Billings Catholic Schools
"Faith, Family Spirit, Academic Excellence"

July 21, 2009

City of Billings
Director of Public Works – Engineering Department
510 N. Broadway
Billings, MT 59101

Re: Parade Permit Cover Letter

Dear Sir or Madam,

We have finalized plans for our football schedule and our Homecoming game and festivities are scheduled for October 3, 2009

Our plan is to have a carcade from Billings Central Catholic High School to Wendy's Field at Daylis Stadium. We will be departing the staging area at approximately 6:00 PM and our route will be from Wyoming Avenue to Division Street and then West on Broadwater Avenue to 5th St. West; then turn right and proceed North through the intersection at 5th and Grand and then turn into the parking lot of Senior High School at which time the carcade will disband.

We expect to have approximately fifteen floats and 5 or 6 convertibles with the Homecoming Royalty. I have asked all of the drivers to display flashing amber lights.

Should you have any questions, my point of contact is Mr. Jim Hawbaker, and may be reached at 245-6651 or on his cell phone 670-9571.

Thank You,

Shel Hanser
Principal

BILLINGS CENTRAL CATHOLIC HIGH SCHOOL 3 BROADWATER AVENUE BILLINGS, MONTANA 59101 (406) 245-6651 FAX (406) 259-3124

City of Billings
RIGHT-OF-WAY ACTIVITY PERMIT

Please check the type of activity you are applying for:

☒ Parade ☐ Run/Walk/Procession ☐ Street/Alley Closure ☐ Block Party

Submit this application with attachments to either the: Public Works office, 2224 Montana Ave., Billings, MT 59101 or Downtown Billings office, 2815 2nd Ave North, Billings, MT 59101. Application packet should be turned in at **least 60 days prior to the date of the proposed event for approval.**

PERSON MAKING APPLICATION Shel HANSER

ORGANIZATION MAKING APPLICATION Billings CENTRAL CATHOLIC HIGH School

PHONE 406 245 6651

ADDRESS 3 BROADWATER AVE Billings MT 59101

CITY STATE ZIP

EMAIL ADDRESS Shelhanser@billingscatholicschools.org

APPROXIMATE TIME EVENT WILL:

Assemble 5:15 PM Start 6:00 PM Disband 6:30 PM

DATE OF EVENT OCTOBER 3, 2009

PURPOSE/DESCRIPTION OF EVENT: (Description and detail of the event.)

Homecoming Parade/Carcade Departing FROM Billings CENTRAL H.S. AT Approximately 6:00 PM 10-3-09

EVENT ROUTE DESIRED (IF APPLICABLE): (Please attach map.)

FROM CENTRAL H.S. - WEST ON BROADWATER, NORTH ON 5th STREET WEST - ENTER SENIOR HIGH STUDENT PARKING LOT - DISBAND

BLOCK PARTY STREET LOCATION (IF APPLICABLE):

CLEAN UP IMPLEMENTATION: (Company contracted or services you will provide)

CERTIFICATION OF INSURANCE WHICH MUST SHOW: (1) The limits of liability coverage for the period of this agreement as a minimum of $750,000 per claim/ $1.5 million per occurrence general liability, and (2) the City of Billings named on the Certificate of Insurance as the additional insured. (Refer to the sample insurance copy. Please note a certificate of insurance *is not required* for Block Parties)

NOTICE: ANY MARKINGS (NO PAINT ALLOWED) TO BE PLACED ON PUBLIC RIGHT-OF-WAY MUST BE APPROVED BY THE CITY TRAFFIC/ENGINEERING DEPARTMENT PRIOR TO PLACEMENT, BE ENVIRONMENTALLY SAFE, AND NOT CONFLICT WITH EXISTING MARKINGS.

FOR DOWNTOWN EVENTS: YOU OR THE ORGANIZATION YOU REPRESENT MUST "ASSIGN" THE FIRST TWO BLOCKS OF THE DOWNTOWN EVENT ROUTE FOR NO PARKING TWO HOURS PRIOR TO YOUR EVENT USING THE ROUTE SIGNS PROVIDED BY THE CITY. IT IS YOUR RESPONSIBILITY TO PROVIDE THE APPROPRIATE BARRICADES FOR THE STREET CLOSURE.

IF USING THE ESTABLISHED EVENT ROUTE, THE CITY WILL PROVIDE TWO POLICE OFFICERS WITH VEHICLES TO START THE EVENT, AND A STREET SWEEPER, IF NECESSARY, TO FOLLOW THE EVENT.

COORDINATOR OF EVENTS AT WHICH ALCOHOL WILL BE CONSUMED IN PUBLIC RIGHT-OF-WAY ARE REQUIRED TO OBTAIN AN OPEN-CONTAINER PERMIT FROM THE POLICE DEPARTMENT

UPON SIGNING OF THIS APPLICATION, THE APPLICANT AGREES NOT TO VIOLATE ANY STATE OR CITY CODES IN THE PRESENTATION OF THE REQUESTED SPECIAL ACTIVITY.

In consideration for permission to conduct its activity as requested, applicant agrees to indemnify, defend and hold harmless the City of Billings, its officers, agents, employees and volunteers from damage to property and for injury to or death of any person and from all liability claims, actions or judgments which may arise from the activity.

Applicants also agree to obtain valid "save or hold harmless agreements" from all participants in its activity, protecting the City of Billings from all losses arising out of its activity, including damages of any kind or nature.

APPLICANT SIGNATURE **DATE** 7/22/09

APPLICATION APPROVED **DATE**

APPLICATION DENIED **DATE**

ADDITIONAL RESTRICTIONS OR SPECIAL CONDITIONS: YES [ ] NO [ ]
(IF YES, ATTACH COPY)

FOR CITY USE ONLY

FEE:

APPLICANT NOTIFIED BY:

DATE:

COPIES TO:
CITY ADMINISTRATOR
DEPUTY CITY ADMINISTRATOR
POLICE CHIEF
FIRE CHIEF
FIRE MARSHALL
MET TRANSIT MANAGER
STREET/TRAFFIC SUPERINTENDANT
TRAFFIC ENGINEER
PRPL DIRECTOR
PARKING SUPERVISOR
CITY ATTORNEY

Certificate of Coverage

Date: 7/27/2009

Certificate Holder

The Roman Catholic Bishop of Great Falls
A Corporation Sole, Chancery Office
P O Box 1399
Great Falls, MT 59403

This Certificate is issued as a matter of information only and confers no rights upon the holder of this certificate. This certificate does not amend, extend or alter the coverage afforded below.

Company Affording Coverage

THE CATHOLIC MUTUAL RELIEF
SOCIETY OF AMERICA
10843 OLD MILL RD
OMAHA, NE 68154

Covered Location

Billings Central Catholic High School
c/o Billings Catholic School
PO Box 31158
Billings, MT 59107

Coverages

This is to certify that the coverages listed below have been issued to the certificate holder named above for the certificate 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 coverage afforded described herein is subject to all the terms, exclusions and conditions of such coverage. Limits shown may have been reduced by paid claims.

	Type of Coverage	Certificate Number	Coverage Effective Date	Coverage Expiration Date	Limits	
	Property					
					Real & Personal Property	
	General Liability				**General Aggregate**	
					Products-Comp/OP Agg	
	☑ **Occurrence**				**Personal & Adv Injury**	
	☐ **Claims Made**	8560	7/1/2009	7/1/2010	**Each Occurrence**	1,500,000
					Fire Damage (Any one fire)	
					Med Exp (Any one person)	
	Excess Liability					
					Each Occurrence	
	Other					
					Each Occurrence	

Description of Operations/Locations/Vehicles/Special Items

Coverage only extends for claims arising out of Billings Central Catholic High School holding a "Homecoming Parade/Carcade", on October 3, 2009, from 5:30 PM to 6:30 PM.

Holder of Certificate

Additional Protected Person(s)

City of Billings

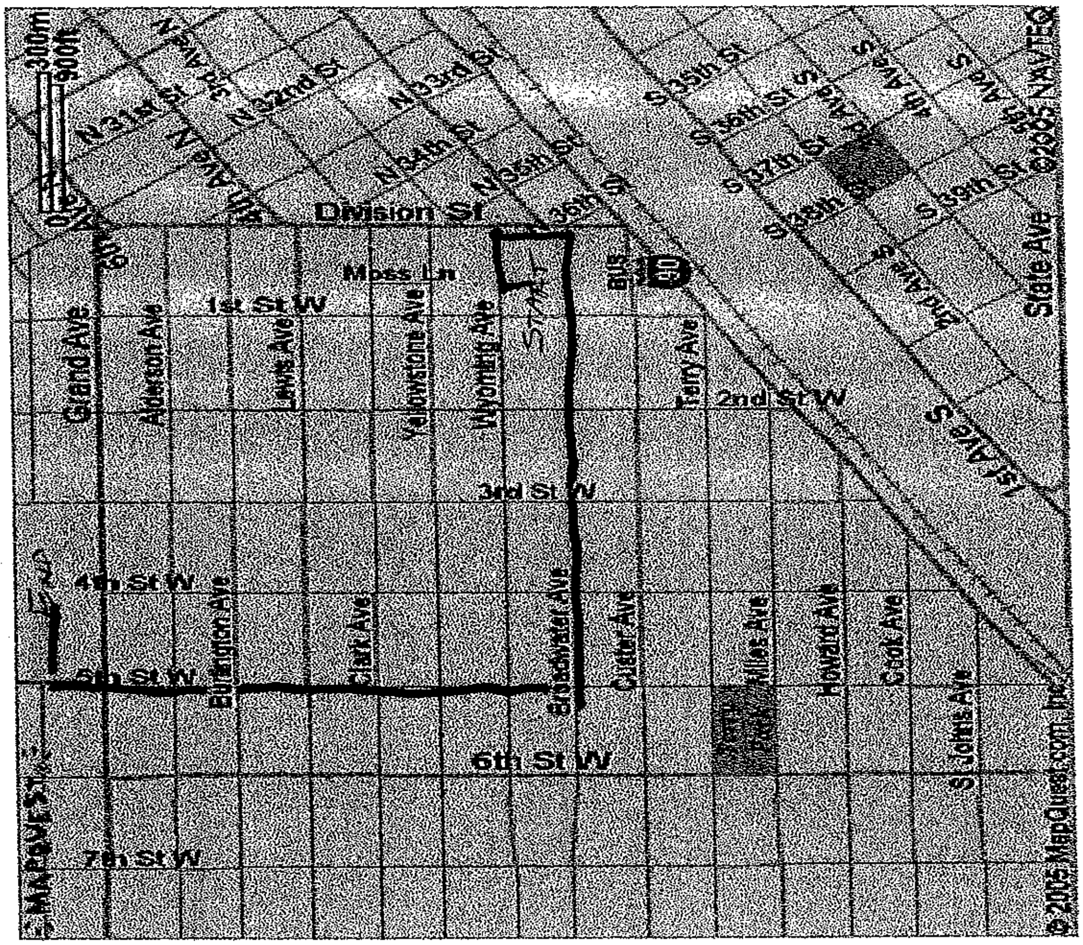
0069000253

Cancellation

Should any of the above described coverages be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 **days written notice to the holder of certificate named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.**

Authorized Representative

Joseph T. [illegible]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Lewis Ave
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Wyoming Ave
Terry Ave
Burlington Ave
Clark Ave
Broadwater Ave
Custer Ave
Miles Ave
Howard Ave
Cook Ave
St Johns Ave
Start
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