

STREET CLOSURE APPLICATION

REQUIRING CITY COUNCIL APPROVAL (OVER 400 FEET).



For current Fee, please see Planning & Development Fee Schedule

ror current.	ree, please see Flamming & Development Fee Schedule	Application:
CHECKLIS	<u>ST:</u>	Receipt:
Prior to subt	mitting your application, please confirm by checking $(oxing)$ the eted.	e boxes below that <u>all</u> the following ha
Y	Have you completed the "Description of Event" below a (Incomplete information may delay your application.)	and signed the application on page 3?
Y	Have you allowed at least 8-10 weeks prior to the event City Council agenda?	for your application to be placed on a
Y	Have you obtained the required insurance and do you hawith your application? (See "Insurance" section on page	ave proof of that insurance to submit ge 3 for details)
Y	Has the Indemnification Agreement on page 3 of this apauthorized representative of the sponsoring organization	oplication been signed by an
After obtaini	ing approval from the City, but prior to the event, please ma	ke sure you have done the following:
	Have you read the conditions of approval and is your ev conditions?	ent prepared to abide by all
	Have you given public notice of the street closure to all mile at least 72 hours prior to the event as required in Coprovided at page 6 which can be used to inform the publ signed and returned to the Planning Division at least 24 that notice has been given per the above requirements.	ondition #2 below? A form is lic. A copy of the form should be
	Have you posted "No Parking" at least 24 hours prior to below and using the standards outlined on page 5?	the event as required in Condition #1
	Have you arranged for "Special Event" City Refuse Serv	vice by calling 385-6800?
	Have you made arrangements for any temporary barricathe barricades for street closures.)	des? (The City does NOT provide
	Have you made arrangements for supplying any necessa (Plugging outlets into City light poles is NOT allowed ut Please call City Public Works at 385-6800 for additional	nless prior approval is obtained.
	If you are selling alcohol at your event, have you obtaine (ABC) license or permit for this event?	ed an Alcoholic Beverage Control
DESCRIPTI	ON OF EVENT:	
APPLICANT	/EVENT SPONSOR Merced County and United Way	
CONTACT P	ERSON John Ceccoli PHONE	
ADDRESS _		
DRIVER'S L	ICENSE NO. E-MAIL	

	CRIPTION OF EVENT (include equipment, obstruction 17 Veteran Day Parade			nment area)
HI	S EVENT WILL SELL OR SERVE ALCOHOL:	Yes	or No _	X
EST	IMATED NUMBER OF PEOPLE IN ATTENDANCE _	2500		
)AI	E(S) AND TIME(S) OF USE (include time for setup and vember 11, 2017 12:00pm to 4:00pm	l takedown as	well as event time):	
E 1	ALL STREETS PROPOSED FOR CLOSURE: 8th and Calimyrna to Main Street; Main Street to 0 ds at Court House Park; Canal Street from Main to (PLEASE ATTACH A MAP TO IDENTIFY PARAD OBSTRUCTIONS TO BE PLACED W	o 18th E ROUTES, S	STREET CLOSURE	
TA	NDARD CONDITIONS FOR STREET/PARKING L	OT CLOSUI	RES/PARADES	
•	Event Sponsor shall be responsible for placing and re restrictions. "No Parking" signs shall be posted at least per California Vehicle Code Section 22651(m)—see	st twenty-fou		
0 •a	Event Sponsor shall contact all businesses affected by of hours, conditions and reason thereof within one-ha (72) hours prior to the event. Event Sponsor shall prinotification was given. (A form is provided on page	the street/par lf mile of the ovide the Cit	e encroachment area by confirmation that	at least seventy-two
•	Event Sponsor must remove all equipment, trash and event prior to the expiration of the encroachment perm	debris, includ nit.	ling "no parking" sig	ns, generated by the
•	Street closures shall not include major arterial streets. Supervision/security shall be provided by event spons public if required by the Police Department.	sor to ensure	the safety of event p	articipants and the
	Event Sponsor shall pay for any City services require			
•	Alcoholic beverages may be served or sold, subject to Requirements, and subject to the Liquor Liability Inst	Alcoholic B	Severage Control Lic	ensing
	Provisions addressed in Ordinance #1941 Chapter 12.			
•	Event Sponsor shall be responsible for insuring that a Merced business license.	ll vendors inv	volved with the even	t obtain a City of
0.	The applicant shall arrange and pay for special event (209) 385-6800.	City Refuse s	service by contacting	g Public Works at
1.	The applicant shall comply with the Indemnification a application.	and Insurance	provisions as outlin	ed on page 3 of this
2.	Event sponsor shall provide and maintain a minimum through the closure area at all times via movable barritime whatsoever.	22-foot-wide ers. Fire hy	e emergency vehicle drant access shall no	access path into and of be blocked at any
3. 4.				

INDEMNIFICATION: Event Sponsor shall indemnify, protect, defend, (with counsel selected by the City) save and hold City, its officers, employees, agents, and volunteers harmless from any and all claims or causes of action for death or injury to persons, or damage to property resulting from intentional or negligent acts, errors, or omissions of Event Sponsor or Event Sponsor's officers, employees, agents, volunteers, and participants during performance of the Event, or from any violation of any federal, state, or municipal law or ordinance, to the extent caused, in whole or in part, by the willful misconduct, negligent acts, or omissions of Event Sponsor or its officers, employees, agents, volunteers, or participants, or resulting from the negligence of the City, its officers, employees, agents, and volunteers, except for loss caused solely by the gross negligence of the City. Acceptance by City of insurance certificates and endorsements required for this Event does not relieve Event Sponsor from liability under this indemnification and hold harmless clause. This indemnification and hold harmless clause shall apply to any damages or claims for damages whether or not such insurance policies shall have been determined to apply.

<u>INSURANCE</u>: Prior to engaging in the event, Event Sponsor shall complete and file with the City a special events, general liability and automobile policy of at least \$500,000 combined limit for bodily injury and property damage which covers the entire event. Said policy shall stipulate that this insurance will operate as primary insurance and that no other insurance will be called on to cover a loss covered thereunder. Additional insured endorsements evidencing this special events, general liability and automobile coverage, naming the City and its officers, agents, and employees as additional insureds, must be submitted to the City prior to the event. This certificate shall provide that thirty (30) days written notice of cancellation shall be given to the City.

REFUSAL OR REVOCATION OF PERMIT: Failure to comply with any law, rule or regulation applicable to the use of said streets shall be grounds to revoke any such permit and, in such circumstances, the Chief of Police shall immediately revoke said permit. The Event Sponsor or permit holder, in such case, shall have the right to appeal said revocation to the City Council.

The undersigned declares under penalty of perjury that he/she has the authority to sign for and bind the Event Sponsor to the conditions imposed by the City upon the granting of this Application.

Signature:

	Print Name: <u>Daron McDaniel, Chairman Board o</u> Date: <u>SEP 1 9 2017</u>	of Supervisors			
	OFFICE USE				
	APPLICATION APPROVED SUBJECT TO CONDITIONS				
BY,	Development Services Department (385-6858)	DATE			
BY.	Merced Police Department (385-6912)	DATE			
BY .	Merced Fire Department (385-6891)	DATE			

DEVELOPMENT SERVICES DEPARTMENT CITY OF MERCED 678 W. 18TH ST, MERCED 6A 95340 PHONE (209) 385-6858

LIQUOR LIABILITY INSURANCE -POLICY-

YOU HAVE APPLIED FOR STREET CLOSURE/PARKING LOT CLOSURE AND HAVE INDICATED THAT ALCOHOLIC BEVERAGES WILL EITHER BE SERVED OR SOLD AS PART OF THE FUNCTION OR ACTIVITY BEING CONDUCTED AT THIS EVENT.

THE MERCED CITY COUNCIL HAS ADOPTED ORDINANCE #1941 CHAPTER 12.42 TEMPORARY STREET CLOSURES WHEREAS WHEN ALCOHOLIC BEVERAGES ARE TO BE SERVED OR SOLD, THE GROUP OR INDIVIDUAL SHALL BE REQUIRED TO COMPLY WITH ALL OTHER LAWS RELATING TO THE SALE OF ALCOHOLIC BEVERAGES.

FOR GROUPS SELLING ALCOHOLIC BEVERAGES AT A FUNCTION OR ACTIVITY, WE RECOMMEND THAT YOU CONTACT YOUR INSURANCE CARRIER TO OBTAIN SPECIFIC INFORMATION ON COVERAGE OR CONSIDER CONTRACTING WITH A CATERER WHO ALREADY HAS THE NECESSARY PERMITS, LICENSES, AND INSURANCE COVERAGE.

WHETHER YOU SELL OR SERVE ALCOHOLIC BEVERAGES, IT IS YOUR RESPONSIBILITY OR YOUR GROUP'S RESPONSIBILITY TO COMPLY WITH THE RULES AND REGULATIONS OF THE CALIFORNIA STATE DEPARTMENT OF ALCOHOL BEVERAGE CONTROL WITH REGARD TO OBTAINING THE NECESSARY LICENSES OR PERMITS. SHOULD YOU HAVE ANY QUESTIONS REGARDING THE REQUIREMENT FOR A LICENSE OR PERMIT, YOU SHOULD CONTACT THE CALIFORNIA STATE DEPARTMENT OF ALCOHOL BEVERAGE CONTROL, 31 EAST CHANNEL STREET, ROOM 168, P. O. BOX 150, STOCKTON, CALIFORNIA 95201; TELEPHONE (209) 948-7739.

I CERTIFY THAT I HAVE READ AND REVIEWED THE LIQUOR LIABILITY POLICY OF THE CITY OF MERCED AND WILL COMPLY WITH THESE REQUIREMENTS.

SIGNATURE	DATE	
EVENT DATE		
LOCATION OF EVENT		
•		



Alliant Insurance Services, Inc.

Newport Beach - Alliant Insurance Services, Inc. 1301 Dove Street, Ste. 200 Newport Beach CA 92660-2436

Merced County 2222 M St Rm 9

Merced, CA 95340-3790

Phone: (949) 756-0271

Invoice # 700544	Page 1 of 1	
ACCOUNT NUMBER	DATE	
MERCCOU-08	9/18/2017	
BALANCE DUE ON	AGENCY CODE	
10/18/2017	200	
AMOUNT PAID	AMOUNT DUE	
	\$1,224.00	

Special Events Program

Client: Merced County Policy: Special Event Liability
Policy Number: SEP41023
Insurance Carrier: Evanston Insurance Company

Effective: 1/1/2017 to 1/1/2018

Item #	Trans Eff Date	Due Date	Trans	Description	Amount
2584204	1/1/2017	10/18/2017	ENDT	Premium Merced Veterans Day Parade	\$1,139.42
2584205	1/1/2017	10/18/2017	SURT	Surplus Lines Taxes	\$34.18
2584206	1/1/2017	10/18/2017	SURF	Surplus Lines Stamping Fees	\$2.28
2584207	1/1/2017	10/18/2017	OFEE	Other Fees & Services	\$11.40
2584208	1/1/2017	10/18/2017	BNKF	Bank Fee	\$36.72

Total Invoice Balance: \$1,224.00

IMPORTANT NOTICE: The Nonadmitted & Reinsurance reform act (NRRA) went into effect July 21, 2011. Accordingly, surplus lines tax rates and regulations are subject to change which could result in an increase or decrease of the total surplus lines taxes and/or fees owed on this placement. If a change is required, we will promptly notify you. Any additional taxes and/or fees owed must be promptly remitted to Alliant Insurance Services, Inc.

IMPORTANT NOTICE: The Foreign Account Tax Compliance Act (FATCA) requires the notification of certain financial accounts to the United States Internal Revenue Service. Alliant does not provide tax advice. Please contact your tax consultant for your obligations regarding FATCA.

Alliant embraces a policy of transparency with respect to its compensation from insurance transactions. Details on our compensation policy, including the types of income Alliant may earn on a placement, are available at www.alliant.com. For a copy of our policy or for inquiries regarding compensation issues pertaining to your account contact: Alliant Insurance Services, Inc., Attn: General Counsel, 701 B St., 6th Floor, San Diego, CA 92101

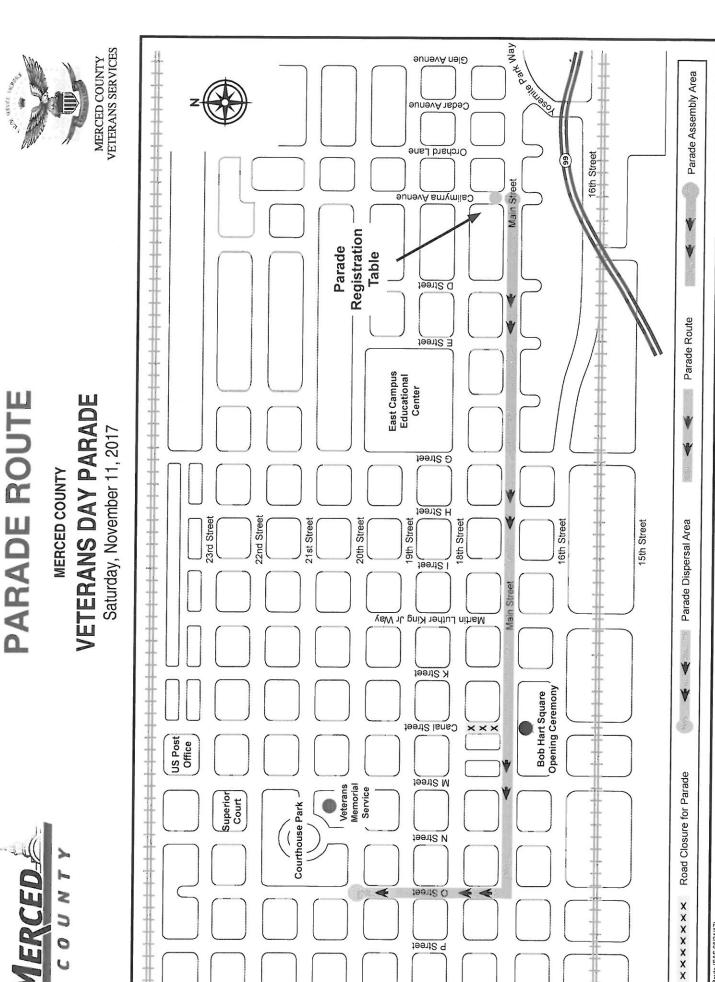
EVANSTON INSURANCE COMPANY

CERTIFICATE NO.:

CERTIFICATE OF INSURANCE SPECIAL EVENT LIABILITY PROGRAM

PRODUCER	PUBLIC ENTITY (ADDITIO	ONAL INSURED)		
Alliant Insurance Services, Inc. in conjunction with Apex Insurance Services P. O. Box 6450 Newport Beach, CA 92658 License No: OC 36861				
NAMED INSURED (EVENT HOLDER): Merced County Merced County Department of Human Services – Veterans Services 2222 M St Rm 9 Merced, CA 95340	EVENT INFORMATION: TYPE: Merced Veterans Day Parade DATE(S): November 11, 2017 LOCATION: City of Merced Downtown streets *Liquor Liability Yes No ** **Liquor Liability after 12 am ends before 2 am **			
This is to certify that the insurance policy listed below has been issued to the above insured named (event holder) for the policy period indicated. The insurance described herein is subject to all the terms, exclusions and conditions of such policy(ies) unless amended as described in Special Conditions. INSURANCE CARRIER: Evanston Insurance Company MASTER POLICY NUMBER: SEP41023 MASTER POLICY DATES: EFFECTIVE: JANUARY 1, 2017 EXPIRATION: JANUARY 1, 2018				
COMMERCIAL GENERAL LIABILITY General Aggregate Limit Products & Completed Operations Personal & Advertising Injury Each Occurrence Limit Damage To Premises Rented To You (Any One Premises) Medical Payments (Any One Person) Liquor Liability (If purchased) Optional Limits Purchased \$\Begin{array}{c} \$1,000,000 \\ 5,000 \\ 1,000,000 \\ \end{array} Optional Complete Single	OCCURRENCE FORM	DEDUCTIBLE: NONE SPECIAL CONDITIONS: The following endorsements attached to the Master Policy do not apply to this Certificate Of Insurance:		
The limits of insurance apply separately to each event insured by this policy as if a separate policy of insurance has been issued for that event.				
City of Merced Merced County Veterans Council Merced County HSA				
CANCELLATION: Should the above described policy be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.				
AUTHORIZED REPRESENTATIVE: DATE ISSUED: 9/18/17				





P Street

Q Street