

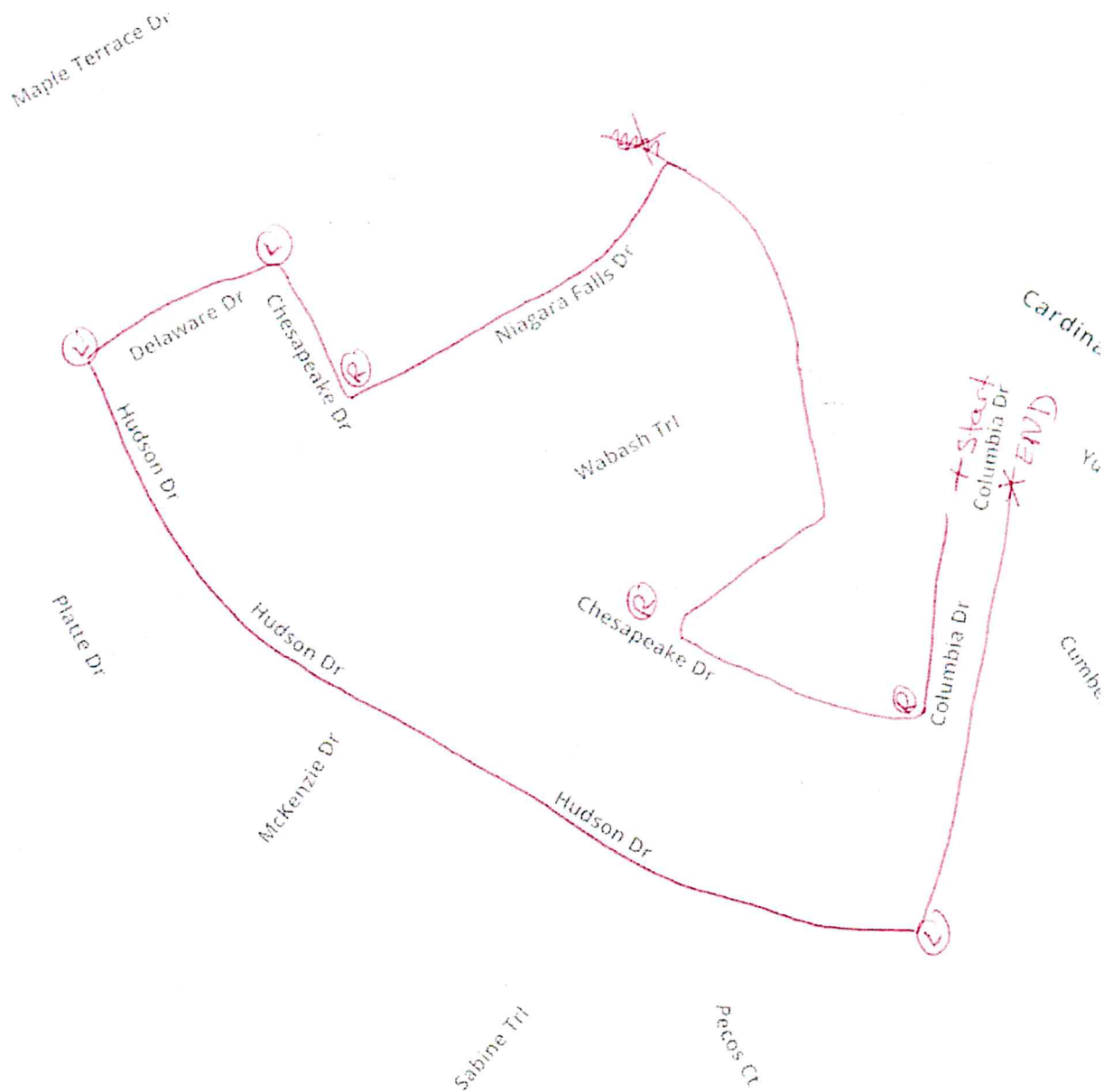
Special Event Application

Organization/Group: Legacy Bronco Band		Date: 9-25-18
Applicant: Tanaya Hestrin		
Applicant's Address: 3666 Doris Walker Trl 76028		Phone No: 682-433-6604
*Will be called or emailed for more information needed and/or when the permit is ready for pick-up		Email: tanayahestrin@gmail.com
Address of Event: Tanglewood & Twin Creek Subdivisions		
Description & Activities: Legacy H.S. Band March-a-thon		
Date of Event: 10/27/18		Hours of Event: 9:00a 1:00p
Public Invited or Private Party? 1		Estimated Number of Attendees: 200
Is the event in a Mansfield Park? NO		*If yes, Insurance is required
Do you plan to Temporarily Close a Public Street? NO		*If yes, Insurance is required
Is the event on Private Property other than your own? NO		*If yes, signed permission is required
Will there be any new or temporary electric lines installed? NO		
*If yes, a registered Electrician must obtain a permit. Indicate the line locations on the site plan.		
Will you be using generators? NO		*If yes, show location on the site plan
Do you plan to have any Tents? NO		*If yes, a separate permit is required.
Do you plan to have any pop-up canopies? NO		
Do you plan to have any Promotional Signs? (banners, streamers, balloons) NO		*If yes, a separate permit is required
City of Mansfield Assistance Requested:		
Barricades/ Street Closure? NO		*If yes, show on site plan where you want to have barricades. A resident roster must be submitted for a block party.
Police/Traffic Control/Security? MISD Police		*If yes, attach an explanation and the name of the person you are working with
Please Read and Include the Following Information With This Application * For all outdoor activities, a site plan must be attached. One can be provided if requested. You need to show where <u>all items</u> will be located on the site plan. * If Insurance is required, the City of Mansfield must be listed as "Additional Insured". * All documents must be turned in at the same time. Please allow enough time for review and approval before the date of your event.		
Applicant's Printed Name:		Applicant's Signature:
Tanaya Hestrin		Tanaya Hestrin

mapquest

Start on Colombia
Right on Chesapeake
Right on Delaware
Left on Niagara Falls
Right on Chesapeake
Left on Delaware
Left on Hudson
Left on Columbia

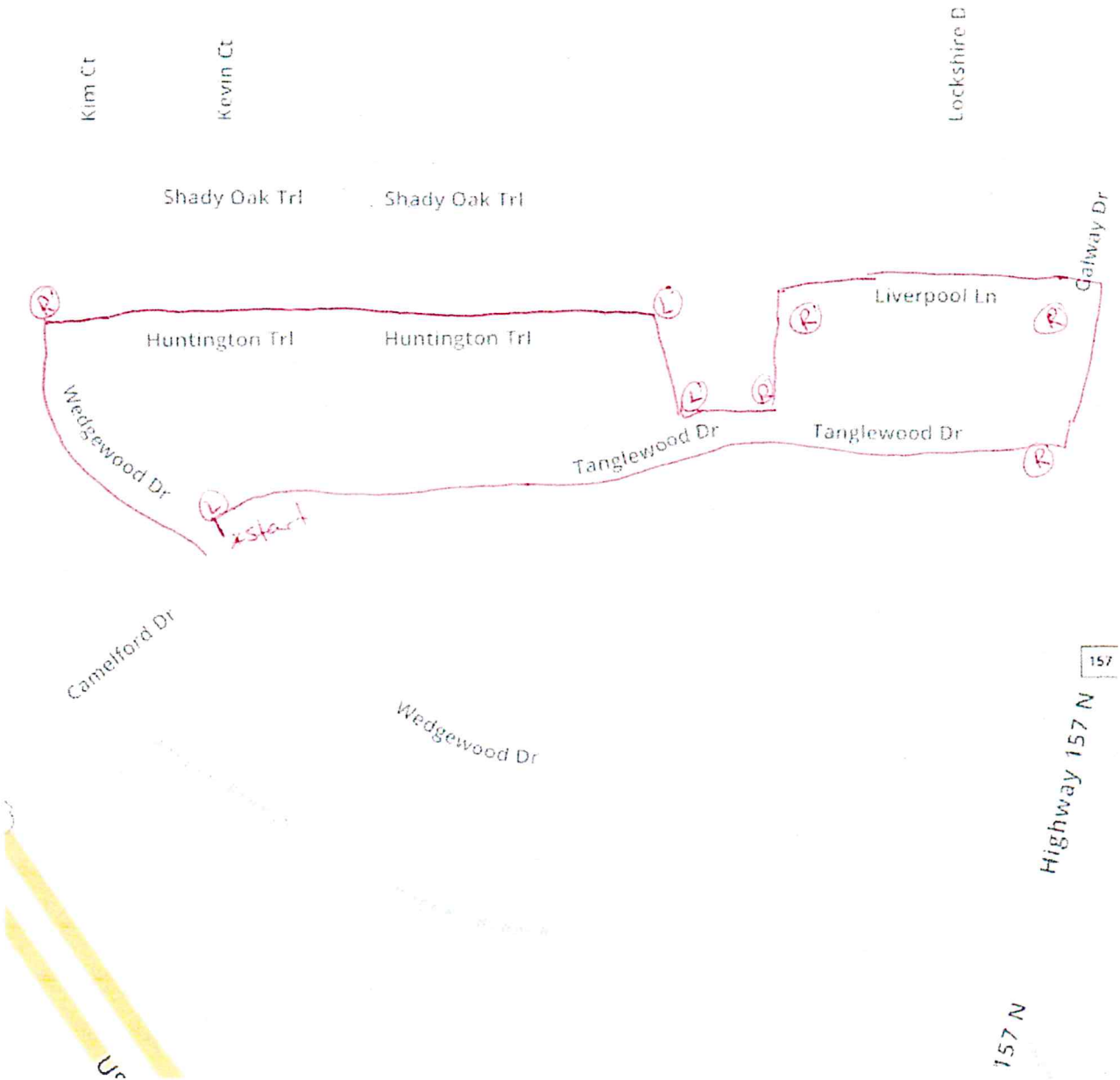
Twin Creeks





- Start on Wedgewood dr.
- Right on Huntington Tr.
- Left on Tanglewood Dr.
- Left on Forest Creek Dr.
- Right on Liverpool Ln.
- Right on Galway Dr.
- Right on Tanglewood
- Left on Wedgewood

Tanglewood



AGREEMENT TO ASSIST AT SPECIAL EVENT

Special Event Name and Date: Legacy High School March-A-Thon 10/27/

Name of Group Assisting:

☐ Mansfield Police

☒ MISD Police

☐ Constable Office

☐ Other _____

Please check all that apply:

☒ We have an agreement to be Traffic Officers for this Special Event.

☒ We have an agreement to be Security Officers for this Special Event.

☐ Other: _____

Terry Gomas #108
Signature

TERRY GOMAS Sgt. Police
Printed Name/ Job Title

1522 N. WALNUT CREEK Mansfield Tx 76031
Mailing Address

817 299-6000
Contact Phone Number

terrygomas@misdmail.org
E-mail



ASSOCIATION
INSURANCE
MANAGEMENT, INC.

MEMBER CERTIFICATE OF INSURANCE

9/25/18

Thank you for purchasing your insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

Insured #: TX074309

NAMED INSURED MEMBER:

Legacy Band Boosters
Attn: Shelly Reigh or Current Officer
P.O. Box 1638
Mansfield, TX 76063

Named Insured & Mailing Address

Education Support Purchasing Group
c/o AIM
P.O. Box 674051
Dallas TX, 75267-4051

PRODUCER NAME

AIM Association Insurance
Management, Inc.
PO Box 674051
Dallas TX, 75267-4051

Company / Coverage	Policy #	Effective Dates	Deductible	Limits of Insurance	
Tudor Insurance Company / Commercial General Liability	CPG1071301	6/19/18 - 6/19/19	\$ 0	Each Occurrence	\$1,000,000
				General Aggregate	\$2,000,000
				Products - COM/P/OPS - Subject to General Aggregate	Included
				Personal & Advertising Injury	\$1,000,000
				Fire Damage (any one fire)	\$50,000
Tudor Insurance Company / Extended Medical Payments	CPG1071301	6/19/18 - 6/19/19	\$ 0	Any One Person	\$5,000
Tudor Insurance Company / Professional Liability (Directors & Officers Liability)	CPG1071302	6/19/18 - 6/19/19	\$ 1,500	Aggregate	\$1,000,000
		Retro-active Effective Date:	6/19/14		
Tudor Insurance Company / Fidelity Bond (Crime)	CPG1064225	6/19/18 - 6/19/19	\$ 250	Each Occurrence	\$50,000

Certificate Holder:

City of Mansfield
1200 E. Broad Street
Mansfield, TX 76063

This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any, complete the above numbered policy. Copies of the Master Policies are available upon request or may be printed at www.aim-companies.com

AUTHORIZED REPRESENTATIVE