



City of Billings  
RIGHT-OF-WAY ACTIVITY  
PERMIT

Please check the type of activity you are applying for: Triathlon/Duathlon

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

Submit this application with attachments to either the: Public Works office, 510 N. Broadway, 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 Karen Stanford Gall

ORGANIZATION MAKING APPLICATION Big Sky State Games

PHONE 254.7426

ADDRESS Box 7136 Billings MT 59102

EMAIL ADDRESS ks9@bigskygames.org

APPROXIMATE TIME EVENT WILL:

Assemble 5:30 am Start 6:30 AM Disband 11:00 am

DATE OF EVENT Sunday, July 18<sup>th</sup> 2010

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

Triathlon/Duathlon competition held by the Big Sky State Games. The Triathlon event will include Adult + youth races. The Duathlon event will include Adult + youth races. (13+)  
- SEE ATTACHED MAPS -

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

Map of Running route - Adult map is in Purple / youth map is in Pink. Description of cycling leg of Tri/Duo is also attached. - Property owners located in the 'Old K-mart' area have been contacted & given permission + approval of cycling route that pertains to them. MT Dept of Trans. + Yellowstone County have also been contacted for approval of the cyclin route that pertains to them. -> OVER

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

Big Sky State Games Volunteers/Staff will be responsible for any clean-up needed after the event.

**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.



**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 *Karen Sanford Hill* DATE 5-24-10

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

M O N T A N A ' S  
**BIG SKY**  

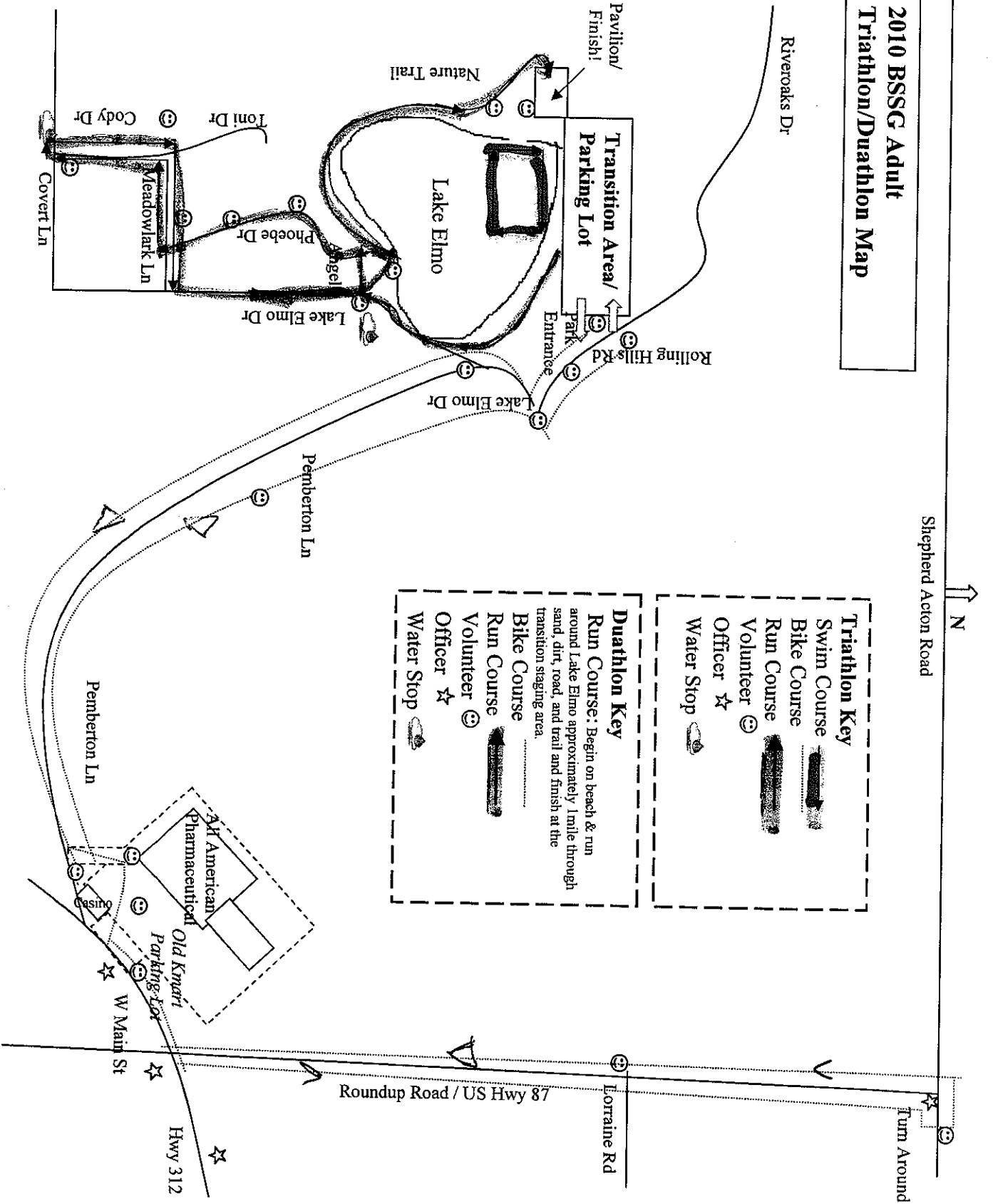
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**STATE GAMES**

**2010 BSSG Triathlon/Duathlon Bike Course & Plan**

- Bike Course begins at conclusion of swim course, inside Lake Elmo State Park near the boat dock area
- Bikers exit the transition area and take a left proceeding past the Park entrance booth **(1 volunteer here)**
- Bikers take a right at the corner of Rolling Hills Rd and Lariat Trail. They proceed on Rolling Hills Rd. **(1 volunteer here)**
- Course continues straight on to Pemberton at the corner of Pemberton and Rolling Hills **(1 volunteer here)**
- At **(2 volunteers here)** Pemberton and the parking lot entrance to the old KMART now home to the All American Pharmaceuticals, riders take a left into the lot. Lot will be coned so riders will know where to ride. None of the businesses are open on Sunday at 7:00 a.m. except Montana Lil's Casino that opens at 8:00 a.m.
- Riders exit the parking lot at Main - they take a immediate left turn on Main – and ride in the West Lane, not crossing the traffic on Main. The riders will be riding in a lane that has been coned off for the race by Billings Construction Supply. **(1 law enforcement officer in uniform with vehicle and flashing lights at intersection of HWY 312 and Roundup Rd) In addition, there will be signage posted on HWY 312 – slowing traffic into one lane onto main.**
- They take another left at the corner of Roundup Rd. and Main **(1 -2 law enforcement officers with vehicle and flashing lights posted further up on Roundup Rd.)**
- Riders will watch traffic to cross and ride the direction of traffic. Riders will ride on the very wide shoulder of the road.
- Riders continue 4.5 miles North on Hwy. 87
- (Volunteer at Lorraine Rd.)
- At the Shepherd Acton Rd. participants turn right proceed to turn around. **(Law enforcement on road to slow traffic)**
- Riders turn around and return to Billings on Hwy. 87 following the course in reverse. Riders ride with traffic the entire way back to Lake Elmo.

# 2010 BSSG Adult Triathlon/Duathlon Map



Shepherd Acton Road

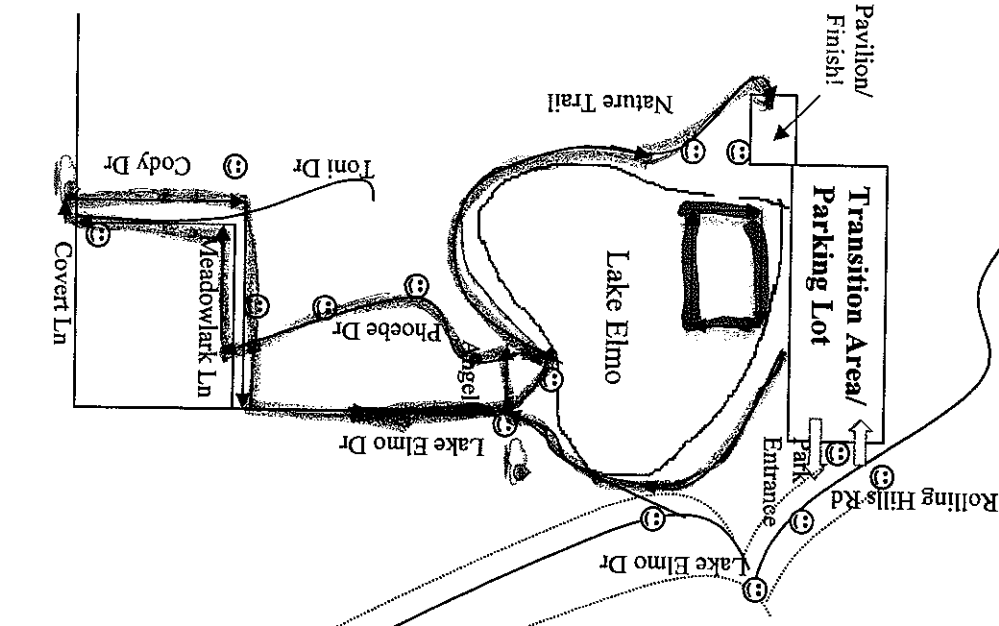


### Triathlon Key

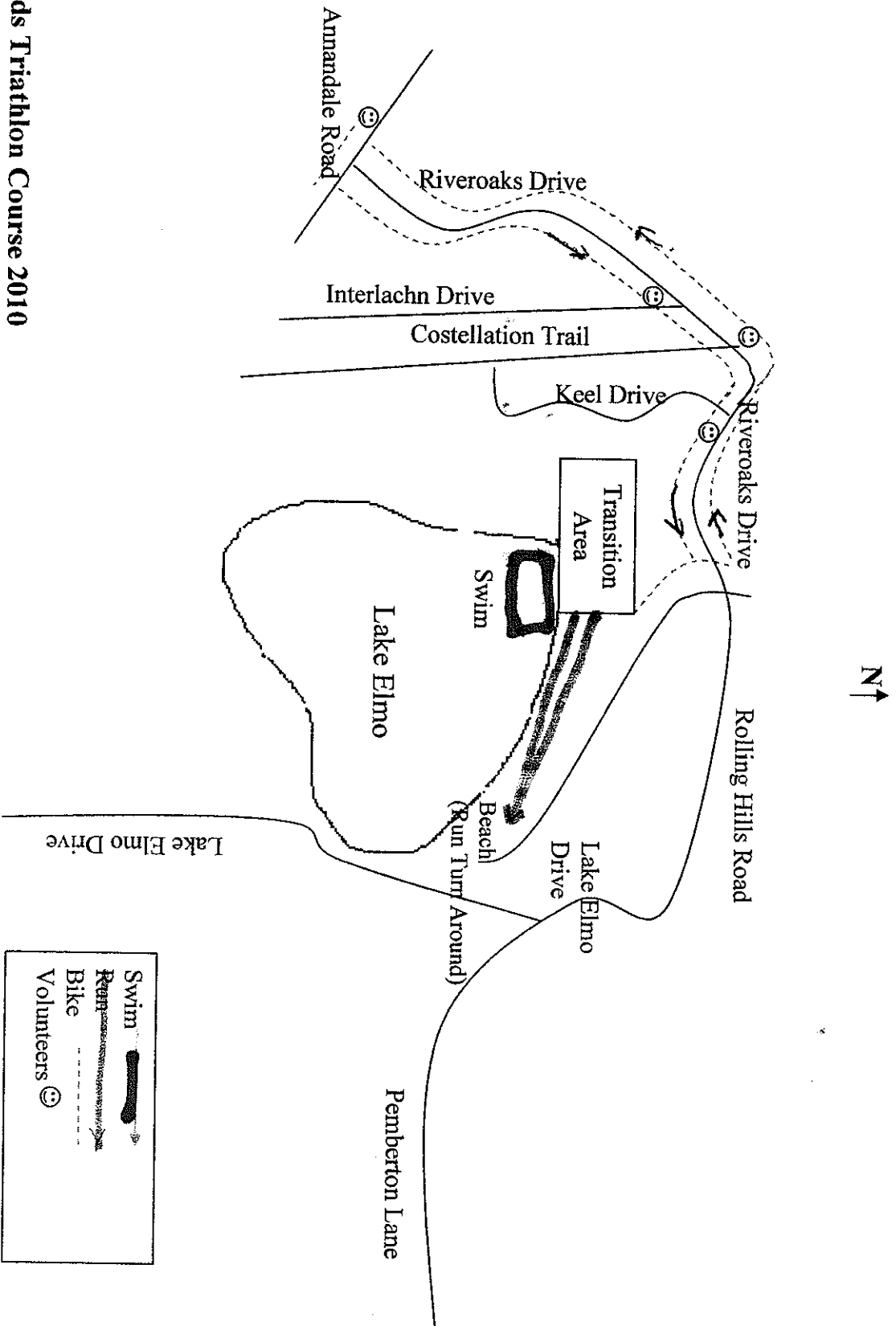
- Swim Course
- Bike Course
- Run Course
- Volunteer ☺
- Officer ☆
- Water Stop

### Duathlon Key

- Run Course: Begin on beach & run around Lake Elmo approximately 1 mile through sand, dirt, road, and trail and finish at the transition staging area.
- Bike Course
- Run Course
- Volunteer ☺
- Officer ☆
- Water Stop



# Kids Triathlon Course 2010



Swim	
Run	
Bike	
Volunteers	



# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
04/23/10

**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

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Penn-American Insurance Co.	
INSURER B:	
INSURER C:	
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 LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		<b>GENERAL LIABILITY</b> <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	PAC6784202	04/01/10	04/01/11	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
		<b>AUTOMOBILE LIABILITY</b> <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) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**

Holder is listed as Additional Insured on policy for Big Sky State Games competitions in Billings, MT 7/16/10-7/18/10.

**CERTIFICATE HOLDER**

**CANCELLATION 10 Days for Non-Payment**

Montana Amateur Sports, Inc, dba  
Big Sky State Games  
PO Box 7136  
Billings, MT 59103

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 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