# A G E N D A THE SEVENTH MEETING OF THE SPECIAL EVENTS COMMITTEE

COMMITTEE ROOM 304 CITY HALL

3:00 P.M.

**OCTOBER 2, 2019** 

### **DISCLOSURES OF INTEREST**

#### **MINUTES**

Confirmation of the minutes of the meeting held on September 4, 2019.

## **PETITIONS AND COMMUNICATIONS**

RTL St. Thomas Life Chain - St. Thomas & District Right to Life - October 6, 2019 Pages 2-8

<u>Tree Lighting Celebration – DDB – November 15, 2019</u> Pages 9-16

## **UNFINISHED BUSINESS**

#### **Upcoming Events**

- The Gift of Baby Elena Amanda Zielinski October 5, 2019
- Santa Claus Parade Optimist Club November 16, 2019
- Light the Night November 16, 2019 to January 5, 2020

#### **NEW BUSINESS**

#### **ADJOURNMENT**

page 4

SECTION 1: EVENT AN	D OKGANIZER INFORMATION
Event Name:	RTL St. Thomas Life Chain
Date(s):	October 06, 2019
Start Time:	1:00 P.M. 2:00 P.M.
Location(s):	Talbot Street
Organizing Group:	St. Thomas & District Right To Life
•	Charlie DiMaria #2:John Van Eyk
Contact Name #1:	ling Address: 468 Talbot St.
Street Address:	
Town/City:	Province: Postal Code:
Phone Number #1:	519-633-5433
Email Address:	sthomasrtl@bellnet.ca
Expected Attendance:	Number of Event Personnel/Volunteers: 5
Location and number	of washrooms in place: Along both sides of Talbot Street
	oly Angels Catholic Church.
Location and Number	of Parking Spaces: Holy Angels Parking Lot
Number of Accessible	Washrooms: Number of Accessible Parking Spots:
Please describe your s	pecific event. Attach additional sheets as necessary. Participants will stand
	g both sides of Talbot Street
Between Sc	outhwick and White Street
holding sign	s promoting Life for the unborn.
SECTION 2: FOOD AND	BEVERAGE

Will food/beverage of any kind be available at this event? Yes  $\square$  No If Yes, you must notify Southwestern Public Health at 519-631-9900 at least 2 weeks prior to the event. No 🗹 -3-

SECTION 3:	<b>PERSONAL</b>	SERVICES
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	Will there be personal services of any kind offered to the public at this ever if Yes, you must notify Southwestern Public Health at 519-631-9900 at least	nt? Yes [ : 2 weeks prior	N to the event	o <b>☑</b> t.
	Personal services include but are not limited to barbering, manicures, pedic piercing.	ures, esthetics	, tattooing a	nd
	SECTION 4: TENTS			
	Will there be an indoor or tent covered area used for public assembly as part		_	_
	If Yes, please specify the number and size of tents.	Yes [		o 🗹 —
	If the tents are larger than $60m^2$ cumulatively, a building permit is required to Services. Please attach a copy of the Permit and provide the Permit Number	through Planni r:	ng & Buildin	g
	Please note that Indoor or Tent covered areas for public assembly must conrequirements enforced by Southwestern Public Health. Please contact the Trinformation on how to meet these requirements.	nply with Smok obacco Enforce	e Free Ontai	rio Act er for
	SECTION 5: SERVING OF ALCOHOL			
	Will alcohol be consumed at the event?  If Yes, you must review and meet the requirements of the City's Alcohol Poli Rec and Property Management Department for Special Events taking place of	Yes [ cy available th on municipal p	rough the Pa	erks,
	You must also comply with the Alcohol and Gaming Commission of Ontario (responsible to notify and provide any pertinent information required under obtaining a Special Occasion Permit. You must adhere to the Liquor Licence ensure access is given to the Police and AGCO Inspectors for the purposes of copy of the liquor permit with this application. If utilizing the services of a calendorsements to provide off — premises beverage services, organizers shall sconfirming date/time/location/services as well as a copy of the establishment	the AGCO guid Act and its Reg Finspections. P Iterer with all t Supply a letter	elines for ulations and lease submi- he required from the lice	l t a
	The area where alcohol is being served has to have a 36" (0.9m) high barrier, is a no staking policy in all of the City's Parks, Recreation and Property Mana	/partition. Plea gement faciliti	ise note that es.	there
	SECTION 6: MUNICIPALLY SIGNIFICANT EVENT		*	
	If you wish to apply for a "Special Occasion Permit," through the Alcohol and (AGCO), you must obtain a letter of approval from City Council, declaring you by submitting the request to the City Clerk's Department. Please note that suweeks.	ır event "muni	cipally signif	icant",
,	Will you be requesting that City Council declare your event a "Municipally Sig			
1	SECTION 7: MUSIC / NOISE	Yes 🗌	No 🗹	
,	Will there be a concert or musical entertainment as part of the event?	Yes 🗍	No 🗹	

-4-

If Yes, please note that the use of sound reproduction devices is authorized between the hours of 8:00 a.m. and 11:00 p.m. so long as the Police are satisfied that said devices are being "used in a reasonable manner" and not intolerably high. It is the responsibility of the organizers to obtain any applicable musical licencing through SOCAN for events not taking place in a City facility.

Please note that if utilizing a temporary stage structure, regulations are found under the Occupational Health and Safety Act and enforced by the Ministry of Labour. A resource document for event organizers can be found on the Special Event Permits page on the City of St. Thomas website.

#### **SECTION 8: ANIMALS**

SECTION D: ANIMALS				
Will there be a Petting Zoo or Animals at t If Yes, the Southwestern Public Health mu are not permitted in the Animal Control By Law must be approved by City Council. Ple Please note that such approval may take s	st be notified of the ev y-Law 71-2011, an App ease attach a copy of th	lication for Ten	nporary Exempt	ion to the Rv.
SECTION 9: ROAD CLOSURES / TRAFFIC FL	OW CHANGES			
Are you anticipating any road closures or t	raffic flow changes?		Yes 🗆	No 🗹
If Yes, please describe the road closure red of Way Occupancy Permit and City Council approval may take several weeks.	approval is required for	or all road closu	ires. Please note	osure. A Right e that
Please attach a copy of the Right of Way O if the event is a Parade / Run / Walk / Pass under the Special Events page on the City v	through Sporting Even	t, please refer t	to the city roads	map located
			10	
Do you require traffic control? If Yes, please contact the St. Thomas Police	Services at (519) 631-1	1224 ext. <b>41</b> 77.	Yes 🗆	No <b>☑</b>
PLEASE NOTE: Marshalls, volunteers and sp can direct traffic pursuant to the Highway T Have you contacted the Env Services Depar	raffic Act.		rect traffic. Only	the police
The second and and our vices pepar	Barricades	Yes	No 🗆	N/a 🖼
	No Parking Signs		No 🗆	N/A ☑
	Detour Signing	Yes 🗌	No 🗍	N/A 🗹
		Yes 🔲	No 🔲	N/A 🗹
	Page 4 of 7			

-5-

## **SECTION 10: MUNICIPAL FACILITIES**

and Property Management staff once the	organizers will need to arra Special Events Permit App	ange an onsit plication has	e meeting with been approved	ı Parks, Rec
Have you contacted Parks and Recreation	staff about your event?	Yes 🗌	No 🗌	 N/A ☑
Have you rented a pavilion/facility and sig	gned a permit?	Yes 🔲	No 🖂	N/A 🗹
If yes, please provide the location of the r	ental and attach a copy of	the permit.		
Do you require additional picnic tables or and Property Management Dept and that	garbage cans? Please note delivery/pick up is the res	e availability i sponsibility of	is at the discret f the event orgi	ion of the Parks, Rec anizer.
		Yes 🗌	No 🔲	N/A 🗹
If Yes, how many are you requesting? #	of Picnic Tables:	# of Garl	bage Cans:	·
Have you made arrangements with Enviro	nmental Services staff for	recycling co	ntainers and co	llection?
		Yes 🗌	No 🗌	N/A ☑
Will you require municipal support for:	Water Hydro	Yes □ Yes □	No □ No □	N/A ☑ N/A ☑
Please note that all equipment and extensions certification body under the Ontario Electrification body under the Ontario Electrification body under the Ontario Electrification body under the Number:  If required, have you obtained a Hydrant (	ctrical Safety Code or hav Electrical Safety Authorit	e been inspe	cted by the El	ectrical Safety
f Yes, please attach a copy of the Permit a	and provide the Permit Nu	mber:		_
SECTION 11: ACCESSIBILITTY				
As an event organizer, it is your respons Accessibility for Ontarians with Disability requirements to meet for accessibility. displayed throughout the event venue to washrooms and parking. Although not requian to the Municipal Accessibility Advisor	les Act (AODA). Organizates Please note that direct indicate the barrier-free uired, the Special Events (	itions with a ional signage path of trav Committee re	it least one eigeneeds to be el and location ecommends sul	mployee have prominently of accessible
SECTION 12: OTHER SERVICES/RESOURCE	<u>s</u>			ø'
Security: Has a privately licenced security f f Yes, what company and how many secur			Yes 🗆	No 🗹
First Aid: For events with an anticipated at equired to be retained. Have you confirme		00 people, Fi	rst Aid services	
f Yes, please attach documentation provid		_	· · · · —	N/A 🗹

-6-

Ambulance: Has Emergency Medical Services (Ambulance Service) been contacted planned emergency access to the site?	regarding your Yes □	event and No 🗹
Fireworks: Will there be fireworks as part of your event?  If Yes, a permit for exhibition fireworks is required through the Fire Department.	Yes 🗌	No 🗹

#### **SECTION 13: SIGNATURE**

That the information contained in this application and any documentation, including reports, and drawings, provided in support of the application, by myself, my agents, consultants and solicitors, constitutes public information and will become part of the public record. As such, and in accordance with the provisions of the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c.M.56, I hereby consent to the City of St. Thomas making this application and its supporting documentation available to the general public, including copying and disclosing the application and its supporting documentation to any third parties upon their request.

(Signature of Individual Completing this Application)

(Date completed)

Office Use Only: Application Received: Aug 29, 2019

-7-

#### **SECTION 14: INSURANCE**

A Certificate of Insurance is required providing proof of \$5,000,000 in insurance coverage, including the naming of the City of St. Thomas as an Additional Insured under the corresponding policies. A copy of the required insurance MUST be submitted a minimum of two weeks prior to the start of the event. The Special Events Committee reserves the right to impose additional requirements and increased insurance coverage for large community events.

The provision of the completed and signed Statement of Indemnification below is also required.

Please note that an approved event may be cancelled should insurance coverage not be provided and may be altered or cancelled as a result of an emergency situation.

STATEMENT OF INDEMNIFICATION		
RTL St. Thomas Life Chain	ST. Thomas	s & District Right to Life
(Event Name)		(Organizing Group)
shall indemnify and save harmless The Corporat law responsible from any and all liabilities, dama	ion of the City of St. The ages, costs, claims, suits	omas and all persons for whom it is a or actions arising out of:
any damage to property including loss of use the death resulting at any time there from, occasion	ereof, and any injury to ned by any act or omissi	any person or persons, including ons of
RTL St. Thomas Life Chain	nized by ST. Thoma	as & District Right to Life
(Event Name)		(Organizing Group)
the premises or any part thereof arising from or damage or injury is due to the act, default or neg officers, agents, servants, employees, contractor Witness:  Name (Print):  Mel KOMO	gligence of The Corpora	tion of the City of St. Thomas, its
	Address:	23 Rosemount Cres.
	Telephone:	519-633-2322
	Date:	August 29, 2019
	Event Name:	RTL St. Thomas Life Chain
	Organizing Group:	ST. Thomas & District Right to Life
	Event Dates:	October 06, 2019

-8-

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## CERTIFICATE OF LIABILITY INSURANCE

This certificate is issued as a	matter of information only, and confers no rights upon the certificate holder and imposes no liability on the insurer	
	his certificate does not amend, extend or alter the coverage afforded by the policies below.	•

545 Talbot Street St Thomas, ON	St. Thomas & District Right-To-Life 488 Talbot St.	-0.77.85
	2	
	St. Thomas, ON	
POSTAL NSP 3V7	POSTAL N CODE N	5P 1C
With respect to the operations usual to named insured and the		

This is to carrify that the policies of insurance Ested below have been issued to the insured named above for the policy period indicated notwithstanding any requirements, terms or conditions 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 terms, evolutions and conditions of such policies.

subject to all terms, evolusions and conditions of such policies. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS CONNERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY
BOOLLY BLAIRY AND PROPERTY DANAGE LIABILITY 5,000,D00 - GENERAL AGGREGATE CLAMB MADE OF TO COCURRENCE PRODUCTS AND/OR COMPLETED OPERATIONS | Heartland Farmers Mutual - EACH OCCURRENCE 5,000,000 PRODUCTS AND COMPLETED OF STATIONS EMPLOYER'S LUBILITY 2019/2/16 2020/2/16 5,000,000 31593C01 AGGREGATE CROSS LIABILITY PERSONAL PLURY LIABILITY 5,000,000 PERSONAL AND ADVERTISING INJURY MEDICAL PAYMENTS 25,000 TENANTS LEGAL LIABILITY 500 500,000 TENANTS LEGAL LIABILITY POLLUTION LIABILITY EXTENSION POLLUTION LIABILITY EXTENSION NON-OWNED AUTOMOBILES Heartland Farmers Mutual HON OWNED AUTOMOBILE 2019/2/16 2020/2/16 2,000,000 HIRED AUTOMOBILES 31593C01 AUTOMOBILE LIABILITY SCOLLY INLURY AND PROPERTY DESCRIBED AUTOMOBILES WHICE COMBINED ALLOWNED AUTOMOBILES MODILY INJURY (PER PERSON) LEASED AUTOMOBILES \*\* SCORLY INJURY (PER ACCIDENT) "ALL ALTONOMIN, EX LEASED IN SIECES OF SO DAYS WHERE THE INSINED ON REQUIRED TO PROVIDE SINURANCE ROPERTY DAMAGE EXCESS LIABILITY BACH OCCURRENCE UMBRELLA FORM AGGREGATE OTHER MABILITY (SPECIFY) 

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the certificate holder named above, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

Reith & Associates insurance and Financial Services Limited	City of St. Thomas
462 Talbot Street	545 Talbot Street
St Thomas, ON	St Thomas, ON
POSTAL NSP 1B9	
BROKER CLIENT ID: STTHOMA-01	POSTAL N5P 3V
ISSUER Reith & Associates Insurance and Financial Services Limited	CONTACT NUMBER(6) TYPE Phone No. (519) 631-3862 TYPE Fax No. (519) 631-038
AUTHORIZED REPRESENTATIVE	TYPE PROTIE NO. (519) 631-3852 TYPE FAX NO. (519) 631-038
SIGNATURE OF AUTHORIZED REPRESENTATIVE DELITIAL PLOSEDES	DATE 2019/1/25 EMAIL ADDRESS

# **SECTION 1: EVENT AND ORGANIZER INFORMATION**

Event Name:	DDB TREE LIGHTING CELEBRATION
Date(s):	FRIDAY NOVEMBER 15, 2019
Start Time:	5:00PM 8:00PM
Location(s):	MONDAMIN STREET - TALBOT TO CURTIS
Organizing Group:	ST THOMAS DDB
Contact Name #1:	EARL TAYLOR
Street Address: 545	TALBOT STREET
Town/City:	ST THOMAS Province: ON Postal Code: N5P3V7
Phone Number #1:	519-670-9223
Email Address:	earl-taylor@coldwellbanker.ca
Expected Attendance:	Number of Event Personnel/Volunteers: 6
Location and number of	of washrooms in place: CITY HALL
Contracted t	hrough Lyndon Security
Location and Number	of Parking Spaces: N/A
Number of Accessible	Washrooms: 2 Number of Accessible Parking Spots: N/A
Please describe your sp	pecific event. Attach additional sheets as necessary
Santa will arrive	on a St Thomas Fire Truckabout 5:30pm, Tree Lighting
will ocurr at 6	6:00pm, kids visit Santa to about 7:30pm
Serving Cooki	es and Hot Chocolate, Local talent entertainment,
2' x 4' sign ins	stalled at the tree 3 weeks prior to event, Require
hydro to be to	urned on through to mid January 2020
SECTION 2: FOOD AND	BEVERAGE
Will food/beverage of	any kind be available at this event?  Southwestern Public Health at 519-631-9900 at least 2 weeks prior to the event.

# **SECTION 3: PERSONAL SERVICES**

Will there be personal services of any kind offered to the public at this even If Yes, you must notify Southwestern Public Health at 519-631-9900 at least		No ☑ ne event.
Personal services include but are not limited to barbering, manicures, pedic piercing.	ures, esthetics, tatt	ooing and
SECTION 4: TENTS		
Will there be an indoor or tent covered area used for public assembly as part	rt of the event? Yes 🗹	No □
If Yes, please specify the number and size of tents. 10'x10' tent if snow or rain		
If the tents are larger than $60\text{m}^2$ cumulatively, a building permit is required Services. Please attach a copy of the Permit and provide the Permit Numbe		Building —
Please note that Indoor or Tent covered areas for public assembly must con requirements enforced by Southwestern Public Health. Please contact the Tinformation on how to meet these requirements.	• •	
SECTION 5: SERVING OF ALCOHOL		
Will alcohol be consumed at the event? If Yes, you must review and meet the requirements of the City's Alcohol Pol Rec and Property Management Department for Special Events taking place	•	
You must also comply with the Alcohol and Gaming Commission of Ontario responsible to notify and provide any pertinent information required under obtaining a Special Occasion Permit. You must adhere to the Liquor Licence ensure access is given to the Police and AGCO Inspectors for the purposes o copy of the liquor permit with this application. If utilizing the services of a calendorsements to provide off — premises beverage services, organizers shall confirming date/time/location/services as well as a copy of the establishme	the AGCO guideline Act and its Regulat f inspections. Pleas aterer with all the re supply a letter from	es for ions and e submit a equired
The area where alcohol is being served has to have a 36" (0.9m) high barrier is a no staking policy in all of the City's Parks, Recreation and Property Mana		ote that there
SECTION 6: MUNICIPALLY SIGNIFICANT EVENT		
If you wish to apply for a "Special Occasion Permit," through the Alcohol and (AGCO), you must obtain a letter of approval from City Council, declaring yo by submitting the request to the City Clerk's Department. Please note that sweeks.	ur event "municipa	lly significant"
Will you be requesting that City Council declare your event a "Municipally Si	=	) <b> </b>
SECTION 7: MUSIC / NOISE	163 🗀 140	, RT
Will there be a concert or musical entertainment as part of the event?	Yes ✓ No	

If Yes, please note that the use of sound reproduction devices is authorized between the hours of 8:00 a.m. and 11:00 p.m. so long as the Police are satisfied that said devices are being "used in a reasonable manner" and not intolerably high. It is the responsibility of the organizers to obtain any applicable musical licencing through SOCAN for events not taking place in a City facility.

Please note that if utilizing a temporary stage structure, regulations are found under the Occupational Health and Safety Act and enforced by the Ministry of Labour. A resource document for event organizers can be found on the Special Event Permits page on the City of St. Thomas website.

<b>SECT</b>	<b>ION</b>	8: A	NIN	IALS

Will there be a Petting Zoo or Animals at the If Yes, the Southwestern Public Health must are not permitted in the Animal Control By-Law must be approved by City Council. Plea Please note that such approval may take see	be notified of the eve Law 71-2011, an Appli se attach a copy of the	cation for Temp	orary Exempti	on to the By-
SECTION 9: ROAD CLOSURES / TRAFFIC FLO	OW CHANGES			
Are you anticipating any road closures or tra	affic flow changes?		Yes 🗹	No 🗌
If Yes, please describe the road closure requof Way Occupancy Permit and City Council approval may take several weeks.				
Closure of Mondamin Stre	eet from Talb	ot to Curl	is at 4:30	)pm
for setup, barricades req	uired			
Please attach a copy of the Right of Way Oc	cupancy Permit and pr	ovide the perm	it #:	
If the event is a Parade / Run / Walk / Pass t under the Special Events page on the City w		•		
Do you require traffic control?  If Yes, please contact the St. Thomas Police	Services at (519) 631-1	224 ext. 4177.	Yes 🗌	No <b></b> ✓
PLEASE NOTE: Marshalls, volunteers and specan direct traffic pursuant to the Highway To	raffic Act.		ect traffic. Only	y the police
Have you contacted the Env Services Depart	ment - Roads and Trar Barricades No Parking Signs Detour Signing	nsporation for: Yes ☑ Yes ☑ Yes ☑	No 🗆 No 🗀	N/A □ N/A □ N/A □

# **SECTION 10: MUNICIPAL FACILITIES**

For events taking place in Pinafore Park, and Property Management staff once the	~	_	_		
Have you contacted Parks and Recreatio		Yes 🗌	No 🗌	N/A 🗸	
Have you rented a pavilion/facility and si	gned a permit?	Yes 🗌	No 🗌	N/A ☑	
If yes, please provide the location of the	rental and attach a copy of	the permit.			
Do you require additional picnic tables of and Property Management Dept and tha				•	:C
and Hoperty management bept and the	t delivery, piet up to the rec	Yes 🗹	No 🗌	N/A □	
If Yes, how many are you requesting?	# of Picnic Tables: 4	# of Garl	bage Cans: 2		
Have you made arrangements with Envir	onmental Services staff for	recycling cor	ntainers and col	lection?	
		Yes 🗌	No 🗀	N/A ☑	
Will you require municipal support for:	Water	Yes 🗌	No ☑	N/A 🗆	
	Hydro	Yes <b></b> ✓	No 🗌	N/A 🗌	
certification body under the Ontario Ele Authority. If required, please attach the Number:	Electrical Safety Authorit	•	•	•	
If Yes, please attach a copy of the Permit	and provide the Permit Nu	mber:		-	
SECTION 11: ACCESSIBILITTY					
As an event organizer, it is your respor Accessibility for Ontarians with Disabili requirements to meet for accessibility displayed throughout the event venue t washrooms and parking. Although not re plan to the Municipal Accessibility Adviso	ties Act (AODA). Organiza . Please note that direct o indicate the barrier-free quired, the Special Events	ations with a ional signago path of trav Committee re	it least one en e needs to be el and location ecommends sub	nployee have prominently of accessible	
SECTION 12: OTHER SERVICES/RESOURC	<u>ES</u>				
Security: Has a privately licenced security If Yes, what company and how many secu			Yes 🗹 gh City contract	No □ ———	
First Aid: For events with an anticipated a required to be retained. Have you confirm	ned First Aid services?	Yes 🗆	No 🗌	are N/A 🗆	

-13-

Ambulance: Has Emergency Medical Services (Ambulance Service) been contacted planned emergency access to the site?	regarding your Yes □	event and No ☑
Fireworks: Will there be fireworks as part of your event?  If Yes, a permit for exhibition fireworks is required through the Fire Department.	Yes 🗌	No 🗹
SECTION 13: SIGNATURE		
That the information contained in this application and any documentation, including provided in support of the application, by myself, my agents, consultants and so information and will become part of the public record. As such, and in accordance Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.5 City of St. Thomas making this application and its supporting documentation available including copying and disclosing the application and its supporting documentation their request.	licitors, constitu with the provisi 6, I hereby cons able to the gene to any third pa	ites public ons of the ent to the eral public,
(Signature of Individual Completing this Application)  (Date com		
Office Use Only: Application Received: Sopt 13, 2019 Committee Approval:		

#### **SECTION 14: INSURANCE**

A Certificate of Insurance is required providing proof of \$5,000,000 in insurance coverage, including the naming of the City of St. Thomas as an Additional Insured under the corresponding policies. A copy of the required insurance MUST be submitted a minimum of two weeks prior to the start of the event. The Special Events Committee reserves the right to impose additional requirements and increased insurance coverage for large community events.

The provision of the completed and signed Statement of Indemnification below is also required.

Please note that an approved event may be cancelled should insurance coverage not be provided and may be altered or cancelled as a result of an emergency situation.

# TREE LIGHTING CELEBRATION organized by ST THOMAS DDB

(Event Name)

INSUPANCE ATE O

(Organizing Group)

shall indemnify and save harmless The Corporation of the City of St. Thomas and all persons for whom it is at law responsible from any and all liabilities, damages, costs, claims, suits or actions arising out of:

any damage to property including loss of use thereof, and any injury to any person or persons, including death resulting at any time there from, occasioned by any act or omissions of

TREE LIGHTING CELEBRATION organized by ST THOMAS DDB (Event Name) (Organizing Group)

its officers, agents, servants, employees, contractors, customers, invitees or licensees, or occurring in or on the premises or any part thereof arising from or occasioned by any cause whatsoever, except where such damage or injury is due to the act, default or negligence of The Corporation of the City of St. Thomas, its officers, agents, servants, employees, contractors, customers, invitees of licensees.

Signed:

Witness: Mancy Saylor
Name (Print): NANCY TAYLOR

Name (Print):

ÉARL TAYLOR

Address:

545 TALBOT STREET

Telephone:

519-670-9223

Date:

SEPT 13, 2019

Event Name:

TREE LIGHTING CELEBRATION

Organizing Group:

ST THOMAS DDB

FRIDAY NOVEMBER 15, 2019

**Event Dates:** 



545 Talbot Street, P.O. Box 520 St. Thomas, ON N5P 3V7 519-633-5248 info@downtownstthomas.com www.downtownstthomas.com

Hello,

Reference: Christmas Tree Lighting Ceremony

The St Thomas Downtown Development Board is planning our Annual Christmas Tree Lighting Celebration to kick off the 2019 Christmas Season.

Once again we are submitting a Special Events Application to City Hall to obtain permission to hold this event.

As required by the Special Event Permit Application we want to supply our information directly to you.

Date: Friday November 15, 2019

Location: Road closure on Mondamin Street from Talbot Street to Curtis Street

Time: Setup at 5:00pm to Cleanup at 8:00pm

We are asking for your help please:

**Public Health**: We will be serving Hot Chocolate and Apple Cider as supplied by Talbot Teen Centre or Legends Restaurant or Tim Hortons

**Fire Dept:** We are asking the St Thomas Fire Department to once again transport Santa Claus to and from the event via City Fire Truck for 5:45pm delivery.

Parks Dept: 4 picnic tables and 2 garbage cans requested please

Roads Dept: Road Closure and barricades at Talbot and Mondamin Street and Mondamin and Curtis Street

City: Use of public washrooms - security contracted by DDB to Lyndon Security, electrical source for entertainment and tree lighting, permission to install a 2' x 4' sign in front of the City Hall tree 3 weeks prior to the event.

CAO and Council: Help to promote our event through the Council events announcements

Thank you in advance for your help with our event and I extend a personal invitation to each of you and your teams to attend and celebrate this Christmas kickoff event with us.

Yours sincerely,

DDR Chair



#### CONFIRMATION OF INSURANCE

This is to confirm to: The City of St Thomas 545 TALBOT ST, PO BOX 520, ST THOMAS, ON N5P 1C3

That policies of insurance as herein described have been issued to the Insured named below and are in force at this date.

Name and address of Insured: ST THOMAS DOWN TOWN DEVELOPMENT BOARD

545 TALBOT ST, PO BOX 520

ST THOMAS, ON, N5P 3V7

Location to which this confirmation applies: 545 TALBOT ST ST THOMAS, ON, N5P 3V7

Operations to which this confirmation applies: Civic, community, special interest (non-medical) associations or groups

Type of Policy	Policy Number	Expiry Date DD/MM/YYYY	Amount of Insurance
Commercial General Liability Products and/or Completed Operations Incl. ☑ Excl. □	1076385830	04/04/2020	Each occurrence limit: \$5,000,000 Aggregate limit: \$5,000,000 Tenant's Legal Liability: \$250,000 Non-Owned Automobile - limit: \$2,000,000 The limits shown may have been reduced by
Non-Owned Automobile Incl. ☑ Excl. □			paid claims.
Other: Additional Insured			Other: City of St Thomas is listed as additional insured
Directors' and Officers'	n/a	n/a	Limit: n/a Deductible: n/a The limits shown may have been reduced by paid claims.
Errors and Omissions	n/a	n/a	Limit: n/a Deductible: n/a The limits shown may have been reduced by paid claims.

#### NOTE:

The insurance afforded is subject to the terms, conditions and exclusion of the applicable policy. This confirmation is issued as a matter of information only and confers no rights on the holder and imposes no liability on the Insurer. The Insurer will endeavour to mail to the holder of this Confirmation \_\_\_\_\_\_30 days' written notice of any material change in or cancellation of these policies, but assumes no responsibility for failure to do so.

Date: 19/06/2019

Authorized Representative of the Insurer: DEBBIE HAMILTON-A072162