



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 Nadine Hart

ORGANIZATION MAKING APPLICATION Hope 2 One life, Inc.

PHONE 406-248-1954

ADDRESS PO Box 21112 Billings MT 59104

EMAIL ADDRESS nadine.hart@gmail.com

APPROXIMATE TIME EVENT WILL:
Assemble 7:30-8:30 am Start 9 am Disband 12:30 pm

DATE OF EVENT March 20th, 2010

PURPOSE/DESCRIPTION OF EVENT: (Description and detail of the event.)
To raise awareness of the global water crisis on World Water Day, an international day of observance. More than 1.1 billion people lack access to clean water and more than 2 billion people lack access to sanitation. Women and children walk miles each day in search of clean water, leading to widespread poverty, inability to do income generating work or attend school. Included in our

EVENT ROUTE DESIRED (IF APPLICABLE): (Please attach map.) event will be a "walk for water" please see attached map No charge to attend event.

5k and 1 mile walk route originating on MSU B campus and returning to MSU B. This is the same route as the past 2 years. City Police will be hired to monitor Virginia O'Leary. Notices to houses along the

BLOCK PARTY STREET LOCATION (IF APPLICABLE): N/A walk route will be detoured 2 weeks prior.

CLEAN UP IMPLEMENTATION: (Company contracted or services you will provide)
Volunteers will pick up any water bottles or trash that may be discarded along the route. All other activities will take place at MSU-B. The committee will handle all clean up

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 Nadine M Hart DATE 12/29/2008

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

World Water Day 2010



the perpetual
struggle
to survive

You can help.

Walk for Water

Free 5K or 1 Mile Walk

Saturday, March 20

Registration begins at 8:30 am--Walk begins at 9:00 am

MSU-Billings Student Union, Lower Level

Informational Booths and Demonstrations for

- *Amani Development Organization, Tanzania
- *New Hope International Hospital, Tanzania
- *Family Empowerment Farm, Uganda
- *Tender Mercies Outreach Ministries, Uganda
- *The Rwanda School Project, Rwanda

For more information, please visit www.hope2onelife.org, call 861-4281 or worldwaterday.billings@gmail.com

Donations for World Water Day are gladly accepted.

Presenting Sponsor



**St. Vincent Healthcare
Foundation**

MSUBILLINGS

**Organizing
Sponsor**

**HOPE
&
ONE
LIFE**

MTN.DESIGNS

**RALPH SPENCE, JR.
SPENCE ACCOUNTS**

**ENERGY
LABORATORIES**

**HEADWATERS
FLOATING ISLAND**

**Hydro
Solutions Inc**

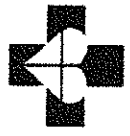
American Water

World Water Day Map

March 20th, 2010

9:00 - 12:00 MSU-Billings

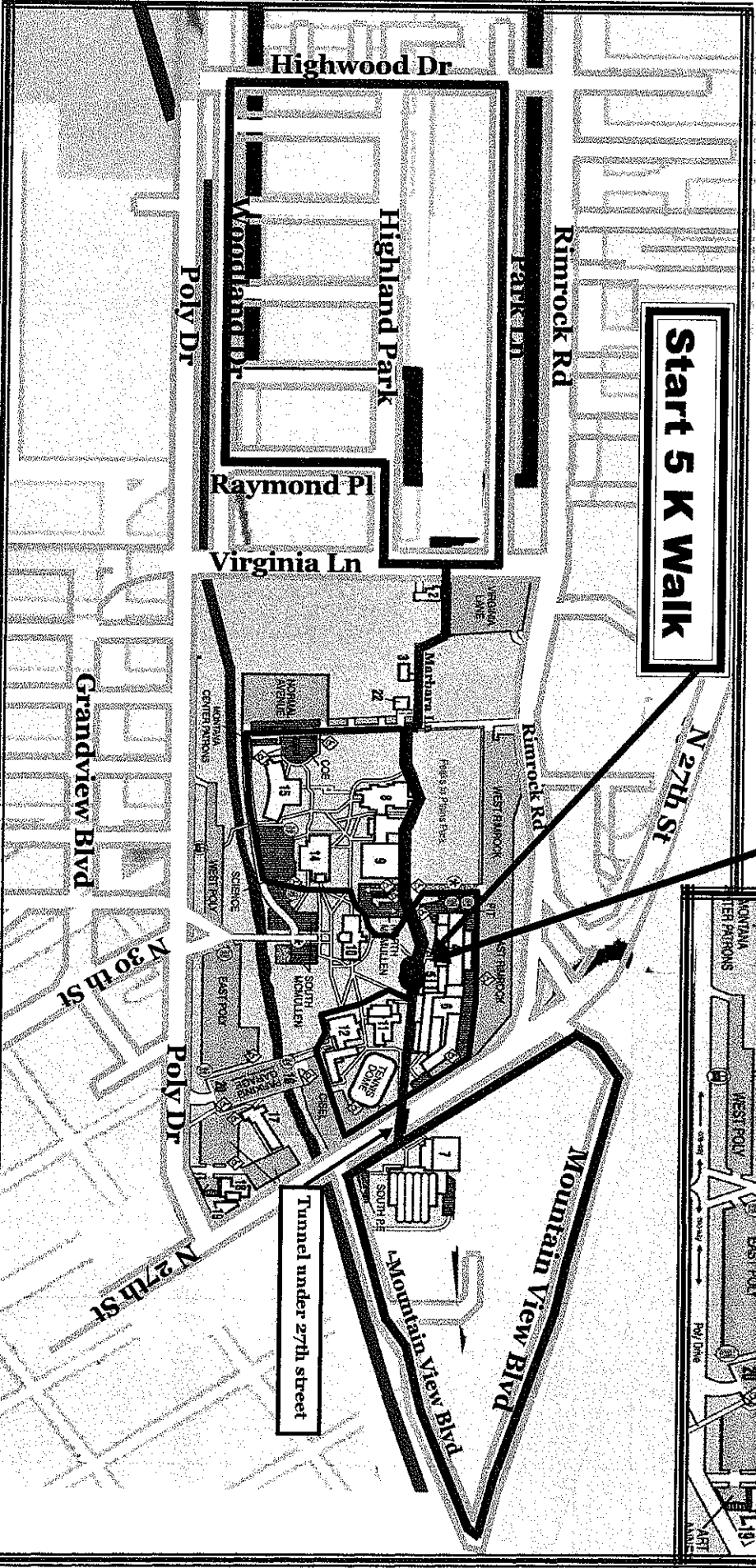
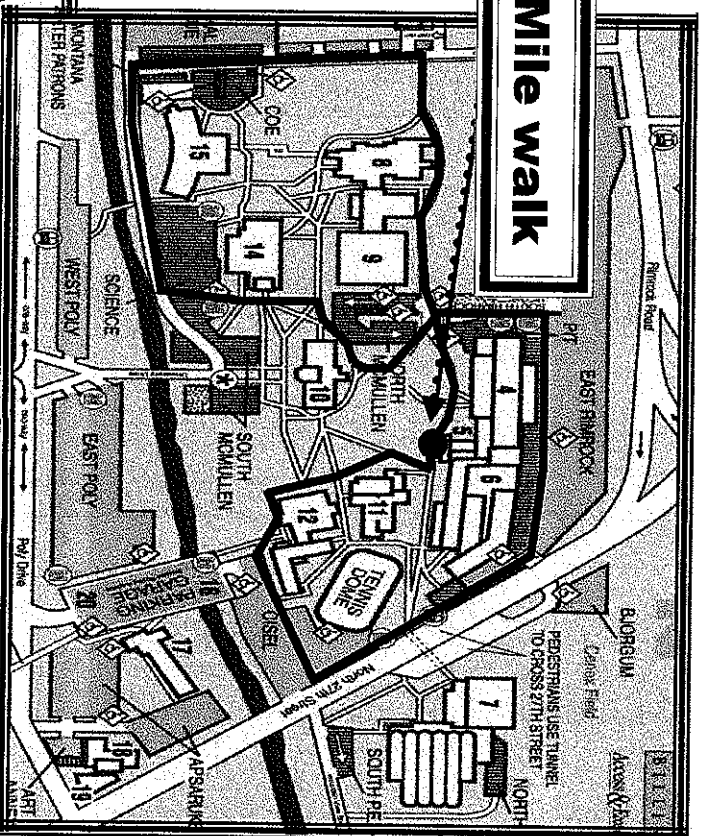
HOPE
ZONE
LIFE



St. Vincent Healthcare
Foundation

Start 5 K Walk

Start 1 Mile walk



SPECIAL
NOTICE

World Water Day Walk
March 20th, 2010
9 a.m. – 11:30 a.m.

SPECIAL
NOTICE

Mayor has proclaimed March 20th, 2010, World Water Day in Billings, Montana. In recognition of this event, a 5k and 1 mile walk will take place that morning, followed by a brief program of demonstrations and information at MSU-Billings.

This notice is to inform you that the walk will take place through your neighborhood on March 20th. For your safety and the safety of the walkers and volunteers, we ask that you drive with caution through your neighborhood and while backing out of your driveway during this time. We appreciate your support.

Attached is a copy of the route map. Please note, Billings' police officers will be directing traffic on Virginia Lane, and volunteers wearing orange vests will be directing traffic throughout the neighborhood.

The City of Billings has approved this walk, which will begin and end on the campus of MSU-Billings. Should you have any questions or concerns, please contact Debbie Whitney at 256-8917 or Nadine Hart at 861-3166. Thank you for your support.

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ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/16/10

PRODUCER Hoiness LaBar Insurance A Member of Payne Financial Group P.O. Box 30638 Billings, MT 59107-0638	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.												
INSURED City Of Billings %Human Resources Dept P.O. Box 1178 Billings, MT 59104	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:80%;">INSURERS AFFORDING COVERAGE</th> <th style="width:20%;">NAIC #</th> </tr> <tr> <td>INSURER A: Penn-American Insurance Co.</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: Penn-American Insurance Co.		INSURER B:		INSURER C:		INSURER D:		INSURER E:	
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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	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS																
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> PD Ded:250 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	PAC6784156	04/01/09	04/01/10	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000																
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$																
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$																
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$																
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;"></td> <td style="width:10%;">WC STATU-TORY LIMITS</td> <td style="width:10%;">OTH-ER</td> <td style="width:10%;"></td> </tr> <tr> <td></td> <td>E.L. EACH ACCIDENT</td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td>E.L. DISEASE - EA EMPLOYEE</td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td>E.L. DISEASE - POLICY LIMIT</td> <td></td> <td>\$</td> </tr> </table>		WC STATU-TORY LIMITS	OTH-ER			E.L. EACH ACCIDENT		\$		E.L. DISEASE - EA EMPLOYEE		\$		E.L. DISEASE - POLICY LIMIT		\$
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		OTHER																				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Holder is listed as Additional insured on policy for World Water Day, Walk for Water 2010 on 3/20/10 on the MSU Billings campus and surrounding area, 5K and 1 Mile walk with booths and demonstrations.

CERTIFICATE HOLDER Hope 2 One Life, Inc. PO Box 21112 Billings, MT 59104	CANCELLATION 10 Days for Non-Payment SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
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(MARCH 2010)

As with last year's event, please include the following conditions:

1. Participants will walk on the left-hand side of the roadway facing on-coming traffic where no sidewalk is available.
2. Participants will be required to walk as a group. Late arrivals will not be allowed to walk the 5K route as individuals. The leading and trailing walkers in the group shall wear orange or green safety vests.
3. Warning signs and course guards shall be placed at strategic locations along the route to warn motorists the event is in progress. At a minimum signing will be required coming into the event route off major roadways (Poly, Virginia, Rimrock, and N. 27th) and at the base of the hill where Mountain View Boulevard becomes a single lane roadway.
4. The event sponsor shall notify the residents along the upper portion of Mountain View Boulevard of the date and approximate times for the event at least two weeks prior to the event.
5. The event sponsor shall make arrangements for the use of off-duty law enforcement officers or State certified flaggers where the event route crosses Virginia Lane. All costs therefore shall be the responsibility of the event sponsor.
6. Participants shall not be allowed to walk within the roadway on N. 27th. They will be required to use trails or sidewalks adjacent to 27th, and to cross N. 27th using the pedestrian underpass.

Let me know if you have any questions or concerns. Thanks for your help!