

To Whom It May Concern,

My Name is Lyle Coyle, I am the committee chair for ABATE of Washington's Spring Opener held last year in Easton at the Silver Ridge Ranch. We are hoping that you will allow us to do this event there again this year. I have filled out the permit and given all information that I could think of however if I have not given you the information you need please contact me and I will get whatever information you need. My e-mail address is lacoy@live.com and cell # 253-617-8843.

Sincerely

Lyle Coyle

RECEIVED

NOV 18 2011

1st 2nd 3rd KITHTAS COUNTY BOARD OF COMMISSIONERS



Kittitas County, Washington

BOARD OF COUNTY COMMISSIONERS

EVENT APPLICATION

Thank you for your interest in holding a special event in Kittitas County. Please complete and return this application along with any other materials to the Kittitas County Board of Commissioners at least 60 days prior to the day upon the event is scheduled. Any misrepresentation in the application materials or deviation from the final agreed upon route and/or method of operation described may result in the immediate revocation of an issued permit. Specifics outlining Event Permits can be viewed at http://www.co.kittitas.wa.us/boc/countycode/title05.asp

Event Information

Name of event: ABATE of Washington Spring Opener					
Date(s) of event: <u>June 14-17 2012</u>					
Hours of operation: 6:00 AM - 1:00 AM					
Description of the event: A weekend event of music, motorcycle games,					
Has this event taken place before? Yes No Dates: last 32 years same weekend					
Estimated attendance: 500 to 1500					
How is your event being publicized?newsletter, flyers (are not made up till					
event is definite)					
Please attach any flyers, posters, etc. with your application submission.					
Contact Information					
Name of the organizer/contact person: ABATE of Washington/Mick Gillispie					
Address: P.O. Box 8369, Tacoma, WA. 98419-0369					
Phone number(s): 253-475-4944 home - 253-381-6724 cell					
Email address:_abatemember@comcast.net / please cc lacoy@live.com					
Date of birth of applicant: March 21, 1979					

If the application is made on behalf of a partnership, please submit full names with their residence and post office address for a period of six months prior to the date of application together with the location of principal office or place of business of such corporation. Corporation (see attached)

Mick Gillispie - State Coordinator 253-381-6724

Emergency contact name(s) and phone number(s) that can be contacted during the event:

Ron Voss - officer

Ron Voss - officer

Sog-305-1363

Phone Number

Lyle Coyle

Phone Number

Phone Number

WRITTEN PERMISSION TO ENTER EVENT SITE

I/We hereby permit law enforcement and/or County officials to enter the site for which the Event Application has been granted at the time of the event and up to five days prior to the event for the purposes of inspecting and enforcement of County Code and other applicable laws, and pursuant to my agreement and representations made in connection with this Event Application.

SWORN STATEMENT OF COMPLIANCE

I/We hereby acknowledge that I/We have read Kittitas County Code, have familiarized myself with County requirements. I/We agree that either my designated agent or I/we shall be on site at all times and shall be responsible for the operation of the event and for compliance with all legal requirements in connection with this event.

I/We understand that failure to comply with the rules, regulations and conditions set forth in Code may be deemed a gross misdemeanor and that drug or narcotics violations are crimes under RCW.

ABATE of Washington State Coordinator
Applicant Name (Print)

ABATE of Washington Deputy Coordinator
Applicant Name (Print)

Konell 5. (). Applicant Signature

bicant Signature

KITTITAS COUNTY COURTHOUSE - 205 WEST 5th , SUITE 108 - ELLENSBURG, WA 98926 (509) 962-7508 - FAX (509) 962-7679



Kittitas County, Washington

BOARD OF COUNTY COMMISSIONERS

Fire Safety and Protection

If more than 50 people are expected at your event, you must complete a separate application process which can be obtained through the Kittitas County Fire Marshal's office. You may contact the Fire Marshal's office at 509-962-7000.

Will there be a temporary structure erected for the event? Yes



If yes, you must attach a drawing including the dimensions. The structure may require an inspection by County staff prior to the event.

Public Health/Environmental Health

Will there be food served at the event?



No

If no food will be served at the event then, no permit or application is required.

If yes, is the food and beverage that you intend on preparing and serving at the event exempt from permit requirements http://www.co.kittitas.wa.us/health/food.asp?

- If yes, please submit an <u>application for exemption</u> from permit and proof of food handlers training to the Kittitas County Public Health Department (KCPHD).

If yes, and the food or beverage is <u>not</u> considered exempt from permit, then does the person or organization preparing and serving the food have a food service permit, temporary food service permit, or catering permit from KCPHD?

- If yes, please provide a list of foods and beverages that you intend on having prepared and served at the event along with the name and phone number(s) of the permitted person or organization.

If yes, and the person or organization preparing and serving the food <u>does not</u> already have a food service permit.

 Then a temporary food service permit or catering permit will need to be acquired from KCPHD prior to the event.

Please allow at least 2 weeks to complete the food service permitting process.

Are there permanent or fixed bathroom facilities already available at the location of the event?



No

If yes, please provide an estimated attendance for the event, a detailed map that identifies the name and address of the physical facility that will provide lavatory facilities for the event, quantity of toilette facilities available for each gender, and the distance from the event that patrons must walk.

If no, please provide an estimated attendance for the event, specific information related to the number of portable restrooms that will be provided, the distance from the event that patrons must walk, and a service plan to ensure that sani-cans remain in a sanitary condition. You must include the location of the portable restrooms on a map/diagram of the event.



Kittitas County, Washington BOARD of COUNTY COMMISSIONERS

Law Enforcement/Security/Emergency Medical Services

Will there be security on site during the event?							
If yes, please provide a complete list of names and contact information for who will b providing the security.							
Will Emergency Medical Services (EMS) be on site during the event? Ves No							
If yes, please provide written verification from the providers.							
Will there be music, sound amplification or any other noise impacts?							
If yes, Kittitas County has a noise ordinance in effect (see County Code for details). If your event is scheduled for outside of the allowed time, you must submit a written letter to the Board of County Commissioners requesting a waiver and it must be included with your application materials.							
Will you have traffic control? Yes Vo If yes, please provide documentation on how the traffic control will be addressed.							
if yes, please provide documentation on now the traine control will be addressed.							
Will there be off-site parking? Yes							
If yes, please provide the location and a parking plan.							
Will there be shuttle buses provided for attendees? Yes							
If yes, provide a map of their route.							
Will there be alcohol served at the event? Yes							
If yes, a State permit is required from the WA State Liquor Control Board and must submitted with your application materials.							



Kittitas County, Washington BOARD of COUNTY COMMISSIONERS

Public Roads

Will the event obstruct, interfere or require the closure and free use of any public road, street or right-of-way? Yes Vo

If yes, please provide a detailed adequate traffic and detour plans at the time of submission of the application.

Will there need to be road closure or detour signs posted? Yes



Kittitas County, Washington

BOARD OF COUNTY COMMISSIONERS

Garbage/Recycling

Do	you	have a	plan i	for	garbage	and	recycling?	\/ks	No
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A written plan for garbage and recycling must be attached to your application materials. For questions or assistance contact the Kittitas County Solid Waste Department at 509-962-7542.

Insurance

Have you obtained a Certificate of Insurance, specifically naming "Kittitas County" as an insured? Yes No

A copy of the Certificate of Insurance must be included with your application materials. Kittitas County must be named as an additional insured in the amount of \$1,000,000.00 per occurrence and \$2,000,000.00 aggregate coverage.

Penal Bond - Bond of Indemnity

A \$5,000.00 Penal Bond - Bond of Indemnity is required to be deposited with the County Treasurer to save and protect the streets, pavements, bridges, etc. from damage. The deposit or its balance will be returned once the event has been held and the Board of County Commissioners has certified no damage has been done and that the County has not incurred additional expenses

Are you submitting a \$5,000.00 Penal Bond - Bond of Indemnity with your Event Application? Yes

If no, you must request a letter in writing to the Board of County Commissioners requesting a waiver to the Penal Bond – Bond of Indemnity and outline the specific reasons why it should not be required of your event.

County Filings and Registration

Is there a cost to attend the event?



No

How much are you charging to attend your event? \$35.00 / \$40.00

ABATE-1

OP ID: CL



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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(les) 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). CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS; PRODUCER 253-851-9600 Century Insurance Services LLC 3208 50th St Ct NW, Suite C104 Gig Harbor, WA 98335 Susie K Nelson 253-851-9601 FAX (A/C, No): INSURER(S) AFFORDING COVERAGE NAIC ≉ INSURER A : Scottsdale Insurance Company INSURED Abate of Washington Mick Gillispie INSURER C : P.O. Box 8369 Tacoma, WA 98418 INSURER D INSURER E :

INSURER F:							
			E NUMBER:			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		ADDL SUB INSR WYD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY					EACH OCCURRENCE \$	1,000,000
Α	X COMMERCIAL GENERAL LIABILITY		CPS1233350	09/30/11	09/30/12	DAMAGE TO RENTED PREMISES (Ea occurrence) \$	100,000
	CLAIMS-MADE X OCCUR					MED EXP (Any one person) \$	5,000
						PERSONAL & ADV INJURY \$	1,000,000
						GENERAL AGGREGATE \$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG \$	2,000,000
<u> </u>	POLICY PRO- JECT LOC					\$	
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$	
	ANY AUTO ALL OWNED SCHEDULED					BODILY INJURY (Per person) \$	
	AUTOS AUTOS NON-OWNED					BODILY INJURY (Per accident) \$	
	HIRED AUTOS AUTOS					PROPERTY DAMAGE \$ (Per accident)	
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<u> </u>	DED RETENTION \$ WORKERS COMPENSATION					\$ WC STATU- OTH-	
	AND EMPLOYERS' LIABILITY Y/N					ITORYLIMITS! ER	
		N/A				E.L. EACH ACCIDENT \$	
	(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE \$	
A	DESCRIPTION OF OPERATIONS below Commercial Applica		CPS1233350	09/30/11	09/30/12	E.L. DISEASE - POLICY LIMIT \$	
^	- Commorcial Applica		CF 0 1233330	09/30/11	08/30/12		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)							
μceπ	ificate holder is included as addition sects Spring opener	nal insu	red per CG2026 07/04 as				
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CEF	RTIFICATE HOLDER		TO THE RESIDENCE OF THE PARTY O	CANCELLATION	***************************************		***************************************
			KITTITA		THE PROPERTY OF THE PERSON NAMED IN COLUMN 1	**************************************	

	CERTIFICATE HOLDER		CANCELLATION
	Kittitas County 205 W 5th Ave	KITTITA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	Ellensburg, WA 98926-2887		Susil K Melow
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)						
KITTITAS COUNTY 205 W 5TH AVE ELLENSBURG, WA 98926-2887	GOVERNMENT OF THE PROPERTY OF	amus (Kirin (Kirin) (Kirin (Kirin) kung kananan amamin _n (Kirin)	FRANCISCOMORDO ANA ANTONIO			
Information required to complete this Schedule, if not shown above, wi	ill be shown in the Dec	larations				

Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

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ABATE OF WASHINGTON

ABATE OF WASHINGTON

UBI Number

600629990

Category

REG

Profit/Nonprofit

Nonprofit

Active/Inactive

Active

State of

WA

Incorporation

WA Filing Date Expiration Date

03/21/1979 03/31/2012

Inactive Date

Duration

Perpetual

Registered Agent Information

Agent Name

MICK GILLISPIE

Address

11701 94th Ave E

» Close «

City

PUYALLUP

State ZIP

WA 98373

Special Address Information

Address

City

State

Zip

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Phone Numbers | Privacy Policy | Accessibility | Mobile Washington Secretary of State · Corporations Division 801 Capitol Way South PO Box 40234, Olympia WA 98504-0234 (360) 725-0377

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Itinerary for ABATE of Washington Spring Opener 2012

Thursday June 14, 2012 – general setup, vendors allowed to enter property, inspections for compliance (vendors, security, portable toilets, garbage, ect;), and general admission.

Friday June 15, 2012 – general admission, no daytime activities planned, evening live music.

Saturday June 16, 2012 – general admission, bike show, bike games, evening live music.

Sunday June 17, 2012 - cleanup, pack up, inspect, and leave



Security

Security will be handled by Phoenix Protection Corp., ABATE of Washington Security personnel, and Christian Crusaders. All entrants will go thru the gate I.D. checked if any doubt on age and arm banned to insure that all entrants at least 21 years of age.

Sanitation

Along with the fixed toilets and sanicans already on the property ABATE of Washington will be renting additional sanicans and will be cleaned as often as necessary to make sure they clean and sanitary. For garbage there will be garbage cans placed around the property along with containers for recyclables, there will be a 50 yd. dumpster or two 25 yd. dumpsters to place garbage.

Vendors

All vendors will have the proper permits, fire and safety equipment, and any other requirements made by Kittitas County.



ATTEN: Kittitas County Sheriff's Office Clayton Myers – Undersheriff 205 W. 5th Ave. –Ste I/Sheriff Ellensburg, Wa. 98926

To Whom It May Concern:

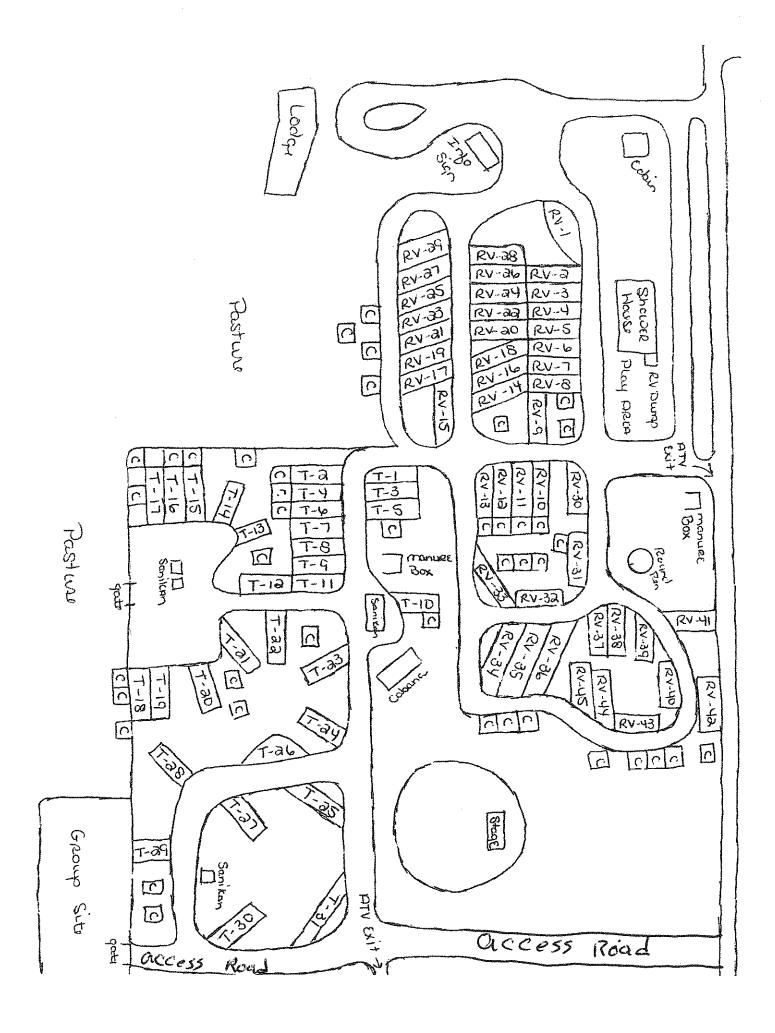
This is an outline of our Security Plan for Spring Opener 2012

- 1. A.B.A.T.E. of Washington will provide a mobile command center for housing of gear, radio's and area for processing any issues.
- 2. Security Manpower:
 - A. Phoenix Security 160 hours.
 - B. Christian Crusaders: at Gate.
- C. ABATE Security, work with Phoenix and manage ABATE Volunteers' 10-40 working with ABATE security and "roving" with min of 4 at any time ABATE security personnel to wear orange vests while on duty volunteering as security. Arm bands will be given to identify that patrons are over 21 and belong in event.
- 3. Coordinate Sheriffs Department Coordination of Kit-Com and Phoenix Security. (Tie-in of Radio communications)
- 4. Will work with Sheriffs Department, Phoenix and ABATE to put together a crisis plan.
- **5. Roster** of key contacts for event: Security (ABATE), Phoenix Security, Sheriff, emergency personnel, ABATE staff and etc. (Phone Directory of Personal)
- 6. Map-Will provide map prior to event to Fire Marshal and Sheriffs Dept..

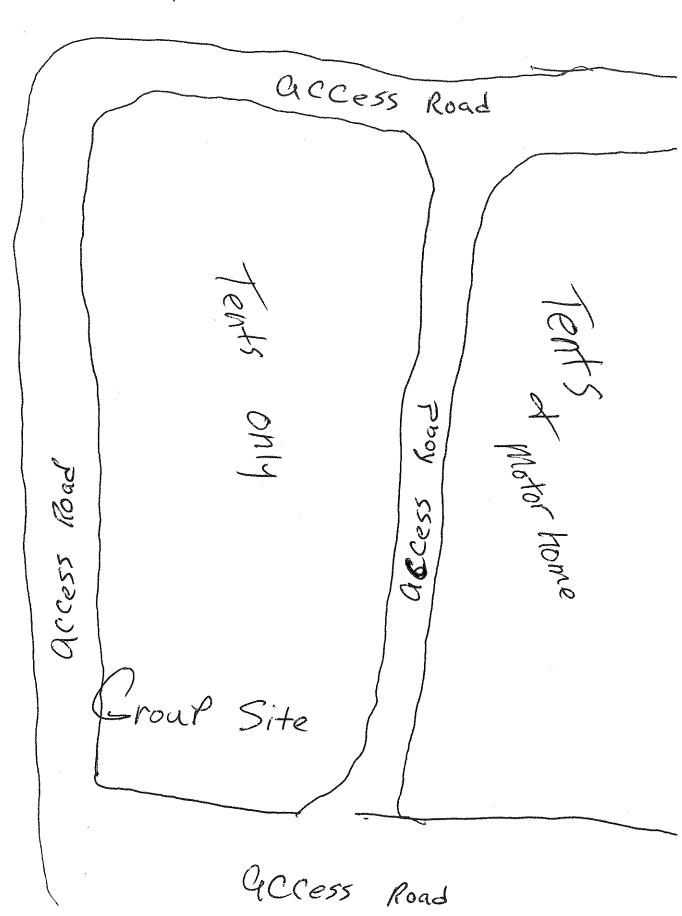
Mick Gillispie

State Coordinator

A.B.A.T.E. of Washington



Tents + Motorhomes



70115 of Motorhomes



We ABATE of Washington are applying for a Penal Bond waiver as we do not have any activities on any public property.

We ABATE of Washington are applying for a waiver to the noise ordinance to the time of 1:00 AM for live music.

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Kittitas County Office Of The Treasurer Deanna Jo Panattoni, Treasurer 205 W 5th Avenue, Suite 102 Ellensburg, Wa 98926

Phone (509) 962-7535 Fax (509) 933-8212

Cash Receipts

Receipt Number:

2011-8772

Date:

11/18/2011

Received From:

MANDY ROBINSON-DEPUTY CLERK OF THE BOARD-KRI

Check Amount:

\$200.00

Cash Amount:

\$0.00

Eft Amount

\$0.00

Total Amount:

\$200.00

Deputy: JULIEC

Receipt Type: CHK

Template:

Comments:

SPECIAL EVENT PERMIT FEE FROM ABATE (LYLE AND DEBORAH COYLE) - CSR - 2011-5566

FundCode

GlCode

Description

Amount

001

1632171

SPECIAL EVENTS FEE

\$200.00

Total Amount:

\$200.00

Kittitas County Treasurer's Office

Submitted By: JULIE COPPOCK