



Date: March 23, 2023

To: City of Sweet Home
City Council Members
1140 12th Ave
Sweet Home, OR 97386

Applicant: Sweet Home Economic Development Group, Inc.
dba The Oregon Jamboree
401 Main Street, Suite D
Sweet Home, OR 97386

Contact: Robert Shamek

Subject: The 2023 Oregon Jamboree in Sweet Home

The Sweet Home Economic Development Group, Inc. (SHEDG) and the Oregon Jamboree Management (OJM) are proud to present the 31st Annual Oregon Jamboree in Sweet Home on August 4-6, 2023, with our Kick Off Party, free to all, on August 3rd. The event will be held at the community field located behind the Sweet Home High School and in Sankey Park. With the support of the City of Sweet Home, Sweet Home School District #55, the Sweet Home Community, and the dedication of over 800 volunteers; the Oregon Jamboree in Sweet Home has become a national entertainment attraction which offers tremendous benefit and unlimited potential for the community of Sweet Home.

List of attached documents:

1. City of Sweet Home Special Event Permit Application
2. Statement regarding OLCC License
3. Letter of Intent regarding Insurance, from Blake Keesecker
4. 2023 Oregon Jamboree Additional Information
 - a. Conflict Resolution
 - b. Event Chain of Command
 - c. Admission Policy
 - d. Liability Insurance; Additional Insured
 - e. 2023 Street Closure Plan Detail
 - f. Sample Team Plans



Community and Economic Development Department

SPECIAL EVENT PERMIT APPLICATION

- Name of Event: The 31st Annual Oregon Jamboree Date(s) of Event August 3-6, 2023
- Setup Start Time/Date: Monday, 7/31/2023 6:00am Event Start Time: Thursday, 8/3/2023 4:00 pm
- Event End Time: Monday, 8/7/2023 11:00am Clean Up End Time/Date: Monday 8/7/2023 10:00 pm
- Sponsoring Organization: Sweet Home Economic Development Group, Inc. dba The Oregon Jamboree
- Event Coordinator/Primary Contact: Robert Shamek
- Mailing Address: 401 Main St, Suite D., Sweet Home, OR 97386
- Day Time Phone: 541-367-8800 Cell Phone: 541-730-0194
- Email: robert@oregonjamboree.com Fax: 541-367-8400
- Secondary Contact: Peggy Curtis Phone: 541-367-8800 or Cell: 269-967-1711
- Is Alcohol Being Served? Yes No If YES include a copy of the State Liquor Permit.
- Do you wish to utilize any City property, such as a park? Yes No
If YES, which one(s)? Sankey Park for festival grounds; Upper Sankey Park, City Hall, Quarry Park, Strawberry Park, for Camping
- Will this event include Food Vendors of any type? Yes No
If YES, all vendors must apply for a Temporary Restaurant License with the Linn County Health Department 541.967.3821, (ORS 624.025). The Vendors must apply three weeks before the start of the event. A list of vendors is required to be submitted with this application.
- Anticipated Number of Attendees? 12,000 patrons per day. 36,000 total

THE PRIMARY CONTACT MUST LIST A DAY OF EVENT PHONE NUMBER IF NOT LISTED ABOVE.

| FOR OFFICE USE ONLY: | | | |
|---|------------------------------|-----------------------|--|
| Planning | <u>OK 04.03.23</u> | Engineering | |
| CEDD Director | | Police Chief | |
| Fire Chief | <u>OK via email 03.28.23</u> | Public Works Director | |
| STAFF – INITIAL AND DATE UPON APPROVAL OR ATTACH MEMORANDUM WITH CONDITIONS | | | |

PAYMENT AMOUNT: N/A CASH CC CHECK # _____
 RECEIVED BY: AC DATE: 03.24.23

PERMIT APPROVED: Yes No

Authorized City Signature: _____ Date: _____



Community and Economic Development Department

HOLD HARMLESS AGREEMENT

IN CONSIDERATION OF BEING PERMITTED TO PRODUCE THIS SPECIAL EVENT OR ACTIVITY OR USE OF ANY CITY PROPERTY OR FACILITIES IN CONNECTION WITH THIS ACTIVITY, THE UNDERSIGNED APPLICANT ("INDEMNITOR") AGREES TO THE FOLLOWING:

1. THE INDEMNITOR HEREBY AGREES TO RELEASE, INDEMNIFY AND HOLD HARMLESS the City of Sweet Home from any and all liability, claims, demands, causes of action, charges, expenses, and attorney fees (including attorney fees to establish the City's right to indemnity or incurred on appeal) resulting from involvement in this event whether caused by any negligent act or omission of the City or otherwise. This agreement shall not apply to any liability resulting from the sole negligence of the City.
2. The INDEMNITOR agrees to reimburse the City for any loss, theft of, or damage to City property, equipment and/or facilities.
3. The INDEMNITOR agrees to comply with all applicable laws, statutes, ordinances, rules and requirements including, but not limited to, not admitting more attendees than designated by Fire Department as safe for the particular event or facility.
4. The INDEMNITOR expressly agrees that this release and hold harmless agreement is intended to be as broad and inclusive as permitted by Oregon law and that if any portion thereof is held invalid, notwithstanding, the balance shall continue in full legal force and effect.
5. Falsification and/or misrepresentation in completing this application may result in rate adjustment or event cancellation. I UNDERSTAND THAT CHANGES TO THE ABOVE DETAILED PROGRAM REQUIRE IMMEDIATE NOTIFICATION TO THE CITY.

I, the undersigned representative, have read the Special Events Application and the Policies and Procedures contained herein, and I am duly authorized by the event organization/business to submit this application on its behalf. The information herein is complete and accurate.

APPLICANT: Robert Shamek The Oregon Jamboree
 PRINT NAME AUTHORIZED AGENT FOR

SIGNATURE OF APPLICANT:  March 24-2023
 SIGN NAME DATE

APPROVAL, DENIAL OR INCLUSION OF RESTRICTIONS OR SPECIAL CONDITIONS OD USE PERMIT IS AT THE SOLE DISCRETION OF THE CITY PUSUANT TO Sweet Home Code of Ordinances 17.80 Conditional Uses. All applications must be reviewed and approved before a permit can be issued.



Community and Economic Development Department

Event and Equipment Rental Fees

| Description | Fees: Non-Refundable | Fees: Refundable | Replacement Costs | Total Owed | Total Paid | Date Paid |
|---|-------------------------------|------------------|-------------------|------------|------------|-----------|
| Bandstand | \$15.00/hour or \$100 maximum | \$100.00 | | | | |
| Outdoor Event Center | \$15.00/hour or \$100 maximum | \$100.00 | | | | |
| Gazebo | \$15.00/hour or \$100 maximum | \$100.00 | | | | |
| Sankey Hut | \$15.00/hour or \$100 maximum | \$100.00 | | | | |
| Weddle Bridge | \$15.00/hour or \$100 maximum | \$100.00 | | | | |
| <p>Total Equipment Items not to exceed a \$400.00 replacement costs. Items described below are subject to availability. A 24-hour notice is required before pick-up. Two-day maximum rental.</p> | | | | | | |
| Description | Fees: Non-Refundable | Fees: Refundable | Replacement Costs | Total Owed | Total Paid | Date Paid |
| Tables | \$5.00/table | \$100.00 | \$60.00 | | | |
| Chairs | \$1.00/chair | | | | | |
| 2' Fold Up Barricade | \$3.00/ Barricade | | \$25.00 | | | |
| 2' Fold Up Plastic Barricades | \$3.00/Barricade | | \$40.00 | | | |
| 8' Barricade | \$3.00/Barricade | | \$45.00 | | | |
| Small Barricade – "No Park" | \$3.00/Barricade | | \$24.00 | | | |
| Photo Cell Battery Light | \$3.00/Light | | \$20.00 | | | |
| 18" Traffic Cones | \$3.00/Cone | | \$10.00 | | | |
| 28" Traffic Cones with Reflective Strip | \$3.00/Cone | | \$19.00 | | | |
| Construction Signs with Sign Holders | \$10.00/Sign | | \$50.00 | | | |
| Slow/Stop Paddle | \$3.00/Each | | \$18.00 | | | |
| Slow/Stop Paddle with 30" Handle | \$5.00/Each | | \$20.00 | | | |
| Slow/Stop Paddle with 60" Handle | \$5.00/Each | | \$21.00 | | | |
| Hydrant Wrench | \$5.00/Each | | \$35.00 | | | |
| Safety Vests | | | \$12.00/Each | | | |



Community and Economic Development Department

SANKEY HUT RENTAL

Pass Code: _____ (given by staff upon payment of fees)

Please read and initial each line below:

- ___ I agree to not share my pass code with anyone else.
 - o Pass codes will be distributed by authorized City employees only.
- ___ I agree to report any problems or damage to the Community Development Department immediately. During regular business hours (7am-4pm), call **541-367-8113**. At other times call the police non-emergency number, **541-367-5181**.
- ___ I agree to set up and remove all equipment, structures, and materials for the reserved hut activity within the block of time specified in the park permit.
- ___ I agree to pick up and properly dispose of all trash, litter, and food from the reserved hut activity.
- ___ I agree to properly dispose of garbage that exceeds the capacity of the garbage receptacles at the hut facility. You can rent a dumpster through a private vendor or haul off your bagged garbage and recyclables yourself. Excess garbage left at the rental facility will be removed at your expense. A fee for service will be deducted from your security deposit.
- ___ I agree to remove all signs or markings associated with the reserved hut activity. Paint is not permitted for marking pavement or structures. Chalk is acceptable but must be removed immediately after the event.
- ___ I agree to obtain an underground utility locate and permission from the Community Development Department if sign posts, stakes, or spikes will be driven into the ground.
- ___ I agree to accept the hut facilities, including the premises and equipment, in their present condition.
- ___ I agree to reimburse the City for all damages to the premises or property resulting from their use, other than ordinary wear and depreciation, as determined by the City.
- ___ I agree to conform to all rules and regulations of the City.
- ___ I agree to provide adequate supervision and be responsible for any improper conduct of the attendees, both individually and collectively, while on the City premises or utilizing facilities.
- ___ I agree that the use of the facilities and this permit is revocable by the City at any time at the City's option.
- ___ I agree to hold the city harmless and indemnify the city from any and all liability for injury to persons or property occurring as a result of the activity sponsored by the permittee.
- ___ I agree that the permittee and any other person who allows or causes damage to hut facilities, park areas, and any other property owned by the city shall be liable to the city for the damage caused.
- ___ I agree to abide by all Federal, State, and municipal equal opportunity laws and regulations prohibiting discrimination.

Staff Use Only:

Clean up verified by Staff _____, _____
Date signature of staff

Deposit Returned _____, _____
Date signature of staff



Community and Economic Development Department

FACT SHEET

The Oregon Jamboree will take full responsibility to repair/replace any damages incurred to the City of Sweet Home properties while under the permitted use by the Oregon Jamboree; with exception of uncontrollable events produced by natural forces (Force Majeure Event).

Occupancy Tax:

- Historically, the Oregon Jamboree pays an occupancy tax on all patron campsites (excluding comp sites) to the City of Sweet Home and Linn County based on camping sites sold, within the city and county limits. The Jamboree supports the long standing tradition of giving these funds to the Sweet Home Chamber of Commerce.

Alcohol Sales:

- Oregon Beverage Services personnel will ensure that alcohol sales are in strict compliance with all city and state laws; including proper liquor permits, security and insurance.

Residential Passes:

- All residents of 18th Avenue and Kalmia Street will receive (4) passes via USPS with tracking, allowing them to proceed to and from their homes. Resident vehicles must be parked on their property and not on the street.

Requested Assistance from the Sweet Home Police Department

- We are requesting adequate manpower from the Sweet Home Police Department to assist with concert security and safety based on our projection of between 10,000-12,000 patrons per day.

Please see Additional Information for:

- Conflict resolution
- Event chain of command
- Admission Policy
- 2023 Street Closure Plan with Map
- Traffic Control Plan



Community and Economic Development Department

SPECIAL EVENT TASK LIST / TIME LINE

| DATE | TIME | EVENT TASK | RESPONSIBLE PARTY |
|---|------------------------|---|--|
| <i>e.g.</i> 06/20/18 | <i>e.g.</i> 9:00 am | <i>e.g.</i> All Scheduled Streets Closed | <i>e.g.</i> City of Sweet Home |
| 8/7/2023 | 9:00 am | Deliver 18 - "No Parking Signs" to the Boys and Girls Club | Public Works Department/ Jamboree: Ryan Warden |
| July 2023 | no later than 7/27 | Mow and Rake Sankey Park, to prepare for Camp Site Layout (7/29) | Public Works Department |
| July 2023 | no later than 7/27 | Clear debris from Quarry Park, to prepare for Camp Site Layout (7/29) | Public Works Department |
| July 2023 | no later than 7/27 | Mow and Rake Strawberry Park, to prepare for Camp Site Layout (7/29) | Public Works Department |
| 7/27/2023 | 9:00 am | Turn-on the water access at the Rodeo Grounds | City of Sweet Home Water Department -Cindy |
| 8/8/2023 | 9:00 am | Turn-off the water at the Rodeo Grounds | City of Sweet Home Water Department -Cindy |
| 7/27/2023 | 9:00 am | Unlock the Rodeo Grounds Gate (Camp 9&10) | Public Works Department |
| 8/2/2023 | 12:00 pm | Unlock Cable at Upper Sankey Park Gate | Public Works Department |
| ROAD CLOSURES --- PERMIT ACCESS | | | |
| 8/3/2023 | 7:00 AM | <-----Starting at // | |
| 8/6/2023 | 9:00 PM | <-----Ending at // | |
| Kalmia Street just past 14th - Unmanned Closure | | | |
| 18th AVE--barricade at 18th & Long-local traffic only | | | |
| Ames Creek Road between BGC & Grape St | | | |
| Ames Creek to Mountain View Road-open to local traffic | | | |
| HARD BARRIER CLOSURE---NO TRAFFIC | | | |
| 8/3/2023 | 7:00 AM | <-----Starting at // | |
| 8/6/2023 | 9:00 PM | <-----Ending at // | |
| 18th AVE North of Main Gate & Bus Garage --NO TRAFFIC | | | |
| PARKS CLOSURE | | | |
| *provides maximum security and eliminates potential hazards | | | |
| 7/31/2023 | 6:00 AM | <-----Starting at // | |
| 8/7/2023 | 10:00 PM | <-----Ending at // | |
| Sankey Park/Weddle Bridge | | | |
| 8/3/2023 | 12:00 PM | <-----Starting at // | OTHER CITY PARKS CLOSED TO THE PUBLIC |
| 8/7/2023 | 10:00 AM | <-----Ending at // | CITY PARKS REOPENING TO THE PUBLIC |
| Grassy area and Parking Lot at City Hall | | | |
| Strawberry Park | | | |
| Quarry Park | | | |
| Upper Sankey Park | | | |



Community and Economic Development Department

Insert Event Overview Map

* Attached



Community and Economic Development Department

Insert Vendor Site Map

**Attached*



Community and Economic Development Department

SPECIAL EVENT APPLICATION CHECKLIST

- Review the Instructions for completing the Special Event Permit.
- Complete the Special Event Permit Application.
- Scheduled and Attended a meeting with the Community and Economic Development Department to review the application and supporting documentation.
- Obtained and submitted a Certificate of Insurance.
- Review and signed the Hold Harmless Agreement.
- Completed the Rental Fees form.
- Completed Sankey Hut Rental form (if applicable)
- Completed the Fact Sheet
- Completed the Special Event Task List / Time Line. (if applicable)
- Completed the List of Vendors. (if applicable)
- Submitted an Event Overview Map. (if applicable)
- Submitted a Vendor Map. (if applicable)
- Turned in or mailed all the above items to the City of Sweet Home

Community and Economic Development Department
Special Event Permit
3225 Main Street
Sweet Home, OR 97386



Statement of Intent to provide OLCC License & Proof Of Insurance

March 13, 2023

Oregon Jamboree
401 Main St, Ste D
Sweet Home, OR 97386

Angela Clegg
Community and Economic Development Dept.
City of Sweet Home
3225 Main Street
Sweet Home, OR 97386

Angela,

As in 2022, our 2023 OLCC License will be submitted by our vendor, Oregon Beverage Services, managed by Carroll Unruh. He will submit the request for the permit to the State of Oregon approximately 6 weeks prior to the event, to allow for processing. The permit is sent to the Chief of Police who will then forward the approval to the City of Sweet Home.

Additionally, included is a letter of intent to provide insurance from Blake Keesecker.

Sincerely,

Peggy Curtis



1195 Main Street
PO Box 9
Sweet Home, OR 97386
(541) 367-2141
(541) 367-3904 fax
www.keeseckerinsurance.com

March 16th, 2023

To whom it may concern:

Sweet Home Economic Development Group Inc. (SHEDG Inc.) has intent to purchase Commercial General Liability insurance for the 2023 Oregon Jamboree. I, Blake Keesecker, licensed insurance agent, have submitted applications on behalf of SHEDG Inc. for Commercial General Liability Insurance and are in the process of reviewing pricing and coverages.

SHEDG Inc. will be obtaining insurance with a \$3,000,000 per occurrence and \$5,000,000 aggregate limit of liability.

Those who require additional insured status from SHEDG Inc.'s insurance policy will be furnished a certificate of insurance showing additional insured status.

Attached is a sample certificate of insurance of what coverages SHEDG Inc. will obtain.

Regards,

Blake Keesecker
Keesecker Insurance Inc.
PO BOX 9
Sweet Home, OR 97386
541-367-2141
blake@kee-ins.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/16/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE 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 have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| PRODUCER Keesecker Insurance, Inc. 1195 Main Street PO Box 9 Sweet Home OR 97386 | CONTACT NAME: Sabrina Sutor PHONE (A/C No. Ext): (541) 367-2141 FAX (A/C No.): (541) 367-3904 E-MAIL ADDRESS: sabrina@kee-ins.com | | | | | | | | | | | | | |
|--|--|-------------------------------|--------|-----------------|--|------------------|--|-------------|--|-------------|--|-------------|--|-------------|
| | <table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A : TBA</td> <td></td> </tr> <tr> <td>INSURER B : SAIF</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table> | INSURER(S) AFFORDING COVERAGE | NAIC # | INSURER A : TBA | | INSURER B : SAIF | | INSURER C : | | INSURER D : | | INSURER E : | | INSURER F : |
| INSURER(S) AFFORDING COVERAGE | NAIC # | | | | | | | | | | | | | |
| INSURER A : TBA | | | | | | | | | | | | | | |
| INSURER B : SAIF | | | | | | | | | | | | | | |
| INSURER C : | | | | | | | | | | | | | | |
| INSURER D : | | | | | | | | | | | | | | |
| INSURER E : | | | | | | | | | | | | | | |
| INSURER F : | | | | | | | | | | | | | | |
| INSURED Sweet Home Economic Development Group, Inc., DBA: Oregon 401 Main Street Ste D Sweet Home OR 97386 | | | | | | | | | | | | | | |

COVERAGES

CERTIFICATE NUMBER: CL2331807203

REVISION NUMBER:


THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY 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.

| INSR LTR | TYPE OF INSURANCE | ADDITIONAL | | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
|----------|--|------------------------------|--------|---------------|-------------------------|-------------------------|---|--------------|
| | | INSUR | WAIVED | | | | | |
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY | | | | | | EACH OCCURRENCE | \$ 3,000,000 |
| | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 300,000 |
| | | | | | | | MED EXP (Any one person) | \$ 10,000 |
| | | | | | | | PERSONAL & ADV INJURY | \$ 3,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | GENERAL AGGREGATE | \$ 5,000,000 |
| | <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC | | | | | | PRODUCTS - COMP/OP AGG | \$ 5,000,000 |
| | OTHER: | | | | | | | \$ |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ 2,000,000 |
| | <input type="checkbox"/> ANY AUTO | | | | | | BODILY INJURY (Per person) | \$ |
| | <input type="checkbox"/> OWNED AUTOS ONLY | | | | | | BODILY INJURY (Per accident) | \$ |
| | <input checked="" type="checkbox"/> HIRED AUTOS ONLY | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY | | | | | | | \$ |
| | UMBRELLA LIAB | | | | | | EACH OCCURRENCE | \$ |
| | <input type="checkbox"/> EXCESS LIAB | | | | | | AGGREGATE | \$ |
| | <input type="checkbox"/> OCCUR | | | | | | | \$ |
| | <input type="checkbox"/> CLAIMS-MADE | | | | | | | \$ |
| | DED RETENTION \$ | | | | | | | \$ |
| B | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | | | | PER STATUTE | |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | <input type="checkbox"/> Y/N | N/A | 749772 | 04/01/2023 | 04/01/2024 | E.L. EACH ACCIDENT | \$ 1,000,000 |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ 1,000,000 |
| | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

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. |
| | AUTHORIZED REPRESENTATIVE  |

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2023 Oregon Jamboree Additional Information

A. Conflict Resolution:

- 1) Anyone causing problems will be asked to leave the premises.
- 2) A complaint will be made to the Police Department and the person(s) will be subject to arrest for trespassing or disorderly conduct.
- 3) The Chief of Police has the final say in every matter.

B. Event Chain of Command

- 1) *Police Chief*
- 2) *Fire Chief*
- 3) *Festival Director*
- 4) *Staff/Management Team*
- 5) *Production Manager*
- 6) *Paid Security*
- 7) *Volunteer Supervisors*

C. Admission Policy

RFID enabled wristbands will be scanned at the gate for admission. We have an open gate policy with a search at the gate conducted by paid security and volunteer personnel. No alcohol, food, beverages, or weapons will be allowed to enter the festival gates. Re-entry is allowed.

D. Liability Insurance: Additional Insured

The Oregon Jamboree will provide a letter of intent to provide liability insurance policy when the City Permit is applied for, followed by the actual COI to the City of Sweet Home with an all-inclusive list of additional insured entities, no later than Friday, July 31st.



2023 Street Closure Plan Detail

Oregon Jamboree security and parking teams will monitor all road closures closely to ensure the utmost safety for patrons and residents.

Closures #1 - #5 are in effect from 7:00 am Thursday (8/3) through 9:00 pm Sunday (8/6)

Closure #1: Unmanned Closure; open to local traffic only.
Barricade located on Kalmia Street just past 14th Ave.

Closure #2: Pass Required; Resident, Sankey Vendor/Sponsor & Volunteer Parking
Barricades located on 14th Avenue @ Kalmia Street & Hawthorne Street and just past entrance to Camp 1.

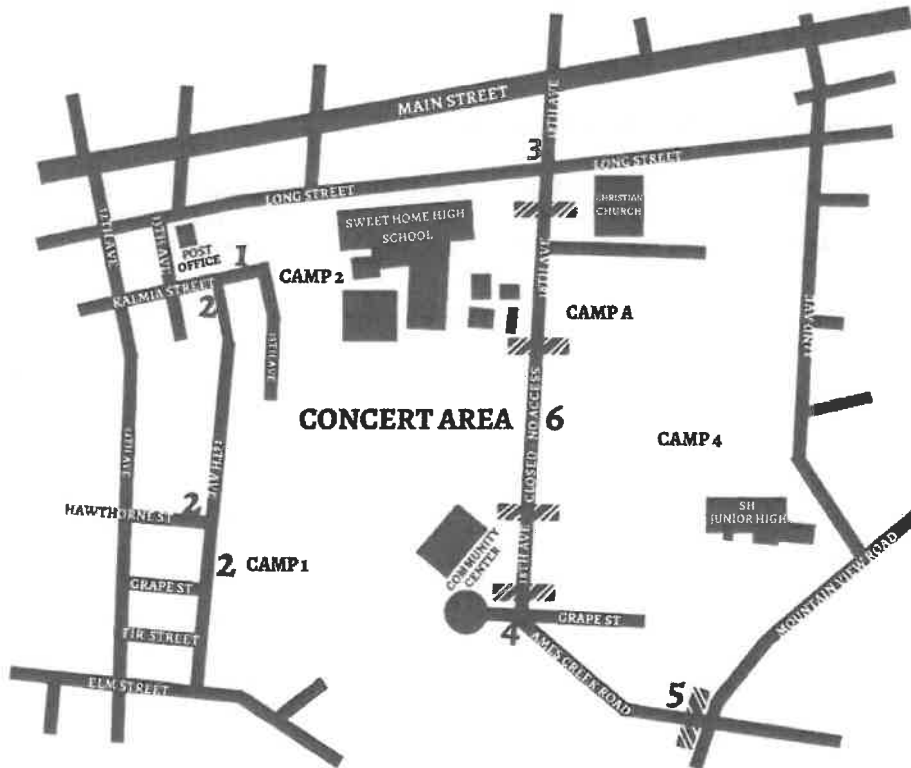
Closure #3: Pass Required; Resident, Vendor/Sponsor, Handicapped, Tent A, Christian Church ADA and Sunday Parking
Barricade located on 18th Avenue and Long Street.

Closure #4: Pass Required; Resident, Backstage, and Boys & Girls Club and Community Center Parking
Barricade located on Ames Creek Road and Grape Street.

Closure #5: Unmanned Closure; open to local traffic only.
Barricade located at Ames Creek Road and Mountain View Road.

Closure #6 is in effect from 7:00 am Thursday (8/3) through 9:00 pm Sunday (8/6)

Closure #6: Road Closed
Barricades located on 18th Avenue North of the Main Gates and South of the entrance to Shuttle Staging.





Sample Team Plans

The following attached proposals are a sampling of individual team plans that will impact the overall flow and safety of the Oregon Jamboree:

1. Clean UP/Sanitation Proposal
2. Concessions Proposal
3. Safety Proposal

1. Clean Up/Sanitation Team Plan

The Clean-Up and Sanitation volunteer team plans to keep the concert site and surrounding areas in as near spotless condition as possible. We will accomplish this goal by having continuous trash patrol before and during each concert. Because of the possibility of injury or contamination, we will only allow trash to be picked up when the stage lights are on, if it is after dark.

Rubber gloves and “grapplers” will be provided for handling trash. Proper sized garbage bags will be readily available to replace full bags as needed. Full bags will be put into dumpsters strategically placed through the concert area; dumpsters will be emptied daily by Sweet Home Sanitation. Concessionaires will be asked to separate cardboard and glass for recycling.

Porta-potties will be provided at a minimum of 35 (plus two handicap accessible) per 5,000 people in attendance. This will be determined by ticket sales. Hand washing sinks will also be provided near the port-potties.

Areas to be cleaned (including port-potty distribution) include concert grounds, RV and tent campgrounds and 14th Avenue, 18th Avenue and Sankey Park.

2. Concessions Team Plan

We have planned for a maximum of 20 food booths, three drink booths and 15 merchandise booths.

Our plans are laid out and understood by the concessionaires, regarding location of the electrical and water outlets. Water lines will be laid to within a few feet of each booth from the main water spigots already in place. Power will be supplied from the existing power stations set up. Defined menus and workable plans to serve large groups of people will be established.

Vendor team schedule is as follows: *

- Thursday, August 3, 2023—Set up 10:00 AM—6:00 PM
- Friday, August 4, 2023—Health inspections begin 11:30 AM
- Friday, August 4, 2023—Vendor Booths open 1:00 PM- 11:30 PM
- Saturday, August 5, 2023—Vendor booths open 11:00 AM-11:45 PM
- Sunday, August 6, 2023—Vendor Booths open 11:00 AM- 9:00 PM

*all days and times are subject to change without notice.

3. Safety Team Plan

The team goal is to maintain a safe environment for participants, volunteers and the public while maintaining compliance with all state, county and city regulations.

The Safety Team gives the following items utmost priority:

- Provide coordination for safe ingress/egress from concert sites, RV campsites, City Public Works Department and Security and Sign Committee Chairpersons.



- Provide oversight of concert participants to ensure compliance with all County Health Department regulations.
- Assist the fire marshal with the electrical needs for concessions, RV parks and all other necessary inspections.
- Provide concert patrons adequate water supply
- Provide assessable First Aid Station

4. Staff Team Plan

Provide a supervisor and approximately six volunteers with the following qualifications:

- Ability to make logical decisions
- Calm action under stressful or emergency situations
- Tact and diplomacy
- Basic hospitality

Provide the following equipment for staff use:

- Emergency generators with lights (two)
- Radios
- Flashlights
- Barrier Gloves (latex and/or rubber)



Peggy Curtis <peggy@oregonjamboree.com>

2023 Oregon Jamboree Public Address System Permit Application

1 message

Peggy Curtis <peggy@oregonjamboree.com>

Thu, Mar 23, 2023 at 3:45 PM

To: Penny Leland <pleland@sweethomeor.gov>

Cc: Angela Clegg <aclegg@sweethomeor.gov>, Robert Shamek <robert@oregonjamboree.com>

Penny,

Could you please see that the Chief gets this?

Thank you!



Peggy Curtis

Office & Event Manager

Vendor Coordinator

o: 541.367.8800

c: 269.967.1711

401 Main St, Ste D
Sweet Home, OR 97386



Virus-free. www.avast.com



2023 Public Address System Permit Jamboree.pdf

101K

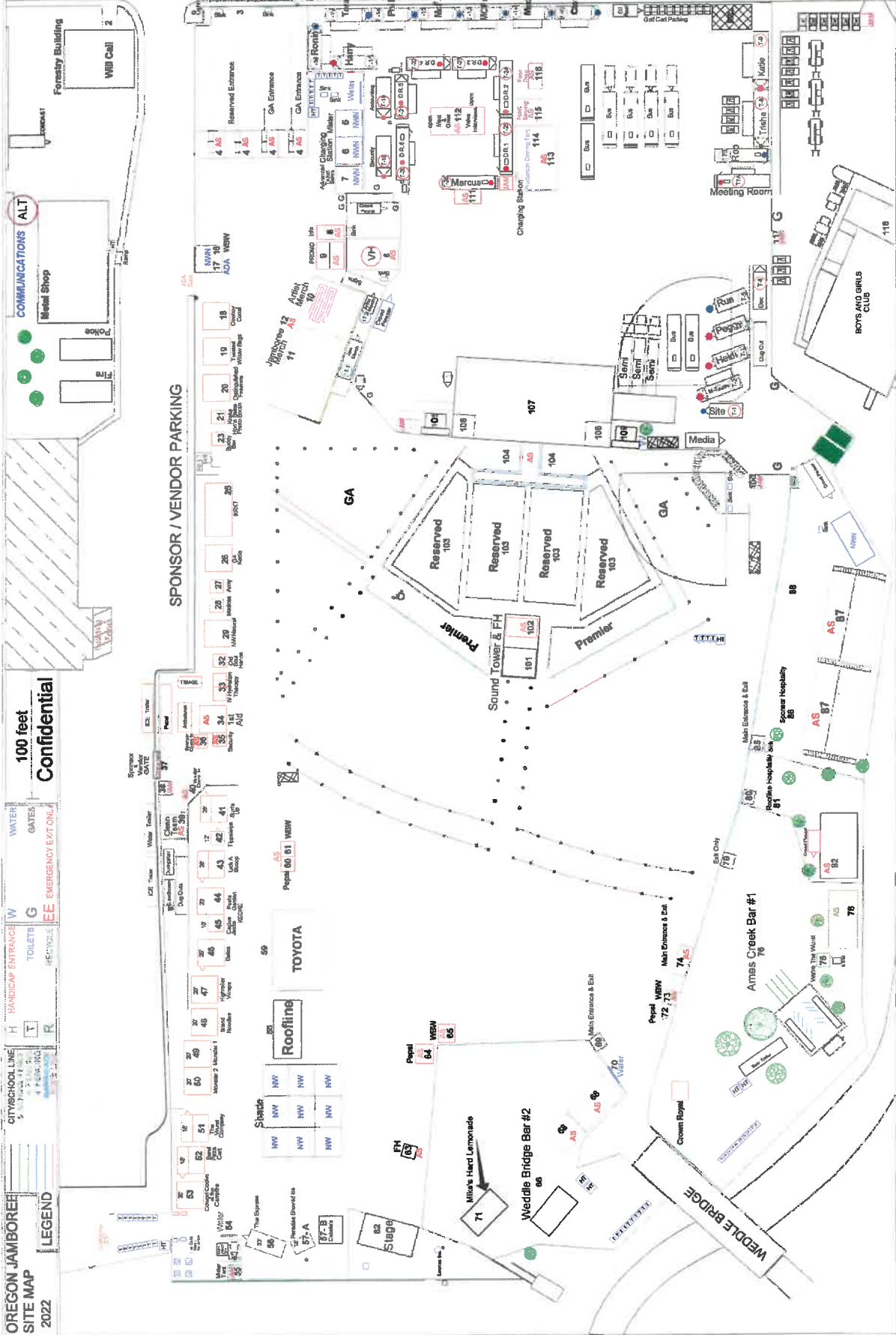
| Name | Profile Name | Company Name | Vendor Category | Item Name |
|--------------------|-----------------------------------|---------------------------------------|--|---|
| Gretchen Speilcher | Twisted Willow | | Merchandise | Vendor Tent 20'x20' |
| SANDRA BATES | Bates Steakhouse and Catering | Bates Catering, Inc | Concessions - Food Trailer | Vendor Tent 20'x20' |
| Heidi Lusk | Sparrow Boutique | Bullets into jewelry | Artisans - Artisan Alley - Sankey Park | Artisan Alley 2-10'x10', side by side, Space (Olam tent provided) |
| Elizabeth Gienger | Ridgeway health | Ridgeway health | Healthcare or Entertainment Services | Vendor Tent 20'x20' |
| Kainoa Lake | Island Noodles | Island Noodles | Concessions - Food Tent | Vendor Tent 20'x20' |
| Darren Perry | Lick-A-Scoop | | Concessions - Food Trailer | Vendor Trailer, per 5' space (if 20', add 4!) |
| Natalie Poland | Poppy Layne | | Merchandise | Artisan Alley 2-10'x10', side by side, Space (Olam tent provided) |
| Don Gorbett | Molalla Kettle Korn and Smoothies | G-4 Molalla Kettle Corn | Concessions -Food Tent | Vendor Tent 10'x20' |
| Wendy Jones | Distinguished Firearms Jewlery | | General Merchandise | Vendor Tent 20'x20' |
| Bethany Brady | The Pizza Cart | The Pizza Cart | Concessions -Food Tent | Vendor Tent 20'x20' |
| Vanessa Gibson | The Butterfly Effect | The Butterfly Effect | Artisans - Artisan Alley - Sankey Park | Artisan Alley 10'x10' Space (Olam tent provided) |
| Natalie Manner | Manner Ohana | | Artisans - Artisan Alley - Sankey Park | Artisan Alley 2-10'x10', side by side, Space (Olam tent provided) |
| Elizabeth Harvey | Fall Creek Creations | Fall Creek Creations by Beth and Jeff | Artisans - Artisan Alley - Sankey Park | Artisan Alley 2-10'x10', side by side, Space (Olam tent provided) |
| Madison Wilson | Dippin' Dots Ice Cream | Sub-Zero Products, LLC. | Concessions - Food Trailer | Vendor Trailer, per 5' space (if 20', add 4!) |
| Trixy Savage | Blue Eyes Ceramics | | Artisans - Artisan Alley - Sankey Park | Artisan Alley 10'x10' Space (Olam tent provided) |
| Kayla Moody | Mystic Visions Jewlery | | Concessions - Food Trailer | Vendor Trailer, per 5' space (if 20', add 4!) |
| alex.golf | Rollin Dough | | Artisans - Artisan Alley - Sankey Park | Artisan Alley 10'x10' Space (Olam tent provided) |
| Megan Sharp | The Flashy Filly | | Concessions - Food Trailer | Vendor Trailer, per 5' space (if 20', add 4!) |
| Nelson Adams | Kona Ice of NW Linn | | Concessions - Food Trailer | Vendor Trailer, per 5' space (if 20', add 4!) |
| Keeley Parsons | TOTS! | | Concessions - Food Trailer | Vendor Trailer, per 5' space (if 20', add 4!) |
| Anne-Marie Moon | Annie's Jammies | | Artisans - Artisan Alley - Sankey Park | Artisan Alley 10'x10' Space (Olam tent provided) |
| Joell Haley-Fence | Mountain Home Arts | Mountain Home Arts | Artisans - Artisan Alley - Sankey Park | Artisan Alley 10'x10' Space (Olam tent provided) |
| Chelsea Headrick | Millie Coffee Bar | Mill Town Coffee LLC | Concessions - Food Trailer | Vendor Trailer, per 5' space (if 20', add 4!) |
| Marissa Lopez | Cowgirl Cookn | | Concessions -Food Tent | Vendor Tent 20'x20' |
| Kathy Skurm | Kats Hats | Cowboy Corral | Merchandise | Vendor Tent 20'x20' |
| Joyce Wright | Monster Foods | | Concessions -Food Tent | Vendor Tent 20'x20' |
| Lisa Strait | Bubble Bee Sweet | | Concessions - Food Trailer | Vendor Trailer, per 5' space (if 20', add 4!) |
| Mary George | Cactus Jack's | Keoke LLC | Concessions -Food Tent | Vendor Tent 20'x20' |
| Brittany Murphy | X Squeeze Me | | Concessions -Food Tent | Vendor Tent 10'x20' (10' frontage, 20' deep) |
| Jennifer Iler | International Experience | | Military or Non-Profit, Informational only | Military, Non-Profit Booth. 10'x10' Informational space only |

LEGEND

| | | | | |
|------------------|---------|-------------------|-------|-------|
| CITY/SCHOOL LINE | TOILETS | HANDICAP ENTRANCE | WATER | GATES |
| 5 | T | H | W | G |
| 6 | R | E | E | E |
| 7 | EE | EE | EE | EE |

100 feet
Confidential

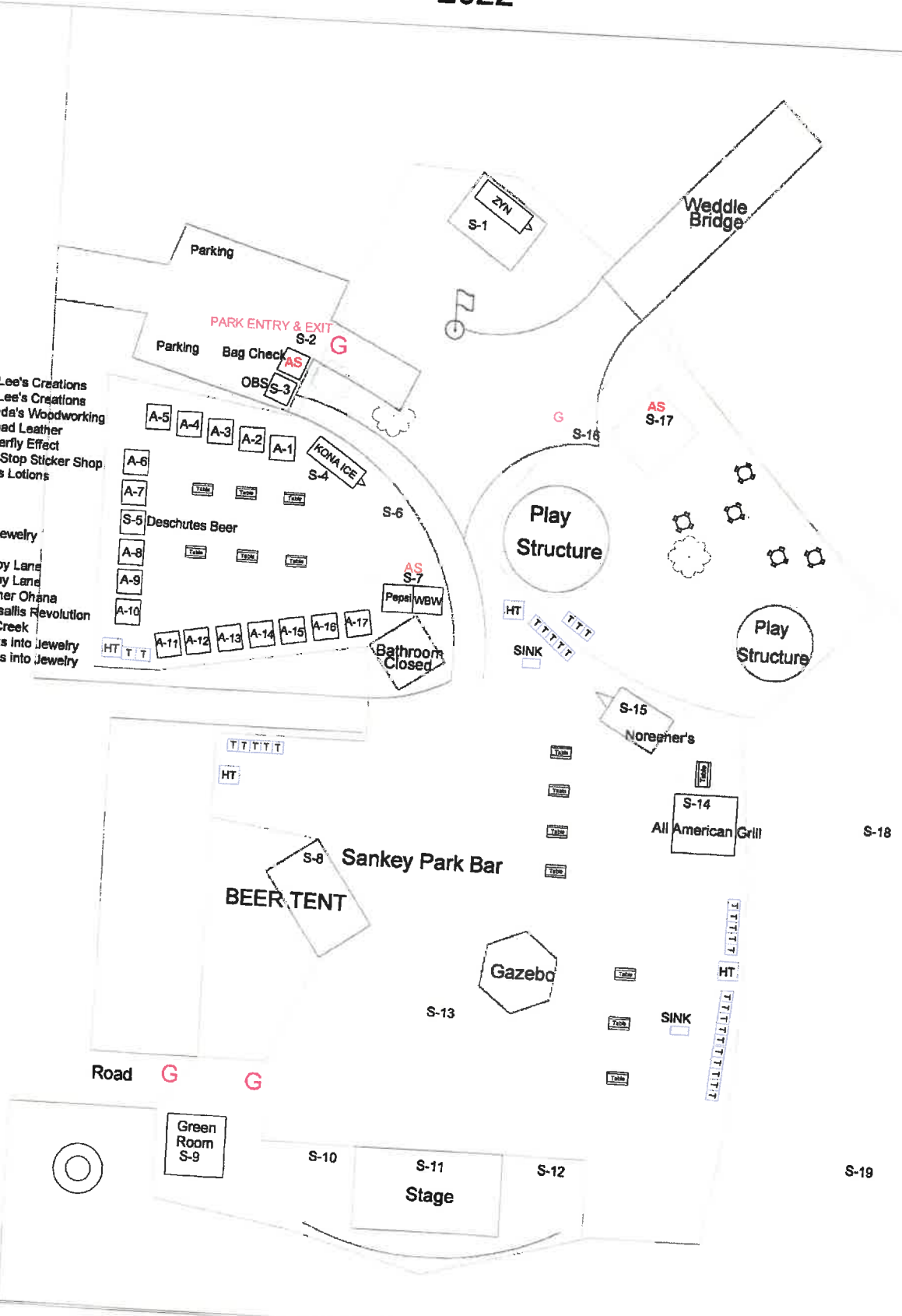
100 feet
Confidential



Confidential

Sankey Park Confidential 2022

- A-1: Ina Lee's Creations
- A-2: Ina Lee's Creations
- A-3: Wanda's Woodworking
- A-4: Nomad Leather
- A-5: Butterfly Effect
- A-6: One Stop Sticker Shop
- A-7: Lani's Lotions
- A-8: Fruit
- A-9: Fruit
- A-10: JP Jewelry
- A-11: Poppy Lane
- A-12: Poppy Lane
- A-13: Manner Ohana
- A-14: Chrysalis Revolution
- A-15: Fall Creek
- A-16: Bullets into Jewelry
- A-17: Bullets into Jewelry



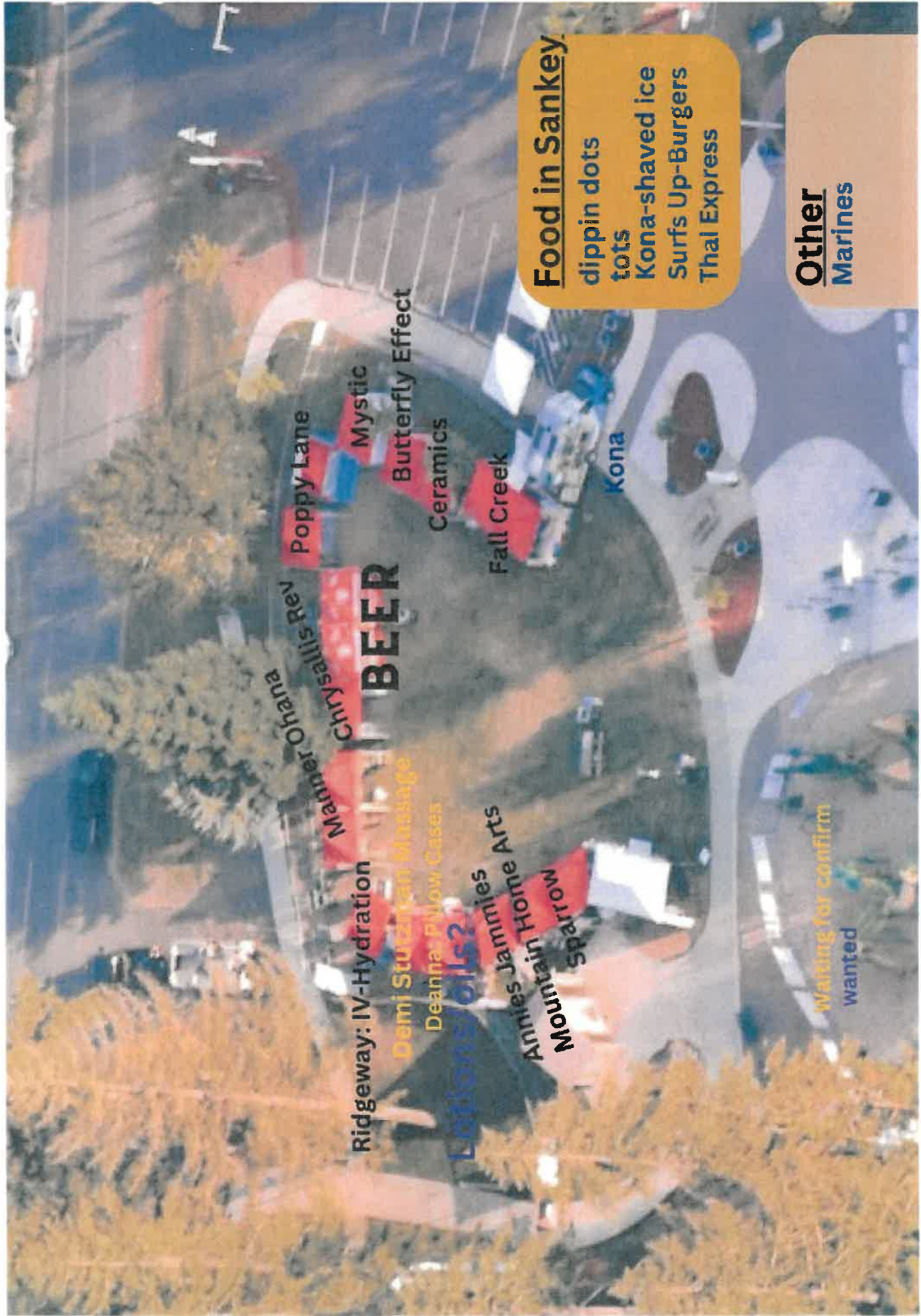
OREGON JAMBOREE

music festival

OVERVIEW MAP

YOUR GUIDE TO
PARKING &
SHUTTLE
LOCATIONS





Ridgeway: IV-Hydration

Manner Ohana
Chrysalis Rev

Poppy Lane

Mystic

Butterfly Effect

Ceramics

Fall Creek

Kona

BEER

Demi Stuzman Massage

Deanna Pillow Cases

Lotions Oils?

Amies Lammies

Mountain Home Arts

Mountain Sparrow

Waiting for confirm
wanted

Food in Sankey

dippin dots
tots

Kona-shaved ice
Surfs Up-Burgers
Thal Express

Other Marines

600 14TH AVE

PREMIER CAMP I

Upper Sankey

Sites 56-59 on pavement

Note: put these porties against fence

Marking/Vendor

2, 1, 2
standard, sea, sinks

2 2 - 2 yd

1 2 4 20

revised 3/8/2023

HOST

Entrance

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

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22

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49

BMX TRACK

1, 1, 1

2

HOST

ALL SITES
20'x40'

OREGON JAMBOREE

music festival

Marking/Vendor

13, 1, 7
standard, ada, stripe
 (1) 90 gal
 (3) 4 yard
 (2) 20 yard

20

revised 3/8/2023

Entrance

Long St 4000 LONG STREET



CAMP 9

Rodeo Grounds
 West

OREGON
JANBOREE
 music festival

Sites are 25'x50'

Marking/Vendor

107 pictures
12, 2, 6 standard, add. shhks
2 - 90 gal
5 - 4 yard

4100 LONG STREET

174
173
172
171
170
169
168
167

185 184 183 182 181

Host
176 177 178

2 3 4 5 6 7
Host

13 12 11 10 9
Host

179
180

Bus Stop

34
35
36
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59
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62

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84
83
82
81
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Host 158

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revised 3/8/2023

1 2 4 20

2.0.1 4

4 2.0.1

2.1.1

Camp 9
Rodeo Grounds West

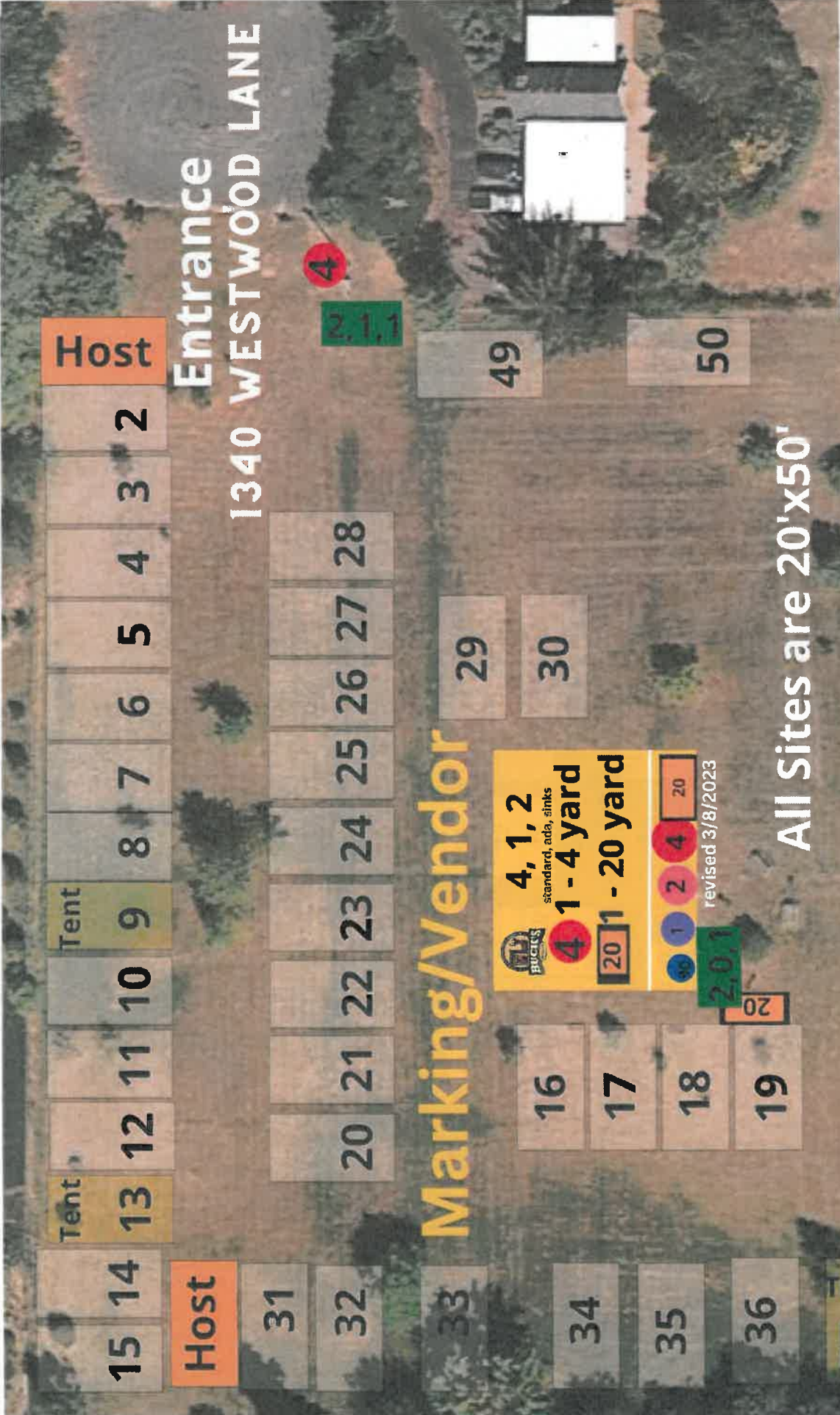
CAMP 10

Rodeo Grounds East

OREGON JAMBOREE
music festival

Sites are 25'x50' on grass -- sites in grey are 20'x50'
Tent sites are 20'x40'

42nd Ave



Host

Entrance

1340 WESTWOOD LANE

4

2.1.1

49

50

Tent

2

3

4

5

6

7

8

9

10

11

12

13

15

Host

31

32

Marking/Vendor

4, 1, 2
standard, ads, sinks

4
1 - 4 yard

20
1 - 20 yard

36 1 2 4 20
revised 3/8/2023

2.0.1

29

30

16

17

18

19

All Sites are 20'x50'

Tent

Tent

48

46

47

44

45

42

43

40

41

39

42

Tent

Tent

37

38

Host

48

47

44

42

40

39

Tent

Tent

37

38

OREGON
JAMBOREE
music festival

CAMP 25 STRAWBERRY PARK



4

3 spaces

4 spaces

3 spaces

28 spaces

19 spaces

8 spaces

Entrance

host

host

Marking/Vendor

6, 1, 2
standard, ada, sinks

3 - 4 yard

1 2 4 20

revised 3/8/2023

Sites are 25' x 50' on sand/gravel.

Sites are not reservable. You will be assigned a site when you arrive

CAMP 30 Quarry Park

3101 Zelcova Street



**APPLICATION AND PERMIT TO OCCUPY OR
PERFORM OPERATIONS UPON A STATE HIGHWAY**

See Oregon Administrative Rule, Chapter 734, Division 55

PERMIT NUMBER

CLASS: 05 KEY# n/a

| | | | | | | | | | | | | | | | |
|--|---|---|--|---|----------------------|----------------------|-------------------|--|--|--|---------------------------------|--------------------------|---|---------------------------------|----------------------|
| GENERAL LOCATION | | | | PURPOSE OF APPLICATION (TO CONSTRUCT/OPERATE/MAINTAIN) | | | | | | | | | | | |
| HIGHWAY NAME AND ROUTE NUMBER US-20 / 16 / Santiam | | | | <input type="checkbox"/> POLE LINE | TYPE | MIN. VERT. CLEARANCE | | | | | | | | | |
| HIGHWAY NUMBER | COUNTY | Linn | | <input type="checkbox"/> BURIED CABLE | TYPE | | | | | | | | | | |
| BETWEEN OR NEAR LANDMARKS Sweet Home Main Street East of 22nd Ave | | | | <input type="checkbox"/> PIPE LINE | TYPE | | | | | | | | | | |
| HWY. REFERENCE MAP DVL | DESIGNATED FREEWAY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | IN U.S. FOREST <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | <input checked="" type="checkbox"/> NON-COMMERCIAL SIGN | FEE AMOUNT \$0.00 | | | | | | | | | | |
| APPLICANT NAME AND ADDRESS Company: Oregon Jamboree 2023 Oregon Jamboree Contact: Peggy Curtis City: Sweet Home State: OR Zip Code: 97386 Email: peggy@oregonjamboree.com Phone #: 269-967-1711 Cell 541-367-8800 Work | | | | <input checked="" type="checkbox"/> MISCELLANEOUS OPERATIONS AND/OR FACILITIES AS DESCRIBED BELOW | | | | | | | | | | | |
| | | | | <table border="1"> <tr> <td colspan="3">FOR ODOT USE ONLY</td> </tr> <tr> <td>BOND REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</td> <td>REFERENCE: OAR 734-55 035(2)</td> <td>AMOUNT OF BOND \$0.00</td> </tr> <tr> <td>INSURANCE REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</td> <td>REFERENCE: OAR 734-55 035(1)</td> <td>SPECIFIED COMP. DATE</td> </tr> </table> | | | FOR ODOT USE ONLY | | | BOND REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | REFERENCE: OAR 734-55 035(2) | AMOUNT OF BOND \$0.00 | INSURANCE REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | REFERENCE: OAR 734-55 035(1) | SPECIFIED COMP. DATE |
| FOR ODOT USE ONLY | | | | | | | | | | | | | | | |
| BOND REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | REFERENCE: OAR 734-55 035(2) | AMOUNT OF BOND \$0.00 | | | | | | | | | | | | | |
| INSURANCE REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | REFERENCE: OAR 734-55 035(1) | SPECIFIED COMP. DATE | | | | | | | | | | | | | |

DETAIL LOCATION OF FACILITY (For more space attach additional sheets)

| MILE POINT | TO | MILE POINT | ENGINEERS STATION | TO | ENGINEERS STATION | SIDE OF HWY OR ANGLE OF CROSSING | DISTANCE FROM | | BURIED CABLE OR PIPE | | SPAN LENGTH |
|------------|----|------------|-------------------|----|-------------------|----------------------------------|----------------|----------|----------------------|---------------|-------------|
| | | | | | | | CENTER OF PVMT | R/W LINE | DEPTH/VERT. | SIZE AND KIND | |
| 27.93 | | | | | | both | | | | | |

DESCRIPTION AND LOCATION OF NON-COMMERCIAL SIGNS OR MISCELLANEOUS OPERATIONS FACILITIES

Install temporary banner July 21 - August 7, 2023

Permit is to hang a banner at the above locations.

SPECIAL PROVISIONS (FOR MORE SPACE ATTACH ADDITIONAL SHEETS)

- TRAFFIC CONTROL REQUIRED YES [OAR 734-55-025(6)] NO
- OPEN CUTTING OF PAVED OR SURFACED AREAS ALLOWED? YES [OAR 734-55-100(2)] NO [OAR 734-55-100(1)]
- AT LEAST 48 HOURS BEFORE BEGINNING WORK, THE APPLICANT OR HIS CONTRACTOR SHALL NOTIFY THE DISTRICT REPRESENTATIVE AT TELEPHONE NUMBER: 541-757-4211 OR FAX A COPY OF THIS PAGE TO THE DISTRICT OFFICE AT: n/a - please call SPECIFY TIME AND DATE IN THE SPACE BELOW.
- A COPY OF THIS PERMIT AND ALL ATTACHMENTS SHALL BE AVAILABLE AT THE WORK AREA DURING CONSTRUCTION.
- ATTENTION: Oregon Law requires you to follow rules adopted by the Oregon Utility Notification Center. Those rules are set forth in OAR 952-001-0010 through OAR 952-001-0090. You may obtain copies of the rules by calling the center at (503) 232-1987. CALL BEFORE YOU DIG 1-800-332-2344

COMMENTS - ODOT USE ONLY

Permit is to hang a banner from dates: 07.21.2023 - 08.07.2023
Banner is not to contain sponsorship or company advertising of any kind.

See page 2 -3, for permit general and special provisions.

IF THE PROPOSED APPLICATION WILL AFFECT THE LOCAL GOVERNMENT, THE APPLICANT SHALL ACQUIRE THE LOCAL GOVERNMENT OFFICIAL'S SIGNATURE BEFORE ACQUIRING THE DISTRICT MANAGER'S SIGNATURE.

| | | |
|--|-------------------------------|-------------------------------|
| LOCAL GOVERNMENT OFFICIAL SIGNATURE <input checked="" type="checkbox"/> | TITLE City Manager | DATE 5-1-23 |
| APPLICANT SIGNATURE <input checked="" type="checkbox"/> | APPLICATION DATE 4/26/2023 | TITLE Event Manager |
| DISTRICT MANAGER OR REPRESENTATIVE <input checked="" type="checkbox"/> | | TELEPHONE NO. 269 967 1711 |
| When this application is approved by the Department, the applicant is subject to, accepts and approves the terms and provisions contained and attached: and the terms of Oregon Administrative Rules, Chapter 734, Division 55, which is by this reference made a part of this permit. | | APPROVAL DATE |

GENERAL PROVISIONS / SPECIAL PROVISIONS BANNER PERMIT

"APPLICANT/PERMITTEE SHALL BE RESPONSIBLE AND LIABLE FOR (1) INVESTIGATING PRESENCE/ABSENCE OF ANY LEGALLY PROTECTED OR REGULATED ENVIRONMENTAL RESOURCE(S) IN THE ACTION AREA; (2) DETERMINING ANY AND ALL RESTRICTIONS OR REQUIREMENTS THAT RELATE TO THE PROPOSED ACTIONS, AND COMPLYING WITH SUCH, INCLUDING BUT NOT LIMITED TO THOSE RELATING TO HAZARDOUS MATERIAL(S), WATER QUALITY CONSTRAINTS, WETLAND, ARCHEOLOGICAL OR HISTORIC RESOURCE(S), STATE AND FEDERAL THREATENED OR ENDANGERED SPECIES, ETC.; (3) COMPLYING WITH ALL FEDERAL, STATE, AND LOCAL LAWS, REGULATIONS, RULES AND ORDINANCES, WHETHER ENVIRONMENTAL IN NATURE OR OTHER, PERTAINING TO THE PROPOSED ACTION, AND OBTAINING ALL REQUIRED AND NECESSARY PERMITS AND APPROVALS.

IF APPLICANT/PERMITTEE IMPACTS A LEGALLY PROTECTED/ REGULATED RESOURCE, APPLICANT/PERMITTEE SHALL BE RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH SUCH IMPACT, INCLUDING, BUT NOT LIMITED TO ALL COSTS OF MITIGATION AND REHABILITATION, AND SHALL INDEMNIFY, DEFEND AND HOLD HARMLESS ODOT FOR SUCH IMPACTS AND BE RESPONSIBLE AND LIABLE TO ODOT FOR ANY COSTS OR CLAIMS THAT ODOT MAY HAVE.

NOTHING IN THIS PERMIT IS INTENDED TO GRANT RIGHTS OR IMPLY APPROVAL NOT FALLING WITHIN THE AUTHORITY AND JURISDICTION OF ODOT. IT IS THE RESPONSIBILITY OF THE APPLICANT TO DETERMINE THE NEED FOR AND TO OBTAIN SUCH LICENSES, PERMITS OR OTHER FORM OF APPROVAL WHICH MAY BE REQUIRED BY OTHER STATE AGENCIES, FEDERAL AGENCIES, CITIES AND/OR COUNTIES OF OREGON, UTILITY OR RAILROADS. OAR 734-055-055.

GENERAL PROVISIONS

SHOULD TRAFFIC CONTROL BE NECESSARY FOR INSTALLATION, MAINTENANCE & REMOVAL IT SHALL BE ACCORDING TO THE CURRENT "MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES FOR STREETS AND HIGHWAYS," USDOT & ODOT MANUAL, "SHORT TERM TRAFFIC CONTROL HANDBOOK, DECEMBER 2011."

LIABILITY INSURANCE CERTIFICATE SHALL BE SUBMITTED TO THIS OFFICE PRIOR TO BANNER INSTALLATION(S).

CONTACT AN ODOT REPRESENTATIVE AT 541-757-4211 or 503-362-0457 IF PROBLEMS ARISE.
CONTACT 9-1-1 IN CASE OF AN EMERGENCY.

ANY DAMAGE TO ODOT RIGHT OF WAY SHALL BE RESTORED TO THAT CONDITION PRIOR TO CONSTRUCTION AND TO SATISFACTION OF ODOT REPRESENTATIVE.

SPECIAL PROVISIONS FOR BANNERS

BANNER TO BE HUNG AND REMOVED BY THE CITY OR A UTILITY COMPANY. IT IS APPLICANTS RESPONSIBILITY TO COORDINATE PLACEMENT AND REMOVAL OF BANNER WITH THE UTILITY COMPANY.

BANNER IS TO BE ERECTED SO THAT 20'-0" OF CLEARANCE WILL REMAIN BETWEEN THE ROADWAY ASPHALT AND THE AERIAL BANNER.

BANNER MATERIAL AND SUPPORT MUST BE MADE FROM DURABLE MATERIAL AND CONSTRUCTED TO WITHSTAND WIND PRESSURE OF 20 POUNDS PER SQUIRE FOOT OF EXPOSED SURFACE.

THE BANNER(S) MAY CONTAIN THE NAME AND/OR LOGO, DATE AND TIME, AND GENERAL LOCATION OF THE EVENT. BANNERS MAY NOT INCLUDE ANY ADVERTISING, COMMERCIAL MESSAGE, BRAND OR PRODUCT NAME, OR OTHER INFORMATION ABOUT THE EVENT SUCH AS COST, DIRECTIONS, ETC.

THE BANNER IS TO ADVERTISE AN EVENT THAT IS:
SPONSORED OR ENDORSED BY A CITY, COUNTY, OR STATE AGENCY.
TWO WEEKS OR SHORTER IN DURATION AND OPEN TO THE GENERAL PUBLIC.
LOCATED WITHIN A FIVE MILE RADIUS OF THE EVENT.

THE BANNER(S) MAY NOT BE ERECTED OR MAINTAINED IF THEY:
INTERFERE WITH, IMITATE, OR RESEMBLE ANY OFFICIAL TRAFFIC CONTROL DEVICE OR ATTEMPT OR APPEAR TO ATTEMPT TO DIRECT THE MOVEMENT OF TRAFFIC;
PREVENT THE DRIVER OF A MOTOR VEHICLE FROM HAVING A CLEAR AND UNOBSTRUCTED VIEW OF OFFICIAL TRAFFIC CONTROL DEVICES AND APPROACHING OR MERGING TRAFFIC;
HAVE ANY LIGHTING, UNLESS SUCH LIGHTING IS SHIELDED TO PREVENT LIGHT FROM BEING DIRECTED AT THE HIGHWAY OR IS OF SUCH LOW INTENSITY OR BRILLIANCE AS NOT TO CAUSE GLARE OR TO IMPAIR THE VISION OF THE DRIVER OF A MOTOR VEHICLE; OR ARE OTHERWISE A TRAFFIC HAZARD.

PERMITTEE, TO THE EXTENT PERMITTED BY THE OREGON CONSTITUTION AND THE OREGON TORT CLAIMS ACT, INDEMNIFY, DEFEND, SAVE, AND HOLD HARMLESS THE STATE OF OREGON, OREGON TRANSPORTATION COMMISSION AND ITS MEMBERS, DEPARTMENT OF TRANSPORTATION, ITS OFFICERS AND EMPLOYEES FROM ANY AND ALL CLAIMS, SUITS, AND LIABILITIES WHICH MAY OCCUR IN THE PERFORMANCE OF THIS ACTIVITY.

ADDITIONAL SIGNATURES ARE REQUIRED. LOCAL JURISTITION. SIGNATURE REPRESENTS CITY APPROVAL FOR THE PLANNED EVENT, APPROVAL OF ALL ASSOCIATED PLANNED ACTIVITIES ASSOCIATED TO AND FOR THIS PERMIT.

CITY REPRESENTATIVE IS TO SIGN PAGE 1 OF 2 THIS PERMIT, UNDER LOCAL GOVERNMENT OFFICIAL SIGNATURE, AND TO PROVIDE THE FOLLOWING CONTACT INFORMATION:

JURISTITION: City of Sweet Home

SIGNATURE: 

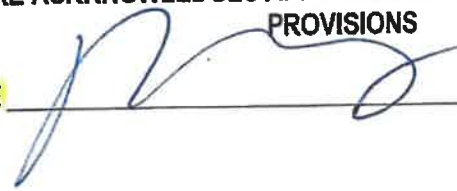
CONTACT NAME:  PHONE NO.: _____

MAILING ADDRESS: 3225 Main Street

CITY: Sweet Home STATE: OR ZIP CODE: 97386

APPLICANT IS TO PROVIDE THE CITY WITH A COPY OF THE FINALIZED ODOT ISSUED PERMIT 30 DAYS PRIOR TO HANGING THE BANNER.

APPLICANT'S SIGNATURE ACKNOWLEDGES APPLICANT HAS READ, UNDERSTANDS AND ACCEPTS ALL PROVISIONS

APPLICANT SIGNATURE  **DATE** 4/26/2023



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/22/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE 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 have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| | | |
|--|---|--------------------------------------|
| PRODUCER Keesecker Insurance, Inc. 1195 Main Street PO Box 9 Sweet Home OR 97386 | CONTACT NAME: Blake Keesecker PHONE (A/C, No, Ext): (541) 367-2141 E-MAIL ADDRESS: blake@kee-ins.com | FAX (A/C, No): (541) 367-3904 |
| | INSURER(S) AFFORDING COVERAGE | |
| INSURED SWEET HOME ECONOMIC DEVELOPMENT CORP INC 401 MAIN STREET STE D SWEET HOME OR 97386 | INSURER A: Mutual of Enumclaw | NAIC # 14761 |
| | INSURER B: | |
| | INSURER C: | |
| | INSURER D: | |
| | INSURER E: | |

COVERAGES **CERTIFICATE NUMBER:** CL22112207010 **REVISION NUMBER:**

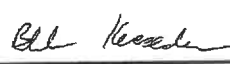
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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.

| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|---|-----------|------------|---------------|-------------------------|-------------------------|--|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | BOP0004624 | 09/09/2022 | 09/09/2023 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 CYBER \$ 100,000 COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | | | | \$ \$ \$ |
| | <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | Y/N N/A | | | | PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

| | |
|---|---|
| Pacific Power 525 Wilco Rd Stayton OR 97386 | <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p>  |
|---|---|

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/22/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE 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 have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| PRODUCER Keesecker Insurance, Inc. 1195 Main Street PO Box 9 Sweet Home OR 97386 | CONTACT NAME: Blake Keesecker PHONE (A/C No. Ext): (541) 367-2141 E-MAIL ADDRESS: blake@kee-ins.com FAX (A/C No.): (541) 367-3904 | | | | | | | | | | | | | | | | | | | | |
|--|--|-------------------------------|--|--------|------------|--------------------|-------|------------|--|--|------------|--|--|------------|--|--|------------|--|--|------------|--|
| | <table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>Mutual of Enumclaw</td> <td>14761</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table> | INSURER(S) AFFORDING COVERAGE | | NAIC # | INSURER A: | Mutual of Enumclaw | 14761 | INSURER B: | | | INSURER C: | | | INSURER D: | | | INSURER E: | | | INSURER F: | |
| INSURER(S) AFFORDING COVERAGE | | NAIC # | | | | | | | | | | | | | | | | | | | |
| INSURER A: | Mutual of Enumclaw | 14761 | | | | | | | | | | | | | | | | | | | |
| INSURER B: | | | | | | | | | | | | | | | | | | | | | |
| INSURER C: | | | | | | | | | | | | | | | | | | | | | |
| INSURER D: | | | | | | | | | | | | | | | | | | | | | |
| INSURER E: | | | | | | | | | | | | | | | | | | | | | |
| INSURER F: | | | | | | | | | | | | | | | | | | | | | |
| INSURED SWEET HOME ECONOMIC DEVELOPMENT CORP INC 401 MAIN STREET STE D SWEET HOME OR 97386 | | | | | | | | | | | | | | | | | | | | | |

COVERAGES **CERTIFICATE NUMBER:** CL22112207010 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY 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.

| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|--|-----------|----------|---------------|-------------------------|-------------------------|--|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: | Y | | BOP0004624 | 09/09/2022 | 09/09/2023 | EACH OCCURRENCE \$ 1,000,000 |
| | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 | | | | | | |
| | | | | | | | MED EXP (Any one person) \$ 10,000 |
| | | | | | | | PERSONAL & ADV INJURY \$ |
| | | | | | | | GENERAL AGGREGATE \$ 2,000,000 |
| | | | | | | | PRODUCTS - COMP/OP AGG \$ 1,000,000 |
| | | | | | | | CYBER \$ 100,000 |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ |
| | <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY | | | | | | BODILY INJURY (Per person) \$ |
| | | | | | | | BODILY INJURY (Per accident) \$ |
| | | | | | | | PROPERTY DAMAGE (Per accident) \$ |
| | | | | | | | \$ |
| | <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | | | | EACH OCCURRENCE \$ |
| | | | | | | | AGGREGATE \$ |
| | | | | | | | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | PER STATUTE OTH-ER |
| | | | | | | | E.L. EACH ACCIDENT \$ |
| | | | | | | | E.L. DISEASE - EA EMPLOYEE \$ |
| | | | | | | | E.L. DISEASE - POLICY LIMIT \$ |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is an additional insured when required by writtten contract, permit or agreement.

CERTIFICATE HOLDER

City of Sweet Home
3225 Main Street

Sweet Home OR 97386

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.

AUTHORIZED REPRESENTATIVE

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/22/2022

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| | | |
|--|--|---------------------------------------|
| PRODUCER Keesecker Insurance, Inc. 1195 Main Street PO Box 9 Sweet Home OR 97386 | CONTACT NAME: Blake Keesecker PHONE (A/C No. Ext): (541) 367-2141 E-MAIL ADDRESS: blake@kee-ins.com | FAX (A/C. No.): (541) 367-3904 |
| | INSURER(S) AFFORDING COVERAGE | |
| INSURED SWEET HOME ECONOMIC DEVELOPMENT CORP INC 401 MAIN STREET STE D SWEET HOME OR 97386 | INSURER A: Mutual of Enumclaw | NAIC # 14761 |
| | INSURER B: | |
| | INSURER C: | |
| | INSURER D: | |
| | INSURER E: | |
| | INSURER F: | |

COVERAGES **CERTIFICATE NUMBER:** CL22112207010 **REVISION NUMBER:**

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| | <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | | | | PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | Y/N | N/A | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The State of Oregon, its Department of Transportation, its Divisions, Officers and Employees are hereby included as additional insured in the herein numbered policy as to the operations of the named insured under any pipe, pole conduit, approach road or miscellaneous permit issued by the Department of Transportation, but only with respect to the insured activities to be performed under permit.

CERTIFICATE HOLDER

CANCELLATION

Oregon Department of Transportation ATTN: Office of Maintenance
 455 Airport Road SE
 Building K
 Salem OR 97301-4796

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

AUTHORIZED REPRESENTATIVE

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