SPECIAL EVENTS PERMIT APPLICATION RECEIVED Lancaster County, Nebraska

<u>Application must be received by the County Clerk</u> <u>a minimum of three (3) weeks prior to the event.</u>

PLEASE READ THE GENERAL REQUIREMENTS PRIOR TO COMPLETING THE APPLICATION. THE HOLD HARMLESS AGREEMENT MUST BE SIGNED AND SUBMITTED AT TIME OF APPLICATION.

APPLICANT INFORMATION

Applicant Name: David Hattan, Lincoln Track Club Insurance and Permitting Coordinator

Business/Organization Name (if applicable): Lincoln Track Club

Full Mailing Address: 1225 N. 38th Street, Lincoln, Ne 68503

Phone #: (402) 464-0685

Alternate Phone #: (402) 430-7921

LANCASTER COUNTY

CLERK

E-mail Address: dhattan@neb.rr.com

EVENT INFORMATION

Event Name: State Farm Run	
Event Description: 10 mile, 5K, 1 Mile (ou	t and back) Road Race
*Date of Event: <u>3/24/2018</u>	Alternate Date:
Start Time: 8:00 am	End Time: 11:00 am

*In the event of cancellation, the County shall be notified by the applicant as soon as possible, however, not later than the day preceding the scheduled date.

Will the event be in/on a road?	√ Yes N)
Will the event be in/on sidewalk space?	Ves No)
Is part of the proposed route within the	city limits of Lin	coln or any other
incorporated city or village?	Yes No	

If yes, please contact the City or Village Clerk of that jurisdiction to inquire about other necessary permits.

Page 1 of 3

SPECIAL EVENTS PERMIT APPLICATION Lancaster County, Nebraska

Planned Route (describe in detail and attach map):Race is out and back starting atState Farm 222 S. 84th St, proceeding South on 84th St. to the MoPac Trail. East on the

MoPac trail to East of 134th Street. Return via same route to the start. Race will cross

paved and gravel county roads.

(Attach additional sheets if necessary.)

Expected number of people attending: 1200

Location(s) of event marshals/monitors: Monitors at all intersections

*Do you need sheriff escort/traffic control? 🗸 Yes 🗌 No

*Do you need traffic control equipment (i.e., signs, cones, barricades)? 🗹 Yes 🗌 No

*Applicant shall be responsible for reimbursing the County for such expenses.

Additional Comments: We use All Roads Barricade Company for coning and barricades. Permits are being secured for the City Clerk, Lincoln Park & Rec, Lower Platte South NRD, LPD resources will be used for city streets. LFR will provide EMS support. Certificate of Insurance will be e-mailed from our insurance Carrier.

The applicant agrees to pay all costs incurred by Lancaster County, Nebraska.

Signature: David A. Hattan	Digitally signed by David A. Hattan Date: 2016.11.27 15:58:20 -06'00'	Date: 11/27/2016
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Return this application at least three (3) weeks prior to the event to: Lancaster County Clerk 555 S. 10th Street, Room 108 Lincoln, NE 68508

If you have questions regarding Special Event Permits, please contact the Clerk's Office at: Phone: (402) 441-7484 E-mail: <u>coclerk@lancaster.ne.gov</u> Web site: lancaster.ne.gov

For Office Use Only:	 Application Hold Harmless Map Certificate of Insurance 	Engineer LLCHD Planning Sheriff	Building & Safety Other Other WITHDRAWN

Page 2 of 3

SPECIAL EVENTS PERMIT APPLICATION Lancaster County, Nebraska							
	HOLD HARMLESS AGREEMENT						
Event Name:	State Farm Run						
Date of Event:	March 24, 2018						

The applicant shall indemnify and hold harmless, to the fullest extent allowed by law, Lancaster County, Nebraska (the "County"), and its agents, employees and representatives from all claims, demands, suits, actions, payments, liability, judgments (including court-ordered attorneys fees), arising out of or resulting from the special event listed above that results in bodily injury, sickness, disease, death, civil rights liability or damage to or destruction of tangible property including loss of use resulting therefrom, and that is caused in whole or in part by the acts or omissions of the applicant or anyone directly or indirectly employed by applicant or anyone for whose acts or omissions they may be liable, regardless of whether or not such claim, damage, loss or expense is caused in part by a party indemnified hereunder. Applicant shall maintain a policy or policies of insurance (or a self-insurance program) sufficient in coverage and amount to pay any judgments or related expenses from or in conjunction with any such claims.

In claims against any person or entity indemnified under this agreement by an employee or the applicant or anyone directly or indirectly employed by the applicant or anyone for whose acts they may be liable, the indemnification obligation under this agreement shall not be limited by a limitation on amount or type of damages, compensation or benefits payable by or for the applicant under workers' or workmen's compensation acts, disability benefit acts or other employee benefit acts.

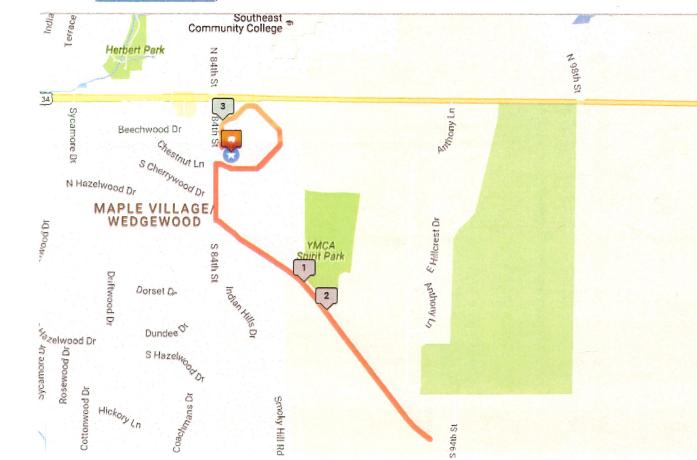
Dated this 26 day of December , 20 17					
Applicant Signature:	David A. Hattan Digitally signed by David A. Hattan Date: 2016.11.27 16:00:06 -06'00'				
Printed Name:	David A. Hattan				
Title/Legal Capacity:	Lincoln Track Club Insurance and Permitting Coordinator				
Witness to Signature:	Jui Hotta				
DEMINDED, The	applicant much also provide the Country with mess				

<u>REMINDER</u>: The applicant must also provide the County with proof of insurance; see General Requirements for coverage type and amounts.

Page 3 of 3

to Mile Run State Farm Run 1 10 Mile;





5K Run <u>State Farm Run | 5k;</u>;

1 Mile Run 5tate Farm Run 1 Mile





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

_							010.010			27/2017
E	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 be endorsed. If SUBROGATION IS WAIVED, subject to								subject to	
t	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).									
PRC	DUCER				CONTA NAME:	Margare	et Mayers			
ST	AR Insurance – Fort Wayne	Offi	ce		PHONE (A/C, N	o, Ext); (200)	467-5689	FAX (A/C, No):	(260)4	57-5691
21	30 East Dupont Road				E-MAIL	ss: margare	et.mayers	@starfinancial.co	m	
						INS	SURER(S) AFFOR	RDING COVERAGE		NAIC #
Fo	rt Wayne IN 46	825			INSUR	RA:Nation	al Casual	Lty Company		11991
INSU	IRED			8				e Insurance Co.		66869
Ro	ad Runners Club of America	/201	.8 a	nd Its	INSURE					
	Member Clubs				INSURE					
15	01 Lee Highway, Suite 140				INSURE					
Ar	Lington VA 22	209			INSURE					
co	VERAGES CEI	RTIFIC	CATE	ENUMBER:2018 \$1M				REVISION NUMBER:		
Т	HIS IS TO CERTIFY THAT THE POLICIE	S OF I	NSUF	RANCE LISTED BELOW HAV	VE BEE	N ISSUED TO	THE INSURE	D NAMED ABOVE FOR TH	E POLI	CY PERIOD
C	IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	PERT	AIN, [†] CIES.	THE INSURANCE AFFORD	ED BY	THE POLICIES	5 DESCRIBED	DOCUMENT WITH RESPECT HEREIN IS SUBJECT TO	ALL T	<i>N</i> HICH THIS HE TERMS,
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMIT	S	
	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000
A	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	500,000
	X Legal Liability to			KR0000007170900		12/31/2017	12/31/2018	MED EXP (Any one person)	\$	5,000
	Participant \$1,000,000					12:01 AM	12:01 AM	PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	Unlimited
	X POLICY PRO- JECT LOC			Abuse & Molestation				PRODUCTS - COMP/OP AGG	\$	1,000,000
	OTHER:			Aggregate \$5,000,000				Abuse and Molestation	\$	500,000
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	s	1,000,000
	ANY AUTO							(Ea accident) BODILY INJURY (Per person)	\$	1,000,000
A	ALL OWNED SCHEDULED			KR0000007170900		12/31/2017	12/31/2018	BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS AUTOS					12:01 AM	12:01 AM	PROPERTY DAMAGE	\$	
	A HIRED AUTOS					12.01 AM	12.01 AM	(Per accident)	\$	
	UMBRELLA LIAB OCCUR									
	EXCESS LIAB CLAIMS-MADE							EACH OCCURRENCE	\$	
	DED RETENTION \$	4						AGGREGATE	\$	
	WORKERS COMPENSATION							PER OTH- STATUTE ER	\$	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE									
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$	
а.	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE		
	2016 (2016) 100 (2016)							E.L. DISEASE - POLICY LIMIT	\$	
в	Excess Medical & Accident			SPX0000028554500		12/31/2017	12/31/2018	Excess Medical		\$10,000
	(\$250 Deductible/Claim)					12:01 AM	12:01 AM	AD & Specific Loss		\$2,500
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) CERTIFICATE HOLDER IS NAMED AS AN ADDITIONAL INSURED AS RESPECTS TO THEIR INTEREST IN THE OPERATIONS OF THE NAMED INSURED. DATE OF EVENT(S): 03/24/18 State Farm Run INSURED RRCA CLUB/EVENT MEMBER: Lincoln Track Club, Att'n: David Hattan, 1225 N. 38th Street, Lincoln, NE 68503										
CER										
UEF	TIFICATE HOLDER				CANC	ELLATION				
	03/24/18 County of Lancaster, NE 555 S. 10th Street Lincoln, NE 68508 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.									
					AUTHOR	RIZED REPRESE	NTATIVE			
						Terry Diller/LKR Jerry R- Diller, CPCU				

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ACORD	

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/07/0017

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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 p				noliov	(icc) must b	andaraad	IS SUBBOCATION IS WAINED) authia at ta	
the	terms and conditions of the policy tificate holder in lieu of such endor	, certa	ain p	policies may require an e	ndorse	ement. A sta	tement on th	is certificate does not confer	rights to the
PRODU	ICER				CONTA NAME:	^{CT} Margare	et Mayers		
STAF	Insurance – Fort Wayne	Offi	ce		PHONE	o, Ext); (260)	467-5689	FAX (A/C, No): (260)4	67-5691
2130	East Dupont Road				E-MAIL	margare	et.mavers	@starfinancial.com	
	-				ADDRE				
Fort	Wayne IN 46	825							NAIC #
INSURE		525						ty Company	11991
		1001	~		INSURE	ERB:Nation	wide Life	Insurance Co.	66869
	Runners Club of America,	/201	8 a	nd Its	INSURE	ERC:			
	lember Clubs				INSURE	ERD:			
1501	Lee Highway, Suite 140				INSURE	ERE:			
Arli	ngton VA 222	209			INSURE	ERF:			
COV	ERAGES CER	TIFIC	ATE	ENUMBER:2018 \$1M				REVISION NUMBER:	
IND	S IS TO CERTIFY THAT THE POLICIES CATED. NOTWITHSTANDING ANY RE	QUIRI	EME	NT. TERM OR CONDITION	OF AN'	Y CONTRACT	OR OTHER [OCUMENT WITH RESPECT TO	WHICH THIS
L CEF	RTIFICATE MAY BE ISSUED OR MAY I	PERTA	AIN.	THE INSURANCE AFFORDE	D BY	THE POLICIES	S DESCRIBED	HEREIN IS SUBJECT TO ALL	THE TERMS,
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR			POLICY EFF (MM/DD/YYYY)		LIMITS	
		INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)		1 000 000
A	CLAIMS-MADE X OCCUR							EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$	1,000,000
	Legal Liability to			KR0000007170900		12/31/2017	12/31/2018	MED EXP (Any one person) \$	5,000
	Participant \$1,000,000					12:01 AM	12:01 AM	PERSONAL & ADV INJURY \$	1,000,000
	EN'L AGGREGATE LIMIT APPLIES PER:								Unlimited
				Abuse & Molestation				GENERAL AGGREGATE \$	
l F								PRODUCTS - COMP/OP AGG \$	1,000,000
	OTHER:			Aggregate \$5,000,000				Abuse and Molestation \$ COMBINED SINGLE LIMIT	500,000
				26				(Ea accident)	1,000,000
A	ANY AUTO							BODILY INJURY (Per person) \$	
	ALL OWNED SCHEDULED AUTOS			KR0000007170900		12/31/2017	12/31/2018	BODILY INJURY (Per accident) \$	
2	HIRED AUTOS X NON-OWNED AUTOS					12:01 AM	12:01 AM	PROPERTY DAMAGE (Per accident) \$	
								\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE \$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE \$	
	DED RETENTION \$								
w	ORKERS COMPENSATION							PER OTH- STATUTE ER	
	ND EMPLOYERS' LIABILITY NY PROPRIETOR/PARTNER/EXECUTIVE								
0	FICER/MEMBER EXCLUDED?	N / A						E.L. EACH ACCIDENT \$	
lf	andatory in NH)							E.L. DISEASE - EA EMPLOYEE \$	
D	SCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$	
BE	xcess Medical & Accident			SPX0000028554500		12/31/2017	12/31/2018	Excess Medical	\$10,000
(\$250 Deductible/Claim)					12:01 AM	12:01 AM	AD & Specific Loss	\$2,500
DESCE									
CEPT	PTION OF OPERATIONS / LOCATIONS / VEHICI IFICATE HOLDER IS NAMED A	LES (A	CORD ז איז	101, Additional Remarks Schedu	le, may b	e attached if mo	re space is requir	ed)	TONG
				ENT(S): 03/24/18					
	oln Track Club, Att'n: D							URED RRCA CLUB/EVENT	MEMBER:
21110		avic		accan, 1225 N. 500		Leet, Lin	COIN, NE	08503	
(Eff	ective 12/29/17. This voi	de =	bna	replace provious	1	and as	tificato	`	
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CEPT	IFICATE HOLDER				CANC				
JENI					CANC	ELLATION			
					SHO				
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
	Attached: PCN0132 - C	G201	2	,	ACCORDANCE WITH THE POLICY PROVISIONS.				
	555 S. 10th Street		_						
	Lincoln, NE 68508				AUTHOR	RIZED REPRESE	NTATIVE		

AUTHORIZED REPRESENTATIVE

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THE ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

IL 12 01 11 85

POLICY CHANGES

POLICY NO. KRO000007170900	POLICY CHANGES EFFECTIVE 03/24/18	COMPANY NATIONAL CASUALTY COMPANY					
NAMED INSURED ROAD RUNNERS CLUB OF AI	AUTHORIZED REPRESENTATIVE K&K INSURANCE AGENCY, INC.						
COVERAGE PARTS AFFECTED		PAGE 01 OF 01					
Commercial General Lia	oility						
	CHANGES						
Form Number: CG2012 "Ad Si An	Form Number: CG2012 "Additional Insured-State or Governmental Agency or Subdivision or Political Subdivision-Permits or Authorizations"						
(X) Add Form To Include	(X) Add Form To Include Additional Insured Below:						
COUNTY OF LANCASTER							
Club: Lincoln Track Club Event: State Farm Run Date: 03/24/18							
No Premium Change							
NLS 01/25/18	/dc	ott hunt					

Authorized Representative Signature

Copyright Insurance Services Office, Inc., 1983 Copyright, ISO Commercial Risk Services, Inc. 1983

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – STATE OR GOVERNMENTAL AGENCY OR SUBDIVISION OR POLITICAL SUBDIVISION – PERMITS OR AUTHORIZATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

State Or Governmental Agency Or Subdivision Or Political Subdivision: COUNTY OF LANCASTER

Club: Lincoln Track Club Event: State Farm Run Date: 03/24/18

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured any state or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following provisions:
 - 1. This insurance applies only with respect to operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization.

However:

- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

- 2. This insurance does not apply to:
 - a. "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
 - b. "Bodily injury" or "property damage" included within the "products-completed operations hazard".
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

LANCASTER

Pamela L. Dingman, P.E. County Engineer

COUNTY

ENGINEERING

Kenneth D. Schroeder, R.L.S.

Deputy County Surveyor

DEPARTMENT

DATE: January 30, 2018

Kelly Lundgren

TO:

FROM:

County Clerk's Office () OM Ken Schroeder **County Surveyor**

SUBJECT: SPECIAL EVENTS PERMIT - LINCOLN TRACK CLUB STATE FARM RUN MARCH 24, 2018 – FROM 8:00 A.M. TO 11:00 A.M.

Upon review, this office has no direct objections to this submittal, subject to no parking allowed along adjacent County roads, and subject to review by the Lancaster County Sheriff's Office for safety precautions, and by the County Attorney's Office for insurance compliance.

Cc: Lancaster County Sheriff's Office Lancaster County Attorney's Office Ron Bohaty, Road Maintenance Supervisor

KDS/bml

402-441-7681

Kelly S. Lundgren

From: Sent: To: Subject: Tom J. Cajka Wednesday, January 31, 2018 11:25 AM Kelly S. Lundgren RE: State Farm Run Special Events Permit

No objections

Tom Cajka, Planner II County Planner Lincoln-Lancaster County Planning 402-441-5662

From: Kelly S. Lundgren Sent: Monday, January 29, 2018 8:30 AM

To: Angela S. Keim <<u>AKeim@lincoln.ne.gov</u>>; Barbi M. Loschen <<u>bloschen@lancaster.ne.gov</u>>; David A. Derbin <<u>DDerbin@lancaster.ne.gov</u>>; David R. Cary <<u>dcary@lincoln.ne.gov</u>>; Greg R. Topil <<u>gtopil@lincoln.ne.gov</u>>; Jenifer T. Holloway <<u>JHolloway@lancaster.ne.gov</u>>; Jeremy J. Schwarz <<u>JSchwarz@lancaster.ne.gov</u>>; Josh D. Clark <<u>JClark@lancaster.ne.gov</u>>; Justin L. Daniel <<u>jdaniel@lincoln.ne.gov</u>>; Ken D. Schroeder <<u>kschroeder@lancaster.ne.gov</u>>; Robert K. Simmering <<u>RSimmering@lincoln.ne.gov</u>>; Steve S. Henrichsen <<u>shenrichsen@lincoln.ne.gov</u>>; Terry A. Kathe <<u>tkathe@lincoln.ne.gov</u>>; Tom J. Cajka <<u>tcajka@lincoln.ne.gov</u>> Subject: State Farm Run Special Events Permit

Please find attached the special events permit application for the Lincoln Track Club State Farm Run scheduled for March 24, 2018 from 8:00 a.m. to 11:00 a.m. This will be scheduled for the Tuesday, February 13th Board of Commissioners meeting. Please have recommendations to me by Wednesday, February 7th.

Thank you!

Kelly Lundgren, Records Specialist Lancaster County Clerk 555 S. 10th Street, Room 108 Lincoln, NE 68508 Direct: 402-441-7485 Main: 402-441-7484