OFFICE USE ONLY:
Permit No:



CITY OF FRANKLIN EVENT PERMIT APPLICATION

Application is Due 90 **Days Prior** to Scheduled Event. Please read application carefully and fully complete each section. A non-refundable application fee of \$100 is due at time of filing.

	Note: Filing this application does not guarantee that your request will be granted.
	Please check street closure parade all that apply:
	☐ other special event ☐ beer served (separate permit required)
Plea	ase supply the following information. For additional space, use separate sheets of paper and attach to the application.
1)	Location requested (if Temporary Street Closure only, list major roads to be closed):
	Aspen Grove ParkLiberty ParkEastern Flank Battlefield ParkFieldstone FarmsPinkerton ParkHarlinsdale Farm Other: \(\sum_{Grid Grid Grid Grid Grid Grid Grid Grid
2)	Name/purpose of event: Winc Down main Street 15
3)	Date or dates of event: NOVember M 2015
4)	Time of Event: Mpm to 10 pm
5)	Time of Street Closure (if applicable): 3 Pm 1+0 Pm
	Set-Up Date/Time: 3 M Nov. 7
	*Note: Two (2) hours will be added before set-up time and two hours (2) will be added after tear-down to allow time for clean-up. Event is responsible for payment of Franklin Police Officers during this time. Read Additional Requirements section for more information.
6)	Name of Applicant and Organization Requesting Permit:
	Boys, 6,415 Clubs of Middle Tennessee
	a) Address: 129 West Towlkes Street Suite 1000
	b) Phone: 615-794-480° c) Cell: 615-554-230 P Fax: 615-794-9662
	e) E-mail address: dearothers & bacott. org
7)	Person in charge on day of event: Den Sc Carothers
	Cell: 45-554-2302 E-mail address: And rother Sa bacmt. or

	HISTORIC
8)	Name and Cell Number of at least two others available on day of event: FRANKLIN
	Name: Jan Junique Cell: 45-971-0770 E-mail address: derigan & bgcmt Name: Janwinnett Cell: 521-2015 E-mail address: juint & bgcmt
9)	DETAILED description of event (use additional sheets): Toud, and wine fasting from 5th Avenue to 3rd Avenue. Street is closed to 3rd.
10)	ENCLOSE A DETAILED MAP of event site, detailing any temporary or permanent structures, street closures, parking, etc. If applicable, list the location, blocks, streets, and/or intersections in which such event will occur. For large-scale events, map should be obtained from the City's GIS division.
11)	An estimated number of participants and an estimated number of attendees expected to attend during the course of the event:
12)	Please <u>attach a list</u> containing the names, addresses, and phone numbers of the Chairperson of the organization and all other persons involved in the management or control of organization and/or committee.
13)	Is your organization based in Williamson County? Circle Yes or No
	(if no, please state where:)
14)	Is your organization authorized to do business in Tennessee? Circle Yes or No
15)	Is your organization a tax-exempt organization as described by the Internal Revenue Code Section 501(c)(3) or a not-for-profit organization? Circle Yes or No. If yes, please attach copy of IRS tax exemption letter providing proof of status.
16)	Will you charge an admission/participation fee (including vendors)? If yes, please specify how much per person/vendor.
17)	Will any charity, gratuity, or offers be solicited or accepted during the event? Circle Yes or No.
18)	Is this event a fundraiser? Circle Yes or No. If yes, what organization will be benefactor of event? What percentage of funds will they receive?
	Middle Knnisser 100 10
19)	Will parking in the area of the event need to be restricted or prohibited? Circle Yes or No.



	HISTORIC
20)	Will any sound amplification equipment be used during the event? Circle Yes or No. If no, FRANKLIN please skip to Question #22.
21)	For what purpose will sound amplification be used (i.e. announcements, entertainment, etc.)?
22)	What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply.
23)	During what time period is sound amplification requested? 4 Pm -10 Pm
24)	If for entertainment, give details of entertainment being provided (i.e. number of musicians, type of music, amp wattage, etc.). Man Stage hand at Common Holling House Band on Holling Square Band on Holling Square Band on Holling Square Band on Holling Square Band on Holling Band on Holling Square Band on Holling Ban
25)	Will any stages, antisement attractions, or amusement rides, including inflatables, be erected for the event? Circle Yes or No. If yes, Applicant must give specific details as to the location and type of games/activities, i.e. inflatables, Horseshoes, relay races, etc. along with the name of the company providing the stages and/or activities. Applicant must also include a copy of that company's insurance certificate indicating coverage and listing the City of Franklin as additional insured. ***For stages, tents, inflatables, etc. constructed on site prior to the event, that date must be included on Certificate of Insurance provided to the City of Franklin. Stages MUST be removed from site at end of event. ***Rented inflatables/interactives that are set-up and manned by applicant must be included specifically in applicant's Certificate of Insurance.
26)	What, if any, vendors will be present at event? (i.e medical related, shirts, arts, etc.) Please provide detailed list. Use additional sheets.
27)	Will food, beverages, or merchandise be sold or given away? Circle Yes of No. If yes, clean-up is required. Please provide name of clean-up provider, contact, and phone number of person on-site during event. See Question #28.
	City of Frankin 501. d Wash and Street
28)	Events under 200 participants require a \$250 refundable security deposit at the time of approval. For events over 200, a \$1000 security deposit is required upon approval. If clean-up is not done properly, the organization requesting the permit will be fined (See Attachment A). Applicant's event coordinator or representative and a City of Franklin representative will conduct a Pre-Event meeting prior to event date for Pre-Event Check List Site Review. At the end of the event, a Post-Event

Franklin and organization requesting event.

Check List shall be completed by the Applicant's event coordinator, or representative, and a City of Franklin representative to re-assess the site for trash and damage, and to secure with caution tape and signage (provided by event group) any tents left for removal. Damage deposit will be refunded after a satisfactory Post Event Check List has been completed and signed off on by both the City of



- 29) *NOTE: Events that include deep frying cooking oil operations are required to have a grease pit on-site and contract with a grease waste hauler to handle the grease waste and removal of the grease pit. A copy of this agreement shall be filed along with this application. The primary event sponsor is required to remove all cooking grease from the site immediately after the event. Illegal dumping of cooking grease will be prosecuted. Please read Additional Requirements section of this application for more information.
- 30) Will you require a temporary water tap? Circle Yes or No. If yes, please list exact locations:
- 31) Will alcohol, beer, and/or wine be given away or sold? Circle Yes or No. If yes, a permit from the relevant board is required. Please read Additional Requirements section of this application for more information.
- Will your event include tents or other temporary structures, propane use, or open flames? Circle yes or no. Events using tents of size 20 x 10 or larger require permitting from Franklin Fire Department. Safety measures must be provided on all tents, especially those set-up prior to the actual event. Tents should be taken down the date the event has ended. Please read Additional Requirements section of this application for more information.
- 33) Attach Good Neighbor Letter and Mailing List used. *Please read Additional Requirements section of this application for more information.*

TITLE VI OF THE 1964 CIVIL RIGHTS ACT

"No person in the United States shall, on the ground of race, color, or national origin be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

The City of Franklin does not discriminate based on race, color or national origin in federal or state sponsored programs, pursuant to Title VI of the Civil Rights Acts of 1964 (42 U.S.C. 2000d). For more information or to file a complaint against the City of Franklin under Title VI of the 1964 Civil Rights Act, contact the Title VI Coordinator:

Risk Manager City of Franklin 109 Third Avenue South Franklin, Tennessee 37064 615.791.3277

The City of Franklin is committed to providing reasonable access and accommodations upon request for people with disabilities. Please call the Risk Management Department at (615)791-3277 for specific requests.



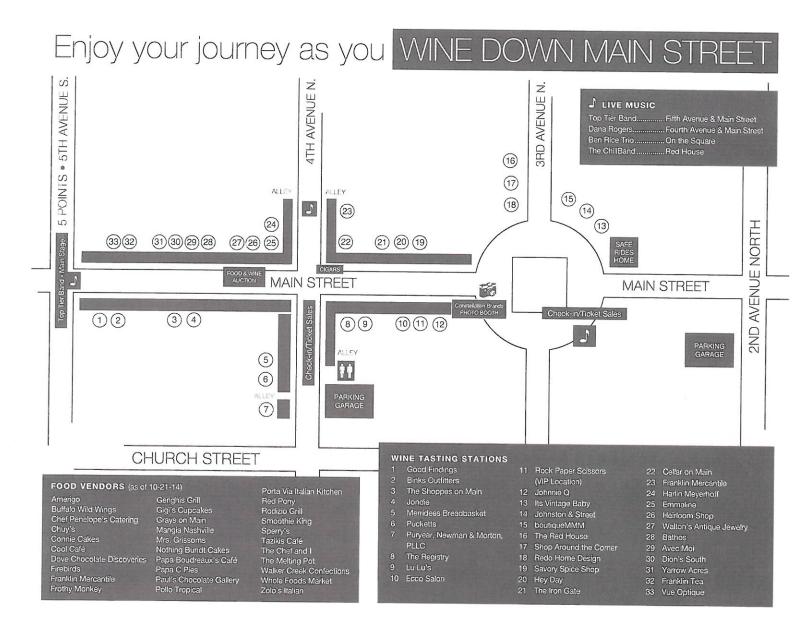
PLEASE READ ATTACHMENTS BEFORE SIGNING APPLICATION.

- 1) I/We agree to abide by all ordinances and regulations of the City of Franklin and all conditions placed upon the event by the City Administrator and the Board of Mayor and Aldermen.
- 2) I/We do swear or affirm that all of the information given in this application is true and complete.
- 3) I/We do hereby agree to assume the defense of and indemnify and save harmless the City, its aldermen, boards, commissions, officers, employees and agents, from all suits, actions, damages or claims to which the City may be subjected of any kind or nature whatsoever resulting from, caused by, arising out of or as a consequence of such event and the activities permitted in connection there with, and to submit a certificate of insurance prior to the event in an amount acceptable to the City Administrator.
- 4) I/We agree to provide a copy of this signed Event Application to any vendors, planners, and related parties associated with the event to ensure they are familiar with the guidelines set forth herein.
- 5) I/We understand that I/we assume the responsibility of the actions of any vendors, planners, and related parties for this event.
- 6) I/We understand that granting of Special Event Permit does not imply granting of other permit that is separately required.
- 7) The application for an event permit shall be filed not less than 90 days nor more than 364 days prior to the scheduled date of such event. Suggested filing is at least 180 days prior to scheduled event. Events should not be advertised or promoted until an event permit has been obtained from the City. Failure to file in a timely manner may result in denial of a permit.
- 8) The City reserves the right to require one or more City of Franklin police officers or other emergency personnel be present at any and all events that occur within the city limits. Please budget for this request at a rate of \$30 per hour at a minimum of two (2) hours.

BY: Which was be officer of organization) BY: Which was the state of	
Approved by the Board of Mayor and Aldermen on, 20	Return application to:
Dr. Ken Moore, Mayor	City Administrator's Office City Hall 109 Third Ave South Franklin, TN 37065
Eric S. Stuckey, City Administrator	615-791-3217 615-790-0469 (FAX)
If you have questions concerning your request, please call 615-550-6606.	T T



	FOR C	CITY USE	ONLY		1
Department	Date	Initials	Attach	Any Comment	ts
Administration			Comments:	Yes	No
Business Office			Comments:	Yes	No
Codes			Comments:	Yes	No
Engineering			Comments:	Yes	No
Finance			Comments:	Yes	No
Fire			Comments:	Yes	No
Information Technology			Comments:	Yes	No
Law			Comments:	Yes	No
Parks			Comments:	Yes	No
Planning			Comments:	Yes	No
Police			Comments:	Yes	No
Risk Manager			Comments:	Yes	No
Solid Waste			Comments:	Yes	No
Streets			Comments:	Yes	No
Water/Wastewater			Comments:	Yes	No



BOARD MEMBER BIOGRAPHICAL INFORMATION (Please indicate principal officers with *)

~	Name:Farzin Ferdowsi*	Street: 1728 Gen. George Patton	City: Brentwood	Zin:37027
	Employer: Management Resources Company	_	Telephone:615-972-9222	Vre on Board:12
7	Name: Lee W. Shaeffer*	Street:722 Newberry Road	City: Nashville	7in:37206
	Employer: Maverick Properties	Email:lee@maverick-properties.com	Telephone:615-292-7554	Yrs. on Board:13
ო	Name: Ward Wilson*	Street:150 4 th Avenue North, 3 rd Floor	City: Nashville	Zip:37219
	Employer: US Bank	Email:ward.wilson@usbank.com	Telephone:615-251-9253	Yrs. on Board:9
4	Name: Gregory Reidy*	Street:10 Cadillac Drive Suite 200	City: Brentwood	Zip:37027
	Employer: United Healthcare	Email:Gregory_d_reidy@uhc.com	Telephone:615-372-3466	Yrs. on Board:5
ည	Name: Peggy Smith	Street: 210 Gloucester Street	City: Franklin	Zip: 37064
	Employer: Retired	Email: peggysmith210@hotmail.com	Telephone: 615-591-9114	Yrs. on Board: 8
9	Name: John Wilson	Street: 604 Cattail Lane	City: Franklin	Zip: 37064
	Employer: Reliant Bank	Email: jwilson@reliantbank.com	Telephone: 615-221-2020	Yrs. on Board: 7
_	Name: Lisa Carson	Street: 617 Hillsboro Road	City: Franklin	Zip: 37064
	Employer: Buerger, Moseley & Carson	Email: Icarson@buergerlaw.com	Telephone: 615-790-6824	Yrs. on Board:9
∞	Name: Phil Fawcett	Street: 2000 Meridian Boulevard	City: Franklin	Zip: 37067
	Employer: Boyle, Inc	Email: pfawcett@boyle.com	Telephone: 615-370-5122	Yrs. on Board: 9
6	Name: Phillip Feemster	Street: 200 Valley Ridge Road	City: Franklin	Zip: 37064
	Employer: Franklin Synergy Bank	Email: Philip.feemster@franklinsynergy.com	Telephone: 615-807-1724	Yrs. on Board:3
-1	Name: Jim East	Street: 1201 Hourglass Court	City: Franklin	Zip: 37067
	Employer: Home Page Media Group	Email: eastjimeast@aol.com	Telephone: 615-771-8009	Yrs. on Board: 3
7	Name: Scott Jones	Street:107 Warren Place	City: Hendersonville	Zip:37075
	Employer:Dailchi Sankyo Pharmaceutical Company LLC	Email:scottjonesbac@gmail.com	Telephone:615-854-4403	Yrs. on Board:2 years
12	Name: Cathy Hardcastle	Street: 908 Fair Street	City: Franklin	Zip: 37064
	Employer: Community Volunteer	Email: NA	Telephone: 615-794-1904	Yrs. on Board: 1 year
13	Name: Derek Smith'	Street: 219 3 rd Avenue North	City: Franklin	Zip: 37064
	Employer: Attorney	Email: dksmith@dksmithlaw.com	Telephone:615-719-2354	Yrs. on Board: 6 months
4	Name: Toney Sutton	Street: 7301 Clearview Drive	City: Fairview	Zip: 37062
	Employer: Williamson County Sheriffs Dept.	Email: toneys@williamson-tn.org	Telephone: 615-574-8945	Yrs. on Board: 2 years
15	Name: Jon Cherry	Street: PO Box 233	City: Fairview	Zip:37062
	Employer: Big Dog Realty	Email: jcherry@realtracs.com	Telephone: 615-799-9494	Yrs. on Board: 2 years

BOARD MEMBER BIOGRAPHICAL INFORMATION (Please indicate principal officers with *)

16	Name: Rick Craven	Street: 2430 Douglas Glenn Lane	City: Franklin	Zip: 37064
	Employer: Dell, Inc	Email: rick_craven@dell.com	Telephone: 512-289-1125	Yrs. on Board: 9 mos.
17	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
18	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
19	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
70	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
71	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
22	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
23	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
24	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
22	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
26	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
27	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
28	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
73	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:
၉	Name:	Street:	City:	Zip:
	Employer:	Email:	Telephone:	Yrs. on Board:

Internal Revenue Service

Department of the Treasury

District Director Delaware-Maryland District

31 Hopkins Plaza, Baltimore, MD 21201

D

JULY 14, 1998

DOYS AND GIRLS CLUB OF MIDDLE TENNESSEE, INC. PO BOX 110268 NASHVILLE, TN 37222-0268 P.O. Box 13163, Room 817 Ballimore, MD 21203

Employer Identification Number: 62-0540402

Person to Contact: EP/EO Tax Examiner

Telephone Number: (410) 962-6058

Dear Sir/Madam:

This is in response to your inquiry received JULY 10, 1998, requesting a copy of the letter which granted tax exempt status to the above named organization.

Our records show that the organization was granted exemption from Federal Income Tax under section 501(c)(3) of the Internal Revenue Code effective SEPTEMBER, 1954.

We have also determined that the organization is not a private foundation because it is described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you under section 170 of the Code.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during the calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

You are required to file Form 990, Return of Organization Exempt from Income Tax, only if your gross receipts each year are normally more than \$25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the

A copy of our letter certifying the status of the organization is not available, however, this letter may be used to verify your tax-exempt status.

Because this letter could help resolve any questions about your exempt status, it should be kept in your permanent records.

Sincerely yours,

Paul M. Harrington

