form, or become a traffic problem?

We wish you and all the organizers a great race day!

Non Profit Insurance Program Certificate of Coverage

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONVEYS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF COVERAGE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGRATION IS WAIVED, subject to the terms and conditions of the policy, certain coverage may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Clear Risk Solutions 451 Diamond Drive Ephrata, WA 98823	COMPANIES AFFORDING COVERAGE GENERAL LIABILITY American Alternative Insurance Corporation, et al. AUTOMOBILE LIABILITY American Alternative Insurance Corporation, et al.
INSURED Jansen Art Center 321 Front Street Lynden, WA 98264	PROPERTY American Alternative Insurance Corporation, et al. MISCELLANEOUS PROFESSIONAL LIABILITY Princeton Excess and Surplus Lines Insurance Company
COVERAGES	

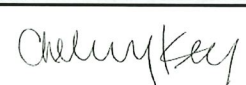
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE COVERAGE PERIOD INDICATED, NOT WITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFF DATE	POLICY EXP DATE	DESCRIPTION	LIMITS
GENERAL LIABILITY					
COMMERCIAL GENERAL LIABILITY	N1-A2-RL-0000013-14	6/1/2023	6/1/2024	PER OCCURRENCE	\$5,000,000
OCCURRENCE FORM				PER MEMBER AGGREGATE	\$10,000,000
INCLUDES STOP GAP				PRODUCT-COMP/OP	\$5,000,000
				PERSONAL & ADV. INJURY	\$5,000,000
(LIABILITY IS SUBJECT TO A \$350,000 SIR PAYABLE FROM PROGRAM FUNDS)				ANNUAL POOL AGGREGATE	\$50,000,000
AUTOMOBILE LIABILITY					
ANY AUTO	N1-A2-RL-0000013-14	6/1/2023	6/1/2024	COMBINED SINGLE LIMIT	\$5,000,000
(LIABILITY IS SUBJECT TO A 350,000 SIR PAYABLE FROM PROGRAM FUNDS)				ANNUAL POOL AGGREGATE	NONE
PROPERTY					
	N1-A2-RL-0000013-14	6/1/2023	6/1/2024	ALL RISK PER OCC EXCL EQ & FL	\$75,000,000
				EARTHQUAKE PER OCC	Excluded
				FLOOD PER OCC	Excluded
(PROPERTY IS SUBJECT TO A \$350,000 SIR PAYABLE FROM PROGRAM FUNDS)				ANNUAL POOL AGGREGATE	NONE
MISCELLANEOUS PROFESSIONAL LIABILITY					
	N1-A3-RL-0000060-14	6/1/2023	6/1/2024	PER CLAIM	\$5,000,000
(LIABILITY IS SUBJECT TO A \$350,000 SIR PAYABLE FROM PROGRAM FUNDS)				ANNUAL POOL AGGREGATE	\$40,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS

Regarding permit for use of Front Street for Front Street Arts Festival held July 27th, 2024. City of Lynden is named as Additional Insured as respects General Liability regarding this permit use only and is subject to policy terms, conditions, and exclusions. Additional Insured endorsement is attached. Coverage is contingent upon successful renewal of the 24-25 NPIP policy.

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

CERTIFICATE HOLDER City of Lynden 300 4th Street Lynden, WA 98264	AUTHORIZED REPRESENTATIVE 
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Will be providing an updated ins. certificate.

**AMERICAN ALTERNATIVE
INSURANCE COMPANY**

**ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION
(GENERAL LIABILITY)**

Named Insured Non Profit Insurance Program (NPIP)	
Policy Number N1-A2-RL-0000013-14	Endorsement Effective 6/1/2023

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

This endorsement modifies insurance provided under the following:

GENERAL LIABILITY COVERAGE PART

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated above.

Schedule

Person or Organization (Additional **Insured**): As Per Schedule on file with Clear Risk Solutions, Underwriting Administrator

City of Lynden
300 4th Street
Lynden, WA 98264

Regarding permit for use of Front Street for Front Street Arts Festival held July 27th, 2024. City of Lynden is named as Additional Insured as respects General Liability regarding this permit use only and is subject to policy terms, conditions, and exclusions. Additional Insured endorsement is attached. Coverage is contingent upon successful renewal of the 24-25 NPIP policy.

A. With respects to the General Liability Coverage Part only, the definition of **Insured** in the Liability Conditions, Definitions and Exclusions section of this policy is amended to include as an **Insured** the Person or Organization shown in the above Schedule. Such Person or Organization is an **Insured** only with respect to liability for **Bodily Injury, Property Damage, or Personal and Advertising Injury** caused in whole or in part by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In performance of your ongoing operations; or
2. In connection with your premises owned or rented to you.

B. The Limits of Insurance applicable to the additional **Insured** are those specified in either the:

1. Written contract or written agreement; or
2. Declarations for this policy,

whichever is less. These Limits of Insurance are inclusive and not in addition to the Limits Of Insurance shown in the Declarations.

All other terms and conditions remain unchanged.

Form: RL 2124 10 21

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