



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 Amber Gundsted

ORGANIZATION MAKING APPLICATION Billings Association of Realtors

PHONE 406.248.7145

ADDRESS 1643 Lewis Ave, Ste 12, Billings, MT 59102

EMAIL ADDRESS amber@billings.org

APPROXIMATE TIME EVENT WILL:  
Assemble 7a.m. Start 8a.m. Disband 11a.m.

DATE OF EVENT Saturday, August 20, 2011

PURPOSE/DESCRIPTION OF EVENT: (Description and detail of the event.)  
The quality of life Run benefits non-profits that improve quality of life in our community. This year's proceeds benefit First Tee Montana. The run includes a 5-mile and 2-mile event and will attract approximately 500 participants.

EVENT ROUTE DESIRED (IF APPLICABLE): (Please attach map.)  
The run will have two starting locations -- one atop The Rims and one at the base of The Rims. The run winds through Pioneer Park and ends in the central business district at Transwestern parking lot.

BLOCK PARTY STREET LOCATION (IF APPLICABLE):  
\_\_\_\_\_

CLEAN UP IMPLEMENTATION: (Company contracted or services you will provide)  
Volunteers from the Association provide cleanup at the start points, race route and finish line. Cones and barricades also are promptly removed from the race route. (cleanup plan attached)

**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 *Handsted* DATE June 16, 2011  
APPLICATION APPROVED \_\_\_\_\_ DATE \_\_\_\_\_  
APPLICATION DENIED \_\_\_\_\_ DATE \_\_\_\_\_

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

**FOR CITY USE ONLY**

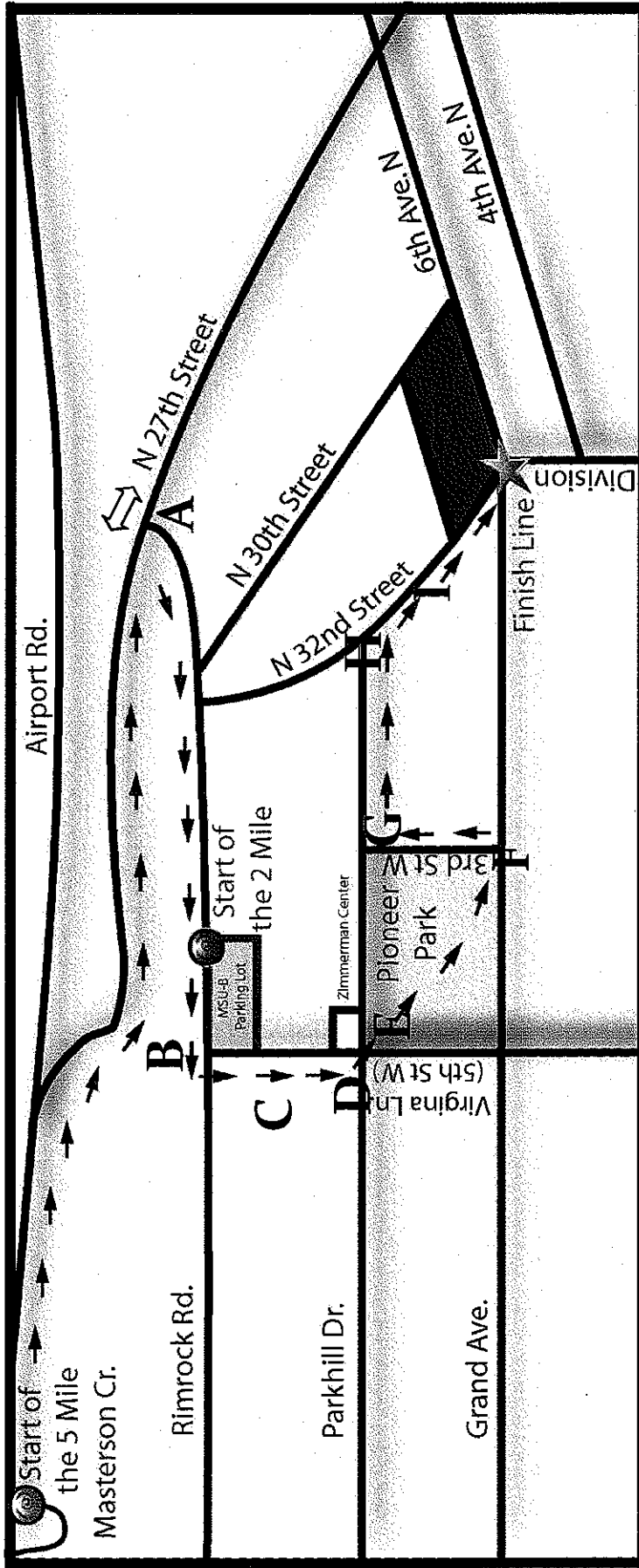
FEE: \$100.00

PAID: \_\_\_\_\_

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

# Road Guard and Water Station Placement



**Road Guards:**

- A. One way turn onto Rimrock from 27<sup>th</sup>
- B. Rimrock and Virginia Lane intersection
- C. Virginia Lane and Poly intersection
- D. Virginia Lane and Parkhill intersection
- E. Virginia Lane to Pioneer Park turnoff
- F. 3<sup>rd</sup> Street and Pioneer Park
- G. 3<sup>rd</sup> Street and Parkhill
- H. Avenue E and North 32<sup>nd</sup>
- I. Avenue C and 9<sup>th</sup> Avenue N. off 32<sup>nd</sup> Street

**Water Station:**

2-mile Start



Barricade Location

## Quality of Life Run Cleanup Plan

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1. Cleanup crews will be provided along the entire race route and at the finish line.
2. Volunteers man one water station at the beginning of the two-mile race. Once all runners have passed, the volunteers disassemble the water station and provide cleanup.
3. The finish line and Transwestern Parking Lot are cleaned up immediately following the end of the awards ceremony.
4. The one barricade used during the race is removed once all runners have passed. Additionally, all cones are picked up immediately following the awards ceremony.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/6/2010

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).

<b>PRODUCER</b> <b>STAR Insurance - Fort Wayne Office</b> <b>2130 East DuPont Road</b>  <b>Fort Wayne IN 46825</b>		<b>CONTACT NAME:</b> Janice Routt <b>PHONE (A/C, No, Ext):</b> (260) 467-5690 <b>FAX (A/C, No):</b> (260) 467-5691 <b>E-MAIL ADDRESS:</b> janice.routt@starfinancial.com <b>PRODUCER CUSTOMER ID#:</b> 00050950	
<b>INSURED</b>  <b>ROAD RUNNERS CLUB OF AMERICA/2011</b> <b>&amp; ITS MEMBER CLUBS</b> <b>7410 SKYLINE DRIVE</b> <b>FREDERICK MD 21702-3652</b>		<b>INSURER(S) AFFORDING COVERAGE</b> <b>NAIC #</b> <b>INSURER A: NATIONAL CASUALTY COMPANY</b> <b>11991</b> <b>INSURER B: NATIONWIDE LIFE INSURANCE CO.</b> <b>66869</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES**      **CERTIFICATE NUMBER: 2010 MEMBER CLUB**      **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			KRO 0000000130070	12/31/2010	12/31/2011	EACH OCCURRENCE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	<input checked="" type="checkbox"/> LEGAL LIAB. TO PARTIC.						PERSONAL & ADV INJURY \$ 2,000,000
	\$1,000,000						GENERAL AGGREGATE \$ NONE
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJ <input type="checkbox"/> LOC			A&M AGGREGATE \$5,000,000			ABUSE & MOLESTATION \$ 500,000
A	AUTOMOBILE LIABILITY			KRO 0000000130070	12/31/2010	12/31/2011	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS						\$
	<input checked="" type="checkbox"/> NON-OWNED AUTOS						\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DEDUCTIBLE						\$
	RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			N/A			OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
B	EXCESS MEDICAL & ACCIDENT (\$250 DEDUCTIBLE/CLAIM)			SPX 00000039016-00	12/31/2010	12/31/2011	EXCESS MEDICAL \$10,000
					12:01 A.M.	12:01 A.M.	AD & SPECIFIC LOSS \$2,500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
MEMBER CLUB CERTIFICATE

**CERTIFICATE HOLDER**      **CANCELLATION**

Quality of Life  
Attn: Amber Sundsted  
1643 Lewis Avenue, Suite 12  
Billings, MT 59102

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

John Lefever/JWE



1643 Lewis Avenue, Suite 12 ♦ Billings, Montana 59102  
Phone: 406.248.7145 ♦ Fax: 406.248.7478  
www.Billings.org ♦ BoardOffice@Billings.org

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June 16, 2011

Susan Wellbrook  
Public Works Department – Engineering Division  
2224 Montana Ave  
Billings, MT 59101

Dear Susan,

Please find enclosed a Right-of-Way Activity permit application and fee for the *Quality of Life* Run organized by the Billings Association of REALTORS®.

This is an annual event aimed at raising money for non-profits in our community. This year, the proceeds will benefit The First Tee Montana.

The *Quality of Life* Run is slated for Saturday, August 20, 2011, beginning at 8 a.m., with all activities concluded by 10 a.m. The race includes two starting points, one for the 5-mile run and another for a 2-mile walk/run. The 5-mile begins atop the Rims near Masterson Circle while the 2-mile starts near MSU-Billings.

The racing path – down the Rims via Airport Road, through the Pioneer Park area and ending at the Transwestern Parking Lot – will be marked with orange cones, but will not obstruct traffic. A barricade will be in place to prohibit traffic from entering Rimrock Road off of Airport Road until all runners have passed that point.

Thank you for your consideration of this permit. If you have any questions, please contact me at 248-7145 or by email at [amber@billings.org](mailto:amber@billings.org).

Sincerely,

A handwritten signature in black ink that reads "Amber Sundsted".

Amber Sundsted  
Government Affairs Director

