



# \* ROUTE CHANGE DUE TO OIL SPILL

## 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 Karen Sanford Gall

ORGANIZATION MAKING APPLICATION Big Sky State Games

PHONE 406-254-7426 406-670-0373

ADDRESS Box 7136 Billings MT 59103  
CITY STATE ZIP

EMAIL ADDRESS Ksg@bigskygames.org

APPROXIMATE TIME EVENT WILL:

Assemble 6:30 am Start 7:00 am Disband 10:00 am

DATE OF EVENT Saturday, July 16

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

The Big Sky State Games is "Montana's Olympics" with the 10K and 1/2 marathon taking place Sat. July 16. The original location on Theil Road by Laurel is closed due to the oil spill. The event will have approximately 250 runners. The 1/2 marathon starts at 7:00 am and the 10K begins at 7:30 am.

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

The event would start across from the Mardi Gras Casino in the Westbound/North lane of King Ave West. Participants would park at Montana Cycling and Ski and adjacent parking lots. Course would be predominantly on the bike path. See map.

BLOCK PARTY STREET LOCATION (IF APPLICABLE):

The <sup>Big Sky Ave</sup> Westbound North Lane will be closed off <sup>from Shiloh and King</sup> to approximately across from Beartooth bank. One lane will still be open. See map.

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

Volunteers will pick up ~~up~~ trash on the course.

**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 Karen Taylor DATE 7-8-11  
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

# NEW 10k and Half-Marathon Course for 2011

-  First Half - to the turnaround
  -  Second Half - from turnaround to finish
  -  10k turnaround
  -  Security
  - T Toilets
- H-17 COURSE GUARDS

