VIII-02



City Council Memorandum

To: Mayor Fasbender & City Councilmembers From: Paige Marschall Bigler, Recreation Program Specialist Date: December 5, 2022

## Item: Special Event Request – Holiday Train

**Council Action Requested:** Designate Sunday, December 11<sup>th</sup> as a Special Event for the Holiday train hosted by the Canadian Pacific Railroad.

## **Background Information:**

Hastings Family Service, on behalf of Canadian Pacific Railroad, submitted the Special event Application for the Holiday Train event. The Holiday Train will stop on 2<sup>nd</sup> St. tracks near the Train Depot. The goal of the event is to raise donations for Hastings Family Service Food shelf. City staff are supportive of the 2022 event with the following conditions:

The areas identified on the attached map shall be for the use of the Holiday Train event beginning at 8:00 p.m. Sunday, December 11<sup>th</sup> 2022.

- City Staff will provide type II barricades, caution tape, and city vehicles if feasible to close the area of use for safety during the Holiday Train stop.
  - Barricades East & West on 2<sup>nd</sup> Street Railroad tracks, set 20 feet back
  - Caution tape on North and West side of tracks
  - City vehicle barricades and reserve officer West and East on 2<sup>nd</sup> Street between Tyler and Lea St.
- The Hastings Police Department will provide support for traffic management; availability of reservists is not guaranteed.
- The Parks and Recreation Department will provide four portable bathrooms near Depot Park
- City garbage and recycling downtown will be emptied before and after the event by City staff.
- Any other reasonable conditions as determined by staff during event.

## Financial Impact:

None

Advisory Commission Discussion:

- None
- Council Committee Discussion:
  - None

## Attachments:

- Special Event Application
- Event Map



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# SPECIAL EVENT PERMIT APPLICATION

General Event Information					
Event Name:					
Name of Event Coordinator:			Home Phone: ( )		
			Work Phone: ( )		
Name of Organization/Busine		Cell Phone: ( )			
			E-mail:		
Mailing Address:		Website:			
On Site Contact Name:		On Site Conta	On Site Contact Cell Phone: ( )		
<b>Type of Event (mark all that apply):</b> 2 Downtown Event 2 Race/Run/Walk 2 Concert/Performance 2 Fundraiser 2 Other:					
Date(s) Requested:					
Date Day of Week		Time		Total Hours	
		a <del>m</del> /pm to	am <mark>/pm</mark>		
		am/pm to	am/pm		
		am/pm to	am/pm		
Is this event: 2 Open to the public 2 Private		Will this be an	annual event?	? Yes ? No	
Has this event been held in another City? 2 Yes 2 No If yes, when was it held and where?					
Will an admission fee be char	Will donations	s be accepted?	2 Yes 2 No		
What will proceeds from the event be used for?					
Anticipated Attendance: Total Per Day					
Will there be a tent(s) at the	If yes, how ma	If yes, how many and how big?			

## **Event Location Information**

Location of the event (including the starting line, finish line and staging/disbanding areas):

List of any City parks/facilities to be used for the event:

Number of vehicles expected at the event:

Describe where participants will park:

If the event will take place on private property, has approval been obtained from the property owner(s)?

Please include a site plan for the event location that show the location of the starting line, finishing line, staging areas, tents, vendors, parking areas, sound amplification equipment and any other areas that will be setup as part of the event.

#### **Event Route Information**

Does the event propose to require the use of any public right of way (crossing or traveling within)?

List all public right of way that will be used during the event:

City Streets

Trails/Sidewalks \_\_\_\_\_

County Roads\_

I State Road

Other Right of Way

Have you received approval for the use of any County or State right-of-way? 2 Yes 2 No 2 Not applicable

**Does the route require the closing or partial closing of any streets, intersections or crossings?** I Yes I No If yes, please describe: \_\_\_\_\_\_

(The City of Hastings reserves the right to require street closings)

Please include a detailed map showing the proposed route. The route map must show what roadways, trails and sidewalks will be used and the direction the participants will travel. All street names must be clearly labeled.

#### **Event Safety Information**

Number of volunteers assisting with the event:

**Do you have a contingency plan if volunteers don't show up?** I Yes I No If yes, please summarize: \_\_\_\_\_

Is the promoter aware of any problems that may arise during the event? 2 Yes 2 No If yes, please summarize:

Have arrangements been made for emergency medical services? 2 Yes 2 No If yes, please summarize:

Will alcohol be served or sold at the event? I No I Yes (a temporary beer or liquor license is required)

Will there be a raffle or other regulated gambling activity at the event? 2 No 2 Yes (a temporary gambling permit is required)

Will the event include the sale of any products or services? I No I Yes (please provide a list of your approved event vendors):

Will the event include the sale of any food or beverages? I No I Yes (health department permits are required, please provide a list of your approved food vendors):\_\_\_\_\_\_

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#### **Event Signage and Sound Information**

Please include a route map detailing where all DIRECTIONAL signage will be placed for the event.

Please include a map detailing where all signs ADVERTISING the event will be placed.

**Will any sound amplification equipment be used at the event?** I Yes I No If yes, please describe where in the event area the equipment will be used and what time the equipment will be used:

## **Insurance Information**

Insurance coverage shall be maintained for the duration of the event with a minimum \$1,000,000 combined single limit and a minimum \$2,000,000 aggregate limit. If food or non-alcoholic beverages are sold or provided at the event the insurance policy shall also include an endorsement for product liability in an amount not less than \$1,000,000. Proof of insurance coverage must be provided at least 5 days prior to the event.

I have read and agree to all ordinances and rules associated with this special event permit. I certify that the answers are true and correct to the best of my knowledge.

Signature

Please return completed form to Paige Marschall-Bigler at <u>pmarschall@hastingsmn.gov</u> or mail in to Parks Department 920 10<sup>th</sup> St W, Hastings MN 55033. Call 651-480-6182 with any questions.

OFFICE USE ONLY

Date application submitted: \_\_\_\_\_

Date application approved by CC:\_\_\_\_\_

Required resources:

- Police Reservists:\_\_\_\_\_

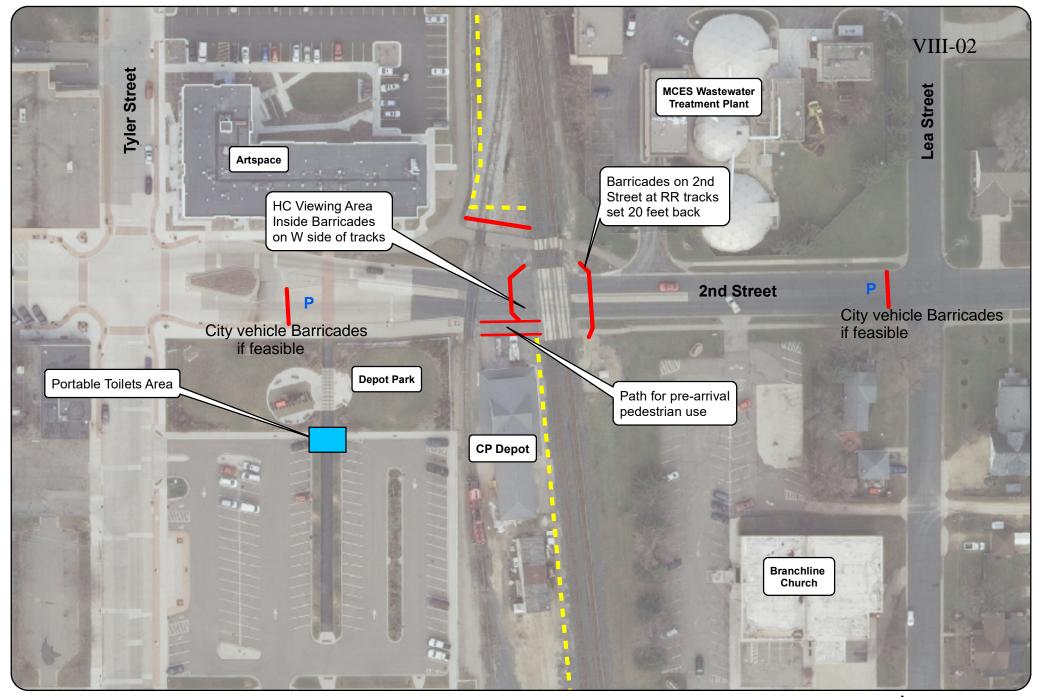
- Equipment:\_\_\_\_\_

- City staff:\_\_\_\_\_

Insurance information received:

Licenses/permits obtained:\_\_\_\_\_

Date



CP Rail Holiday Train

Logistics Map Train Stops on 12/11/2022

- P Police Squad Car/Reserve Officer
- Police Caution Tape
  - Barricade & Hard Closure

