

**Memorandum
Office of the City Clerk**

To: Thomas Thomas, City Manager
Subject: Plaza Outdoor Event - Toys for Tots
Date: October 8, 2012



Attached is a Plaza activity/event application from CBS4/WHBF TV requesting to utilize Parking Lot F for their 2nd annual Toys for Tots Donation Drop-off to be held on Tuesday, November 27, 2012 from 5:30 am to 6:30 pm.

WHBF TV is also requesting that the \$20.00 application fee and the \$35.00 permit fee be waived due to this event being a donation drive for Toys for Tots, a non - profit organization.

No streets are being closed for this event. Vehicles will enter Parking Lot F, drop off donations and then exit without obstructing traffic. Businesses that may be affected by the utilization of Parking Lot F have been contacted.

The purpose of this event is to generate toy donations for Toys for Tots and to promote awareness of The District to the community.

Executive Director Catherine Rodgers-Ingles has reviewed and approved the event application. The certificate of insurance is attached.

RECOMMENDATION:

It is recommended that Council approve the event and waive the fees for CBS4/WHBF TV.

Submitted by: Aleisha L. Patchin, City Clerk

Approved by: Thomas Thomas, City Manager

September 24, 2012

OK
@riap/12

Ms. Aleisha Patchin, City Clerk
City of Rock Island
1528 Third Avenue
Rock Island, IL 61201

Dear Aleisha,

CBS4/WHBF- TV is respectfully applying for the attached event permit for use of the Great River Plaza, Parking Lot F to be exact, for the 2012 CBS4/WHBF – TV “Toys 4 Tots” donation drop off.

With the resounding success of last year’s fundraiser, November 27, 2012 will mark the second year for this event/fundraiser, and we will comply with all rules and regulations set forth in the enclosed application.

The purpose of this event is to generate toy donations for “Toys for Tots”, a not-for profit organization. Holding this event in The District would generate exposure to downtown Rock Island and we are planning on involving local businesses and members of the community. We would like to use Parking Lot F as the drop off point where cars could enter, drop off any donations, and then exit without impeding traffic flow. As this is a donation drive for a not for profit organization, we respectfully request that any fees associated with this application be waived.

Attached are the completed plaza activity permits. I have contacted our insurance carrier and a certificate of insurance will follow.

Thank you.

Sincerely,



Meredith Dennis
Morning Anchor/Producer
CBS4/WHBF-TV



CITY OF ROCK ISLAND
Great River Plaza

OK Original

ACTIVITY / EVENT PERMIT

1. APPLICANT INFORMATION

Form with fields: NAME (FIRST, MIDDLE INITIAL, LAST), HOME ADDRESS, CITY, STATE, ZIP CODE, E-MAIL, TELEPHONE NO., CELL PHONE NO.
Meredith Dennis, 231 18th Street, Rock Island, IL, 61201, mdennis@cbs4qc.com, 309-786-5441 ext. 142

Form with fields: ORGANIZATION NAME, E-MAIL, ADDRESS, CITY, STATE, ZIP CODE, AREA CODE/TELEPHONE NO.
WHBF - TV, mdennis@cbs4qc.com, 231 18th Street, Rock Island, IL, 61201, 309-786-5441 ext. 142

2. STATUS OF ORGANIZATION / ACTIVITY PERMIT FEES

[X] Not For Profit Organization: \$20.00 application fee per activity / event and \$35.00 permit fee per activity / event.

[] A. EDUCATIONAL

[] B. FRATERNAL

[] C. POLITICAL

[] D. CIVIC

[] E. RELIGIOUS

[X] F. OTHER NOT FOR PROFIT

[] For Profit Organization: \$35.00 application fee per activity / event and \$250.00 permit fee per activity / event.

Application fee must be paid when application is submitted.

Permit fee is due one week prior to the activity / event.

3. CONTACT PERSON

NAME (FIRST, MIDDLE INITIAL, LAST) Meredith Dennis	HOME ADDRESS 231 18 th Street	CITY Rock Island	STATE IL	ZIP CODE 61201
E-MAIL mdennis@cbs4qc.com	TELEPHONE NO. 309-786-5441 ext.142	CELL PHONE NO.		

4. ACTIVITY / EVENT DETAILS

SETUP OF EVENT: (MONTH/DAY/YR)	SET UP BEGINS (AM/PM)	SET UP ENDS: (AM/PM)
11-27-2012	5:00AM	5:30AM

CLEAN UP OF EVENT: (MONTH/DAY/YR)	CLEAN UP BEGINS (AM/PM)	CLEAN UP ENDS: (AM/PM)
11-27-2012	6:30PM	7:00PM

DATE OF EVENT: (MONTH/DAY/YR)	EVENT TIME: EVENT STARTS (AM/PM)	EVENT TIME: EVENT ENDS (AM/PM)
11-27-2012	5:30AM	6:30PM

A. TYPE OF ACTIVITY / EVENT

- CONCERT
 OTHER MUSIC
 CRAFTS
 ART SHOW
 INFORMATION
 CIRCUS / CARNIVAL
 ANIMAL SHOW
 PUBLIC SPEAKERS
 OTHER Toy Donation Drop Off

Name of Activity / Event: WHBF "Toys 4 Tots" Drive

Number of Attendees expected: 150 (throughout the day)

B. LOCATION OF ACTIVITY / EVENT

- PLAZA AREA / WEST
 PLAZA AREA / EAST
 STAGE AREA / EAST
 ARTS ALLEY

Purpose of Event / Activity: To raise public awareness and community involvement in generating toy donations for children in financially-challenged families for Christmas morning.

C. ITEMS TO BE SOLD OR DISTRIBUTED DURING ACTIVITY / PERMIT

Indicate the number of vendors, booths, trailers etc. for each and detail their location on the event map

ALCOHOL # ___ FOOD # ___ CRAFTS # ___ BROCHURES # ___ OTHER 2
1- Tent
1- Hummer

STAGES # ___

If food is being distributed or sold, the City Health Inspector must be contacted.

D. STREET CLOSING REQUESTED (also identify on attached map)

Parking Lot F

E. ADDITIONAL EQUIPMENT/WORK BEING REQUESTED FROM CITY (banners hung, extra trash barrels, barricades, etc.) Some trash barrels and 4 (four) "Lot Closed" barricades.

- You are responsible for setting up, cleaning up and each of the applicable items on the attached Great River Plaza Operation Plan.
- You are required to have General Liability Insurance in a minimum amount of \$300,000.00 for Personal Injury and \$50,000.00 for Property Damage. The City of Rock Island should be named as an Additional Insured. Please attach copies of required insurance certificate. Insurance is to be submitted to the City Clerk a minimum of one week prior to the date of the event.
- Council approval is required for all activities on the Great River Plaza. Changes can only be made by contacting the City Clerk to obtain Council approval. Please note: requests for changes that require Council approval should be received by the City Clerk at least two weeks prior to Council meeting. Council can only act on items that are on the printed agenda for that meeting. Items that require decisions can no longer be added to the agenda once it is printed and distributed.
- Sound Amplification must be specifically requested.
- Alcohol sales require a state and local license, and alcohol sales must be in a properly demarcated area which prevents entry by minors in accordance with Chapter 3 of the Code of Ordinances of the City of Rock Island. You must also detail security plans establishing your system for checking identification and verifying age.
- Alcoholic beverages cannot be sold/served in glass or cans on the plaza. All alcoholic beverages will be served in plastic cups.
- If you are planning an entertainment venue or activity on the Plaza, you will need to hire an appropriate number of Police Officers as determined by the Police Department. Arrangements

must be made at least one month prior to your scheduled event. You may contact the Agent assigned to the Office of Professional Standards at (309) 732-2402.

We, the undersigned (applicant and leader of the Sponsoring Organization for the activity / event(s) described on page one), have read and understand the ordinances and regulations that apply to the Great River Plaza. We agree to pay the required fees and provide the certificate of insurance. We understand that these fees and the Insurance Certificate need to be provided to the City Clerk before the activity / event (s) can occur. We agree to share this information with the other members of the Sponsoring Organization and we will abide by all rules and regulations of the City of Rock Island and the State of Illinois in relation to our activity / event(s).

Applicant _____ Date _____

Organization Leader _____ Date _____

DO NOT WRITE BELOW THIS LINE...TO BE COMPLETED BY THE CITY CLERK'S OFFICE

Application Fee Permit Fee

Approved by City Council

Approved by City Clerk

License No.

Application Fee Receipt No Permit Fee Receipt No.
--

License Printed - Date License Delivered - Date
--

Return Application, Certificate of Insurance and Great River Plaza Operations Plan to:

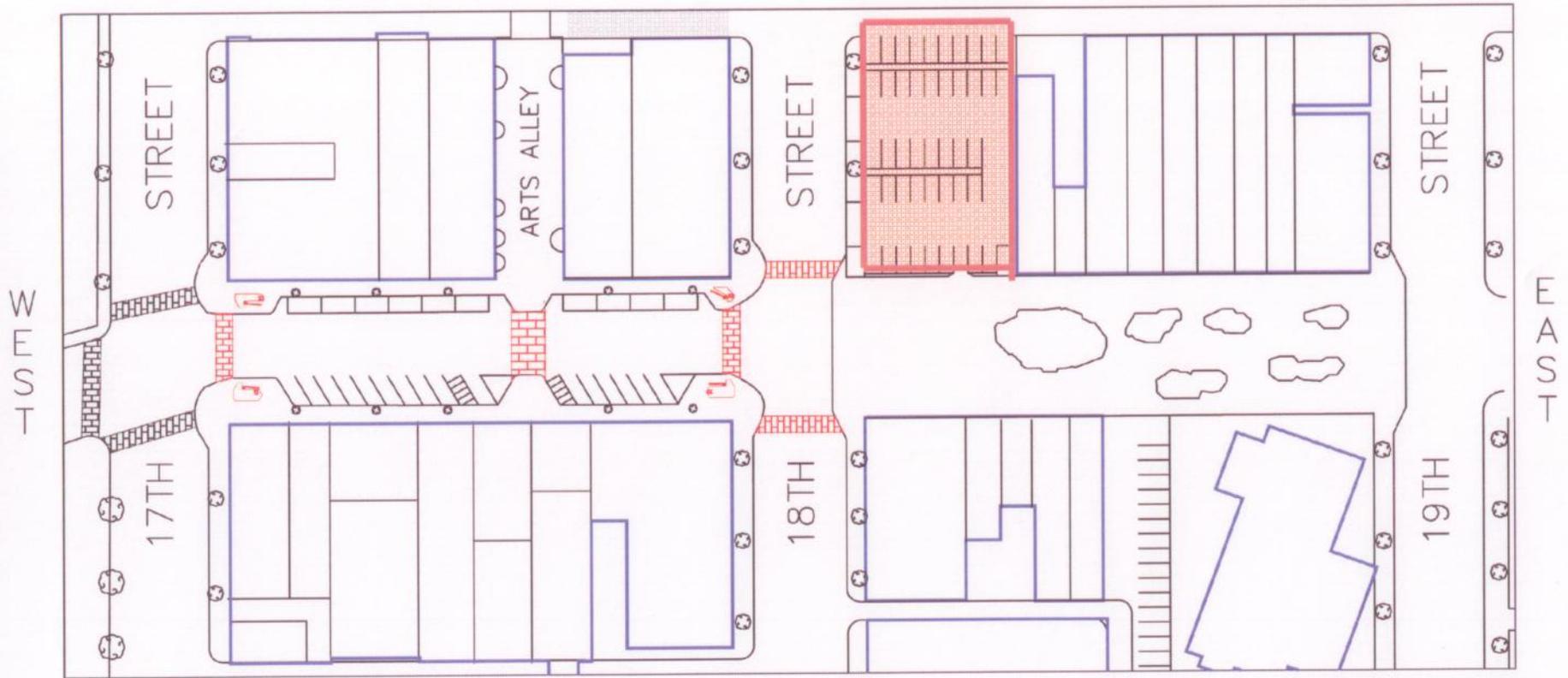
1st Avenue

G R E A T R I V E R
N O R T H

WHBF

"Toys 4 Tots"

November 27, 2012 5:30AM – 6:30PM



SOUTH

C I T Y O F R O C K I S L A N D

Prepared By: City of Rock Island,
Planning & Redevelopment Division
February 2004

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/04/2012

PRODUCER (610)834-0090 FAX (610)832-0241
Preston-Patterson Co., Inc.
P O Box 244
Conshohocken, PA 19428

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

NAIC #

INSURED Coronet Communications Company
WHBF-TV
231 18th Street
Rock Island, IL 61201

INSURER A: Vigilant Insurance Co.

20397

INSURER B:

INSURER C:

INSURER D:

INSURER E:

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY	3581-18-99	01/05/2012	01/05/2013	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 10,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				PERSONAL & ADV INJURY	\$ 1,000,000
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				GENERAL AGGREGATE	\$ 2,000,000
		AUTOMOBILE LIABILITY				PRODUCTS - COMPI/OP AGG	\$ 2,000,000
		ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	\$
		ALL OWNED AUTOS				BODILY INJURY (Per person)	\$
		SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$
		HIRED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		NON-OWNED AUTOS				AUTO ONLY - EA ACCIDENT	\$
		GARAGE LIABILITY				OTHER THAN EA ACC	\$
		ANY AUTO				AUTO ONLY: AGG	\$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
		DEDUCTIBLE					\$
		RETENTION \$					\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
		OTHER				E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
RE: Toys for Tots on 11/27/2012.

The City of Rock Island and The District, Inc. are included as an additional insured but solely with respect to the written agreement with the Named Insured.

*10 day notice of cancellation for nonpayment of premium.

CERTIFICATE HOLDER

CANCELLATION

City of Rock Island
1528 Third Ave
Rock Island, IL 61201

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL *30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Stephen W. Patterson/MARIO

