



**TO:** Noblesville Board of Public Works and Safety  
**FROM:** René Gulley, Operations Manager Street Department  
**SUBJECT:** Board to consider parking spaces on Logan Street for the annual Lions Club  
Porch Chop Dinner  
**DATE:** May 28, 2024

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Attached you will find a request from Julia Kozicki, on behalf of the Noblesville Lions Club for their annual porch chop dinner which will be held on Friday, May 31<sup>st</sup> and ending on Saturday, June 1<sup>st</sup> with a pancake breakfast. The Lions Club is requesting to use the first three (3) parking spaces on the south side of Logan Street just east of 8<sup>th</sup> Street. They have requested to reserve these spots on Friday from 8 am to 8 pm and on Saturday from 6 am to 12 pm.

**Committee recommends the Board of Public Works approve the encroachment permit application.**

## Tiana Chamberlin

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**From:** Sent on Behalf of Street Department <no-reply@egovnotices.com>  
**Sent:** Thursday, May 23, 2024 1:50 PM  
**To:** Street Department  
**Subject:** Special Event Encroachment Permit Submitted - Receipt #2024-DQJRIX



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:** 1 Courthouse Square, Noblesville, Indiana

### APPLICANT CONTACT INFORMATION

**Organization Name:** Noblesville Lions Club  
**Contact Name:** Julia Kozicki  
**Address:** 925 Queensbury Dr, Noblesville, IN 46062  
**Phone Number:** 317-294-8064  
**Email:** [julia@thekozickis.org](mailto:julia@thekozickis.org)  
**Non-Profit:** Yes

### EVENT LOGISTICS

**Event Name:** Lions Club Pork Chop Cookout on the Square  
**Type of Event:** Fundraiser  
**If other, please explain:**  
**What is the purpose of the event?:** This is our annual pork chop dinner fundraiser. We have already received permission to place a tent on the courthouse lawn and are seeking 3 parking spaces on 8th Street adjacent to the tent  
**Event Requirements (Click All That Apply):** No Additional Requirements  
**Event Starting Date & Time:** 05/31/2024 at 08:00:00 AM

**Event Ending Date & Time:** 05/31/2024 at 08:00:00 PM

**Setup Date & Time:** 05/30/2024 at 06:00:00 PM

**Tear Down Date & Time:** 06/01/2024 at 11:30:00 AM

**Total number of anticipated participants (including volunteers, spectators, runners, etc):**  
500

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

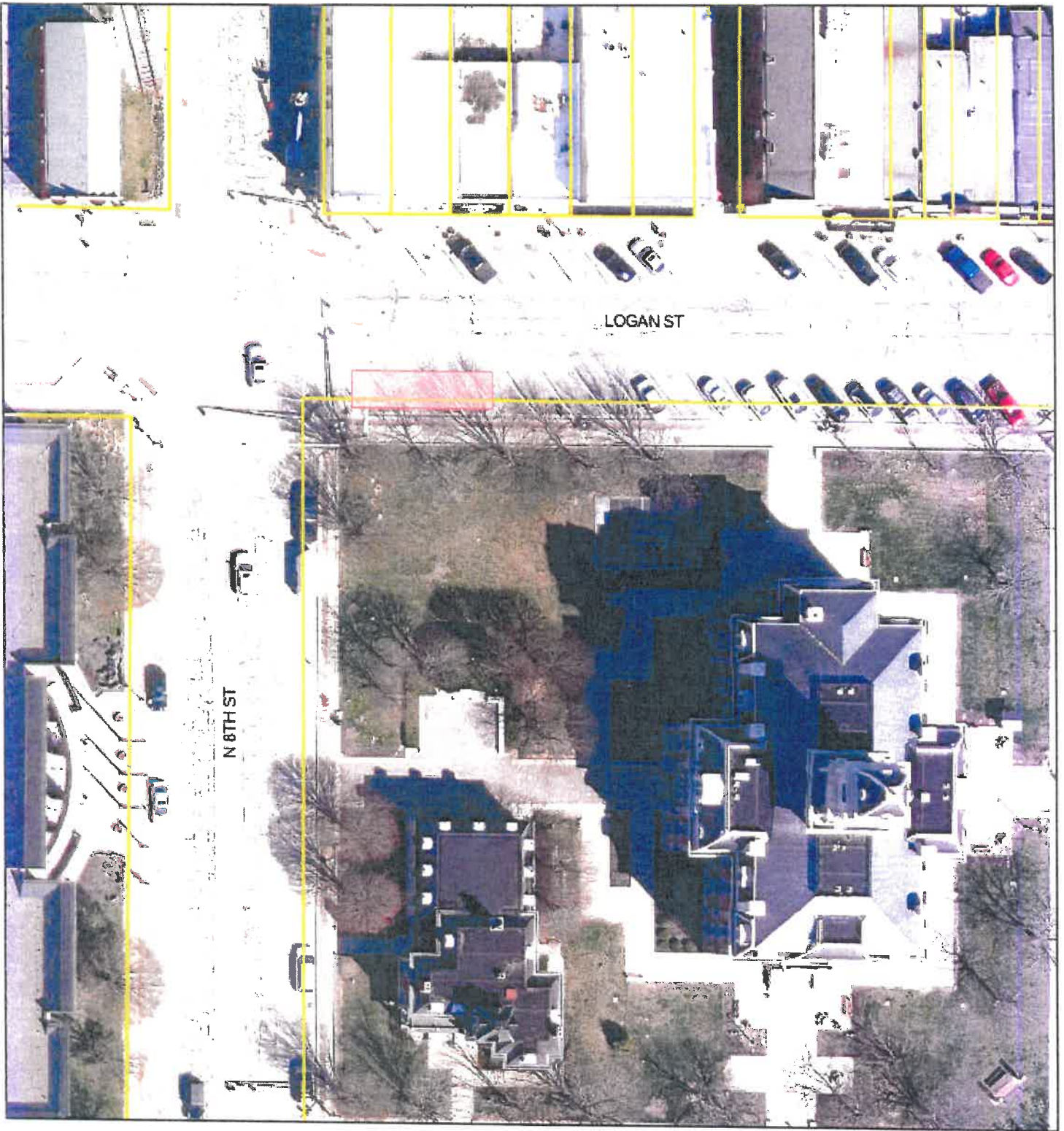
**Do you plan to erect temporary structures such as stages, tents, booths, tables, bounce houses, etc for this event?:** Yes

**\*If yes, please describe::** Yes, we have a tent rented to place on the northwest corner of the courthouse block.

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

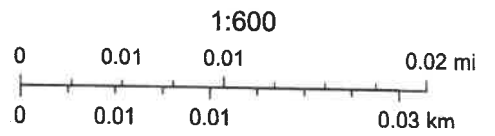
[Noblesville, IN](#)

# Lions Club Pork Chop Cookout on the Square - 3 parking spaces



5/23/2024, 3:23:52 PM

centerlines  
Parcels







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/23/2024

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).

PRODUCER  DSP Insurance Services, Inc. 1900 E. Golf Road, Suite 650 Schaumburg, IL 60173	CONTACT NAME: John Adams	FAX A/C. No: 847-934-6186	
	PHONE (A/C. No. Ext): 1-800-316-6705	E-MAIL ADDRESS: lionsclubs@dspins.com	
INSURED  Julia Kozicki Noblesville Indiana	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: ACE American Insurance Company		22667
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		

**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/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Agg. Per Named Insured is \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			HDO G48333205	09/01/2023	09/01/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 10,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			ISA H10778906	09/01/2023	09/01/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU-TORY LIMITS	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

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

Provisions of the policy apply to the named insureds participation in the following activity during the policy period shown above: Noblesville Lions Club Pork Chop Dinner, June 2-3, 2023

\*\*\* City of Noblesville \*\*\*

is included as an Additional Insured(s), but only with respect to General Liability arising out of the issuance of permit(s) to the Insured shown above and not out of the sole negligence of said additional insured.

PROVISIONS OF THE POLICY DO NOT APPLY TO THE SALE OR SERVING OF ALCOHOLIC BEVERAGES

**CERTIFICATE HOLDER****CANCELLATION**

City of Noblesville  
16 S. 10th St.  
Noblesville Indiana 46060

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