



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 all that apply:	💢 street closure	□ parade				
	απ τη ατ αρριγ.	☐ other special event	💢 beer serv	ed (separate permit required)			
Ple	ase supply the following	information. For additional sp	ace, use separate	sheets of paper and attach to the app	lication.		
1)	Location request	ed (if Temporary Street Cle	osure only, list r	najor roads to be closed):			
	Aspen Grove Fieldstone Fa Jim Warren P	rmsPinkerto	n Park	Eastern Flank Battlefield Park or: Main Street from 1st to 5th.			
2)	Name/purpose of	event: Main Street Festiv	al				
3)	Date or dates of e	event: April 25-26, 2015	7-200-0-0-1				
4)	Time of Event: _1	0 am - 10 pm Saturday, Apr	il 25; 11 am - 6 p	m on Sunday, April 26			
5)	Time of Street Closure (if applicable): 5 am April 24 for sections of 4th Avenue N & S, 9 pm April 24 for a						
	Set-Up Date/Time	: 9 pm April 24	Tear-down	Date/Time: 8 pm April 26			
	*Note: Two (2) hours will be responsible for payment of	e added before set-up time and two ho of Franklin Police Officers during this ti	urs (2) will be added afte me. Read Additional Re	er tear-down to allow time for clean-up. Event is equirements section for more information.			
6)	Name of Applicar	it and Organization Reque	sting Permit:				
		lin Association / Heritage Fo	•	klin & Williamson County			
	a) Address: <u>134</u>	2nd Avenue North					
	b) Phone: <u>515-59</u>	1-8500 ext. 17 c) Cell: 6	18-841-7676	d) Fax:			
	e) E-mail address	kdial@historicfranklin.co	·m				
7)	Person in charge	on day of event: Krist	ta Dial				
	Cell: 618-841	-7676 E-mai l	address: kdia	al@historicfranklin.com			



8)	Name a	nd Cell Number of	at least tv	vo others avail	able on	day of event:	FRANKLI TENNESSEE
	Name:	Rene' Evans	Cell:	615-830-7367	_ E-mai	l address: revans	@historicfranklin.com
	Name:	Mary Pearce	Cell:	615-300-7218	_ E-mai	l address: mpear	ce@historicfranklin.com
9)		ED description of e	•		•	tages, 30 food ven	dors. kids' area
		venue South and be					
10)	closures	SE A DETAILED MA s, parking, etc. If app ent will occur. <i>For la</i> n.	licable, lis	t the location, bl	ocks, st	reets, and/or inters	ections in which
11)		nated number of part he course of the ever		ınd an estimated	d numbe	er of attendees ex	pected to attend
	130,00	00	T-7-7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	B-94444.4844.444.4		WWW.WW.W.	
12)	the orga	attach a list containi nization and all other ee. Attachment B					
13)	ls your c	organization based in	Williams	on County? Circ	le Yes	r No	
	(if no, pi	lease state where:)				
14)	ls your c	organization authoriz	ed to do b	usiness in Tenr	essee?	Circle Yes or No	
15)	501(c)(3	organization a tax-exe B) or a not-for-profit o on letter providing pr	rganizatio	n? Circle (Yes)			
16)	much pe \$300 for	charge an admission charge an admission charge an admission charge are charged and charged are charged and charge are charged an admission charge an admission charge an admission charge are charged an admission charge are charged an admission charged an admission charged an admission charged are charged an admission charged are charged an admission charged an admission charged are charged an admission charged are charged an admission charged are charged an admission charged are charged an admission charged an admission charged are charged an admission charged an	reė admis	sion, \$1,200 for	food ve	endors, \$3,000-\$20	0,000 for sponsors,
17)	Will any	charity, gratuity, or c	offers be s	olicited or accep	oted dur	ing the event? Cir	cleYes or No.
18)		vent a fundraiser? C ercentage of funds w					
	County v	will receive 100% of the	proceeds	of this event.			
10)	Will nort	king in the area of the	a avent n	and to be restric	tad or n	rohibited? Cirol	Voc ar No



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.)? Sound amplification will take place in the beer tent on Fourth Ave. S. and on stages on Fourth Ave. N. and on the Public Square. 22) What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply. Sound amplification is only to be used for festival announcements, approved and scheduled bands, dance groups and other approved entertainment and emergency notifications if necessary. 23) During what time period is sound amplification requested? 10 am - 10 pm Sat; 11 am - 6 pm Sun. 24) If for entertainment, give details of entertainment being provided (i.e. number of musicians, type of music, amp wattage, etc.). There are 2 stages continuously scheduled. Each uses 50 amps. 25) Will any stages, amusement 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 provide lists be removed from site at end of event. ***Rented inflatables/interactives that are set-up and for 25 & 26 manned by applicant must be included specifically in applicant's Certificate of Insurance. closer to the What, if any, vendors will be present at event? (i.e medical related, shirts, arts, etc.) Please 26) provide detailed list. Use additional sheets. 27) Will food, beverages, or merchandise be sold or given away? Circle (Yes) pr 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 Franklin Solid Waste Department

We will

event.

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 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 Franklin and organization requesting event. **\$1000 deposit on file.



- 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.
- Will you require a temporary water tap? Circle Yes or No. If yes, please list exact locations: Yes 3 locations: 4th & Main, 3rd Ave N & 3rd Ave S at Public Square
- 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 ves 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.
 - We will be using Downtown Franklin Association & Downtown Neighborhood Association email for notification, as well as all local media. This event is widely publicized.

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.
- 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:	<u> </u>
Approved by the Board of Mayor and Aldermen on, 20	Return application to:
Dr. Ken Moore, Mayor	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.	~ * * * ***********





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Note: Filing this application does not guarantee that your request will be granted. Please check ☐ street closure ☐ parade all that apply: gother special event □ beer served (separate permit required) Please 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 Park Liberty Park Eastern Flank Battlefield Park Fieldstone Farms Pinkerton Park Jim Warren Park Harlinsdale Farm Other: 2nd Avenue North behind Landmark Bank Name/purpose of event: Main Street Festival Carnival 2) April 23-26, 2015 Date or dates of event: 3) Time of Event: 5-10 p.m. Thursday, 5-11 p.m. Friday, 10 a.m.-11 p.m. Sat., noon-6 p.m. Sun. 4) 5) Time of Street Closure (if applicable): Set-Up Date/Time: 8 a.m. April 19 Tear-down Date/Time: starts at 6 p.m. April 26 and may go through Monday a.m.
*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: Downtown Franklin Association/Heritage Foundation of Franklin & Williamson County a) Address: 134 2nd Avenue North, Franklin, TN 37064 b) Phone: 615-591-8500 ext. 17 c) Cell: 618-841-7676 d) Fax: _____ e) E-mail address: kdial@historicfranklin.com 7) Person in charge on day of event: Krista Dial

E-mail address: kdial@historicfranklin.com

Cell: 618-841-7676



tame.	Rene' Evans	Cell: 615-830-7367 E-mail address: revans@historicfra
Name:	Mary Pearce	Cell: 615-300-7218 E-mail address: mpearce@historics
DETAIL	.ED description of	event (use additional sheets):
Carni	val to accompany M	Main Street Festival.
losure	s, parking, etc. If app	AP of event site, detailing any temporary or permanent structures, stroplicable, list the location, blocks, streets, and/or intersections in what large-scale events, map should be obtained from the City's (
divisio		raige-scale events, map should be obtained from the City's (
	nated number of pa he course of the eve	articipants and an estimated number of attendees expected to atte
ouring t	tie course of the eve	CIH.
60,0		GIR.
60,0 Please	00 attach a list contain anization and all othe	ning the names, addresses, and phone numbers of the Chairperson er persons involved in the management or control of organization and
60,0 Please the orga commit	00 attach a list contain anization and all othe tee.	ning the names, addresses, and phone numbers of the Chairperson
60,0 Please the orga commit	00 attach a list contain anization and all othe tee.	ning the names, addresses, and phone numbers of the Chairpersoner persons involved in the management or control of organization and in Williamson County? Circle (Yes) or No
60,0 Please the organized commits your fifted from the commits of	attach a list contain anization and all other tee. organization based in the lease state where:	ning the names, addresses, and phone numbers of the Chairpersoner persons involved in the management or control of organization and in Williamson County? Circle (Yes) or No
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60,0 Please the organite is your of the commit is your of the committee in th	attach a list contain anization and all other tee. organization based in the lease state where: organization authorized an anization a tax-exes or a not-for-profit of ion letter providing purcharge an admission person/vendor.	ning the names, addresses, and phone numbers of the Chairperson er persons involved in the management or control of organization and in Williamson County? Circle Yes or No ized to do business in Tennessee? Circle Yes or No xempt organization as described by the Internal Revenue Code Sectorganization? Circle Yes or No. If yes, please attach copy of IRS
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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.)? Some rides have amplified sound.				
22)	What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply.				
	Rides and games only.				
23)	During what time period is sound amplification requested? During stated times of event.				
24)	If for entertainment, give details of entertainment being provided (i.e. number of musicians, type of music, amp wattage, etc.). A list of rides will be provided from the carnival vendor. There is no				
	additional entertainment in the carnival.				

- 25) Will any stages, amusement attractions, or amusement rides, including inflatables, be erected for the event? Circle (es 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.
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- 27) Will food, beverages, or merchandise be sold or given away? Circle Yes or 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 Franklin Solid Waste. This site will need at least one dumpster. Carnival operator will handle collection of trash to the dumpster.
- 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 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 Franklin and organization requesting event.



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30)	Will you require a temporary water tap? Circle Yes or No. If yes, please list exact locations:

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- 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.
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BY: Date:	
(Signature and title – must be officer of organization)	
Appropriate but the Deput of Marine and All I	**************************************
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.	*

The Heritage Foundation Board Member List & Staff List Year 2014-2015

				Telephone		_		1st/2nd
		Mailing Address	Home	Work	Cell	Fax	e-mail	Term Ends
Brian	Beathard	704 Fair Street Franklin, TN 37064	656-4661		752-8628	800-513- 0173	brianbeathard@outlook.com	2015/2018
Julian	Bibb III	918 Fair Street Franklin, TN 37064	794-5076	782-2227		791-8481	julian.bibb@stites.com	2015/2018
Angela	Calhoun	1005 Scramblers Knob Franklin, TN 37069	794-5090		642-2890		anpcalhoun@mindspring.com	2014/2017
Sean	Carroll	1419 Clairmonte Circel Franklin, TN 37064	790-5909	415-7595	936-4544		seanpcarroll@gmail.com	2017/2020
Pam	Chandler	502 Braylon Circle Franklin TN 37064	790-0250		243-4404		pchandler@live.com	2017/2020
Josh	Denton	104 Battle Avenue Franklin, TN 37064	794-1454	921-4286	430-6444		identon@gsrm.com	2017/2020
Philip	Dial	102 Granville Road Franklin, TN 37064			931-334-4040		dialphilip@gmail.com	NG
Donna	Douglas				861-5501		donna.douglas@jackson.com	2017/2020
Bryan	Echols	5016 Jackson Lane Brentwood, TN 37027	661-8921		400-3123		jbechols@comcast.net	2014/2017
Connie	Haley	5205 Stillhouse Hollow Rd., Franklin 37064	791-5640		476-2557	591-1702	connietaylor8@gmail.com	2012/2015
Kelly	Harwood	3706 Estes Road Nashville, TN 37215	383-0052	472-1134	260-0170		keilyharwood@comcast.net	2014/2017
Craig	Holland	417 Doe Ridge Court Franklin TN 37067	599-2109	771-6484	210-1409		craig.holland@myfirstfarmers.com	2017/2020
Ann	Johnson	c/o300 Mallory Station Rd#C6, Franklin 37067	715-1800	771-6602	500-1234	771-6686	ai@wastetechservices.com	2012/2015
Rudy	Jordan	231 Second Ave. South Franklin, TN 37064	790-1400	791-4508	479-5920		rudyoldhouse@mindspring.com	2015/2018
Emily	Magid	1208 Hillview Lane Franklin TN 37064	595-8021		479-7936		emmyam@hughes.net	2017/2020
Andy	Marshall	94 East Main Street Franklin, TN 37064	595-9255	478-2216	478-6445		andy@puckettsgrocery.com	2015/2018
Bill	Powell	5395 Old Highway 96 Franklin, TN 37064	790-1940	390-4162	390-4162	790-0633	bilipoweli2@msn.com	2012/2015
Fred	Reynolds	510 South Margin Street Franklin, TN 37064	390-5982		390-5982		freynoids@rockcityconstruction.com	2013/2016
Bob	Roethemeyer	418 Main Street Franklin, TN 37064		791-9121	521-6789		AvecMoiFranklin@gmail.com	DFA
Marianne	Schroer	512 Boyd Mill Avenue	794-0668		519-5812		schroer.marianne@gmail.com	2016/2019
Allen	Sills	1067 Natchez Valley Lane, Franklin 37064	794-4393	875-7054			allen.sills@vanderbilt.edu	2016/2019
Joe	Walker	Public Square Franklin, TN 37064	498-4999	790-5100			imwalker@ftb.com	2014/2017

Executive Committee/Officers: President Joe Walker VP of Finance Fred Reynolds VP of Preservation Bob Roethemeyer VP of Main Street

Connie Haley Angela Calhoun VP of Membership & Development

Secretary

Andy Marshall VP of the Franklin Theatre Philip Dial President of Next Gen.

HF Staff:

Mary Pearce	Executive Director	mpearce@historicfranklin.com	591-8500	Ext. 15
	Membership & Development	kwilliams@historicfranklin.com	591-8500	Ext. 18
Wendy Dunavant	• • • • • • • • • • • • • • • • • • • •	wdunavant@historicfranklin.com	591-8500	Ext. 13
Krista Dial	Festival Manager	kdial@historicfranklin.com	591-8500	Ext. 17
Rick Warwick	Historian	rwarwick@historicfranklin.com	591-8500	Ext. 14
Rene Evans	Vendor Relations Manager	revans@historicfranklin.com	591-8500	Ext. 11
Linda Childs	Office Manager	lchilds@historicfranklin.com	591-8500	Ext. 16

Theatre Staff:

Dan Hays Director dan@franklintheatre.com 351-4832 Joseph Logdson Technical Director joseph@franklintheatre.com 473-3634 Dolly Chandler Evan Freeze Program Director/Marketing dolly@franklintheatre.com evan@franklintheatre.com 478-1882 Brian Solomon brian@franklintheatre.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/09/14

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). CONTACT NAME: PRODUCER PHONE (A/C, No, Ext): E-MAIL Northeast Insurance Center FAX (A/C, No): (239) 244-9777 (860) 627-8695 P O Box 151868 ricm@neinscenter.com ADDRESS Cape Coral, FL 33915 INSURER(S) AFFORDING COVERAGE Phone (239) 244-9777 Fax (860) 627-8695 United States Fire Insurance Co. INSURER A 21113 INSURED INSURER B J & J ROBERTS INC Gforce games INSURER C 338 HOGANS BRANCH RD INSURER D INSURER E GOODLETTSVILLE, TN 37072 INSURER F CERTIFICATE NUMBER: USP162656 **COVERAGES 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. ADDLSUBR INSR LTR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER LIMITS GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) s 1,000,000,00 COMMERCIAL GENERAL LIABILITY \$ 300,000.00 CLAIMS-MADE V OCCUR SRPGPM-101-0414 MED EXP (Any one person \$ 5.000.00 Α 09/13/2014 09/13/2015 PERSONAL & ADV INJURY 1,000,000.00 3,000,000.00 GENERAL AGGREGATE \$ GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ 3,000,000.00 POLICY PROT \$ AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) ANY AUTO BODILY INJURY (Per person) \$ ALL OWNED SCHEDULED BODILY INJURY (Per accident) s AUTOS NON-OWNED PROPERTY DAMAGE (Per accident) HIRED AUTOS S \$ UMBRELLA LIAB OCCUR EACH OCCURRENCE \$ **EXCESS LIAB** CLAIMS-MADE AGGREGATE \$ DED RETENTION \$ \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?
(Mandatory in NH) E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT \$ SRPGPM-101-0414 Sexual Abuse and Molestation 09/13/2014 09/13/2015 E occ\$100,000 gen aggregate \$100,000. DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) NFLATABLE RENTALS WITH MECHANICAL BULL AND CLIMBING WALL, SPIDER BUNGEE AND 4 STATION EURO BUNGEE Certificate holder (landlord) and Heritage Foundation of Franklin & Williamson Count are listed as an additional insured in regards to gen liab Date: 10/25/2014 Location: 4th avenue north frankln, tn CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE City of Franklin THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. 109 3rd Ave. S. Franklin, TN 37067 **AUTHORIZED REPRESENTATIVE**

1ST AVENUE



