



# Board of Public Works and Safety

## Agenda Item

## Cover Sheet

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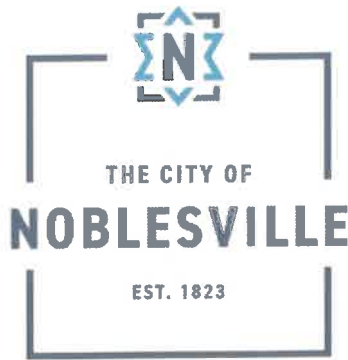
**MEETING DATE:** February 27, 2024

- Consent Agenda Item
- New Item for Discussion
- Previously Discussed Item
- Miscellaneous

**ITEM #:** 2

**INITIATED BY:** René Gulley

- Information Attached
- Bring Paperwork from Previous Meeting
- Verbal
- No Paperwork at Time of Packets



**TO:** Noblesville Board of Public Works and Safety

**FROM:** René Gulley, Operations Manager Street Department

**SUBJECT:** Board to consider street closures, alley activation, and parking reservations for the annual HATCH Fest

**DATE:** February 27, 2024

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Noblesville Creates is requesting to close N. 8<sup>th</sup> Street between Conner and Logan Streets and activate all three pedestrian alleys for this year's annual HATCH Fest. This year's event will be held on Saturday, June 15<sup>th</sup> from 8 am to 7 pm, which is a combined event with the St. Michael's Strawberry Festival and SERVE Noblesville's F.U.N. Fest. There will be activities, performances and music in the alleys with themes celebrating Juneteenth, Technology and Heritage. Vendors will also have popup tents and tables on the Courthouse lawn and in the alleys. They are also requesting the 2 northmost parking spaces on the west side of N 9<sup>th</sup> Street between Logan Street and Conner Street.

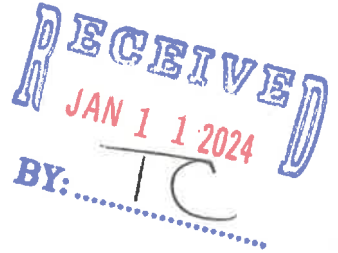
**The committee recommends the Board of Public Works approve this street closure, alley activation, and parking reservation request.**



Tiana Chamberlin

ENCOR-0019-2024

**From:** Sent on Behalf of Street Department <no-reply@egovnotices.com>  
**Sent:** Wednesday, January 10, 2024 2:46 PM  
**To:** Street Department  
**Subject:** Special Event Encroachment Permit Submitted - Receipt #2024-MA92LC



A citizen submitted the following information for one or more item(s) for which you are on the notification list. The information sent to the citizen is as follows.

## Confirmation

Thank you for submitting an online Special Event Encroachment Permit. You will be contacted following a review of this application.

*\*This is required as part of the permit application.\* Please email [nsd@noblesville.in.us](mailto:nsd@noblesville.in.us) with a map detailing the location of event (site map), and an event agenda or planned activities. If your event contains a program of various locations, your proposed route must also be attached.*

**Confirmation:** I agree to the terms and conditions listed above.

## ENCROACHMENT LOCATION INFORMATION

**Address or Special Event Location:** North, South, East Alleys; Logan Street from 8th to 9th Street (we know this may need to adjust because of road construction), parking spaces on the square (2 by CCHA and 2 across from Noble Coffee)

## APPLICANT CONTACT INFORMATION

**Organization Name:** Noblesville Creates  
**Contact Name:** Ryan Shelton  
**Address:** 107 S. 8th Street, Noblesville, IN 46060  
**Phone Number:** 317-900-1272  
**Email:** [rshelton@noblesvillecreates.org](mailto:rshelton@noblesvillecreates.org)  
**Non-Profit:** Yes

## EVENT LOGISTICS

**Event Name:** HATCH Fest (Hamilton County Arts, Technology, Craft, and Heritage Festival)  
**Type of Event:** Other  
**If other, please explain:** Arts Festival  
**What is the purpose of the event?:** HATCH Fest brings in vendors throughout the Downtown Noblesville area to sell their wares. Noblesville Creates will assign booth areas for each vendor. There will also be a celebration of Juneteenth, Technology, and Heritage in the alleys with activities,

performances, and music. This festival is connected with Strawberry Festival.

**Event Requirements (Click All That Apply):** Event Barricades; Trash Pickup; Park Facilities

**Event Starting Date & Time:** 06/15/2024 at 11:00:00 AM

**Event Ending Date & Time:** 06/15/2024 at 05:00:00 PM

**Setup Date & Time:** 06/15/2024 at 08:00:00 AM

**Tear Down Date & Time:** 06/15/2024 at 07:00:00 PM

**Total number of anticipated participants (including volunteers, spectators, runners, etc):**  
4,000

**Is this a first time event for you or the sponsoring organization at this location?:** No

**Do you plan to erect temporary structures such as stages, tents, booths, tables, bounce houses, etc for this event?:** Yes

**\*If yes, please describe::** Each vendor would have a tent and tables. The alleys will also have tents and tables.

To stay up to date you can view the status of this item [here](#).

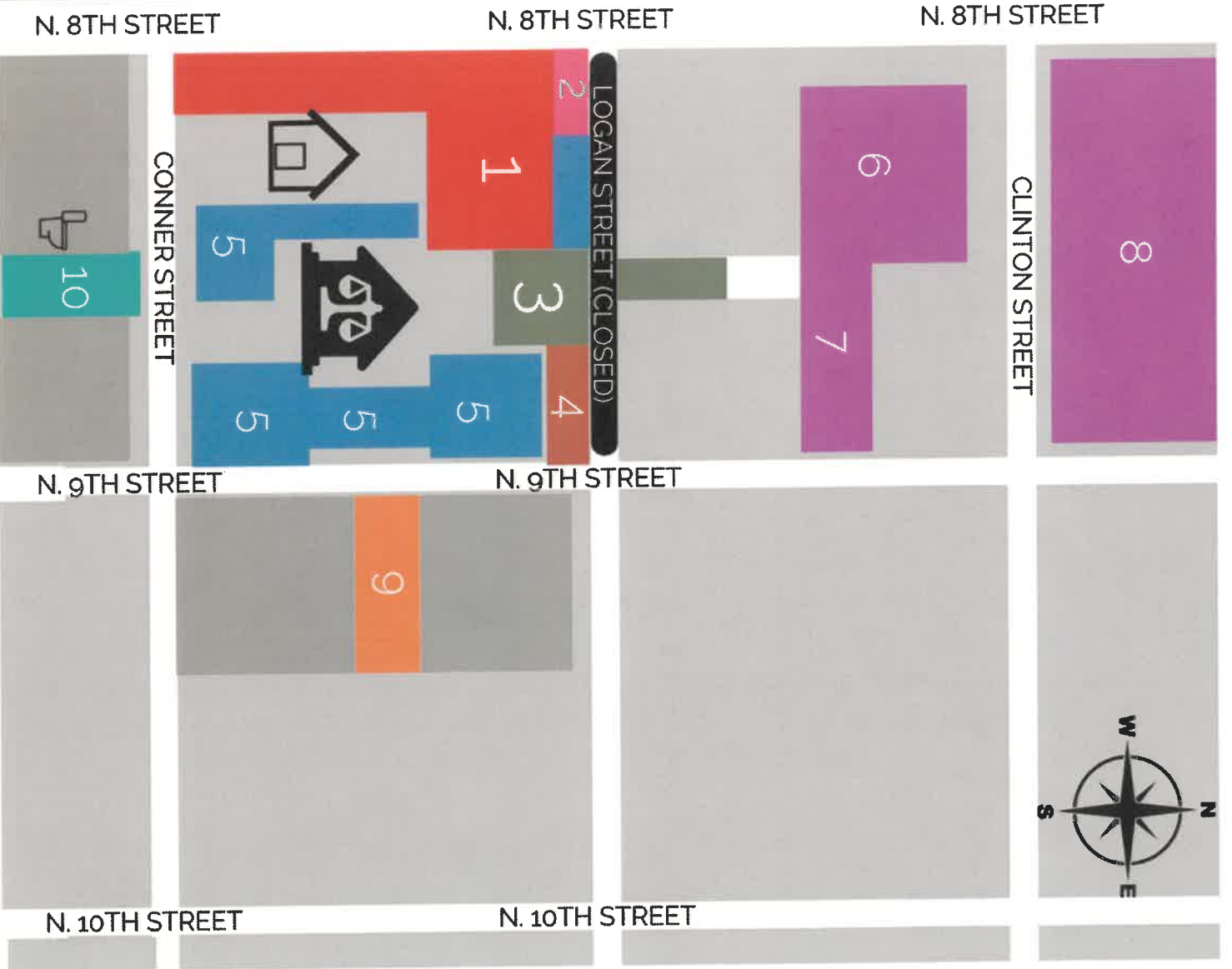
[Noblesville, IN](#)



# HATCH FEST

JUNE 17, 11 A.M. - 5 P.M.

- 1 St. Michael's Strawberry Fest
  - 2 FUN Fest
  - 3 Juneteenth Celebration
  - 4 Kid Entrepreneur
  - 5 HATCH fest Vendors
  - 6 Vendor Parking (open lot)
  - 7 Vendor Parking (Orange Lot)
  - 8 Visitor Parking (County Garage)
  - 9 Heritage Alley with HEPL & HamCo Bicentennial
  - 10 Tech Alley with Battle Bots & NHS Robotics
- Hamilton Co. Courthouse
  - Historic Sheriff Residence
  - Public Restroom Location

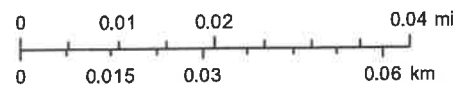


# HATCH Fest



2/14/2024, 2:45:34 PM

1:1,200



centerlines

Parcels





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/22/2024

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> SHEPHERD INSURANCE LLC/PHS 36212003 The Hartford Business Service Center 3600 Wiseman Blvd San Antonio, TX 78251	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): (866) 467-8730		<b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b>		
<b>INSURED</b> NICKEL PLATE ARTS INC 107 S 8TH ST NOBLESVILLE IN 46060-2608	<b>INSURER A:</b> Twin City Fire Insurance Company		<b>NAIC#</b> 29459
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
	<b>INSURER F:</b>		

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **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/Y YYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY	X		36 SBA IB8700	01/01/2024	01/01/2025	EACH OCCURRENCE	\$1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
	<input checked="" type="checkbox"/> General Liability						MED EXP (Any one person)	\$10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$1,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC						GENERAL AGGREGATE	\$2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	\$2,000,000
A	AUTOMOBILE LIABILITY			36 SBA IB8700	01/01/2024	01/01/2025	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	ANY AUTO						BODILY INJURY (Per person)	
	<input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB			36 SBA IB8700	01/01/2024	01/01/2025	EACH OCCURRENCE	\$1,000,000
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$1,000,000
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000							
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH)						E.L. EACH ACCIDENT	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE -EA EMPLOYEE	
							E.L. DISEASE - POLICY LIMIT	
A	EMPLOYMENT PRACTICES LIABILITY			36 SBA IB8700	01/01/2024	01/01/2025	Each Claim Limit	\$10,000
							Aggregate Limit	\$10,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Those usual to the Insured's Operations. Certificate holder is an additional insured per the Business Liability Coverage Form SS0008 attached to this policy.

<b>CERTIFICATE HOLDER</b> City of Noblesville 16 S 10TH ST NOBLESVILLE IN 46060	<b>CANCELLATION</b> 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 <i>Susan L. Castaneda</i>

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