



**GARDINER CITY COUNCIL
AGENDA ITEM INFORMATION SHEET**



Meeting Date	05/05/2021	Department	City Clerk
Agenda Item	4.b) Special Events Application from Gardiner Area High School for a Graduation Event		
Est. Cost	NA		

Background Information

The graduating Senior Class from MSAD#11 will participate in a parade that begins at the Business Park and ends at the Waterfront Park. There will also be a fireworks display at the waterfront so that the Greater Gardiner Community may wish our 2021 graduates good luck and good work.

Requested Action	"I move to accept the Special Events Application from Gardiner Area High School for a Graduation Event."
City Manager and/or Finance Review	Acting City Manager recommends the above motion.
Council Vote/ Action Taken	
Departmental Follow-Up	

City Clerk Use Only	1 st Reading _____	Advertised _____	EFFECTIVE DATE _____
	2 nd Reading _____	Advertised w/in 15 Days _____	
	Final to Dept _____	Updated Book _____	Online _____

**Special Event
Application**

Applicant's Name: Chad Kempton GAHS
 Applicant's Address: 40 West Hill Road, Gardiner, Me.
 Applicant's Phone Number(s): (207) 582-3150 EXT. 3006
 Applicant's Email Address: CKempton@msad11.org
 Event Name: Graduation Celebration
 Date(s): June 12, 2021
 Location: Route 201 into downtown Gardiner/Waterfront
 Event Description: After our graduation ceremony, we want to have a parade of our graduates (same as last year) starting @ the business park and ending @ the entrance to the waterfront, followed

Minor Event: \$50.00 / Major Event: \$100.00 by a 20 minute fireworks show on the Kennebec River,
 Applicant has requested fees be waived/reduced for the following reason:

- Non-profit charitable cause
- Gardiner River Fest, LLC sponsored _____
- Gardiner Main Street sponsored _____

	YES	NO
Have you made arrangements with Public Safety to ensure public safety, crowd control and noise levels?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Have you addressed parking?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Have you made arrangements for clean-up and/or trash removal?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Will you be providing port-a-potties?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Will there be any use of fire, i.e. tiki torches, grills, barbeques, bonfires, etc.? If yes, a burn permit must also be obtained from the Fire Department for the date specified.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Will there be a parade associated with the event? If yes, have you contacted the Chief of Police?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Will you be posting a banner? If yes, you must contact the Code Enforcement Officer with details and for approval.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Will you need electricity? If so, how many hours? If yes, you must contact the Buildings & Grounds Director.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is this a Minor Event – it will not exceed four hours in duration and fewer than 100 people will be affiliated – i.e. wedding ceremony, etc. (*30 day minimum requirement for the application process time)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is this a Major Event – it will exceed four hours in duration and/or more than 100 people will be affiliated – i.e. community festival, carnival, street dance, etc. Major	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please send application and payment (payable to City of Gardiner) to:
 City Clerk's Office, 6 Church Street, Gardiner, ME 04345

**Special Event
Application**

events involve additional City Services and fees for services apply – i.e. police protection, clean-up, electricity, etc. (*60 day minimum requirement for the application process time)

*Applicant is responsible for contacting the Departments below if you require any services and/or assistance from them.

Date of Event June 12, 2021

Name of Event Graduation Celebration

	City Services Contacted	Estimate of Department Cost	Department Head Initials
Police: 207-582-5150 jtoman@gardinermaine.com	April 1, 2021		
Fire: 207-582-4535 TBD	April 7, 2021		
Public Works/ Buildings & Grounds: 207-582-4408 JDouglass@gardinermaine.com	4-22-2021 School to clean up - public works to leave a truck at waterfront		
Economic Development: 207-582-6892 tdesjardins@gardinermaine.com			
Code Enforcement Office: 207-582-6892 ceo@gardinermaine.com			
	Total Amount Invoiced		

Additional comments:

We would like to have Police and Fire participate in our parade, we want to replicate last year's parade as it was a huge success. The start point will be the Entrance to the Business Park, the route will be down RTE. 201 / Brunswick Avenue,

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Ending near the entrance to the waterfront.
 we also want to have a 20 minute fireworks display @ 9pm
 on the Kennebec River.

Special Event Application

- I understand permits may be required before operating or conducting any activity on property owned by the City of Gardiner.
- As the applicant, I have the authority from the owner to apply for this license from the City of Gardiner.
- Events are considered rain or shine.
- This permit does not authorize alcohol on any public property, including but not limited to the Common, Waterfront, streets and sidewalks.
- The applicant will provide proof of insurance to the City of Gardiner with the City of Gardiner being named as additionally insured. **(Required)** (Tenant User Liability Insurance / TULIP insurance)

Rotary provided

Failure to answer and comply with all the questions in this application may result in the application not being approved.

Chad Kempton

April 9, 2021

Applicant's Signature

Date

Office use only:

Received in Clerk's Office by _____ Date _____

Approved by

CM _____ Police _____ Fire _____ PW/B&G _____ CEO _____ ED _____

City Council Approval (If necessary)

City Council hereby finds that:

1. The proposed Special Event is consistent with the goal of promoting the use of City owned property for recreational, entertainment or charitable events; and
2. That the proposed Special Event can be conducted in the location proposed without endangering the public safety or disturbing the peace and order of the City of Gardiner; subject to the attached list of conditions:

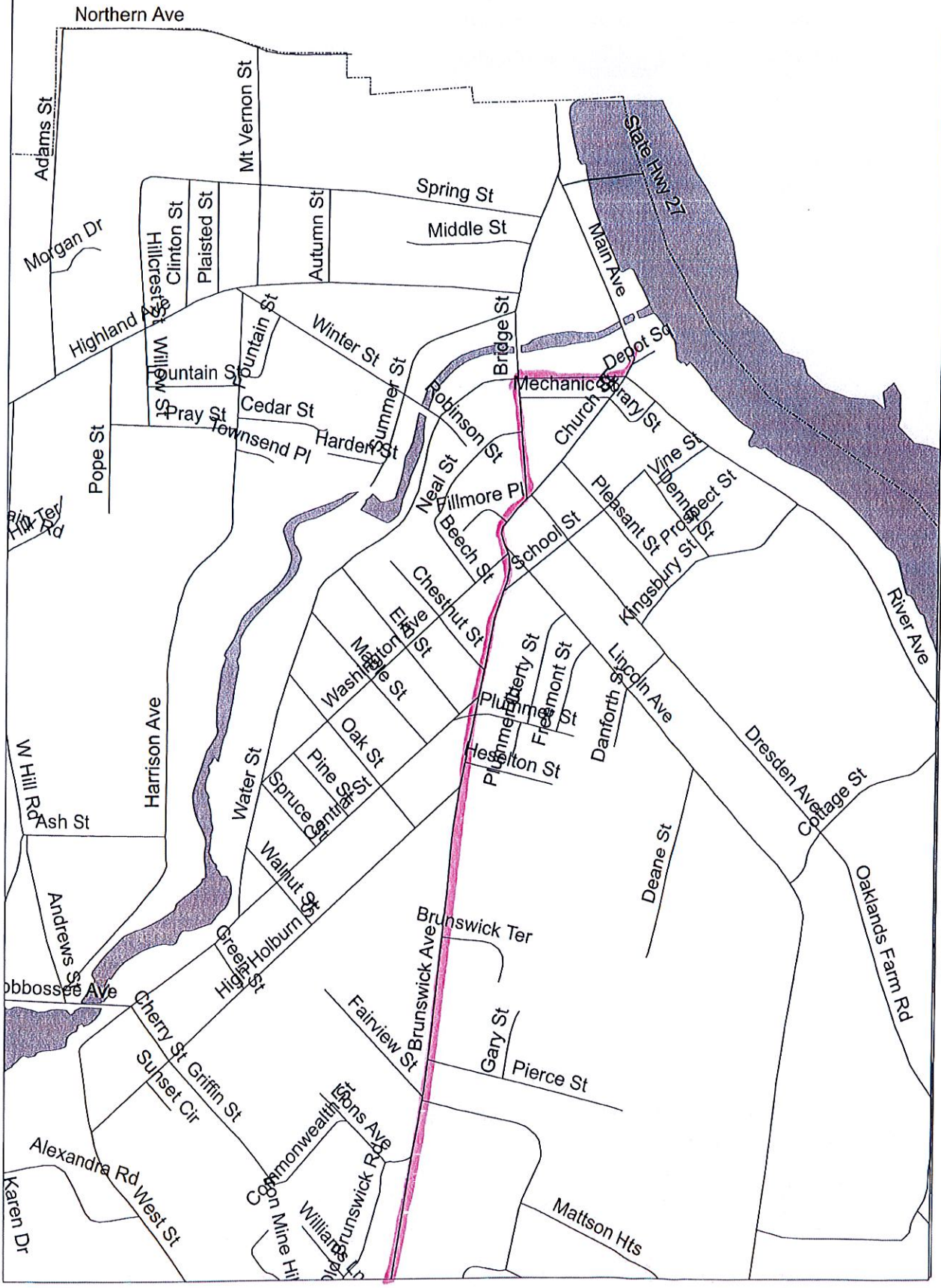
Dated this _____ day of _____, 20____. _____

Municipal Officer of the City of Gardiner

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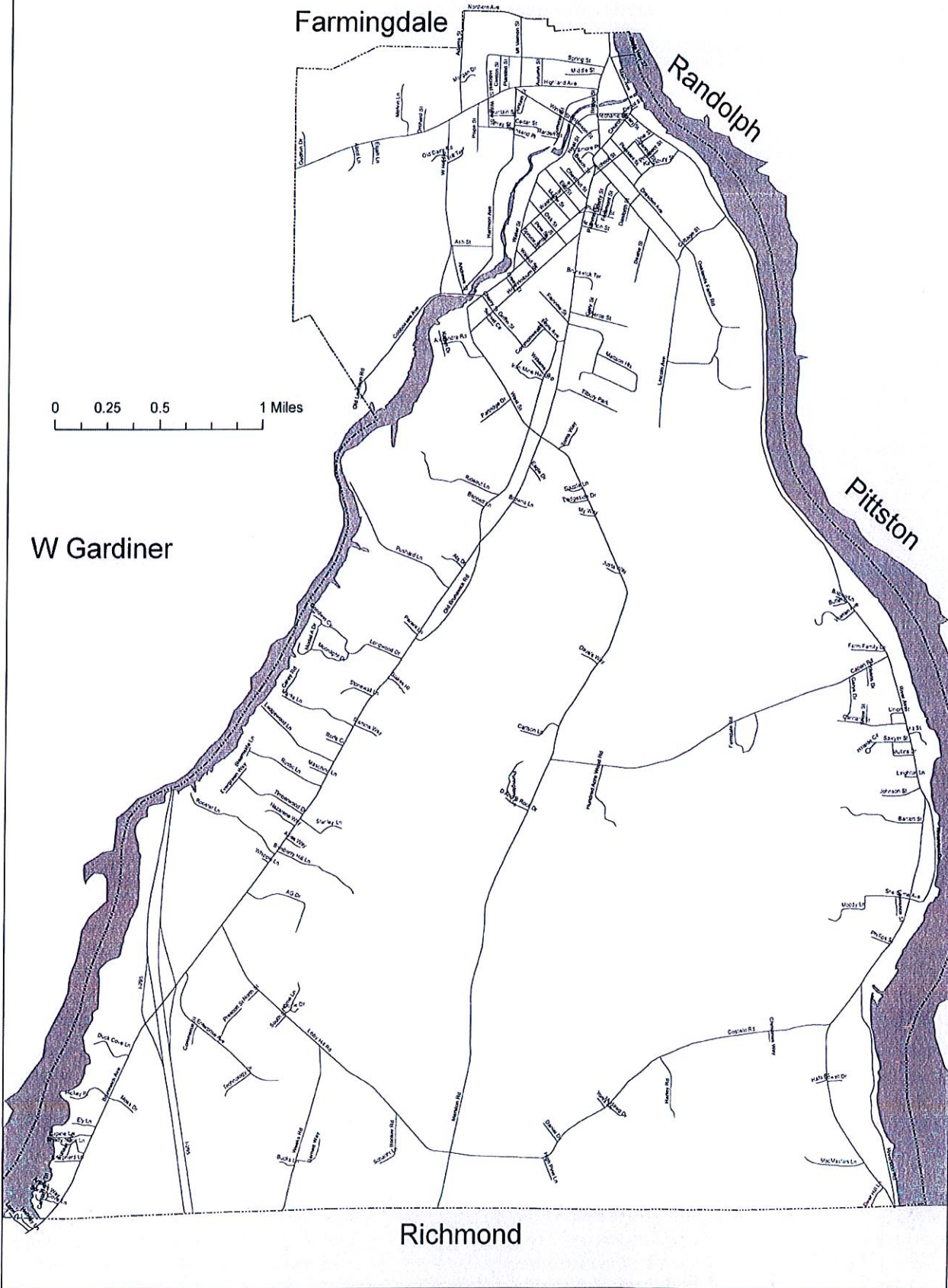
Gardiner Downtown Area

 Parade Route



City of Gardiner, Maine

Streets & Roads





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/27/2021

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 have ADDITIONAL INSURED provisions or 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).

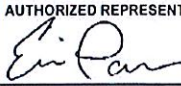
PRODUCER Arthur J. Gallagher Risk Management Services, Inc. 2850 Golf Road Rolling Meadows IL 60008	CONTACT NAME: Ali Sulita PHONE (A/C, No., Ext): 1-833-3ROTARY E-MAIL ADDRESS: rotary@ajg.com	FAX (A/C, No.): 630-285-4062
	INSURER(S) AFFORDING COVERAGE	
INSURED All Active US Rotary Clubs & Districts Gardiner Rotary Club ATTN: Risk Management Dept. 1560 Sherman Ave. Evanston, IL 60201-3698	INSURER A : Lexington Insurance Company	NAIC # 19437
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER: 899307648** **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Liquor Liability Included GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		015375594	7/1/2020	7/1/2021	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			015375594	7/1/2020	7/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 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 DED <input type="checkbox"/> RETENTION \$			NOT APPLICABLE			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	Y/N	N/A	NOT APPLICABLE			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The Certificate holder is included as additional insured where required by written contract or permit subject to the terms and conditions of the general liability policy, but only to the extent bodily injury or property damage is caused in whole or in part by the acts or omissions of the insured.

CERTIFICATE HOLDER Rotary Club of Gardiner Maine	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 



Gardiner COVID-19 Prevention Checklist –

Please read each category carefully. Please fill in the comment section on how you plan to adhere to the guidelines. Please initial to acknowledge each section. If you have any questions please reach out to contacts listed on the last page.

Gathering Limits

1. The number of individuals that can gather in a shared space must not exceed the limit established by the latest relevant Executive Order from the Office of the Governor.
2. People in a shared space must be able to maintain 6 feet of physical distance. If a space cannot accommodate individuals maintaining 6 feet of physical distance, further restrict the number of individuals allowed in that space beyond the limits established by Executive Order.

 Initial

Comments: Our Event (Fire works show) will be an outdoor event with viewing available from multiple areas around Gardiner, Randolph, and Pittston.

Masks

1. Require individuals at your event to wear a mask, per CDC recommendations and pertinent Executive Orders from the Office of the Governor. Patrons and staff should be advised to:
 1. Wear a mask correctly and consistently for the best protection. Information about proper use of masks is available from the US CDC.
 2. Change your mask if it becomes wet or soiled.
 3. During unmasked activities such as communal eating and drinking additional mitigation strategies must be in place, such as physical distancing and increased ventilation.
 4. The degree to which face shields and other personal protective equipment are recommended is based on proximity and duration of contact. Please see industry specific guidance for additional information.



Comments: The most recent protocol issued from the state of Maine does not require people to wear face masks when outside when proper social distancing protocols can be followed.

Initial



Physical Distancing

1. Require individuals at your event to maintain 6 feet of physical distance from individuals who are not part of their household group or travel party.
2. Adjust seating in common areas to promote physical distancing practices.

CV Initial

Comments: we will not be providing designated seating due to the nature of the event. we will distribute covid 19 guide lines to all invited guests (graduates and their families)

Hand Hygiene

1. Good hand hygiene prevents spread of disease. The best hand hygiene is frequent handwashing.
2. Provide hand sanitizer.

CV Initial

Comments: This will be communicated in our information we distribute to our graduates and their families.

Contact Tracing

1. Contact tracing is a fundamental public health activity that involves working with an individual who has been diagnosed with an infectious disease to identify and provide support to people who may have been infected through exposure to the infected person. To facilitate contact tracing by the Maine CDC, certain establishments should maintain a record of information about visitors, including one customer's name and contact information per party, the date they were in the establishment, and the staff who had direct, prolonged interaction with them. Establishments/Events must maintain records for at least 21 days. Review industry specific guidance to determine if your establishment should collect this information.
 1. Based on current scientific knowledge, a close contact is someone who was within 6 feet of an infected person for a total of 15 minutes or more starting from 48 hours before illness onset until the time the patient is isolated. An individual is also considered a close contact if they provided



care at home to someone who is sick with COVID-19, had direct physical contact with the person (hugged or kissed them), shared eating or drinking utensils, or if the person sneezed, coughed, or somehow got respiratory droplets on them.

CD Initial

Comments: *We will do our best with this event due to it being an outdoor event at the water front. There is no way to identify all viewers, specifically those not included in our group (2021 graduates and their families)*

Barriers

1. Consider installing non-porous physical barriers such as partitions or plexiglass barriers to protect visitors and staff. Barriers should be placed at visitor information desks, service counters, and other similar locations where it is not possible to maintain a minimum of 6 feet of physical distance.
2. Limit activities that require staff and/or visitors to enter within 6 feet of another person, regardless of whether physical barriers are installed.

CD Initial

Comments: *Due to the location, there is no benefit to installing barriers.*

Limiting Use of Shared Objects

1. Promote "contactless" payment options (e.g., online payments, pay by phone options, RFID credit and debit cards, Apple Pay, Google Pay, etc.).
2. Use digital rather than paper formats to the greatest extent practicable (e.g., electronic tickets and receipts). If applicable, consider implementing digital waivers for guests to review and sign prior to arriving.
3. Suspend "self-service" food stations and self-serve "tester" food or personal care products taken from a common container.
4. Consider restricting the use of water fountains to refill only with instruction for visitors to wash hands after use.

CD Initial

Comments: *There will be no need of sharing objects. It is a viewing event only.*



Cleaning and Disinfection

1. Hand hygiene is perhaps the most important aspect of cleaning and disinfection. Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissue) to support healthy hygiene practices and cleaning and disinfection procedures.
2. Focus cleaning and disinfection efforts on routine cleaning of frequently touched objects.
3. Any items rented by patrons must be cleaned and disinfected between uses. Staff who handle customer items must clean hands after contact with items.
4. Review US CDC cleaning and disinfecting guidance.

CE Initial

Comments:

There should not be a need for cleanings/disinfection during this Bens A Viewing Event.

Screening

1. People should stay at home if they are sick.
 1. Use an electronic or app-based self-screening form, such as the Coronavirus Self-Checker available on the US CDC's.
 2. Self-screen using the following questions:
 1. Do you feel ill or have you been caring for someone who is ill?
 2. In the past two weeks, have you been exposed to anyone who tested positive for COVID-19?

CE Initial

Comments:

We will communicate this to all of our invited participants (2021 graduates and their families).

In Case of Illness

1. Know the signs and symptoms of COVID-19. Know what to do if staff or event goers become symptomatic at the event.
2. Require people to stay home and notify the event administrators when sick



3. When someone starts to feels ill:
 1. Instruct them to not come to the event with symptoms of COVID-like illness.
 2. Symptoms may appear 2-14 days after exposure to the virus.
 - People with these symptoms or combinations of symptoms may have COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Or at least two of these symptoms:
 - Fever
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - New loss of taste or smell
4. When someone becomes ill at your event:
 1. Have a plan for a room or space where the individual can be isolated until transferred to home or health care facility and provided a mask, if available and tolerated.
 2. Encourage the individual to call their health care provider and get tested for COVID-19, if appropriate.
 3. Is the individual needs urgent medical attention (e.g., if individual is having difficulty breathing), call 911.
5. Call 2-1-1 if you have further questions about COVID-19.

 Initial

Comments:

This will be communicated to all of our invited participants (2021 graduates and their families).

City Contact information:

Contact Name	Number	Email
Police Chief James Toman	207-582-5150	JToman@gardinermaine.com
Code Enforcement Officer Kris McNeill	207-582-6888	kmcneill@gardinermaine.com
City Clerk Alisha Ballard	207-582-4460	aballard@gardinermaine.com