



PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

Event name BUFFALO EXCHANGE 40TH ANNIVERSARY TOUR

Description PROMOTIONAL EVENT TO CELEBRATE COMPANY'S 40TH ANNIVERSARY WITH AIRSTREAM TRAILER PARKED IN FRONT OF / NEARBY STORE

Location (attach a route if applicable) 238 ELM ST., SOMERVILLE, MA 02144

Date(s) 4/16/2014 Rain date(s) _____

Start time (include setup) 8:00 AM End time (include breakdown) 6:00 PM

Estimated maximum attendance at any one time 4-5; 100 THROUGHOUT DURATION OF EVENT

Attendee fees or suggested donations NONE

Will food be served? Y XN If yes, describe _____

Will alcohol be served? Y XN If yes, describe _____

Will a grill/open-flame device be used? Y XN If yes, describe _____

Will streets or sidewalks be blocked? XY N If yes, describe PARKING SPACES USED

Organization name BUFFALO EXCHANGE, LTD

Mailing address (to mail the license) PO BOX 40488, TUCSON, AZ 85717

Contact person KRIS MACKEN

Telephone (520) 622-2711 Email BUFEXBUSINESS@BUFEX.COM

Have you made arrangements for:

Auxiliary Police? Yes X No If yes, describe _____

Police Detail? Yes X No If yes, describe _____

Parking (for Attendees)? Yes X No If yes, describe _____

Restrooms? Yes X No If yes, describe _____

Liability Insurance? X Yes No If yes, describe CITY AS CERTIFICATE HOLDER

Note the following Conditions:

1. The event must not obstruct or inhibit the flow of vehicles or pedestrians except for road closures or detours permitted herein, or as directed by Police Officers or Auxiliary Police Officers.
2. All road closures or detours must be approved in advance by the Traffic and Parking Director, and must be implemented with traffic controls specified by the Traffic and Parking Department. Such controls, and any displays or items placed on any street, must be movable at all times. Vehicles must not be used as traffic controls. If the applicant requires the use of signage loaned by the Traffic and Parking Department, a security deposit must be paid to ensure that the signage is returned.
3. If the event is a road race, the applicant will provide race monitors where required by the Police. The applicant will not make permanent marks on the roadway or sidewalk using paint or other indelible materials. Use of chalk will be acceptable. The applicant will pay the cost of removing any indelible marks placed on the roadway or sidewalk.

- 4. If the event includes a musical performance, the performance will not occur before 9:00 AM or after 10:00 PM, nor at any time on Sunday, except as permitted, nor within 300 feet of any building from which an occupant asks that the performance desist.
- 5. Any fees charged by the city are the sole responsibility of the applicant and must be paid in full prior to the event.
- 6. This permit is valid only for the listed location and time, and is subject to all of the terms, conditions, and limitations set forth in the Somerville Code of Ordinances, any applicable State and Federal laws, these conditions, and any other conditions prescribed by the Board of Aldermen and/or stated in the Departmental approvals below.

The applicant hereby states that this is a true description of the event and acknowledges and agrees to adhere to the conditions described above and in the Departmental approvals below.

Applicant signature *Kristina Mackey* Date 2/17/2014
 Print name KRISTINA MACKAY Phone (520) 622-2711 Email BUFEFBUSINESS@BUFEF.COM
 Event name (taken from page 1) BUFFALO EXCHANGE 40TH ANNIVERSARY TOUR

Obtain the signatures below before submitting this form to the City Clerk for consideration by the Board of Aldermen.

<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>2/18/14</u> Signed: <u><i>Charles Johnson</i></u> Police Chief or Designee Added Conditions: _____ _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Signed: _____ Chief Fire Engineer or Designee Added Conditions: _____ _____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Signed: _____ DPW Commissioner or Designee Added Conditions: _____ _____

Obtain the signature below if the applicant will be providing food to attendees. Not needed for block parties.

Approved Denied Date _____
 Signed: _____
 Health Inspector or Designee
 Added Conditions: _____

Once signed, the Department should:

- Contact the applicant at the phone number/email address above to arrange for pick-up.
- Fax the application (no cover page) to the following fax number: (520) 622-7015.
- Fax the application to the City Clerk at 617 625-4239.

4. If the event includes a musical performance, the performance will not occur before 9:00 AM or after 10:00 PM, nor at any time on Sunday, except as permitted, nor within 300 feet of any building from which an occupant asks that the performance desist.
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 Print name KRISTINA MACKAY Phone (520) 622-2711 Email BUFFEXBUSINESS@BUFFEX.COM
 Event name (taken from page 1) BUFFALO EXCHANGE 240TH ANNIVERSARY TOUR

Obtain the signatures below before submitting this form to the City Clerk for consideration by the Board of Aldermen.

<u> </u> Approved <u> </u> Denied <u> </u> Date <u> </u> Signed: _____ Police Chief or Designee Added Conditions: _____ _____ _____	<input checked="" type="checkbox"/> Approved <u> </u> Denied <u> </u> Date <u>2-18-14</u> Signed: <u><i>Kenneth Blitzer</i></u> Chief Fire Engineer or Designee Added Conditions: <u>Street must remain passable</u> _____ _____
<u> </u> Approved <u> </u> Denied <u> </u> Date <u> </u> Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____ _____	<u> </u> Approved <u> </u> Denied <u> </u> Date <u> </u> Signed: _____ DPW Commissioner or Designee Added Conditions: _____ _____ _____

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Approved Denied Date
 Signed: _____
 Health Inspector or Designee
 Added Conditions: _____

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<input checked="" type="checkbox"/> Approved _____ Denied _____ Date <u>2/18/14</u> Signed: <u><i>[Signature]</i></u> Traffic and Parking Director or Designee Added Conditions: <u>* MURKINS MUST BE RESTRICTED - METERS MUST BE BAGGED - COST INVOLVED.</u>	Approved _____ Denied _____ Date _____ Signed: _____ DPW Commissioner or Designee Added Conditions: _____

Obtain the signature below if the applicant will be providing food to attendees. Not needed for block parties.

Approved _____ Denied _____ Date _____ Signed: _____ Health Inspector or Designee Added Conditions: _____
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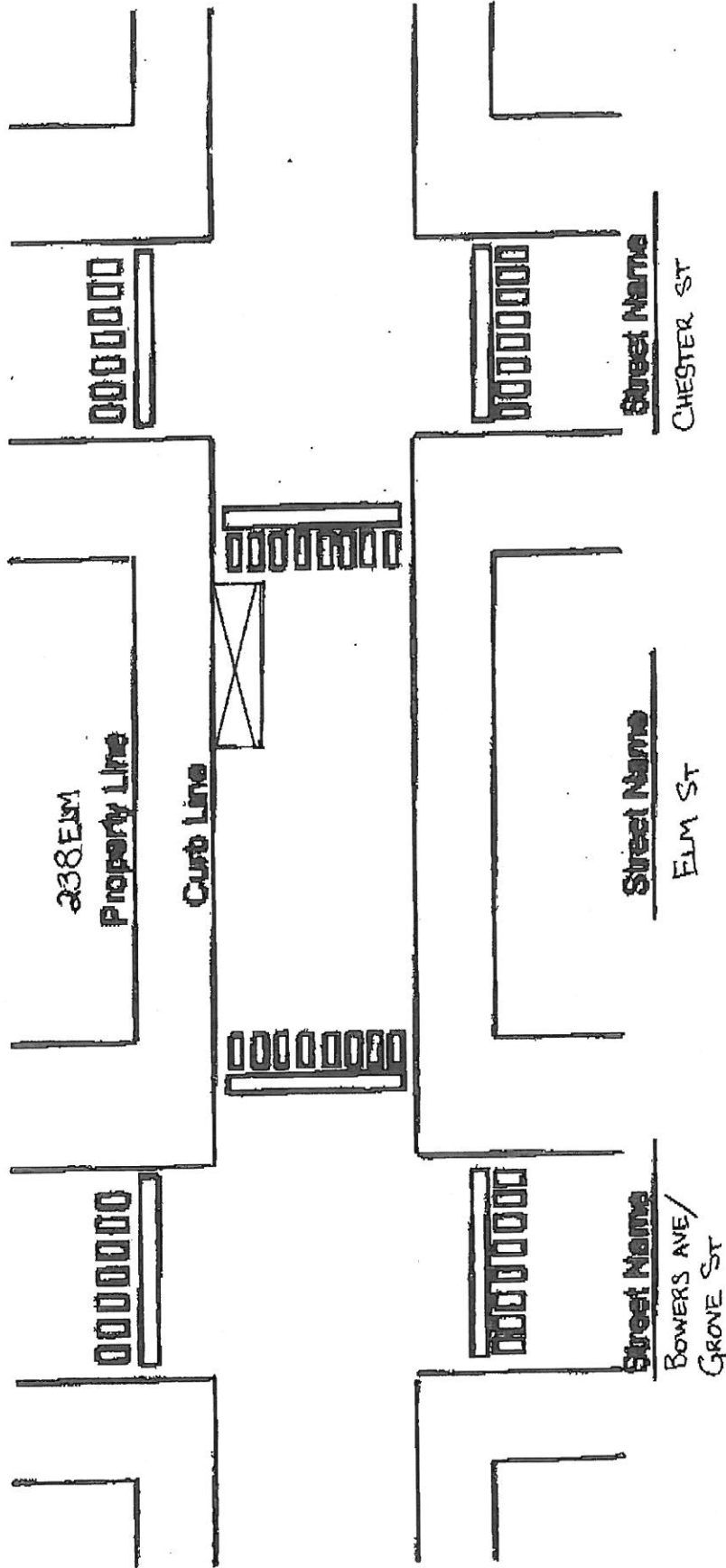
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BUFFALO EXCHANGE 40TH ANNIVERSARY TOUR

DATE: 4/16/2014 TIME: 8:00 AM - 6:00 PM

238 ELM ST, SOMERVILLE, MA 02144

2 PARKING SPACES REQUESTED



Buffalo Exchange 40th Anniversary Tour

238 Elm St., Somerville, MA 02144

Date: 4/16/2014

Time: 8:00 am - 6:00 pm

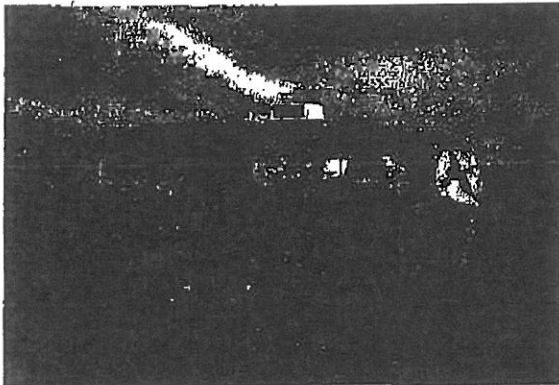
1969 Airstream Tradewind Land Yacht

24' 9" long (tongue end to bumper)

8' 9" wide

9' 8" tall

Trailer door on "passenger" side of vehicle



Trailer to be pulled by 2013 Ford F150

20' 6" long (with hitch)

8' 10" wide (mirrors in)

9' 4" wide (mirrors out)

Combined length of truck and trailer 45' 3"



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/14/2014

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 Koty-Leavitt Insurance Agency, Inc. 6992 E. Broadway Blvd Tucson AZ 85710-2803	CONTACT NAME Cynthia Barbary
	PHONE (A/C No. Ext.) (520) 571-1900 FAX (A/C No.) (520) 871-9667 EMAIL ADDRESS cynthia-barbary@leavitt.com
INSURER A: Travelers Prop Cas Co America NAIC # A25674	INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED Buffalo Exchange Ltd. 209 E. Helen Tucson AZ 85705-7411	

COVERAGES **CERTIFICATE NUMBER:** CL1392002231 **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.

INDR LTR	TYPE OF INSURANCE	ADDRESSOR UNDER WORD	POLICY NUMBER	POLICY EFF. DATE (MM/YYYY)	POLICY EXP. DATE (MM/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		X-5308137R772-COF-12	10/01/2013	10/01/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000 MED EXP (Any one person) \$ 1,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$
	DEF. RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A			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))

CERTIFICATE HOLDER City of Somerville, Massachusetts Department of Traffic & Parking 133 Holland Street Somerville, MA 02143	CANCELLATION 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
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John Long

From: Suzanne Rinfret
Sent: Tuesday, February 18, 2014 5:22 PM
To: John Long
Cc: 'bufexbusiness@bufex.com'
Subject: Buffalo Exchange 40th Anniversary Tour
Attachments: 20140218170626199.pdf

Hi John,
Attached is the Event Permit Application for 4/16/14 Buffalo Exchange 40th Anniversary Tour. There are a few conditions from Traffic and Parking:
Mirrors must be retracted during the parking so they do not interfere with traffic Blocks must be placed under tires to ensure the trailer will not roll while parked Meters must be bagged - cost is \$35/meter/day plus \$35 bagging fee.
Please contact me with any questions or clarification.
Thank you,
Suzanne

Suzanne Rinfret
Traffic and Parking
City of Somerville
133 Holland Street
Somerville, MA 02144
W: (617) 625-6600 ext.7915
srinfret@somervillema.gov

-----Original Message-----

From: Suzanne Rinfret [<mailto:srinfret@somervillema.gov>]
Sent: Tuesday, February 18, 2014 5:06 PM
To: Suzanne Rinfret
Subject: Traffic & Parking Scan

This E-mail was sent from "RNP0026732A9C67" (Aficio MP C5501).

Scan Date: 02.18.2014 17:06:26 (-0500)