

March 2ND

Big Friend Little Friend
Of the Mitchell Area
104 W. 5th Ave.
Mitchell, SD 57301

Feb. 26th, 2020

Dear Council Members,

The 19th annual Memorial Weekend in Mitchell is on May 23rd with a new title sponsor. After 18 years The Imagine Guild Inc. has turned over the event to the Big Friend Little Friend of the Mitchell Area. The event will remain the same as in the past years with the proceeds now helping the local mentoring program. Many of the Imagine Guild board members are continuing to work with this event to help in the transition to Big Friend Little Friend.

With this year's annual event coming up on May 23rd, Big Friend Little Friend would like to again inform the council of this year's schedule of events and then ask for help with the cost of fees and equipment needed to provide this event. For the event site we are asking for street and parking lot closures as follows.

South Main St. from 2nd, South to the Depot. Rail Road St. from ½ block West of Main St. to Lawler St. East of Main. Both City parking lots South of 1st St. and Rail Road St. We also this year ask to close the Alley on the West parking lot and also allow us to use the adjoining City gravel parking area between the Alley and Public Safety storage building.

We ask for the gravel lot to help expand more room for BBQ Teams to set up. The Alley would be closed but we will not set up on the surface to allow emergency vehicles in if needed. This year we also ask again to have 1st closed for the Day to allow us more room for our growing car show & shine.

We are again asking for a Alcohol License this year for the west parking lot and a consumption permit for all of the closed off areas. All of the alcohol consumption area boundaries will be clearly marked for the public

The events are as follows this year.

- 8 AM. BBQ Teams set up and begin preparing food for sampling
- 1 PM. Poker Run leaves Mitchell returning approx. 5 PM.
- 1 PM. Alcohol Consumption allowed only if in our special event cup
- 4 PM. Kids Pedal Pull & Kids games begin
- 3 PM. Car Show & Shine registration at east city parking lot.
- 4 PM. Bean Bag Tournament registration begins at BBQ site
- 5 PM. BBQ public sampling begins

These events will draw a large group of people from Eastern South Dakota as well as adjoining states to our City. As our event continues to grow the out of area visitors also has grown, many making this event an annual stop for them. All proceeds from our event are donated to Big Friend Little Friend of the Mitchell Area to assist their mentoring program.

The Permits & Cost for this event are as follows

- | | |
|-----------------------------------|----------|
| 1. Special Event Beverage License | \$500.00 |
| 2. Consumption Permit | \$500.00 |

3. Picnic Tables 14 @ \$25.00 each	\$350.00
4. Security 8 man hours @31.50 per hour(average ot rate)	\$252.00
5. Parade Permit	\$250.00
6. Portable Sign Post 10@ \$1.00 each	\$10.00
7. Barricades 20 @ \$3.00 each	\$60.00
8. Water Meter Deposit (water for BBQ Teams)	\$1500.00

As in the past we are asking for some assistance from the council with the fees that occur to continue to make this event happen. The total cost for fees for this year is approx. \$3422.00. As the water meter fee is a deposit and will be refunded upon return of the meter, the actual fees are \$1922.00. Big Friend Little Friend asks the council again as in the past for a reduction of the fees to \$800.00 which is 41% of the cost with the City donating approx. 59% of the cost or approx. \$1122.00

The donation of these services allows Big Friend Little Friend to continue to advertise for this event as well as continue to cover the rising cost of many of the materials needed for this event.

We again greatly appreciate all of the councils help and support each year to bring this event to Mitchell and look forward to a successful event again this year.

Thank you for your consideration
 Big Friend Little Friend of the Mitchell Area
 Dan Schneider, BBQ Championship Chairman
 Jean Haley, Executive Director
 Please call with any questions.
 Dan 605-770-1109
 Jean 605-292-4444

City of Mitchell

Street Dance & Special Event Permit Application

Mitchell Area

Applicant: *Big Friend Little Friend*

Event Date: *May* *23* *2020*
(month) (days) (year)



Instructions:

To apply for a Street Dance or Special Event Permit, please complete this application. Submit your application, including required attachments, no later than forty-five (45) days before your event. Facility Use Agreements should also be completed at this time (if applicable).

This application is subject to Mitchell City Council Approval. Any violations of the approved permit will be grounds for law enforcement to require the immediate termination of the event.

EVENT INFORMATION

Type of Event:

Street Dance For Profit Concert
 Private Dance Non-Profit Other (specify) Street Festival

Event Title: Memorial weekend in Mitchell for Big Friend Little Friend.

Event Date(s): 5 23 2010 Total Anticipated Attendance: 2000+
(month, day, year)

(# of Participants 100 # of Spectators 1900)

Actual Event Hours: (from): 8:00 AM (to): 10:00 AM / PM
(dances / bands & amplified noise end no later than 12:00 a.m.)

Location / Staging Area: South end of Main Street

Band Name TBA

Set up/assembly/construction Date: May 23rd Start Time: 6:00 AM / PM

Please describe the scope of your setup / assembly work (specific details):

BBQ Team set up Kids games Ban Bag Tournament
Poker Run Car Show Sponsor Displays

Dismantle Date: May 23rd Completion time: 10:00 AM / PM

List any street(s) requiring closure as a result of this event. Include street name(s), day, date and time of closing and time of re-opening:

Main street from 2nd south to the Depot - Railroad street from 1/2 west of Main to Jewler street east of Main Both City parking lots south of 1st street
Alley on west parking lot between main & Rowley street - City lot west of Alley
All closures will be from 6:00 AM - 10:00 PM

APPLICANT AND SPONSORING ORGANIZATION INFORMATION

Commercial (for profit)

Noncommercial (nonprofit)

Sponsoring Organization: ~~Big Friend Little Friend~~ Big Friend Little Friend of the Mitchell Area

Chief Officer of Organization (NAME): Dan Schneider
Mitchell Area

Applicant (NAME): Big Friend Little Friend Business Phone: (605) 292-4444

Address: 104 W 5th Ave. Mitchell SD 57301
(city) (state) (zip code)

Daytime phone: (605) 770-1109 Evening Phone: (~~905~~ ⁶⁰⁵) 770-1109 Fax #: ()

Please list any professional event organizer or event service provider hired by you that is authorized to work on your behalf to produce this event.

Name: NA

Address: _____
(city) (state) (zip code)

Contact person "on site" day of event or facility use Dan Schneider Pager/Cell #: 605 770-1109
(Note: This person must be in attendance for the duration of the event and immediately available to city officials)

REQUIRED: Attach a written communication from the Chief Officer of the organization which authorizes the applicant or professional event organizer to apply for this Special Event Permit on their behalf.

FEES / PROCEEDS / REPORTING

NO

YES

Is your organization a "Tax Exempt, nonprofit" organization? If YES, you must attach a copy of your IRS 501C Tax Exemption Letter to this Special Event Permit application (providing proof and certifying your current tax exempt, non profit status).

Are admission, entry, vendor or participant fees required? If YES, please explain the purpose and provide amount(s):

\$ 35.00 for Poker Run
\$ 100.00 for BBQ Teams
\$ 10.00 for BBQ Sample Cup
\$ 40.00 for Bean Bag Teams
\$ 7.00 for event cap for Alcoholic Beverage

**OVERALL EVENT DESCRIPTION:
ROUTE MAP / SITE DIAGRAM / SANITATION**

Please provide a detailed description of your proposed event. Include details regarding any components of your event such as use of vehicles, animals, rides or any other pertinent information about the event:

BBQ will begin set up at 6 AM to begin preparing ribs for public sampling at 5 pm in west parking lot. Poker run will assemble on Rail Road street & Depot parking lot. The run will leave at 1 PM returning approx at 5 PM. Parade route will be east on Rail Road st to Burr st. then turn right on Burr St. going south to Havens Ave. Bikes will then leave town on direction of their choice to the first stop. Bean Bag tournament will begin at 4 PM. Kids pedal pull & Inflatables will begin at 4 PM. Car show will start at 2 PM from 2nd south to the Depot. Music & PA announcements will be set up on a stage from 4-9 PM

Blank lined area for additional event description details.

OVERALL EVENT / FACILITIES RENTAL DESCRIPTION (CONTINUED)

Consumption permit requested - \$500 fee
(consumption permits end at 12:30 a.m.)

Parade Permit \$250

Special event license requested: alcoholic beverage license, malt beverage, wine license, or malt beverage & wine license where noise permit is required. (SDCL 35-4-124) - \$500 fee

NO YES

Does the event involve the sale or use of alcoholic beverages? If YES, please provide your liquor liability insurance information to the last page of this application.

Will items or services be sold at the event? If YES, please describe:

Event cups for alcoholic beverages

Event cups for BBQ Samples

Does this event involve a moving route of any kind along streets, sidewalks or highways? If YES, attach a detailed map of your proposed route, indicating the direction of travel and provide a written narrative to explain your route.

Does this event involve a fixed venue site? If YES, attach a detailed site map showing all streets impacted by the event.

In addition to the route map required above, please attach a diagram showing the overall lay-out and set-up locations for the following items:

➤ Alcoholic and Non-alcoholic Concession and / or Beer Garden Areas.

➤ Food Concession and / or Food Preparation Area(s).

Please describe how food will be served at the event: BBQ Contest in West City parking lot

between 1st & Rail Road as well as city lot west of the parking lot. main street may be used Also
If you intend to cook food in the event area, please specify the method to be used:

GAS ELECTRIC CHARCOAL OTHER (specify): _____

➤ First Aid Facilities and Ambulance locations.

➤ Tables and Chairs.

➤ Fencing, Barriers and / or Barricades.

➤ Generator Locations and / or Source of Electricity.

➤ Canopies or Tent Locations.

➤ Booths, Exhibits, Displays or Enclosures.

➤ Scaffolding, Bleachers, Platforms, Stages, Grandstands or Related Structures.

➤ Vehicles and / or Trailers.

➤ Trash Containers and Dumpsters.

(NOTE): You must properly dispose of waste and garbage throughout the term of your event and immediately upon conclusion of the event, the area must be returned to a clean condition.

Number of trash cans: 20 Trash Containers w / lids: _____

Describe your plan for clean-up and removal of waste and garbage during and after the event or use of facility:

Dumpster provided by Meidema Sanitation

➤ Other Related Event Components not covered above.

ADDITIONAL INFORMATION REQUIRED FOR FACILITIES USE

1. Date / Time requested for set up or preparation of facility: May 23rd 2020 5:00 AM
2. Date / Time clean up and restoration of facility will be completed: May 24th 2020 12:00 AM
3. Please indicate city facilities requested for use:

	NO	YES		NO	YES
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bleachers (No. Needed _____) \$35 per day per bleacher	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Electricity / Main Street \$100 per day per electric panel	<input type="checkbox"/>	<input type="checkbox"/>	City Hall parking lot
<input type="checkbox"/>	<input type="checkbox"/>	Fencing - orange snow fence \$2.50 per day per 50'	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify) _____
<input checked="" type="checkbox"/>		Main Street	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Parking Lot
<input type="checkbox"/>	<input type="checkbox"/>	Traffic cones. (No. Needed _____) \$25.00 per day	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Utric Tables \$ 0.25 per Signs - \$2.00 per day (one needed for each lane of traffic)
<input checked="" type="checkbox"/>		Barricades - \$3.00 per day			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	10 Portable Sign Posts - \$1.00 per day			

4. Please indicate set-up by sponsor:

Please describe preparation or set-up required for your activity in detail: Barricades will be needed from 2nd st. South to the Depot including closing 15th st. Rail Road ~~st.~~ from 1/2 block west of Main to Lawler st. East of Main. The Alley adjoining the west parking lot. The City lot west of the west parking lot also.
Alcoholic Consumption permit will be for the same area and posted as needed.

We also request that BBQ Trains can begin set up on Fri evening in west parking lot and allowed to stay until Sun. May 24th if needed

SAFETY / SECURITY / ACCESSIBILITY

Please describe your procedures for both **Crowd Control** and **Internal Security**: _____

Mitchell Police Dept.

Please describe your Accessibility Plan for access at your event by individuals with disabilities:

All events occur on Main Street which is ADA accessible

REQUIRED: It is the applicant's responsibility to comply with all City, County, State and Federal Disability Access Requirements applicable to this event.

PRIVATE SECURITY IS REQUIRED AS APPROVED BY THE CHIEF OF PUBLIC SAFETY

NO YES

Have you hired any Professional Security organization to handle security arrangements for this event? If **YES**, please list:

Security Organization: _____

Security Organization Address: _____

_____ (city) _____ (state) _____ (zip code)

Security Director (Name): _____ Business phone: _____

Is this a night event? If **YES**, please state how the event and surrounding area will be illuminated to ensure the safety of the participants and spectators:

City Street lights

Please indicate what arrangements you have made for providing **First Aid Equipment**?

Mitchell EMS

PARKING PLAN / SHUTTLE PLAN / MITIGATION OF IMPACT

Please describe your plans to notify all residents, businesses and churches impacted by the event:

All downtown business will be notified and radio / newspaper & internet will promote the event

ENTERTAINMENT / ATTRACTIONS / RELATED EVENT ACTIVITIES

NO YES

- Are there any **musical entertainment** features related to your event or facilities rental? If **YES**, please state the number of bands and type of music.

Number of Stages: 1 Number of Bands: 1

Type of Music/Entertainers Name: TBA

- Will **sound amplification** be used?
If **YES**, please indicate: Start Time: 12:00 AM / PM - Finish Time: 10:00 AM / PM

- Will **sound checks** be conducted prior to the event?
If **YES**, please indicate: Start Time: _____ AM / PM - Finish Time: _____ AM / PM

Please describe the sound equipment that will be used for your event:

Please approve a noise request from 12:00 PM - 10:00 PM
for this event

- Will any fireworks, rockets or other pyrotechnics be used? If **YES**, please complete the attached fireworks application included at the end of this Special Event application. A permit will be issued by the City Fire Marshal's office contingent upon the receipt of the required certificate of insurance and approval by the council. \$30.00 fee.

- Will any signs, banners, decorations or special lighting be used? If **YES**, please describe: consumption boundaries & sponsor banners
will be used

PROMOTION / ADVERTISING / MARKETING / INTERNET INFORMATION

NO YES

- Will this event be promoted, advertised or marketed in any manner? If **YES**, please describe: TV - Radio - Internet - Posters - Banners

- Newspapers

- Will there be any live media coverage during your event? If **YES**, please explain: Radio - TV - Newspaper

- Applicant acknowledges and agrees to allow the City to publish the Contact Person and media referral telephone numbers on the internet in conjunction with the Calendar of Upcoming Events in the City of Mitchell. If you have a home page and want us to link with our Calendar, please provide the Internet address for your homepage:

Face book Memorial Weekend in Mitchell
Internet @ www.bigfriendslittlefriends.mitchell.org

Refer all event public inquiries and / or media inquiries for this event to:

NAME: Dan Schneider PHONE: 605 770-1109

Jean Haley 605 999-9200

INSURANCE REQUIREMENTS

REQUIRED: Insurance for your event will be required before final permit approval.

Name of Insurance Company: _____ Agent's Name: _____

Business Phone: _____ Policy Number: _____ Policy Type: _____

Address: _____ (city) _____ (state) _____ (zip code)

For final permit approval, you will need \$2,000,000 commercial general liability insurance that names "the City of Mitchell, its officers, employees and agents" as an additional insured. Insurance coverage must be maintained for the duration of the event. For insurance related questions, please contact the Human Resources Office at (605) 995-8417 – Fax # (605) 995-8443.

The City must be named as an "additional insured." Please obtain the required insurance and mail an original insurance certificate to: **City of Mitchell, Human Resources, 612 North Main Street, Mitchell, SD 57301.**

LIQUOR LIABILITY INSURANCE

REQUIRED: This insurance coverage is required if you are planning to sell alcoholic beverages at your event or facilities rental. A minimum of \$500,000 liquor liability is required with City of Mitchell named as additional insured.

Name of Insurance Company: _____ Agent's Name: _____

Business Phone: _____ Policy Number: _____ Policy Type: _____

Address: _____


Please obtain the required insurance and mail an original insurance certificate to: **City of Mitchell, Human Resources, 612 North Main Street, Mitchell, SD 57301.**

AFFIDAVIT OF APPLICANT

ADVANCE CANCELLATION NOTICE REQUIRED: If this event is cancelled, notify the Mitchell Police Division. Otherwise, City personnel and equipment may be needlessly dispatched.

I certify that the information in the foregoing application is true and correct to the best of my knowledge and belief and that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event and I understand that this application is made subject to the rules and regulations established by the City Commission of Mitchell. I agree to abide by these rules and further certify that I, on behalf of the organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the Event to the City of Mitchell.

Name of Applicant (PRINT): Daniel Schneider Title: Community Member



(signature of Applicant / sponsoring organization) Date: 2-25-2020

(signature of Professional Event Organizer or Renter of City-owned Facilities)

GREAT PLAINS BROKERAGE

Mailing Address:
PO Box 90447
Sioux Falls, SD 57109-0447

Toll Free Number: 1-800-251-5316

Website: www.gpbi.com



Commercial Broker - SD & ND Contact: Jason Kelling

Email: Jason@gpbins.com

Phone: 605.274.7129

Acct Manager & Renewal Underwriter SD& ND: Joanne Johnson

Email: Joanne@gpbins.com

Phone: 605.274.7138

Date: 2/20/20

Agency: Bankwest Ins

Name Insured: Big Friend Little Friend of the Mitchell Area

**QUOTATION ONLY - TERMS & CONDITIONS MAY NOT BE EXACTLY AS REQUESTED. PLEASE REVIEW THIS QUOTE CAREFULLY.*

**QUOTE IS GOOD FOR 30 DAYS.*

General Liability Coverage

General Aggregate: \$2,000,000
Personal/Advertising Injury: \$1,000,000
Fire Damage: \$100,000

Products/Completed Operations: \$2,000,000
Per Occurrence: \$1,000,000
Medical Payments: \$5,000

Liability Deductible: \$NA

Exposure Basis: Special Event - 48558 - 1 Day Event (5/23/20)

1 Addl. Insured Included

Liquor Liability Included within Limits

IM Coverage

Scheduled Property:

Misc Tools:

EXCLUSIONS

Assault & Battery Exclusion

Fungi/Bacteria Exclusion

Participants Exclusion While Actively Participating (Sports)

Lead Contamination Exclusion

Communicable Disease Exclusion

War Exclusion

Professional Liability Exclusion

Punitive Damages Exclusion

Asbestos Exclusion

Pollution Exclusion

Sexual Abuse & Molestation Exclusion

Employment Practices Exclusion

Employers Liability Exclusion

Terrorism Exclusion

Terms & Conditions

Minimum Earned Premium: 100% (Minimum & Deposit)

Commission: 10%

Insurance Carrier: Lloyds of London (A Rated)

Premium Breakdown:

General Liability/Liquor: \$600.00

Property: \$

IM: \$

Inspection Fee: \$

Policy Fee: \$75.00

Surplus Lines Tax: \$16.87

SD Tax Filing Fee: \$1.18

TOTAL: \$693.05

_____ **YES! Please Bind Coverage Per This Quote.**

Effective _____

Producers Signature _____ **Date** _____

ACTION OF CITY COUNCIL

The within application for a Street Dance Permit in the City of Mitchell was presented to the City Council on the _____ Day of _____, 20_____.

Motion by the City Council was as follows:

The following permits will be granted by the Department of Public Safety:

____ Parade Permit ____ Noise Permit ____ Consumption Permit ____ Fireworks Permit

Amount of fees to be paid to the City of Mitchell: _____

Dated this _____ Day of _____, 20_____.

Mayor

Attest:

Finance Officer

Date fees paid: _____

Finance Office signature:

FIREWORKS PERMIT APPLICATION

(Needed Prior To Issuing Fireworks Permit)

Name of Applicant _____ Phone # _____
Address _____ City _____ State _____ Zip _____

PERSON(S) ACTUALLY IN CHARGE OF FIRING THE DISPLAY:

Name _____ Address _____ State _____ Zip _____

Name _____ Address _____ State _____ Zip _____

Date of Display _____ Time of Day _____

Length of Display: _____

Exact Location of Display _____

What is width perimeter requirements? _____

A copy of the applicant's insurance certificate must be on file with Human Resources. The insurance certificate must have liability insurance of \$1,000,000 per occurrence and the City of Mitchell listed as additional insured.

TYPE OF FIREWORKS:

_____ Class B Explosive (Special Fireworks) _____ Class C Common Fireworks

Applicant should be aware that there is a \$30.00 permit fee.



Form Center

By signing in or creating an account, some fields will auto-populate with your information and your submitted forms will be saved and accessible to you.

Outdoor Alcohol Consumption Permit

This permit is issued in accordance with SDCL 35-1-5.3.

Business Name	Person Requesting Permit	Address	Phone
Big Friend Little Friend at the Mitchell Area	Dan Schneider	104 W 5th Ave Mitchell SD 57301	605-770-1109

Permit Period

mm/dd/yyyy	hh:mm am/pm	–	mm/dd/yyyy	hh:mm am/pm
5-23-20	10:00 AM		5-24-20	12:00 AM

Requested Area
2nd Street south to the Depot. Rail Road St from 1/2 block west of Main – Lawrence Street East of Main. Both City parking lots south of 1st street.

Contact Person at Event	Cell Number
Dan Schneider (Must be Present During the Entire Event)	605-770-1109

- The following conditions must be met for this permit to be valid:
- The entire permitted area must be fenced or controlled to limit access.
 - All applicable South Dakota alcohol laws and Mitchell ordinances must be followed.
 - Requesting person/business must provide a minimum of two law enforcement officers from the Mitchell Police Division; or such other officers as deemed appropriate by the Chief of his designee.
 - Insurance certificate must be on file with Human Resources. Certificate of Insurance = \$1 million General Liability, \$500,000 Liquor Liability.
 - Permit fee of \$500 has been paid at the City Finance Office.

Receive an email copy of this form.

Email address
dancin@mit-midco.net
This field is not part of the form submission.

Stay Connected With Mitchell

612 North Main Street | Mitchell, SD 57301 | Phone: 605-995-8420