



CITY COUNCIL Agenda Item #19-116(d)

Date: April 10, 2019

Consent X Discussion _____

SUBJECT: Street Closure Permit Application: Langdon Street, Onion River Outdoors Bike Swap, 5/4/19

SUBMITTING DEPARTMENT: City Manager's Office

RECOMMENDED ACTION: Approve a Street Closure Permit Application from the Onion River Outdoors for the closure of Langdon Street on Saturday, May 4, 2019 from 6 AM – 1 PM for their Bike Swap.

RELATED COUNCIL GOAL/PRIOR ACTION: Inclusive, Equitable and Welcome Community; Environmental Stewardship

EXPENDITURE REQUIRED: N/A

SOURCE OF FUNDS: N/A

LEGAL REQUIREMENTS: Requests for street closures require Council approval.

BACKGROUND INFORMATION: This is an annual event

SUPPORTING DOCUMENTS: Street Closure Application

INTERESTED PARTIES: Applicant; Property owners/businesses on Langdon Street; Fire; Police and Public Works

CITY MANAGER'S APPROVAL:

A handwritten signature in black ink, appearing to read "W. Hoffman", is written over the "CITY MANAGER'S APPROVAL:" text.

1. Event Sponsor

| | |
|----------------------------|--------------------------------|
| Name: ONION RIVER OUTDOORS | Email: outdoors@onionriver.com |
| Address: 20 LANGDON ST | |
| Cell Phone: 522 6422 | Other Phone: 613-3155 |

2. Event Details

| | |
|---|--|
| Name of Event: ONION RIVER OUTDOORS BIKESWAP | |
| General description of the event (1 to 3 sentences): ANNUAL COMMUNITY BIKE SWAP : 400-500 ^{USED} BIKES AVAILABLE FOR SALE FROM 9 TO NOON | |
| Date of Event: SAT 5/4 | Start and End Time of Event: 9 AM - 12 PM (NEED TO DO SETUP @ 6 AM) |
| Street(s) to be Closed - Please attach a sketch of the event layout. LANGDON ST - sketch on back | |
| Time Street will close (recommend up to an hour before event): 6 AM - 1 PM PLUS NO OVERNIGHT PARKING ON LANGDON FR 5/3 | Time Street will reopen (recommend 30 minutes after the event ends): 1 PM |
| Number of Staff/Volunteers on site for Event: 15 | |
| Number of people expected at event: 400 | Number of vendors and/or entertainers who will participate: 1 |
| Name of General liability insurance carrier - Please attach proof of insurance. (General liability insurance for Special Events in the downtown area must be obtained by the Event Sponsor.) Union Mutual policy in process of being renewed | |

3. Community Support

| | |
|---|--|
| <p>Is this a reoccurring event in Montpelier?</p> <p><i>Yes</i></p> | <p>If no, do you have experience elsewhere with such events? Please explain.</p> |
|---|--|

How does this event benefit the public (as outlined in the Street Closure Policy)?

provides market to sell + buy used bikes at beginning of biking season

4. Public Safety and Public Health

Please describe any discussions or arrangements that the Event Sponsor has made with public safety or public works professionals in Montpelier.

We will coordinate with Chief Facos, Tom McArdle, and anyone else necessary to ensure safe closure of street.

What arrangements have been made for food, water, and toilet facilities (if applicable)?

Onion River Outdoors facilities (and shop space) will be available to event patrons.

What arrangements have been made to assure that litter will be cleaned up and disposed of and that trash and recycling containers will be provided?

ORO employees will clean up the area after the event.

If additional law enforcement officials will be hired for your event, please list:

N/A

Please note any other unique aspects of this event:

No parking notices will be placed on Langdon St meters the evening before to ensure clear street

Will noise levels or hours exceed the city's noise ordinance? If so, will this event require a request for variance from the noise ordinance?

NO

on Sat. morning.

5. Accessibility

As this event will take place on public property, I, as the Event Sponsor, attest that this event and all related programming and facilities meet the Americans with Disabilities Act accessibility requirements. These requirements are available at the City's website.

 _____
 Signature

 JEN ROBERTS
 Printed Name

 4/2/19
 Date

6. Signature

I, the undersigned, certify that the information provided above is valid and I will abide by any additional provisions note by Officials below. I acknowledge that I have read and understand the Montpelier Street Closure policy and that I am responsible for compliance with all requirements contained in that policy. I also agree to be onsite for the duration of the above mentioned street closure.

 _____
 Signature

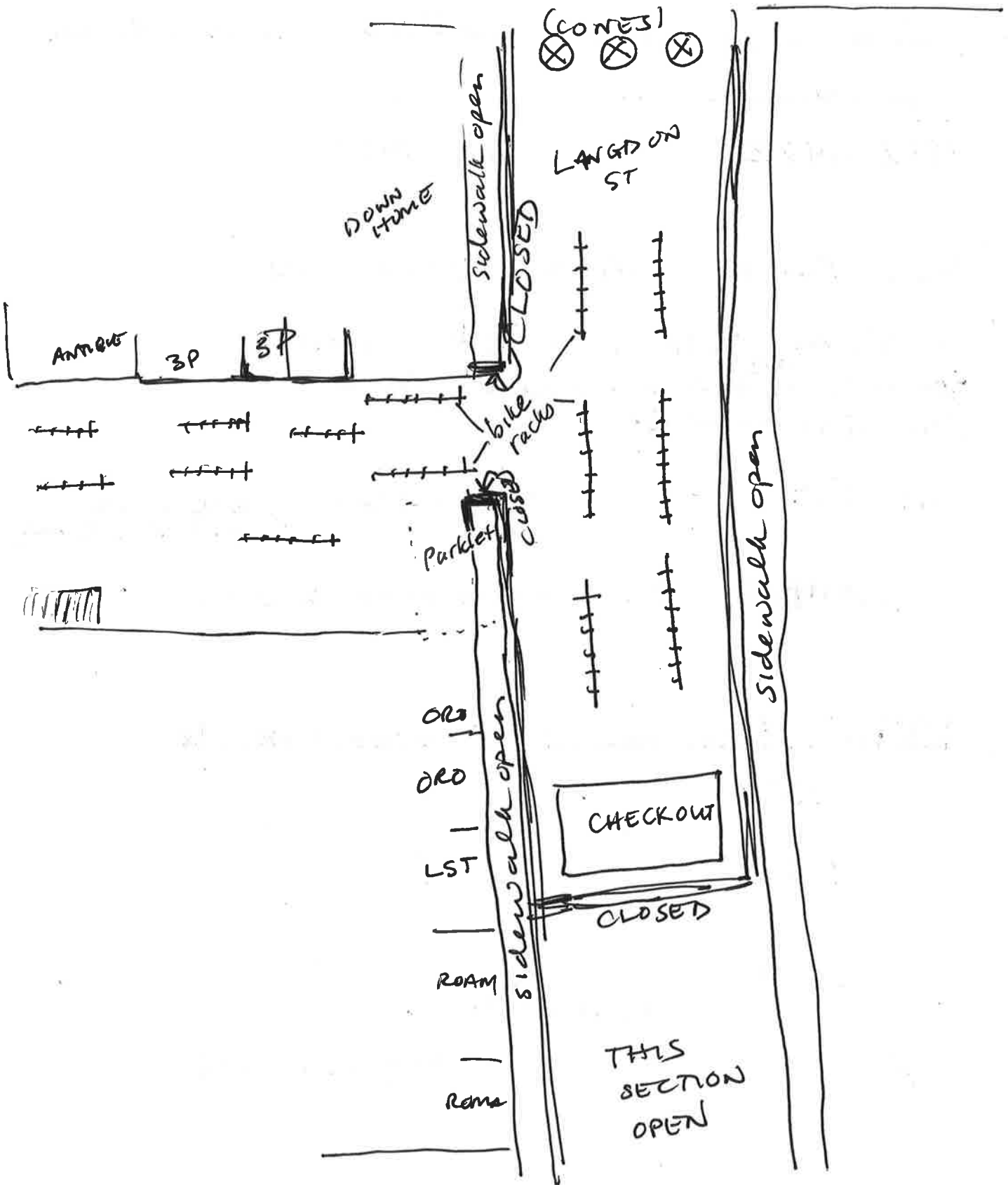
 JEN ROBERTS
 Printed Name

 4/2/19
 Date

Notice Documentation

| | |
|---|--|
| Name of Event: | |
| Date of Event: | Start and End Time of Event: |
| Street(s) to be Closed: | |
| Time Street will close (recommend up to an hour before event): | Time Street will reopen (recommend 30 minutes after the event ends): |
| Date of City Council Meeting to consider permit request: | |
| Describe Efforts made to notify residents and businesses along the street to be closed. Notification must include both the date/time of the proposed event and the date/time of the City Council meeting where the street closure will be considered. | |




MAIN ST



Special Event / Street Closure Permit Application

FOR OFFICIAL USE ONLY

The following parties have reviewed and approved:

| POLICE | |
|---|---|
| <p>Reviewed by:</p> <p><u>NEIL MARTEL</u></p> <p>Print Name</p> <p><u></u></p> <p>Signature</p> <p><u>4/2/19</u></p> <p>Date</p> | <p><input checked="" type="checkbox"/> Reviewed – recommend approval with no conditions</p> <p><input checked="" type="checkbox"/> Reviewed – recommend approval with conditions:</p> <p><i>Barricades or Cones Required on both ends of Langdon St. to be in place before prior to closing of Street. Be responsible for</i></p> <p><i>- ORO shall put signs on Meter spaces / Post indicating NO Parking After 2 AM (Bar closure) SAT. Morning MPD will assist</i></p> <p><input type="checkbox"/> Reviewed – do not recommend approval w/ locating vehicle owners and/or towing after 5 AM Saturday Morning of event.</p> |
| PUBLIC WORKS | |
| <p>Reviewed by:</p> <p><u>Thomas McArdle</u></p> <p>Print Name</p> <p><u></u></p> <p>Signature</p> <p>_____</p> <p>Date</p> | <p><input type="checkbox"/> Reviewed – recommend approval with no conditions</p> <p><input checked="" type="checkbox"/> Reviewed – recommend approval with conditions:</p> <p><i>Closure devices per MUTCD - maintain clear & unobstructed pedestrian thoroughfare on at least one side compliant with ADA P.A.R. requirements.</i></p> <p><input type="checkbox"/> Reviewed – do not recommend approval</p> |
| FIRE DEPARTMENT | |
| <p>Reviewed by:</p> <p><u>Robert Gowans</u></p> <p>Print Name</p> <p><u></u></p> <p>Signature</p> <p><u>4.2.19</u></p> <p>Date</p> | <p><input type="checkbox"/> Reviewed – recommend approval with no conditions</p> <p><input checked="" type="checkbox"/> Reviewed – recommend approval with conditions:</p> <p><i>Maintain Emergency Vehicle Access</i></p> <p><input type="checkbox"/> Reviewed – do not recommend approval</p> |

Special Event / Street Closure Permit Application

| MONTPELIER ALIVE | |
|---|--|
| <p>Reviewed by:</p> <p><u> Dan Groberg </u> Print Name</p> <p><u> Dan Groberg/JG </u> Signature</p> <p><u> 4/3/19 </u> Date</p> | <p><input checked="" type="checkbox"/> Reviewed – recommend approval with no conditions</p> <p><input type="checkbox"/> Reviewed – recommend approval with conditions:</p> <p><input type="checkbox"/> Reviewed – do not recommend approval</p> |
| OTHER | |
| <p>Reviewed by:</p> <p>_____ Print Name</p> <p>_____ Signature</p> <p>_____ Date</p> | <p><input type="checkbox"/> Reviewed – recommend approval with no conditions</p> <p><input type="checkbox"/> Reviewed – recommend approval with conditions:</p> <p><input type="checkbox"/> Reviewed – do not recommend approval</p> |

This permit request was reviewed at the _____ City Council meeting.
(MONTH/DAY/YEAR)

This permit request was: APPROVED _____ DENIED _____