

NEWBURYPORT SPECIAL EVENT APPLICATION

Tel. _____ Fax. _____

(For Parades, Road Races and Walkathons Only - Please complete page 3 of this application)

RECEIVED
CITY CLERK'S OFFICE
NEWBURYPORT, MA
2022 OCT 19 PM 3:16

NAME OF EVENT: Ladies Night out Run, wine + chocolate

Date: 12/3/22 Time: from 2pm to 5pm
 Rain Date: NA Time: from NA to NA

2. Location: Nicholson Hall, 9 Harris St.

3. Description of Property: Greek orthodox Church Public _____ Private

4. Name of Organizer: Ashly Steeves City Sponsored Event: Yes _____ No
 Contact Person
 Address: Tina Papadopoulos Telephone: 978 465 5757
 E-Mail: tpapadopevents@gmail.com Cell Phone: _____
 Day of Event Contact & Phone: Ashly Steeves

5. Number of Attendees Expected: 400

6. MA Tax Number: 47-3215798

7. Is the Event Being Advertised? Yes Where? Social media

8. What Age Group is the Event Targeted to? 21+ Females

9. Have You Notified Neighborhood Groups or Abutters? Yes _____ No Who? _____

ACTIVITIES: (Please check where applicable.) Subject to Licenses & Permits from Relevant City Departments

A. Vending: Food Beverages Alcohol Goods Total # of Vendors 8-10

B. Entertainment: (Subject to City's Noise Ordinance.) Live Music _____ DJ Radio/CD _____
 Performers _____ Dancing _____ Amplified Sound Stage _____
**inside Nicholson Hall*

C. Games /Rides: Adult Rides _____ Kiddie Rides _____ Games _____ Raffle _____
 Other _____ Total # _____
 Name of Carnival Operator: _____
 Address: _____
 Telephone: _____

D. Organizer is responsible for clean-up during and after event. All trash must be collected and removed from event location immediately at the end of the event unless prior written agreement had been made with the Department of Public Services (DPS).

Will you be conducting the clean-up for this event? Yes No _____

an

If yes:

- a) How many trash receptacles will you be providing? All Inside Hall
- b) How many recycling receptacles will you be providing? All Inside Hall
- c) Will you be contracting for disposal of : **Trash** Yes _____ No **Recycling** Yes _____ No
- i. If yes, size of dumpster(s): **Trash** _____ **Recycling** _____
- ii. Name of disposal company: **Trash** _____ **Recycling** _____
- iii. If no, will you remove trash & recycling with organizers' cars or trucks? Yes No _____
- iv. If no, where will the trash & recycling be disposed ? _____

If no:

- a) # of trash container(s) to be provided by DPS NA
- b) # of recycling container(s) to be provided by Recycling Office _____
- c) \$45.00/hr/DPS employee charge must be paid by the organizer to DPS in advance of the event (Fee for Special Events). The hours required for the event will be determined by DPS.

All fees must be paid prior to the event. Check or money order is payable to the City of Newburyport.

E. Portable Toilets: (Each cluster of portable toilets must include at least one ADA accessible toilet)

_____ Standard # NA ADA accessible

Name of company providing the portable toilets: _____

Ashly Steeves
978 594 7050
info@high5em.com

02

FOR PARADE, ROAD RACE AND WALKATHON EVENTS ONLY

PARADE _____ ROAD RACE X WALKATHON _____

1. Name of the Group or Person Sponsoring the Road Race, Parade, Walkathon: HighSEM / Ashley Steeves, Founder/owner

2. Name, Address & Daytime Phone Number of Organizer: Ashley Steeves, 9785947050, 3 Pond Hill Rd. Amesbury MA 01913

3. Name, Address & 24/7 Telephone Number of Person Responsible for Clean Up Ashley Steeves, 9785947050, 3 Pond Hill Rd, Amesbury MA 01913

4. Date of Event: 12/3/22 Expected Number of Participants: 400

5. ^{Race} Start Time: 3pm ^{Race} Expected End Time: 430pm

6. Road Race, Parade or Walkathon Route: (List street names & **attach map of route**): see map attached with turn by turn details.

7. Locations of Water Stops (if any): 1 water stop (parking lot at end of rail trail)

8. Will Detours for Motor Vehicles Be Required? NO If so, where? NA.

9. Formation Location & Time for Participants: Nicholson Hall | 9 Harris St | e 3pm

10. Dismissal Location & Time for Participants: " " " " " "

11. Additional Parade Information:
- Number of Floats: NA
 - Locations of Viewing Stations: NA
 - Are Weapons Being Carried: Yes _____ No X
 - Are Marshalls Being Assigned to Keep Parade Moving: Yes X No _____

APPROVAL SIGNATURES REQUIRED FOR STREET CLOSURE OR ANY USE OF A PUBLIC WAY.

CITY MARSHAL [Signature] 4 Green St. FIRE CHIEF [Signature] 0 Greenleaf St.
 DEPUTY DIRECTOR [Signature] 16A Perry Way CITY CLERK _____ 60 Pleasant St.

Health Director: [Signature]

Rev. 12/15 Jamie Tuccolo 3

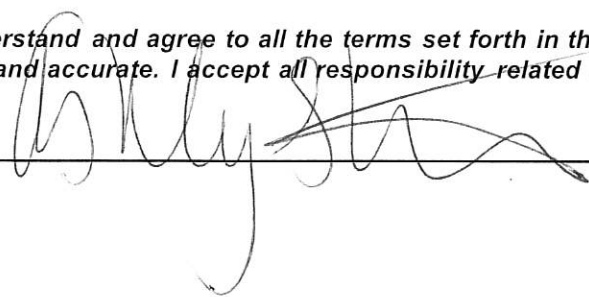
- (e) *"Road Closure"* No ways, public or private, boat ramps or parking lots controlled or patrolled by the city shall be closed without authorization. Authorization shall be considered granted only if said closure(s) are contained in the approved permit. It is the sole responsibility of the race organizers to notify residents ten (10) days in advance that neighborhood roads will be closed if no alternate route is available to those residents.
- (f) *"Insurance"* All events shall have an insurance policy or rider in effect for the event naming the "City of Newburyport" as an insured. The policy shall be no less than two million dollars (\$2,000,000.00).
- (g) *"Event termination"* If in the judgment of the City Marshal, Fire Chief or Department of Public Services (DPS) Director or designees thereof determine that an event is unsafe due to existing conditions, that event may be stopped, terminated or suspended. In the case of a multidiscipline event such as a triathlon, the Harbormaster or his/her designee may likewise stop, terminate or suspend the swimming portion for cause.
- (h) *"Event and traffic Security"* The City Marshal, Fire Chief, DPS Director or in the case of a triathlon, the Harbormaster can require special duty personnel to oversee the safety and security of the event. All special duty assignments will be paid by the event organizers.
- (i) *"Clean-up"* The event organizers shall be responsible for post event trash collection, removal of signage, directional arrows, advertisements or other promotional material associated with the event.

13-101 Enforcement

- (a) *"Regulations"* Consistent with this ordinance, the city shall promulgate regulations to enforce and otherwise implement the provisions of this ordinance upon passage by the City Council. Any event previously approved by City Council shall be deemed permitted.
- (b) *"Warning"* In the circumstance that this ordinance is violated, the enforcement may consist of a warning. Any warnings issued for violation(s) will be reported to the City Clerk and City Council and may be used as a factor in future application approvals and denials.
- (c) *"Noncriminal Disposition"* If the city determines that a violation has occurred in which a noncriminal violation is issued, the named event organizer shall be penalized by a non-criminal disposition as provided in Massachusetts General Law as adopted by the City of Newburyport as a general ordinance in Subsection 1-17 of Chapter 1 of the Code or Ordinances of the City of Newburyport in the amounts set herein in 13-101(d)
- (d) *"Violation"* The non-criminal violation shall be \$100.00 for the first offense and \$250.00 for second and subsequent offenses. Any non-criminal citations issued for violation(s) will be reported to the City Clerk and City Council and shall be used as a factor in future application approvals and denials.

I fully understand and agree to all the terms set forth in this application. The information that I have provided is truthful and accurate. I accept all responsibility related to this event.

Signed: _____



Date: _____

8/30/22



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/22/2022

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).

PRODUCER Allan Insurance Agency Inc. 63 1/2 Jefferson Avenue 2nd F P.O. BOX 511 SALEM MA 01970-0511		CONTACT NAME: David Kameron PHONE (A/C, No. Ext): (978) 745-5905 E-MAIL ADDRESS: david@allaninsurance.com	FAX (A/C, No): (978) 745-5483
INSURED Rising Reg LLC 3 Pond Hill Road Amesbury MA 01913		INSURER(S) AFFORDING COVERAGE INSURER A: Nautilus Insurance Company	
		NAIC #	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES CERTIFICATE NUMBER: CL2051402323 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	ADDITIONAL INSURED	SUBROGATION WAIVED	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	Y		NN1176327	04/05/2022	04/05/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000 Non-owned \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER						
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE \$ AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	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)

City of Newburyport is named as additional insured.

Ladies Night Out Run, Wine & Chocolate 5K on 12/3/2022
Nicholson Hall, 9 Harris Street, Newburyport, MA 01950

CERTIFICATE HOLDER

City of Newburyport
60 Pleasant Street
Newburyport, MA 01950

CANCELLATION

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

David C. Kameron



August 30, 2022

Attn: City of Newburyport BOS

My name is Ashley Steeves, Founder and Owner of High5EM a race management company headquartered in Amesbury, MA. This is a request for permission to utilize the streets of Newburyport on Saturday, Dec 3rd to host the **10th Ladies Night Out Run, Wine and Chocolate Event** to benefit the Gene Geiger Crisis Center and Girls Inc. of the Seacoast Area.

This all female 3-mile run/walk will set stage at Nicholson Hall starting at 3PM sharp. The first runners will be back in just about 20 minutes, with our walkers coming in just before 4:30PM.

You will find the pre-approved established route attached with a turn-by-turn description. We are not requesting any road closures and will work with Lt. Siemasko for required police details.

All pre/post festivities will be held inside of Nicholson Hall.

A copy of our COI naming Nicholson Hall and the City of Newburyport as an additional insured is attached.

We look forward to bringing this wildly popular event back to Newburyport where it originated after a few year hiatus due to the pandemic.

Any questions please call 978 594 7050 or email info@high5em.com

I look forward to hearing from you.

Best,

Ashley Steeves

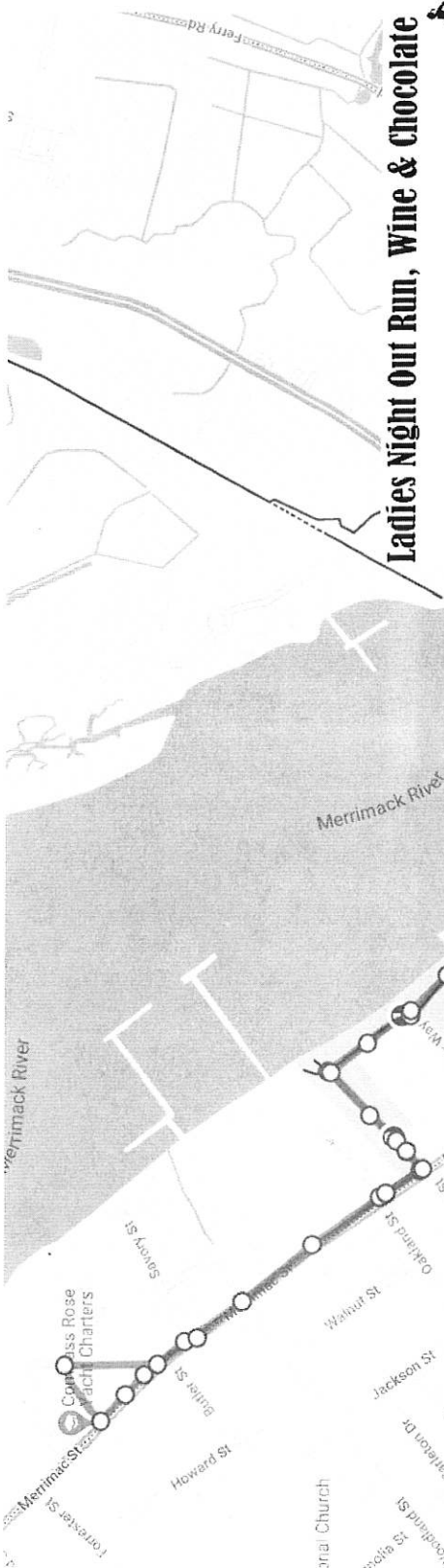
Co-Founder/Co-Owner

High5EM

978-594-7050

3 Pond Hill RD, Amesbury, MA 01913

www.High5EM.com



Ladies Night Out Run, Wine & Chocolate

Ladies Night Out 5k

Run, Wine & Chocolate

- Start at Nicholson Hall
- Quick right on Green St.
- Sharp left on Washington St.
- Right on Rail Trail at Washington St.
- Cont. on the Harbor Walk Rail Trail
- Straight past the soccer fields on to the rail trail extension to the end.
- Left to exit the parking lot onto Merrimac St.
- Right on Merrimac St.
- Bare right on Merrimac Ct.
- Left on Union Place
- Left on Merrimac St.
- Follow the same route back to Nicholson Hall to finish.

