

CITY OF MUSCATINE**TITLE 3, CHAPTER 14**

License #	_____
Wallet #	_____
Sticker #	_____
Receipt #	_____
Issued	_____
Expires	_____

**APPLICATION FOR USE OF ANY STREET, SIDEWALK, ROADWAY, ALLEY,
PARK, PUBLIC WAY, PROPERTY OR FACILITY**

1. Name of applicant and sponsoring organization, if any:

Jesus Mission Church / Pearl City Outreach

Address: 509 Mulberry Avenue, Muscatine IA 52641

Telephone number: 563-264-5430

E-mail address: Hope Thornburg - Youth Director hopeandfaithchycare@gmail.com
Pastor - Sharon Phillips - revsphillips@hotmail.com

2. Type of event that is planned:

Block Party - Bands, Food, Jump House, Clown, Balloon Animals,

Good Clean fun, for ALL ages!

3. Proposed location:

On Mulberry Ave from 5th - 6th in front of the Jesus Mission Church.

4. Date(s)/Time(s): August 27th 12:00PM - 10:00PM

5. Expected length of use: 10:00 AM - 12:00 AM (to set up & cleanup)

6. Expected size of group: 200+

7. Names of any person or persons in charge of the proposed use at the specified location:

★

See attached Sheet

Address(es): _____

Telephone Number(s): _____

E-mail address(es): _____

8. Names and addresses of any persons to be featured as entertainers or speakers:

There will be many christian bands performing throughout the day. Please see attached sheet. ** for list of a few.

9. List mechanical or electronic equipment to be used:

LCD Projector, Projection Screen, Laptop, Sound System, Backline gear (i.e. guitars, guitar amps, drums, pianos, etc.)

10. Number and type of any motor vehicles or other forms of transportation to be used, including bicycles, boats, carriages and golf carts:

NA

11. Number and types of animals to be used:

NA

12. A description of any sound amplification to be used:

10,000 watt system crossed over 3 way, 2-18" speakers on each side of stage, 2-15" speakers w/ a horn on each side of stage, Yamaha mixing console, & rack w/ outboard effects, gates, Eq's, etc.

13. Proposed monitoring of the group and/or activity including the number of people who will direct traffic, set up, clean up and maintain order, if necessary:

30 Volunteers helping w/ all aspects of event.

14. All plans for the provision of security:

There will be 5 Security guards monitoring the area at all times.

15. Beer or wine consumption? Yes No

16. Describe any items to be sold or distributed:

Food, Snacks, Water, Popcorn, Shaved Ice, Glow Sticks

17. Is water connection requested? Yes No

18. Is electricity requested? Yes No

19. Have you provided a layout site plan for your proposed activity or event? Yes No XXX

If yes, please attach.

If no, please explain:

20. Do you understand that you will be financially responsible for all site restoration needed to restore the site to pre-event status? Yes No

The applicant agrees to indemnify, defend and save harmless the City of Muscatine, together with its agents, officers and employees, from any and all claims, lawsuits, damages, losses and expenses, of whatever nature, which may result from or arise from the activity or event covered by the permit, including but not limited to the use of public ways, irrespective of whether said claims are frivolous or meritorious.

Hope A. Thornburg
Authorized Representative

July 25, 2011
Date

ACKNOWLEDGEMENT OF EVENT STREET CLOSING

I hereby acknowledge that I have been notified of the closing of Mulberry, a v/e

5th to 6th street(s)

for the music / children's event on the following dates/times

Aug 27 11p - 9p.m

Name/Business	Signature	Address
Leo's Auto Repair	Leo M.	506 Mulberry Ave
Hy-Vee Home Healthcare	Sheryl Seal	522 Mulberry Ave
Pauline Shipton	516 mulberry	
Hy-Vee Drug Store	Linda Christiansen	510 Mulberry Ave
LA Superior	Closed	3-0393
ESCORPION	Closed	
Alma Walker	DEBTWALKER	516 1/2 Mulberry Ave
El Olmito	EL OM.70	502 Mulberry



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/19/2011

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 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		CONTACT	
Church Mutual Insurance Company		NAME: Jody L Ament	
3000 Schuster Lane		PHONE (A/C. No. Ext):	1-800-554-2642 Option 1
Merrill WI 54452		E-MAIL	FAX (A/C. No.): 855-264-2329
INSURED		INSURER(S) AFFORDING COVERAGE	
JESUS MISSION CHURCH		INSURER A: Church Mutual Insurance Company	
509 MULBERRY AVE		INSURER B:	
MUSCATINE IA 52761-4237		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** **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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			0261178-02-362745	06/26/11	06/26/14	EACH OCCURRENCE	\$ 1,000,000
	COMMERCIAL GENERAL LIABILITY	<input checked="" type="checkbox"/>					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
	CLAIMS-MADE	<input checked="" type="checkbox"/>	OCCUR				MED EXP (Any one person)	\$ 15,000
							PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:		GENERAL AGGREGATE	\$ 3,000,000				
	<input checked="" type="checkbox"/> POLICY	<input type="checkbox"/> PRO- JECT	PRODUCTS - CCMP/OP AGG	\$ 1,000,000				
				\$				
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO	<input type="checkbox"/>					BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS	<input type="checkbox"/>	SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$
	HIRED AUTOS	<input type="checkbox"/>	NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	UMBRELLA LIAB	<input type="checkbox"/>	OCCUR				EACH OCCURRENCE	\$
	EXCESS LIAB	<input type="checkbox"/>	CLAIMS-MADE				AGGREGATE	\$
	DED	<input type="checkbox"/>	RETENTION\$					\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	<input type="checkbox"/> Y/N					WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>	N/A				E.L. EACH ACCIDENT	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

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

Evidence of Liability Insurance for a Block Party on September, 10, 2011 from 1pm - 9pm at 513 Mulberry Ave, Muscatine, IA 52644

CERTIFICATE HOLDER

City Hall of Muscatine
215 Sycamore Street
Muscatine, IA 52761

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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TO BE COMPLETED BY CITY DEPARTMENTS:

I have reviewed the attached application with the following recommendations:

Recommend
Approval

YES NO


Parks & Recreation 8-1-11
Date

Comments:

YES NO


Building & Zoning 7/29/11
Date

**MUST COORDINATE WITH HEALTH
OFFICIAL FOR PERMITS +
INSPECTIONS**

YES NO


Public Works 7/29/11
Date

YES NO


Police Chief 07/28/11
Date

YES NO


Fire Chief 7/29/11
Date

FINAL APPROVAL:

YES NO

City Administrator Date

Persons in charge of event

1. Tom & Hope Thornburg

2101 Ridgewood Ave. Muscatine IA 52761

563-263-16834

hopeandfaithdaycare@gmail.com | tom.thornburg@musc.edu

2. Sharon Phillips

2116 Roselawn Ave. Muscatine IA 52761

563-264-3805

revsphillips@hotmail.com

3. Jeff & Cindy Peterson

1808 Foster St. Muscatine IA 52761

563-554-0681

tiggercool62@hotmail.com

4. Peggy Nelson

32908 120th Ave. W IL City IL 61259

309-537-3530

Pjmart2253@yahoo.com

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Persons to be featured as entertainers / speakers

1. Cloverton - Contact - Shawn Dickinson

Hometown -

Tour Manager

Manhattan KS

Cell - 785-418-5838

shawn@clovertonmusic.com

2. Dividing The Masses - Contact - Kyle Flickinger

Hometown -

Drummer

Muscatine IA

Cell - 563-299-9009

dtmetal@hotmail.com

3. A Wretched Betrayal - contact - Zach Fulton

Hometown -

Vocals

Milwaukee WI

Cell - 563-607-0509

zachvocalist@gmail.com

4. The Dawn Retreat - contact - Dan Smotz

Hometown -

Lead Vocals / Keyboards

Aledo IL

Phone - 347-470-3296

thedawnretreat@gmail.com

Please note that these are only a few of the bands playing throughout the day.

6th Street

Drugtown Parking Lot

Mulberry Ave.
(Secttngs)

Alley
(outhouses)
(Venders)

Pearl City Outreach

Jesus Mission Church

(DODS)

Drugtown Grass
Area

(Jung House)

Church Outreach Parking lot

5th Street