

Planning & Codes Administration Application Form

PERMIT NUMBER: PRSE 2017 1369 RECEIPT NUMBER:
SPECIAL EVENT: VIMTAGE MARKET MAYS
☐ Athletic Event ☐ Mobile Food Vendor ☐ Event Signage ☐ Other
EVENT DATE(S): JUNE 9-1/ EVENT TIME(S): /Wan to 4/m
EVENT LOCATION/ADDRESS: MERRICANITATI COMMUNICA CALLAGE - LANGELLA
BOSW LONGUISW RD. LS. MO 64081 ZONING OF PROPERTY:
APPLICANT: VIMPAR MANYER MTS PHONE: ZIU-632-5948
CONTACT PERSON: ANE HEMBLIX FAX:
ADDRESS: 401 Jul WINTENAR DR CITY/STATE/ZIP: LI, MIS 64081
PROPERTY OWNER: MET REMUNDENCE COMMUNITY CAUSE PHONE: 816-604-7144
CONTACT PERSON: JISHOLOM VIAM7 FAX:
ADDRESS: 500 Sur Contaller An CITY/STATE/ZIP: (J. MO 64081
PROPERTY OWNER APPLICANT
Print name: Kirk A. Nooled Easy frankled
Administrative Notes (do not write below this line)



Planning & Codes Administration Special Event Checklist

*A Completed Checklist Must Be Submitted With Each Special Event Permit Application

Met	Not Met	N/A	
₽⁄			Applicant – Name, Address and Telephone Number
Y			2. Property Owner – Name, Address and Telephone Number
Image: Control of the			Written approval from the property owner agreeing to the proposed event
Image: Control of the			4. Description of the site on which the proposed event is to be held
			5. Date(s) of the proposed event
\square			6. a narrative written description of the proposed event, to include:
			 the hours of operation,
			anticipated attendance, —
			 any building/structures, signs or attention-attracting devices proposed to be used in conjunction with the event,
Image: Control of the con			 A site plan showing the location of all existing or proposed uses, structures, parking areas, outdoor display areas, signs, streets and property lines.
Image: Control of the con			8. Location and number of proposed temporary public toilets
			 Proposed temporary potable water supplies, which shall be approved by the Water Utilities Department, pursuant to applicable City codes.
9			10. Proof of liability insurance at time of application
			11. Electrical Plan shall be approved by the Code Official 🤝 รองพลนคานย์



Planning & Codes Administration Special Event Checklist

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Submittal Requirements	Yes	No
Completed Special Events Application		
Ownership signature/permission		
Filing fee – See Schedule of Fees and Charges for applicable fee		
Checklist for Special Event Application		

* Applications missing any required item above will be deemed incomplete.

Table 1. General Application Requirements							
UDO Article 11., Sec. 11.060	icle 11., Ordinance Requirement						
A .Application Required.	A Special Event Application shall be submitted for any Special Event requiring a Special Event Permit, as outlined above under "Permit Required."		}				
B. Application Deadline	A complete application shall be submitted at least 20 calendar days prior to the requested start date of a Special Event. The Director shall have the authority to waive the application deadline.						
C. Submission Requirements.	The application shall set forth and contain the submission requirements as stated in the UDO Article 11.060.C.1-14						
C.1. Name of Event	Name and/or brief description of the event.						
C.2. Description of City Services	Description of City Services required for the event such as traffic control, street sweeping etc.						
C.3. Fees	Fees as required. See the Schedule of Fees and Charges for applicable fee						
C.4. Narrative	A written narrative, fully describing the proposed event, including: 7. Location 8. Hours of operation 9. Anticipated attendance 10. Buildings or structures to be used in conjunction with the event 11. Proposed signs or attention attracting devices 12. Public streets to be used, if any						
C.5. Statement							
C.6. Site Plan	A site plan in the form and the level of detail as required by the Director, showing the location of all existing or proposed uses, structures, parking areas, outdoor display areas, signs, streets, and property lines.						



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/21/2017

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).

th	is certificate does not confer rights t	to the c	certific	cate holder in lieu of si	ach euc a hour	y, certain pr dorsement(s).).	equire an engorsement	. A SI	atement On
PRODUCER 918-272-2208 918-272-2209				CONTACT Bill Jordan 918-381-3685,						
Wil	iam Jordan Insurance Agency,		PHONE (A/C, No, Ext): 918-272-2208 (A/C, No): 918-272-2209							
841	8 N 123rd E Ave				E-MAIL ADDRE	_{ss:} billjorda	n93@gmai	il.com		
Ow	asso, OK 74055					INS	URER(S) AFFOR	DING COVERAGE		NAIC#
					INSURER A: Burlington Insurance Company					
INSURED						RB:				
	E Enterprises				INSURE	RC:				
	age Market Days, LLC				INSURE	RD:				
	7 E 105th St				INSURE	RE:				
	sa, OK 74137				INSURE	RF:				
				NUMBER:				REVISION NUMBER:		* · · · · · · · · · · · · · · · · · · ·
IN CI	IIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY (CLUSIONS AND CONDITIONS OF SUCH	EQUIRE PERTAI	MENT IN, TH	, term or condition IE insurance affordi	OF AN' ED BY	Y CONTRACT THE POLICIES REDUCED BY I	OR OTHER I S DESCRIBEI PAID CLAIMS.	OCUMENT WITH RESPEC	CT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDLISI INSD V	UBR VVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	✓ COMMERCIAL GENERAL LIABILITY	1						EACH OCCURRENCE	\$ 1,0	00,000
Α	CLAIMS-MADE ✓ OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 10C	0,000
				863BW38689		02/06/2017	02/06/2018	MED EXP (Any one person)	\$ 2,5	00
								PERSONAL & ADV INJURY	\$ 1,0	00,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,0	00,000
	POLICY PROLOC							PRODUCTS - COMP/OP AGG	\$ Exc	luded
	OTHER:							Ded per claim	\$ \$5,	000
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY							` '1	\$	
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
									\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE	1						AGGREGATE	\$	
	DED RETENTION\$	ļļ		· · · · · · · · · · · · · · · · · · ·				1000	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER		
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A						E.L. EACH ACCIDENT	\$	
(Mandatory in NH)								E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						<u> </u>	E.L. DISEASE - POLICY LIMIT	\$	
	ent Location: Long							d) Summit, MO 64081		
Eve	ent Coverage Dates: 06	3/05/2	017-	-06/11/2017						
		.,								
	nket Additional Insured - Mana Jorsement CG 2011 01 96.	igers (or Le	essors of Premises	, if red	quired by v	vritten con	tract, applies per att	ache	d Policy
CERTIFICATE HOLDER					CANCELLATION					
Longview Community College 3801 Longview Road Lee's Summit, MO 64081					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				
					William Jordan					

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

- 1. Designation of Premises (Part Leased to You):
 - Any and all locations or part thereof that is leased to you for your use in your business, but only if you have agreed, in a written contract, to provide additional insured coverage for that location or part thereof.
- 2. Name of Person or Organization (Additional Insured):

Any person or organization with whom you have agreed, in a written contract, to add such person or organization as an additional insured on your policy with respect to the above premises, provided such written contract is fully executed prior to an "occurrence" in which coverage is sought under this policy.

3. Additional Premium: Included

(If no entry appears above, the information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

- 1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
- 2. Structural alterations, new construction or demolition operations performed by or on behalf of the person or organization shown in the Schedule.

To Whom it May Concern:

Please see narrative below regarding Vintage Market Days event June 9-11 in at MCC-Longview.

Vintage Market Days of South Kansas City Metro is bringing over 100 vendors to Metropolitan Community College-Longview at 500 Longview Road, Lees Summit on June 9-11, 2017. The event includes vendors local to Kansas City and surrounding states. The event will also host five food trucks and provide live music.

The event is scheduled from 10am-5pm on Friday and Saturday and 10am-4pm on Sunday. The event will be in the parking lot just west of the Cultural Arts Building (notated on map). The vendors will either provide their own tent or use tents rented by Vintage Market Days. Most tents range in size of 10x10-10x40 with eight 20x20 tents and a couple of larger 20x30 tents.

Food truck vendors have already been provided the information and resources of Jackson County for food permits, etc.

The anticipated attendance is 10-12k over the three day period.

The event has an entrance fee of \$10 on Friday and \$5 on Saturday and Sunday.

Security will be provided by Allied Security both during event hours and overnight.

Vendors opting for electricity will be provided through generators owned by Vintage Market Days.

Signs will be placed throughout the campus for directions to the main entrance.

Portable toilets will be scattered throughout the event to include disabled units. Approximately 10-12 toilets will be used.

