August 6, 2013



# Town of Freeport 30 Main Street FREEPORT, ME 04032 (207) 865-4743 FAX 865-0929

## **Request for Use of Town Property**

<u>Please note:</u> All requests for groups/individuals to use town property\* need to be approved by the Town Council at a regularly scheduled Town Council meeting. Requests must be submitted two weeks prior to the Town Council Meeting in order to be placed on the Agenda (Please contact the Town Manager's office at 865-4743 x121 or check the Town's Website at <a href="www.freeportmaine.com">www.freeportmaine.com</a> for Town Council meeting schedule).

Day/Date(s) of Activity July 4, 2024 Location Freeport Memorial Park at corner of Pa
Arrival Time 6:00 a.m. Time of Activity 7:20 a.m. End Time 11:30 a.m.
Name of Activity L.L.Bean 4th of July Running Race to benefit the YMCA
Description of Activity 10K Running Race and Kids Fun Run
Description of Town Equipment or Personnel requested Police detail needed
If the event is anticipated to affect traffic in any way (e.g. road race) or the number of participants is expected to exceed 250, a Special Event Permit from the Freeport Police Department is required.
Organization/Individual making request Bill Yeo L.L.Bean Community Engagement  Non-Profit Profit X
Contact/Title Bill Yeo L.L.Bean Community Engagement
Address 15 Casco St. Freeport, Maine
Day Phone 207-552-7899 Evening/Cell Phone 207-353-9169

- \* Requests for Winslow Memorial Park Group Shelters are approved by the Winslow Park Manager. Contact Neil Lyman, Park Manager, at 865-9052 or 865-4198 for more information.
- \* Bow Street Park Requests must be pre-approved by the Town Clerk prior to submission of this form (Tracey Stevens, 865-4743 x123).

# **RULES & REQUIREMENTS**

Groups/individuals are required to provide proof of liability insurance - \$400,000 Bodily Injury & Property Damage naming the town as additional insured\*.

If alcohol is to be served, a caterer is required and the caterer is also required to show proof of insurance with both General Liability and liquor liability and naming the town as additional insured.

For events where alcohol is to be served, an off duty Freeport police officer is required to be present for the duration of the event, to be hired at the expense of the applicant.

The Town shall indemnify and hold harmless the USER from claims, suits or liabilities resulting from the negligence of the Town, its officers, agents and employees. The USER shall indemnify and hold harmless the Town its officers, agents and employees from claims, suits or liabilities resulting from the negligence of the USER.

The USER shall hold harmless, indemnify and defend the Town against liabilities, expenses and losses imposed upon them as a result of the negligent actions or inaction of the USER related to its use or operation of the premises. The Town shall hold harmless, indemnify and defend the USER against liabilities, expenses and losses imposed upon them as a result of the actions or inaction of the Town's employees, officers or agents related to its ownership of the Premises. This obligation to indemnify shall not waive any defense immunity or limitation of liability, which may be available to the USER, under the Maine Tort Claims Act pursuant to the provisions of 14 MRSA Section 8101 et seq. or any other privileges or immunities as may be provided by law.

\*\*If the group does not currently have insurance they may check with their personal agent or purchase it through the TULIP program at <a href="www.ebi-ins.com/tulip">www.ebi-ins.com/tulip</a>.

The Town's TULIP ID number is 0419-005

I hereby acknowledge and agree that the event sponsor and the participants will comply with all applicable laws of the State of Maine and the Town of Freeport, and adhere to the conditions granted by this application.

Signature of au	thorized representative:	Bill Geo		
	•			
Printed name:	Bill Yeo		Date: 04/05/24	

\* RETURN COMPLETED FORM & CERTIFICATE OF INSURANCE TO THE FREEPORT TOWN MANAGER'S OFFICE AT LEAST TWO WEEKS PRIOR TO THE TOWN COUNCIL MEETING AGENDA YOU WANT YOUR REQUEST TO BE CONSIDERED.

Authorizing Authority Use Only				
Date received:				
By:				
☐ Denied ☐ Approved ☐ Approved with conditions Date notified:				
Conditions:				

#### Client#: 1568256 LLBEA1

### ACORD...

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/27/2024

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 any rights to the certificate holder in lieu of such endorsement(s).

tine detailed dede not define any righte to the detailed following of each order comment(c).					
PRODUCER	CONTACT Liz Foster				
USI Insurance Services, LLC	PHONE (A/C, No, Ext): 203-634-5721 FAX (A/C, No):				
855 Boylston Street, 8th Floor	E-MAIL ADDRESS: elizabeth.foster@usi.com				
Boston, MA 02116	INSURER(S) AFFORDING COVERAGE				
617 330-1005	INSURER A: Citizens Insurance Company of America				
INSURED	INSURER B: National Fire and Casualty Company	41068			
L.L. Bean, Inc.	INSURER C: Massachusetts Bay Insurance Compa	ny 22306			
15 Casco Street	INSURER D:				
Freeport, ME 04033	INSURER E :				
	INSURER F:				

COVERAGES CERTIFICATE 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		TYPE OF INSURANCE	ADDL:	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	Χ	COMMERCIAL GENERAL LIABILITY			LBNA28025009	04/01/2023	08/01/2024	EACH OCCURRENCE	\$2,000,000
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
								MED EXP (Any one person)	\$10,000
								PERSONAL & ADV INJURY	\$2,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$4,000,000
		POLICY PRO- JECT X LOC						PRODUCTS - COMP/OP AGG	\$4,000,000
		OTHER:							\$
С	AUT	OMOBILE LIABILITY			ADNA28013709	04/01/2023	08/01/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ <b>2,000,000</b>
	X	ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident)	\$
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY			COMP Ded	\$2,000 Max	¢	PROPERTY DAMAGE (Per accident)	\$
					COLL Ded	\$2,000 Max	d		\$
В	X	UMBRELLA LIAB X OCCUR			42UMO31460203	04/01/2023	08/01/2024	EACH OCCURRENCE	\$10,000,000
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$10,000,000
		DED RETENTION \$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$
	(Mar	ndatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$
		s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: Town of Freeport 4th of July . July 4th Road Race Freeport ME.

Town of Freeport named as Additional Insured in regards to General

Liability if required by written contract

CENTIFICATE HOLDEN	CANCELLATION
Town of Freeport Peter Joseph Freeport Town Office Maine Street	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Freeport, ME 04032	AUTHORIZED REPRESENTATIVE
1	Toda M

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