

PRSE20190208

City of Lees Summit
Department of Planning and Development
Application Form

APPLICATION TYPE:

☐ Special Event Permit for Retail Garden Center

PROPERTY LOCATION/ADDRESS: 251 SW Greenwich in Price chopper lot

ZONING OF PROPERTY: _____

APPLICANT Knu Valley Greenhouses, Inc PHONE 785-776-8585

CONTACT PERSON Megan Pickford FAX 785-776-8581

ADDRESS 360 Zandale Road CITY/STATE/ZIP Manhattan, KS 66502

PROPERTY OWNER Consentinos Food Stores PHONE _____

CONTACT PERSON Victor Consentino FAX _____

ADDRESS 3901 W 83rd St CITY/STATE/ZIP Prairie Village, KS 66208

ENGINEER/SURVEYOR _____ PHONE _____

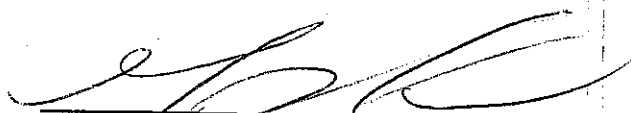
CONTACT PERSON _____ FAX _____

ADDRESS _____ CITY/STATE/ZIP _____

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Contract Attached

PROPERTY OWNER



APPLICANT

Print name: _____

Megan Pickford

City use only, do not write below this line.

Approved Planning & Development

City of Lees Summit

Department of Planning and Development

Special Event Checklist

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

Met	Not Met	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Applicant – Name, Address and Telephone Number
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Property Owner – Name, Address and Telephone Number
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Written approval from the property owner agreeing to the proposed event
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Description of the site on which the proposed event is to be held
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Date(s) of the proposed event
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. a narrative written description of the proposed event, to include: <ul style="list-style-type: none"> • the hours of operation, • anticipated attendance, • any building/structures, signs or attention-attracting devices proposed to be used in conjunction with the event,
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. A site plan showing the location of all existing or proposed uses, structures, parking areas, outdoor display areas, signs, streets and property lines.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Location and number of proposed temporary public toilets
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Proposed temporary potable water supplies, which shall be approved by the Water Utilities Department, pursuant to applicable City codes.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Proof of liability insurance at time of application
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Electrical Plan shall be approved by the Code Official



"Quality Since 1967"

Site Description:

251 SW Greenwich the parking lot of Price Chopper. Kaw Valley's greenhouses center will be placed to the east side of the parking lot occupying 14,000 square feet. A quonset and shade structure will be put up in the garden center. The Quonset is 1008 sq ft and the shade structure is 800 sq ft, Both of these structures have been used at our garden centers in Lee's Summit in past years. The garden center will have a perimeter fence made of landscape timbers and concrete blocks, and displays will be made of both blocks and boards as well as pre-fab display shelves.

Date of Operation: April 1 to June 30th weather permitting

Hours of operation: 8am to 7pm

Attendance estimate: 50-60 per day

Toilet: we have been granted access to the building

Water Supply: Using hydrant on the front of the store

Electrical; should come from outlet installed on a light pole in lot near garden center

Parking spaces available: 454

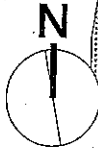
Parking spaces we would like to use: 32

How are Quonsets are constructed:

The base is made into two sections per side, each side will be anchored into the ground by 1' 10.5" pins. Nine hoops of square tubing assemble the main structure. Each hoop is split into two sections and held together by a brace at the top. The entrance/exits are pre-built and just laid into the track system. A heavy-duty greenhouse plastic is placed over the entire unit, and then braced to each hope with bracing and screws.

More information on our company is available at www.kawvalleygreenhouses.com

Lee's Summit



SW Cheddington pl

225'-2"

25'-0"

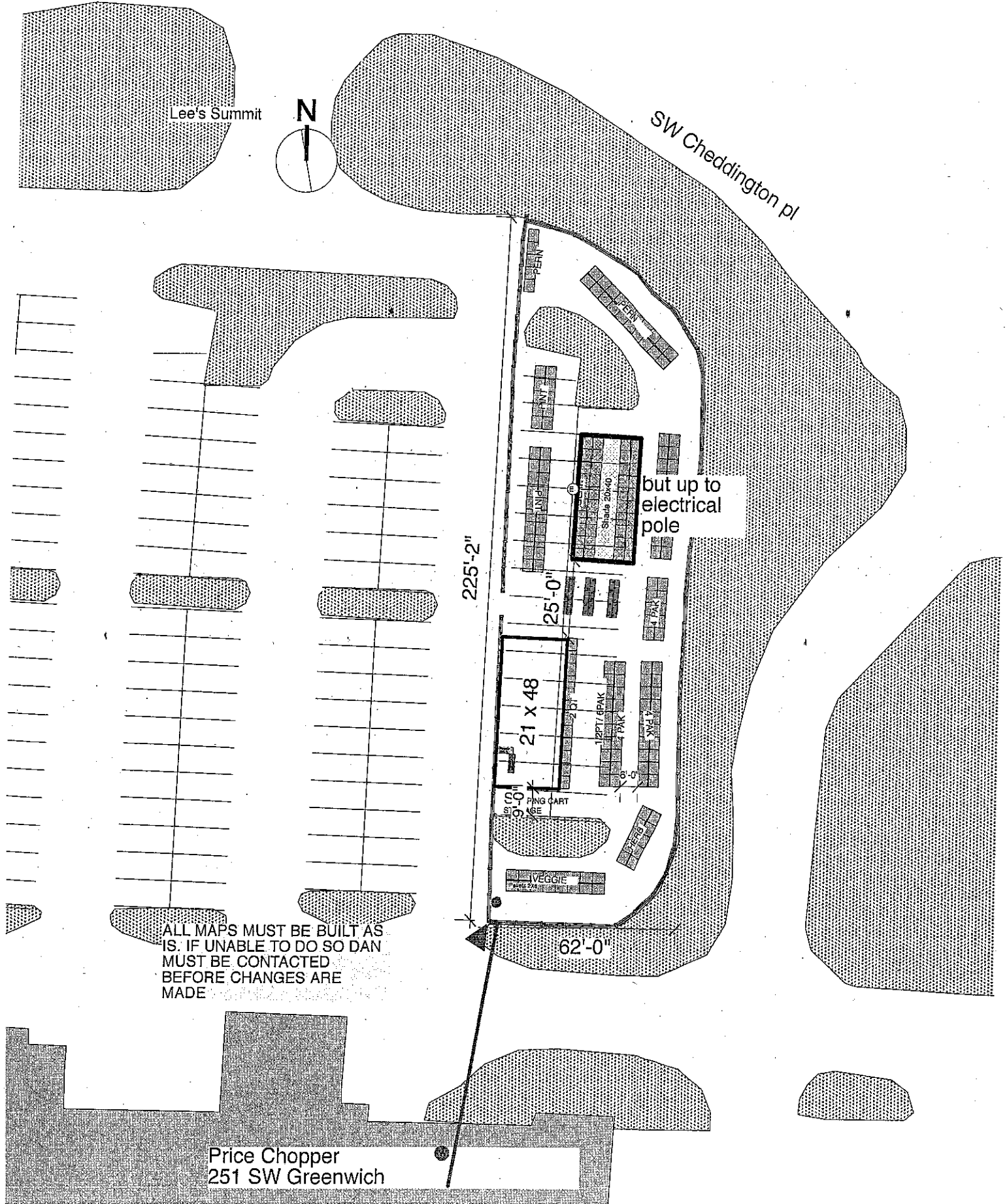
21' x 48'

62'-0"

but up to
electrical
pole

ALL MAPS MUST BE BUILT AS
IS. IF UNABLE TO DO SO DAN
MUST BE CONTACTED
BEFORE CHANGES ARE
MADE

Price Chopper
251 SW Greenwich



ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/03/2018

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Holmes Murphy-Kansas City 1828 Walnut Street Suite 701 Property Casualty/MM-KC Kansas City, MO 64108		CONTACT NAME: Darla Mose CRIS CRM CIC CISR PHONE (A/C, No, Ext): 816 857-7816 FAX (A/C, No): E-MAIL ADDRESS: dmose@holmesmurphy.com															
INSURED Kaw Valley Greenhouses, Inc. 360 Zeandale Rd Manhattan, KS 66502		<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A : Berkley Regional Insurance Company</td> <td>29580</td> </tr> <tr> <td>INSURER B : Accident Fund General Insurance Company</td> <td>12304</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Berkley Regional Insurance Company	29580	INSURER B : Accident Fund General Insurance Company	12304	INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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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.

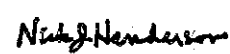
INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> BI/PD Ded:5,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		XCP9005712	12/01/2018	12/01/2019	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$1,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY		XCP9005712	12/01/2018	12/01/2019	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$0 <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE		XUM9005714	12/01/2018	12/01/2019	EACH OCCURRENCE \$2,000,000 AGGREGATE \$2,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WCV6178317	12/01/2018	12/01/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
A	Equip Floater: Leased and Rented Equipment		XCP9005712	12/01/2018	12/01/2019	\$100,000 R1,000 Deductible

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

RE: 251 SW Greenwich, Lee's Summit MO 64082

CERTIFICATE HOLDER

CANCELLATION

City of Lee's Summit 220 SE Green Lee's Summit, MO 64083	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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