SŢREET	USE PERMIT APPLICATION
EVENT INFORMATION	
Name of Event: Voyageur Canoe Races	
	n for Environmental Education
Is Organizer/Sponsor a 501(c)3 non-profit agend	cy? X ☐ Yes ☐ No State Sales Tax Exemption Number: ES#:
Address:_800 Reserve Street	Federal Tax Exempt Number: 6W-1049
City/State/Zip:_Stevens Point, WI 54481	
Primary Contact: <u>Amy Workman</u>	Work Phone: 608-434-8717
Email: amy.workman@waee.org	Phone During Event: <u>608-434-8717</u>
Website: meeconference.org	FAX:_715-346-3835
Secondary Contact: Steve Kerlin	Work Phone: 715-346-4272
Email: steve.kerlin@waee.org	Phone During Event: <u>715-346-2796</u>
Annual Event?	☐ Yes X☐ No
Charitable Event? If Yes, Name of charity to receive donation	X Yes No
Madis at a LAtt of the second	(CERTIFICATE OF INSURANCE MAY BE REQUIRED)
Public Amplification? (not allowed after 11 p.m.): Hours: 12:30 pm to 3:30 pm	X□ Yes □ No
EVENT CATEGORY	
Run/Walk Music/Concert	Festival ☐ Rally X☐Parking (i.e., bagging meters)
X Other: Voyageur Canoe Races on Lake Mond	The raining (i.e., pagging meters)
LOCATION REQUESTED	
☐ Capitol Square (note specific blocks below)	State St. Mall/800 State Street
30 on the Square (aka top of 100 block of Sta	
Street Names and Block Numbers: Blair Lot, John	(1 Martin Strate Todacotca polow)
	Teres & Diam TT married Tot. Intersection
EVENT DATE(S)/SCHEDULE	
Date(s) of Event: 10/24/2015	
Rain Date (if any):	Set-Up Start Time: 6 am
AEW By initialing, I/we waive the 21-day decision	Take-Down Start Time and End Times: 3:30-10 pm TAKE-DOWN TIME: START TO STREETS REOPENED on requirement
APPLICATION SIGNATURE	
ALL CLAIMS, LIABILITY, LOSS, DAMAGE, OR F.	ORGANIZER/SPONSOR" LISTED ABOVE AGREES TO INDEMNIFY, ERS, OFFICIALS, EMPLOYEES AND AGENTS HARMLESS AGAINST XPENSE INCURRED BY THE CITY ON ACCOUNT OF ANY INJURY AGE TO PROPERTY CAUSED BY OR RESULTING FROM THE TED.
A. C.1.1	

Date__8/24/2015_

Applicant Signature_

Saturday, Oct. 24, 2015

6 am	Blair Lot closed with barricades/Traffic signs placed on parkway adjacent to Willy Street and John Nolen Drive indicating Blair Lot closure.
6:30-11:30 ar	n Seven (7) Voyageur Canoes (24- & 34-ft) moved/parked in Blair Lot

1 pm	Voyageur Canoe paddling teams meet in Blair Lot at dock loading area; Amplification begins
1:15-1:45 pm	Voyageur brigade parade on Lake Monona

1:50-3:15 pm	Race heats (3 race lanes, max 3 canoes per race) on Lake Monona	

3:15-3:30 pm Announcement of race times and team winners; Amplification ends

3:30-10 pm Seven (7) Voyageur Canoes (24- & 34-ft) moved out of Blair Lot

Race Spectator locations:

For Monona Terrace conference participants: Monona Terrace and Convention Center Grand Terrace and Rooftop

For Monona Terrace conference participants and the public: public areas include the bike path and surrounding green spaces

Alder Michael E. Verveer (District 4), Alder Marsha A. Rummel (District 6), Alder Ledell Zellers (District 2), and Alder Sara Eskrich (District 13) will be notified **Sept.18** with an email and flier, or sooner if the application is approved earlier. The lot closure occurs in Alder Verveer's district, but surrounding alders may also find the event of interest. Businesses along Blair St/Williamson St./King St will be notified **Sept. 18**. Residents will be notified **Oct. 15**, if not sooner by their alderpeople.



EMERGENCY ACTION PLAN (EAP)

I. GENERAL

The "Voyageur Canoe Race" will be held October 24, 2015 at the Monona Terrace and Convention Center, Blair Lot, and on Lake Monona in front of the Terrace (John Nolen/Blair/Williamson St. intersection).

II. PURPOSE

- A. This emergency action plan predetermines actions to take before and during the "Voyageur Canoe Race" (hereinafter referred to as the event) in response to an emergency or otherwise hazardous condition.

 These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include, but are not limited to, Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

III. ASSUMPTIONS

The possibility of an occurrence of an emergency is present at this event. The types of emergencies possible are various and could require the response of Fire & Rescue, Emergency Medical Services, and Police.

IV. BASIC PLAN

A. Emergency Action Plan (EAP) Event Representative

1. The EAP event representative will be identified as the point of contact for all communications regarding the event. This person is identified as Amy Workman.

B. Emergency Notification

- 1. In the event of an emergency, notification of the emergency will be through the use of 911. The caller should have the following information available to the 911 operator: nature of emergency, location, and contact person with callback number.
- We ⋈ will / will not have on-site EMS (John Linder

US Coast Guard Auxiliary, 608-692-8595)

3. We ☐ will / ☒ will not have on-site Police or Security (ENTER CONTACT NAME & CELL PHONE NUMBER)

C. Severe Weather

- Weather forecasts and current conditions can be monitored through the <u>National Weather</u> Service's Madison Weather Forecast website.
- 2. Before the event If severe weather is predicted prior to the event, the EAP event representative will evaluate the conditions and determine if the event will remain scheduled. The EAP event representative or his/her designee will be identified as such Amy Workman and will be responsible to monitor the weather conditions before and during the event.
- 3. During the event If severe weather occurs during the event, the EAP event representative or his/her designee Amy Workman will make notification to those attending the event that a hazardous weather condition exists and direct them to shelter.
- 4. There are very limited provisions for sheltering participants in the event of severe weather.
- 5. This event will follow the 30-30 Rule for lightning. If lightning is observed and thunder is heard within 30 seconds, the event will be delayed until 30 minutes have passed since thunder was last heard.

D. Fire

- 1. If a specific hazard has been identified as an increased risk of fire at this event, event manager will work with the Fire Department to determine how to address the hazard.
- 2. All event staff will be instructed on the safe use of Portable Fire Extinguishers.
- 3. If cooking is intended, you must contact the fire department and -

- a) Must have a valid fire extinguisher, 2A10BC
- b) Each space is allowed 1 LP tank per cooking device. All LP tanks are to be secured in an approved manner (tied, strapped, chained, etc.)
- c) No cooking shall be allowed under a tent. Cooking shall be a minimum of 20' away from tents/canopies.
- d) Cooking must be on a non-combustible surface (grease collection material generally required under cooking and food service areas)
- 4. Fire Inspectors may be required to do an inspection of your event (depends on size and nature of the event), contact the Fire Department for guidelines
- All tents/canopies used for cooking shall have a FLAME SPREAD Certification attached to the tent.
- 6. Should an incident occur that requires the Fire Department, 911 will be utilized to request this resource. The caller should have the following information available to the 911 operator: nature of emergency, location, and contact person with callback number.

E. Medical Emergencies

- 1. As with any outdoor event, there is potential for injury to the participants. The types of injuries are various and include those that are heat related as well as traumatic injuries.
- 2. Event manager shall contact the Fire Department to determine if there is a need for on-site Emergency Medical Services at this event.
- 3. Should an incident occur that requires Emergency Medical Services to be called to this event, the caller will have the following information available to give to the 911 Center:
 - a) nature of emergency
 - b) precise location
 - c) contact person with callback number

F. Law Enforcement

- The need for constant Law Enforcement presence at this event

 ☐ has / ☐ has not been identified. Event manager shall contact the Police Department to determine if there is a need for Law Enforcement presence at this event
- 2. Should an incident occur that requires Law Enforcement, to be called to this event, the caller will have the following information available to give to the 911 Center:
 - a) nature of emergency
 - b) precise location
 - c) contact person with callback number

G. Emergency Vehicle Access

- 1. Access for Emergency Vehicles will be maintained at all times.
- 2. 20' Fire Lanes are required to be kept open at events.
- 3. A 14' minimum height clearance requirement for anything that goes over a street or fire lane
- 4. Participants and spectators will be directed to park in approved areas and not to obstruct protective features, sidewalks or public throughways.
- 5. Crowd control will be managed by: Amy Workman.
- Parking for vendor and staff vehicles will be: Blair Lot.
- Parking for attendee vehicles will be: Monona Terrace and Convention Center lot.

V. CONTACT INFORMATION

Primary Contact	Amy Workman	608-434-8717
Secondary Contact	Steve Kerlin	715-346-4272
Emergency	Dane County 911 Center	911
Non-Emergency	Madison Fire Department	(608) 266-4420
Non-Emergency	Madison Police Department	(608) 261-9694

RUTAPAD-01

PDEANOVICH

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/27/2015

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 fieu of such	endorsement(s).						
PRODUCER		CONTACT Pamela Deanovich, CISR					
Jackson Kahl Insurance Services, 39 S. Marr St	LLC	PHONE (A/C, No, Ext): (800) 524-5467	FAX (A/C, No): (866	(866) 218-6850			
Fond Du Lac, WI 54935		E-MAIL ADDRESS: info@jacksonkahl.com					
		INSURER(S) AFFORDING COVER	RAGE	NAIC#			
		INSURER A: West Bend Mutual Insurance	15350				
INSURED		INSURER B: National Specialty Insurance					
Rutabaga Paddlesports, LLC		INSURER C:					
220 West Broadway		INSURER D:					
Madison, WI 53716		INSURER E:					
		INSURER F:					
COVERAGES	CERTIFICATE NUMBER:	REVISION	I NUMBED:				

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	SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	'S	
Α	X	COMMERCIAL GENERAL LIABILITY	IIVOD	WVD	7 0210 7 110 110 221	(IMMIDEL (111)	(Miniboli 111)	EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			BOS0902083	04/10/2014	04/10/2015	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	200,000
								MED EXP (Any one person)	\$	10,000
								PERSONAL & ADV INJURY	\$	1,000,000
		L'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
	X	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	3,000,000
		OTHER:							\$	
		OMOBILE LIABILITY				-		COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
Α	Х	ANY AUTO			CPS0902084	04/10/2014	04/10/2015	BODILY INJURY (Per person)	\$	
		ALL OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident)	\$	
	Х	HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
									\$	
	Х	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	1,000,000
В		EXCESS LIAB CLAIMS-MADE			NUS0918572	04/10/2014	04/10/2015	AGGREGATE	\$	1,000,000
		DED X RETENTION\$ 0							\$	
		KERS COMPENSATION EMPLOYERS' LIABILITY						X PER STATUTE ER		
Α .	ANY	PROPRIETOR/PARTNER/EXECUTIVE TAN	N/A		WCS090208508	04/10/2014	04/10/2015	E.L. EACH ACCIDENT	\$	100,000
li li	Man	datory in NH)						E.L. DISEASE - EA EMPLOYEE	\$	100,000
	DES	, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	500,000
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) October 24, 2015

CERTIFICATE HOLDER	CANCELLATION
Voyageur Canoe Race 220 W Broadway Madison, WI 53716	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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