

2018-0007

SPECIAL EVENTS PERMIT APPLICATION

Lancaster County, Nebraska

RECEIVED

JAN 26 2018

LANCASTER COUNTY CLERK

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

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: Scott Ash
Business/Organization Name (if applicable): Nebraska Sports Council
Full Mailing Address: 4903 N. 57th Lincoln, NE, 68507
Phone #: 402-471-2544 Alternate Phone #: _____
E-mail Address: sash@nebraskasportscouncil.com

EVENT INFORMATION

Event Name: Cornhusker State Games Cycling Tour
Event Description: Cycling Tour
*Date of Event: 7/29/18 Alternate Date: N/A
Start Time: 6am End Time: 6pm

**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 No
- Will the event be in/on sidewalk space? Yes No
- Is part of the proposed route within the city limits of Lincoln 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.

SPECIAL EVENTS PERMIT APPLICATION

Lancaster County, Nebraska

Planned Route (describe in detail and attach map): See attached map

(Attach additional sheets if necessary.)

Expected number of people attending: 125

Location(s) of event marshals/monitors: person at each check point + Finish line

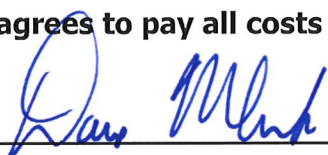
*Do you need sheriff escort/traffic control? Yes No

*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: All riders will be required to wear a helmet, carry a cellphone, & follow traffic laws. There will be HAMs radio crew monitoring the race progress which will report back to race officials

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

Signature: 

Date: 1/17/18

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: coclerk@lancaster.ne.gov
Web site: lancaster.ne.gov

For Office Use Only:

- | | | |
|---|-----------------------------------|--|
| <input type="checkbox"/> Application | <input type="checkbox"/> Engineer | <input type="checkbox"/> Building & Safety |
| <input type="checkbox"/> Hold Harmless | <input type="checkbox"/> LLCHD | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Map | <input type="checkbox"/> Planning | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Certificate of Insurance | <input type="checkbox"/> Sheriff | <input type="checkbox"/> WITHDRAWN _____ |

SPECIAL EVENTS PERMIT APPLICATION
Lancaster County, Nebraska

HOLD HARMLESS AGREEMENT

Event Name: Comhusker State Games Cycling Tour

Date of Event: Sun. July 29, 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 17th **day of** January, 20 18.

Applicant Signature: 

Printed Name: DAVE MLVARIK

Title/Legal Capacity: Exec. Director

Witness to Signature: Brandon Holscher

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



CYCLE TOUR 25-MILE ROUTE

Turn right onto Fallbrook Blvd | 0.0 mi

Turn right onto US-34 W | 0.4 mi

Veer right onto 79 N (signs for
Raymond/Valparaiso) | 3.1 mi

Turn left onto Raymond Rd. (toward
Branched Oak Lake) | 8.3 mi

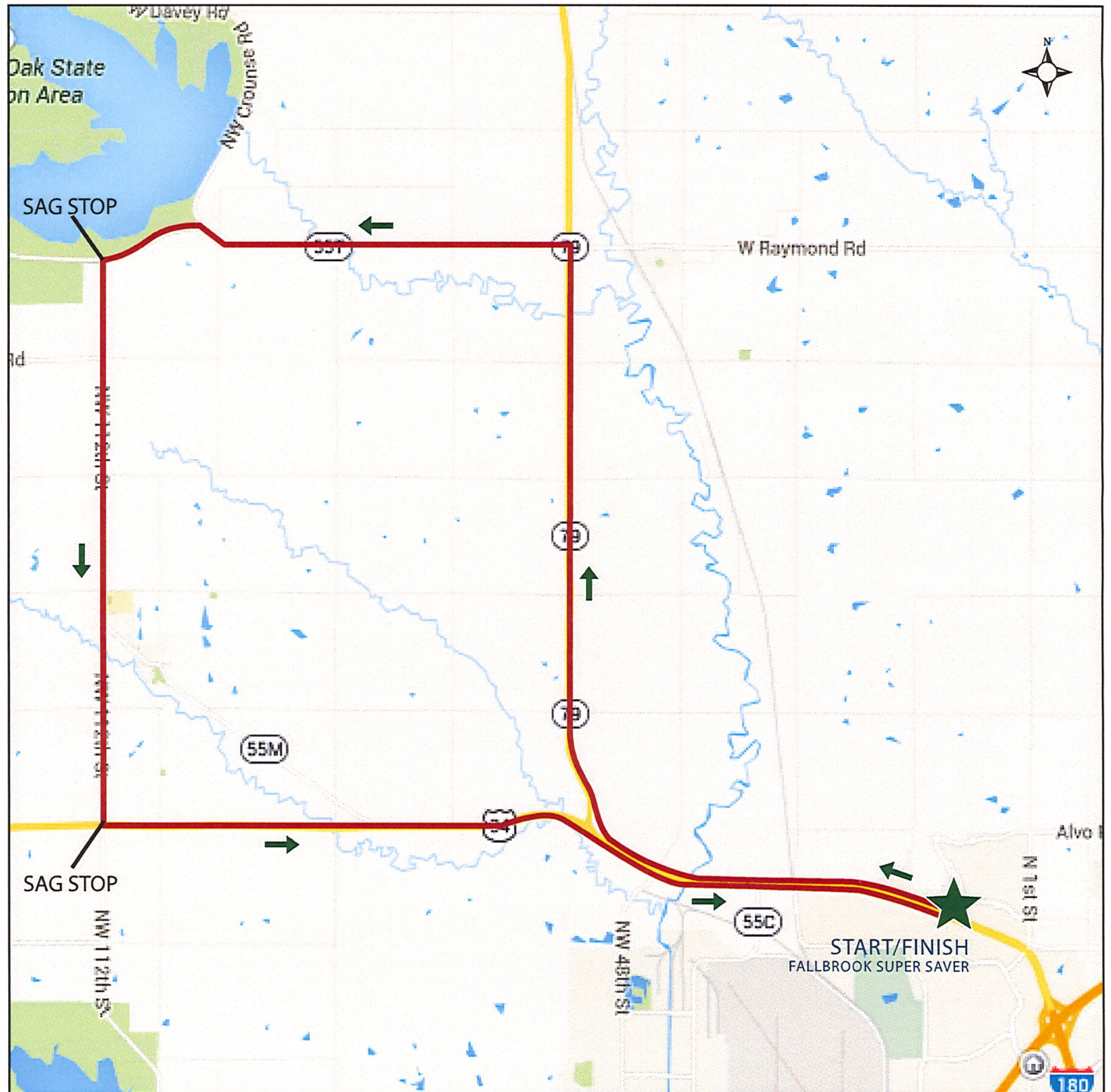
SAG Stop Area 1 Branched Oak Lake
(Food and Bathrooms) | 11.5 mi

Turn left and go South on NW 112 St.

Stay straight on NW 112 St. (Do not curve
left into town) | 15.5 mi

SAG Stop | 17.4 mi

Go East back to Super Saver at Fallbrook
to finish line | 25.1 mi



2018 CSG CYCLING SPONSORED BY:





CYCLE TOUR 50-MILE ROUTE

Turn right onto Fallbrook Blvd | 0.0 mi

Turn right onto US-34 W | 0.4 mi

Veer right onto NE-79 N (signs for
Raymond/Valparaiso) | 3.1mi

Turn left onto Raymond Rd. (Toward
Branched Oak Lake) | 8.3 mi

SAG Stop Area 1 Branched Oak Lake
(Food and Bathrooms) | 11.5 mi

Turn left and go South onto NW 112th St

Stay straight on NW 112 St (do not curve
left into town) | 15.5 mi

SAG Stop | 17.4 mi.

Turn west (right) at the 1st cross street
onto US-34 W | 17.4 mi

Seward Sign | 28.7 mi.

Turn right on 5th St, then 3 blocks to
Bradford St., turn left 1½ blocks to Civic
Center

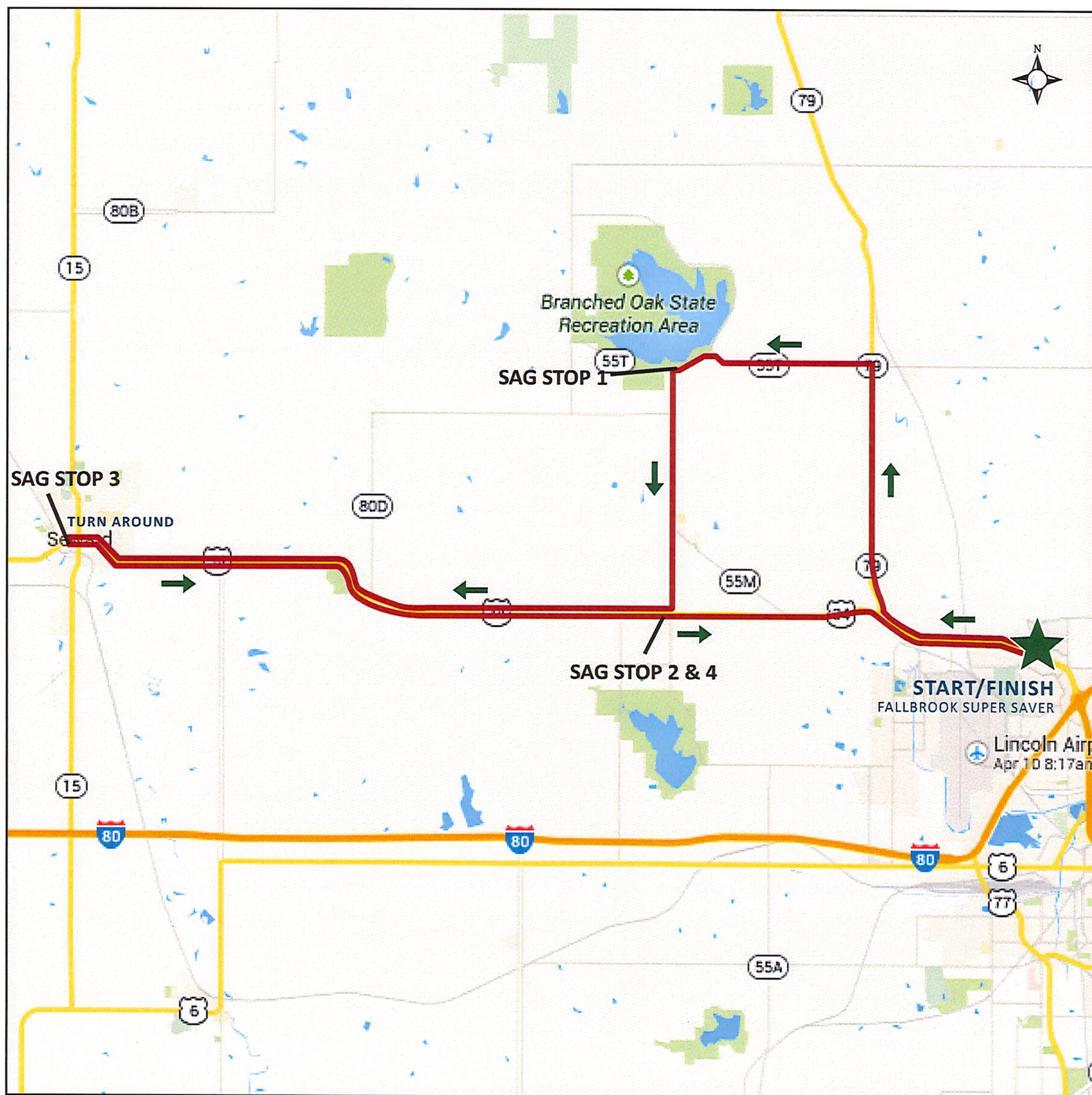
SAG Stop with Bathrooms(Seward Civic
Center) | 30 mi.

Backtrack to US-34 and turn left (east)
onto US-34

SAG Stop NW 112 St./US- 34 | 40 mi.

Continue East on US-34 to Super Saver in
Fallbrook to Finish Line | 50.1 mi

2018 CSG CYCLING SPONSORED BY:



CYCLE TOUR 100-MILE ROUTE

Turn right onto Fallbrook Blvd
| 0.0 mi

Turn right onto US-34 W | 0.4 mi

Veer right onto 79 N (signs for
Raymond/Valparaiso) | 3.1 mi

Turn left onto Raymond Rd(toward
Branched Oak Lake) | 8.3 mi

*SAG STOP Area 1 Branched Oak Lake
(Food/Water/Bathrooms) | 11.5 mi

Turn left, Go South on NW 112 St.

Stay straight on NW 112 St. (do not curve
left into town) | 15.5 mi

*SAG STOP | 17.4 mi

Turn right(West) onto US-34(Seward sign)
| 28.7 mi

Turn right on 5th Street-3 blocks to
Bradford S

Turn left 1 ½ blocks to Civic Center *SAG
STOP | 30 mi

From Civic Center take left(North) onto
HWY 15

*SAG STOP HWY 15/66 Right turn | 41.5 mi

Continue East on HWY 66 for 4 miles | 45.5
mi

Left on Co. Rd S/12 D Spur toward Brainard

Follow Co. Rd S to Brainard

Left on Cleveland .5 miles

*SAG in City Park Brainard | 53.8 mi

Reverse Route Back to HWY 66 | 62.1 mi

Right on HWY 66 to *SAG STOP | 66.1 mi

Left on HWY 15 to Seward

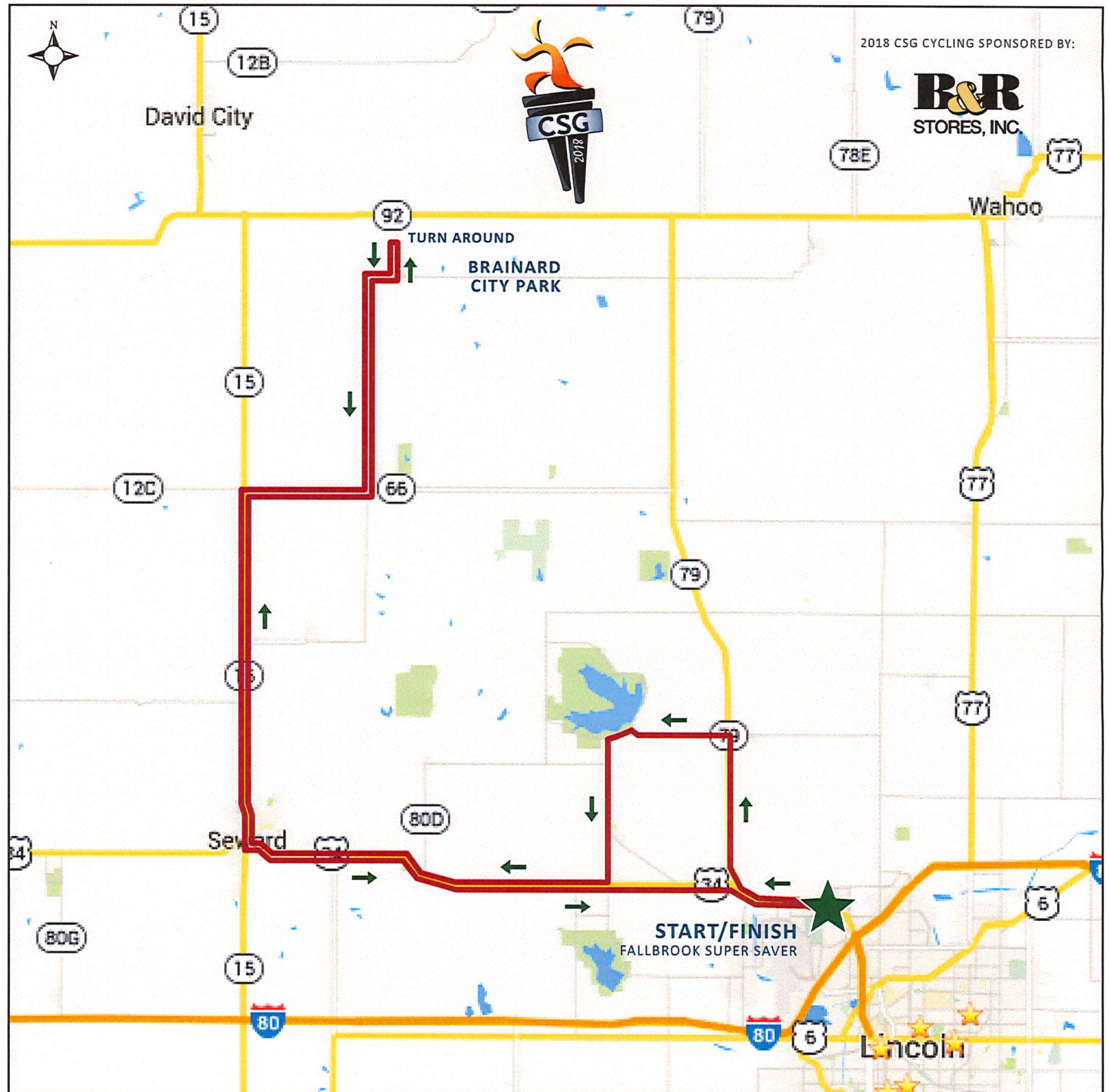
*SAG Civic Center (Brandford/HWY15) |
77.1 mi

Backtrack to US-34

Turn left(east onto US-34)

*SAG STOP NW 112St./US-34

Continue east on US-34 to Super Saver in
Fallbrook to finish line | 97.1 mi





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
1/30/2018

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 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 UNICO Group, Inc. 1128 Lincoln Mall Suite 200 Lincoln NE 68508	CONTACT NAME: Cynthia Reinsch PHONE (A/C, No, Ext): (402) 434-7200 E-MAIL ADDRESS: creinsch@unicogroup.com	FAX (A/C, No): (402) 434-7272
	INSURER(S) AFFORDING COVERAGE INSURER A: Nationwide INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
INSURED Nebraska Sports Council DBA: Cornhusker State Games PO Box 29366 Lincoln NE 68529-0366		

COVERAGES CERTIFICATE NUMBER: 18/19 WC/Auto 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
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			ACP7284251981	2/10/2018	2/10/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE \$ \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			ACP7284251981	2/10/2018	2/10/2019	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 A waiver of subrogation applies on the Worker's Compensation for City of Lincoln and/or Lancaster County and/or City of Lincoln/Lancaster County Public Building Commission.

CERTIFICATE HOLDER City of Lincoln and/or Lancaster County and/or City of Lincoln/Lancaster County Public Building Commission 555 South 10th Street Lincoln, NE 68508	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 Shane Ideus/RRAY
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
1/30/2018

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 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 UNICO GROUP, INC. 1128 LINCOLN MALL STE 200 LINCOLN, NE 68508-2878 (308) 698-2002	CONTACT NAME:		
	PHONE (A/C, No, Ext): (308) 698-2002	FAX (A/C, No): (308) 236-6075	
	E-MAIL ADDRESS:		
		INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: United States Fire Insurance		21113	
INSURED SPORTS AND RECREATION PROVIDERS ASSOCIATION (PURCHASING GROUP) AND ITS PARTICIPATING MEMBERS: Nebraska Sports Council dba Cornhusker State Games P.O. Box 29366 Lincoln, NE 68529	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES

CERTIFICATE NUMBER: USP260916

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			SRPGAPML-101-0717	02/10/2018 12:01 AM	02/10/2019 12:01 AM	GENERAL AGGREGATE	\$3,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	\$3,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$1,000,000.00
							EACH OCCURRENCE	\$1,000,000.00
							FIRE DAMAGE (Any one fire)	\$300,000.00
							MED EXP (Any one person)	\$5,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:							
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> HIRED AUTO						PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS							
	<input type="checkbox"/> NON-OWNED AUTOS							
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR						AGGREGATE	\$
	EXCESS LIAB							
	<input type="checkbox"/> CLAIMS-MADE							
	DED							
	RETENTION \$							
							EACH OCCURRENCE	\$
							GENERAL AGGREGATE	\$
							EACH OCCURENCE	\$
							GENERAL AGGREGATE	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)

Multiple Short Term Sporting Events

The Certificate Holder is added as an additional insured but only with respect to liability arising out of the named insured during the policy period.

Scheduled Activities Exclusion Applies-Please Refer to Named Insured Member Certificate of Coverage

CERTIFICATE HOLDER
 City of Lincoln and/or Lancaster County and/or City of Lincoln/Lancaster County Public Building Commission
 555 South 10th Street
 Lincoln, NE 68508
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

Unico Group, Inc.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

Policy Number: SRPGAPML-101-0717/USP260916
Insured: Nebraska Sports Council dba Cornhusker State Games

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)

City of Lincoln and/or Lancaster County and/or City of Lincoln/Lancaster County Public Building Commission 555 South 10th Street Lincoln, NE 68508
--

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

Section II - WHO IS AN INSURED is amended to include as an insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions of the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

**CITY OF LINCOLN AND/OR LANCASTER COUNTY AND/OR CITY OF
LINCOLN/LANCASTER COUNTY PUBLIC BUILDING COMMISSION
555 S 10TH ST LINCOLN, NE 68508**

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective
Insured

Policy No.

Endorsement No.
Premium

Insurance Company

Countersigned by _____

WC 00 03 13
(Ed. 04-84)

© 1983 National Council on Compensation Insurance.

Kelly S. Lundgren

From: Tom J. Cajka
Sent: Thursday, April 26, 2018 8:57 AM
To: Kelly S. Lundgren
Subject: RE: Cornhusker State Games Cycling Tour

Planning has no objection.

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

From: Kelly S. Lundgren
Sent: Tuesday, April 24, 2018 8:22 AM
To: Angela S. Keim <AKeim@lincoln.ne.gov>; Barbi M. Loschen <bloschen@lancaster.ne.gov>; David A. Derbin <DDerbin@lancaster.ne.gov>; David R. Cary <dcary@lincoln.ne.gov>; Greg R. Topil <gtopil@lincoln.ne.gov>; Jenifer T. Holloway <JHolloway@lancaster.ne.gov>; Jeremy J. Schwarz <JSchwarz@lancaster.ne.gov>; Josh D. Clark <JClark@lancaster.ne.gov>; Justin L. Daniel <jdaniel@lincoln.ne.gov>; Ken D. Schroeder <kschroeder@lancaster.ne.gov>; Robert K. Simmering <RSimmering@lincoln.ne.gov>; Steve S. Henrichsen <shenrichsen@lincoln.ne.gov>; Terry A. Kathe <tkathe@lincoln.ne.gov>; Tom J. Cajka <tcajka@lincoln.ne.gov>
Subject: Cornhusker State Games Cycling Tour

Please find attached a special events permit application from Scott Ash on behalf of the Nebraska Sports Council for the Cornhusker State Games Cycling tour. The event is scheduled for Sunday, July 29, 2018 from 6:00 a.m. to 6:00 p.m. Scott is working on providing the insurance information. This will be scheduled for the May 22nd Board of Commissioners meeting. Please have recommendations to me by Wednesday, May 16th.

Thank you!

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

Kelly S. Lundgren

From: Andrea R. Bethke
Sent: Friday, May 11, 2018 4:21 PM
To: Kelly S. Lundgren
Cc: Angela S. Keim
Subject: RE: Cornhusker State Games Cycling Tour

LLCHD gives APPROVED status for this event.

Andrea Bethke EHS
Lincoln-Lancaster County Health Department
402-441-8074

From: Angela S. Keim
Sent: Tuesday, April 24, 2018 8:45 AM
To: Andrea R. Bethke <ABethke@lincoln.ne.gov>
Cc: Justin L. Daniel <jdaniel@lincoln.ne.gov>
Subject: FW: Cornhusker State Games Cycling Tour

Start and Finish looks like Fallbrook Super Saver.

Angie Keim
Environmental Public Health
Lincoln-Lancaster County Health Dept.
3131 O Street
akeim@lincoln.ne.gov
402-441-8026

From: Kelly S. Lundgren
Sent: Tuesday, April 24, 2018 8:22 AM
To: Angela S. Keim <AKEim@lincoln.ne.gov>; Barbi M. Loschen <bloschen@lancaster.ne.gov>; David A. Derbin <DDerbin@lancaster.ne.gov>; David R. Cary <dcary@lincoln.ne.gov>; Greg R. Topil <gtopil@lincoln.ne.gov>; Jenifer T. Holloway <JHolloway@lancaster.ne.gov>; Jeremy J. Schwarz <JSchwarz@lancaster.ne.gov>; Josh D. Clark <JClark@lancaster.ne.gov>; Justin L. Daniel <jdaniel@lincoln.ne.gov>; Ken D. Schroeder <kschroeder@lancaster.ne.gov>; Robert K. Simmering <RSimmering@lincoln.ne.gov>; Steve S. Henrichsen <shenrichsen@lincoln.ne.gov>; Terry A. Kathe <tkathe@lincoln.ne.gov>; Tom J. Cajka <tcajka@lincoln.ne.gov>
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Thank you!

Kelly Lundgren, Records Administrator
Lancaster County Clerk
555 S. 10th Street, Room 108

DATE: May 17, 2018
TO: Kelly Lundgren
County Clerk's Office
FROM: Ken Schroeder _____
County Surveyor
SUBJECT: SPECIAL EVENTS PERMIT – NEBRASKA SPORTS COUNCIL
CORNHUSKER STATE GAMES CYCLING TOUR
SUNDAY, JULY 29, 2018 FROM 6:00 A.M. TO 6:00 P.M.

Upon review, this office would offer the following comments:

1. No parking allowed along County roads.
2. Suggest using traffic control coordinators at busy intersections to inform the traveling public of the special event in progress.
3. There are roadway improvement projects scheduled along event routes as follows:
 - NW 112th Street is scheduled for crack sealing from Highway 34 north to Malcolm Road, this work has not been scheduled but should be completed during the regular work week of Monday through Friday.
 - Pavement striping is scheduled on NW 112th Street from south of Highway 34 north to West Raymond Road and east on West Raymond Road to NW 98th Street, the estimated completion date for this work is June 30, 2018.
4. Permits and other regulations and/or permissions of use may be required for areas of this event within the jurisdiction of the Nebraska Department of Transportation, City of Lincoln Public Works Department, State Lake Area Authorities and neighboring Counties and Villages.
5. Suggest this application be reviewed by applicable law enforcement agencies for safety precautions and reviewed by applicable Attorney's offices for insurance compliance.

Cc: Lancaster County Sheriff's Office
Jenifer Holloway, Lancaster County Attorney's Office
Ron Bohaty, Road Maintenance Superintendent

KDS/bml

F:\Clerical\Private\Special Permits Events-Other\Cornhusker State Games - 2018 Cycling Tour (Neb. Sports Council).docx