



Special Event Permit  
Application Form

PERMIT NUMBER: 20241647 RECEIPT NUMBER: \_\_\_\_\_  
SPECIAL EVENT: 5th Annual 5K Run/Walk with Gusto!  
☒ Athletic Event ☐ Mobile Food Vendor ☐ Event Signage ☐ Other  
EVENT DATE(S): May 4th, 2024 EVENT TIME(S): 6:00 AM to 10:00 AM  
EVENT LOCATION/ADDRESS: 3390 SW Fascination Drive, LS, MO 64081  
ZONING OF PROPERTY: Public Street

APPLICANT: Gusto Coffee Shop PHONE: 816-602-1045 (cell)  
CONTACT PERSON: Emily Hula FAX: NA  
ADDRESS: 3390 SW Fascination Dr. CITY/STATE/ZIP: LS, MO 64081  
EMAIL: emhula@sbglobal.net

PROPERTY OWNER: Gale Communities PHONE: 816-805-5308  
CONTACT PERSON: Cutter Gale FAX: \_\_\_\_\_  
ADDRESS: 400 SW Longview Blvd, #109 CITY/STATE/ZIP: LS, MO 64081

See Letter of Approval Emily Hula  
PROPERTY OWNER APPLICANT  
Print name: Gale Communities Emily Hula

Administrative Notes (do not write below this line)

Approved Development Services Department



## Special Event Permit Checklist

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

Met	Not Met	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Applicant – Name, Address and Telephone Number
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Property Owner – Name, Address and Telephone Number
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Written approval from the property owner agreeing to the proposed event
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Description of the site on which the proposed event is to be held
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Date(s) of the proposed event
<input checked="" 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"><li>• the hours of operation,</li><li>• anticipated attendance,</li><li>• any building/structures, signs or attention-attracting devices proposed to be used in conjunction with the event,</li></ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Location and number of proposed temporary public toilets
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	9. Proposed temporary potable water supplies, which shall be approved by the Water Utilities Department, pursuant to applicable City codes.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Proof of liability insurance at time of application
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	11. Electrical Plan shall be approved by the Code Official

### Description of Race Route:

The race begins at the stop sign of New Longview Road and Fascination Drive between the Community College and Gusto Coffee Shop. It heads SW into Longview Lake towards the baseball field and turns around from that location back to the stop sign.

Date of Event: Saturday, May 4<sup>th</sup>, 2024

Hours of Operation: 6:00 AM – 10:00 AM

Anticipated Attendance: 75-100 People (including volunteers) No building structures or signs will be used for this event. Cones will be out to mark the distance of the race. There will be an official Start and Finish line with Official timing by Bodies Racing Company. Parking for participants will be in Gusto Coffee Shop's parking lot.

Public toilets: 2 Porta Potties will be positioned in the back parking lot of Gusto Coffee Shop.

City Services Required: Police Officers will be required for public safety.

All proceeds are given to City Union Mission, God's Bucket Brigade (ministry to the homeless) and Rended Hearts Ministry (rescuing the human trafficked).



**METROPOLITAN  
COMMUNITY COLLEGE**  
LONGVIEW

March 25, 2024

RE: Road Closures

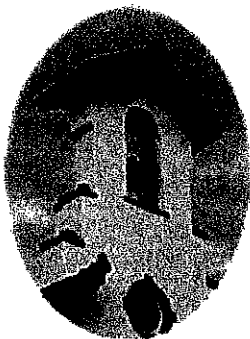
To whom it may concern,

Gusto Coffee has approval of Longview Community College to close Gates 2&3 (using barricades) on SW Longview Road to set up and stage the "Five K Gusto Run" on the morning of Saturday, May 4, 2024 from 6:00-10:00 a.m.

We foresee no issues on our end with the street closing for this event.

Kathrine Swanson

President, MCC-Longview



# *Longview Chapel*

*Christian Church (Disciples of Christ)*

*850 S. W. Longview Road*

*Lees Summit, MO 64081*

*(816) 763-6290*

*e-mail - [office@longviewchapelcc.org](mailto:office@longviewchapelcc.org)*

February 22, 2024

To: Emily Hulu and Lee's Summit

RE: Road Closing for 5K Run

To Whom It May Concern:

Longview Chapel Christian Church is supportive of the annual 5K run/walk to remember Steve Hulu and help those in need. Our Board has affirmed it is okay to close S.W. Longview Road Saturday, May 4, from 7 to 10 a.m. for the run/walk.

Thank you for creating this event.

Blessings,

*Rev. Donna Rose-Heim*

Rev. Donna Rose-Heim

816.535.0088

[pastor@longviewchapelcc.org](mailto:pastor@longviewchapelcc.org)



February 23, 2024

City of Lee's Summit

Please be advised that Gusto Coffee Bistro has our approval and support, as Landlord and property owner, to utilize a portion of SW Fascination Dr., abutting the New Longview Commercial District, and Longview Rd. in order to stage the **2024 Gusto 5K Fun Run/Walk**. This event will occur on Saturday, May 4th, 2024 between the hours of 6am and 10am with a specific start time of 8am.

Thank You,

Cutter Gale

A handwritten signature in black ink, appearing to read "Cutter Gale", written in a cursive style.



# JACKSON COUNTY PARKS + REC

## Application for Special Use / Event Form

- Application must be submitted 60 days prior to the event.
- Fees and charges will be determined upon event approval.
- Use a separate form for each separate event request.
- Liability insurance will be required for all special events.

Please Print		Date of Application: March 14, 2024	
<b>Event Information:</b>			
Name of Event: 5th Annual 5K Run			
Date(s) Requested: Sat, May 4th 2024	Set Up Time: 6:00 AM	Event Time: 8:00 AM	Tear Down Time: 10:00 AM
Name or Location of Facility Being Requested:			
<b>Fleming Park</b> <input type="checkbox"/> Blue Springs Beach <input type="checkbox"/> Cross Country Course <input type="checkbox"/> Fleming Meeting Hall <input type="checkbox"/> Blue Springs Shelter House # <input type="checkbox"/> Jacomo Shelter House # <input type="checkbox"/> Primitive Youth Camping <input type="checkbox"/> RC Flying Field	<b>Longview</b> <input checked="" type="checkbox"/> Longview Beach <input type="checkbox"/> Horse Park <input type="checkbox"/> RC Flying Field <input type="checkbox"/> Longview Shelter House # <input type="checkbox"/> Primitive Youth Camping	<b>Landahl</b> <input type="checkbox"/> Archery Range <input type="checkbox"/> Mountain Bike Trail <input type="checkbox"/> Shelter House (Argo Road) <input type="checkbox"/> Shelter House (Truman Road) <input type="checkbox"/> Argo Primitive Youth Camping <input type="checkbox"/> Truman Road Primitive Youth Camping	<b>Blue &amp; Gray Park</b> <input type="checkbox"/> Brown Road Horse Camping <input type="checkbox"/> Trail Head Brown & Arnold <input type="checkbox"/> Sisk Shelter <input type="checkbox"/> Primitive Youth Camping <input type="checkbox"/> Bergen Shelter <b>Monkey Mountain</b> <input type="checkbox"/> Primitive Youth Camping <b>Other</b> <input type="checkbox"/>
Number of Participants Anticipated to Attend: <input type="checkbox"/> less than 50 <input checked="" type="checkbox"/> 51-100 <input type="checkbox"/> 100-250 <input type="checkbox"/> 250-500 <input type="checkbox"/> Over 500			
Number of Spectators Anticipated to Attend: <input checked="" type="checkbox"/> less than 50 <input type="checkbox"/> 51-100 <input type="checkbox"/> 100-250 <input type="checkbox"/> 250-500 <input type="checkbox"/> Over 500			
Description of requested event: 5th Annual 5K Run/Walk with Gunsto. This event is dedicated in Memory of Steve Hula. Run Route goes through Longview park. All proceeds benefit City Union Mission, God's Bucket Brigade & Rended Hearts Ministry			
Have you held similar events with JCP&R? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (provide information)	Name of Event: same		Date of Previous Event: May 20, 2023
<b>Contact Information:</b>			
Name of Organization Sponsoring this Event: Gunsto Coffee Shop			
Name of Contact Person Prior to Event: Emily Hula		E-Mail Address: emhula@sbcglobal.net	
Address: 3390 SW Fascination Drive	City: Lee's Summit	State: MO	Zip: 64081
Home Phone: (816) 602-1045 (cell)	Business Phone: (816) 767 ext. 1100	Day of Event Contact Phone Number: (816) 602-1045	
Name of Contact Person Day of Event: Emily Hula		E-Mail Address: emhula@sbcglobal.net	

## Event Needs:

Will your event require the service of outside vendors, businesses, or organizations?

☒ No

☐ Yes

If yes, please select from services listed below:

☐ Catering

☐ Dunk Tank

☐ Pony Rides

☐ Amplified Sounds (including disc jockey, microphone, speakers, etc.)

☐ Inflatables

☐ Other (please explain)

☐ Petting Zoo

Will alcohol be served, provided or sold at this event?

☒ No

☐ Yes

If yes, explain:

Will your event require any type of special equipment/apparatus to be brought in to the park(s)?

☒ No

☐ Yes

If yes, please list equipment/apparatus type:

Will your event require off road and/or field parking?

☒ No

☐ Yes

If yes, anticipated number of vehicles:

Explain:

Depending on the nature of your event, liability insurance may be required. Do you currently have liability insurance that would cover this event? *Your Group will be held liable for damage(s) during your event.*

☐ No

☒ Yes

NOTE: Liability Insurance indemnifying Jackson County, Missouri will be required for all Special Event permits. Minimum amount of insurance shall be \$2 million per occurrence with a \$2 million aggregate naming Jackson County, Missouri as an ADDITIONAL INSURED. ***Policy must be provided one month prior to event.***

Please check any of the services your event will require:

☐ Admission Fees

☐ Concession Sales

☒ Law Enforcement

☐ Advertising - Type

☐ Emergency Vehicles

☒ Volunteers

☐ First Aid Station

☐ Other

Please list any additional requests you may have regarding your event. Please include details and use additional pages if needed.

*I will have several volunteers directing runners to stay on one side of the cones, giving campers access to an open lane to exit, thereby avoiding vehicular traffic.*

Please do not print any literature publicizing this event unless you have received an approved copy of your Special Use Permit signed and dated by a representative of the Parks + Rec Department.

## JCP+R Use Only:

Date Received

☐ Special Event

☐ Special Use

☐ Fees Required

☐ Fees Waived

☐ Approved

☐ Approved

☐ Yes

☐ Denied

☐ Denied

☐ No

Reason for Denial:

Fee Amounts:

Special Event Reservation

\$

JCP&R Point of Contact ( \_\_\_\_\_ x \$25.00/per hour) =

\$

Ranger ( \_\_\_\_\_ x \$25.00/per hour) =

\$

Other:

\$

Other:

\$

Total Estimated Minimum Cost

\$

Comments:

Name:

*Deanne Krueger*

Title:

*Deputy Director*

Date:

*3/19/24*

Please Remit Form to:  
Jackson County Parks + Rec  
Attn: Registration Department  
22807 Woods Chapel Road  
Blue Springs, MO 64015




# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
03/15/2024

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).

<b>PRODUCER</b>  Bruce Holiman Agency 319 SE Douglas St Unit 317 Lees Summit, MO 64063		<b>CONTACT NAME:</b> Leslie Lee <b>PHONE (A/C, No, Ext):</b> 816-524-5150 <b>E-MAIL ADDRESS:</b> leslie@bruceholiman.com <b>FAX (A/C, No):</b> 816-524-5149	
<b>INSURED</b> Gusto! Espresso Port, LLC 3390 SW Fascination Dr Lee's Summit, MO 64081		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> State Farm Fire and Casualty Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	
		<b>NAIC #</b> 25143	

## 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			95-C8-U401-4	05/01/2024	05/01/2025	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>UMBRELLA LIAB</b> <b>EXCESS LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

EVENT: Run with Gusto! 3rd Annual 5K Fun Run/Walk, Lee's Summit, MO -- May 4, 2024

## CERTIFICATE HOLDER

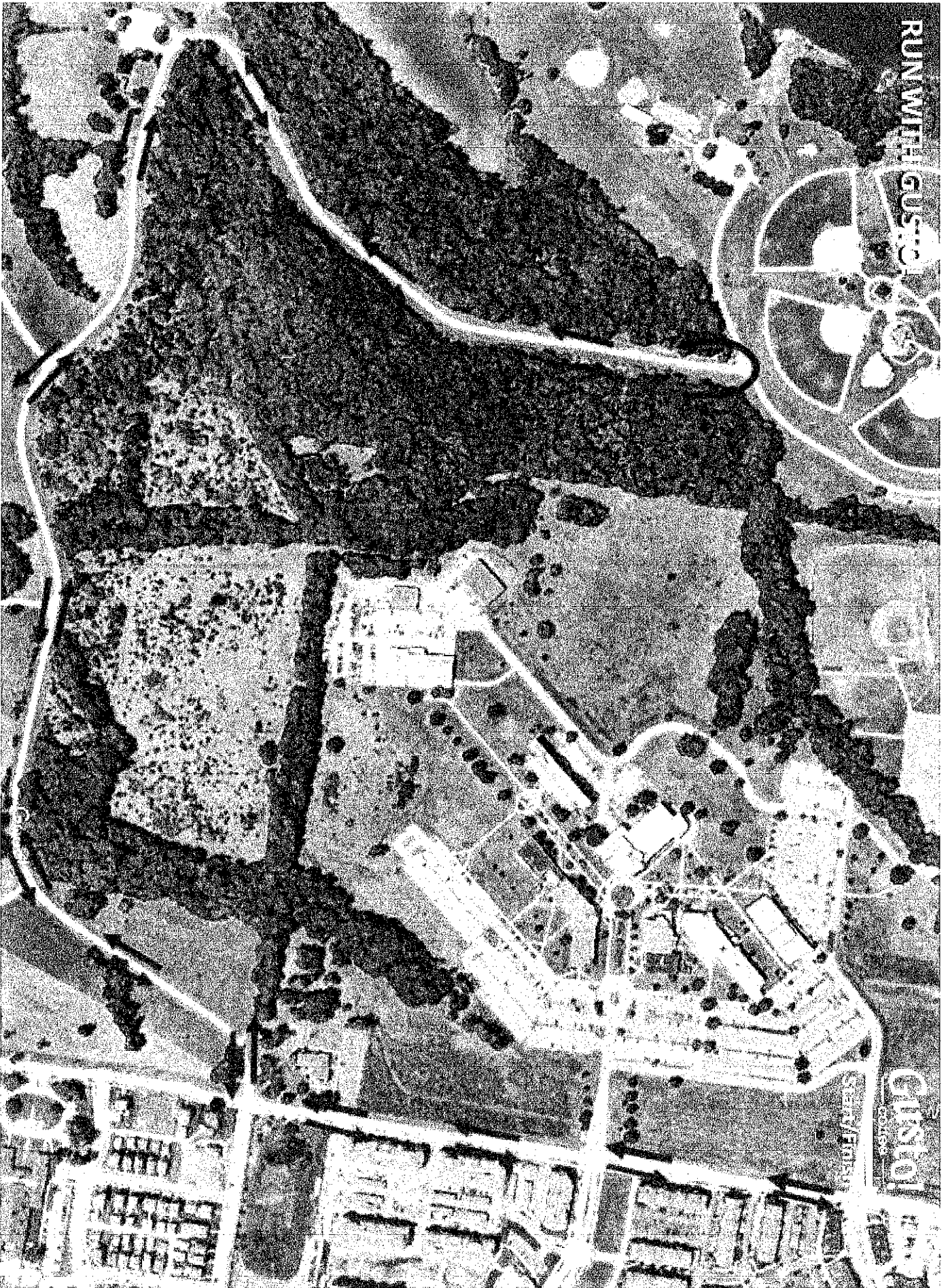
## CANCELLATION

Jackson County Parks & Recreation  
22807 Woods Chapel Rd  
Lees Summit, MO 64015

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

*Leslie Lee* 5545



RUN WITH GUSTO

CLINTON



# GUSTO!

# 5K WALK / RUN

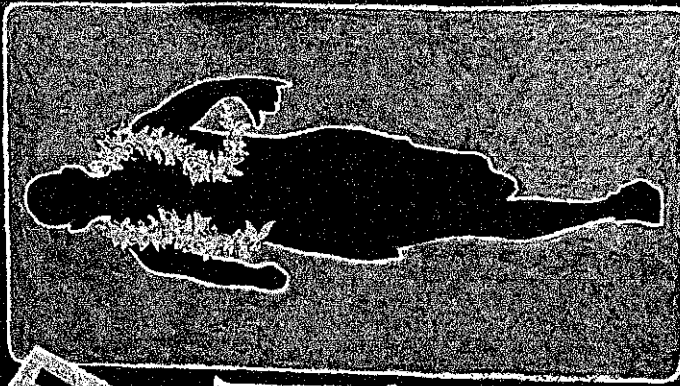
in honor of

*Steve Hula*

MAY 4, 2024 • 8am START

register@

RUNSIGNUP.com



PROCEEDS GO TO CITY UNION MISSION  
GODS BUCKET BRIGADE • RENDED HEARTS MISSION





# RECEIPT OF PAYMENT

Receipt Number:	2024086406
Receipt Date:	04/04/2024
Date Paid:	04/04/2024
Payment Method:	Check,
Check Number:	2984,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	GUSTO ESPRESSO PORT LLC, Address:3390 SW FASCINATION DR, Phone:(816) 767-1100

## **Fees:**

9110077-Special Event Permit (application fee)	PRSE20241647	\$50.00