



STREET USE APPLICATION

Event: Race the Lake

Sponsored by: Midwest Sports Events

Responsible Person: Gloria West

Address: 2079 Lawrence Dr.
De Pere WI 54115

Phone: 920 338 8741

Email Address: gloria@midwestsports events.com

Street Route: (Attach Map) Bikes will ride through from 7:00 to
Description of Use 9:15 am

Street Use Date: 8-21-11

Start Time: 7:00 am

End Time: 9:15 am

Number of Units: 1500

Liability Insurance has been secured in the amount of \$ 1,000,000 with the City of Menasha named as the additional insured. This is primary insurance.

Insurance Company Valley Insurance Policy No. CP3171639
(Attached is a copy of the certificate of insurance).

Date: 8-21-11 Applicant's Signature: [Signature]

Permit Fee: Each application for a Street Use Permit shall be accompanied by a fee of Twenty-Five Dollars (\$25.00). Make checks payable to City of Menasha. See highlighted portion of the attached City of Menasha Municipal Code.

Note to events planning to use City Parks and/or greenspace: Any multi-day event or event which plans to sell beer and/or wine to the public must appear before the Parks and Recreation Board.

TO BE COMPLETED BY CITY STAFF (Revised May 2010)

Scheduled Park & Recreation Board Review Date: _____

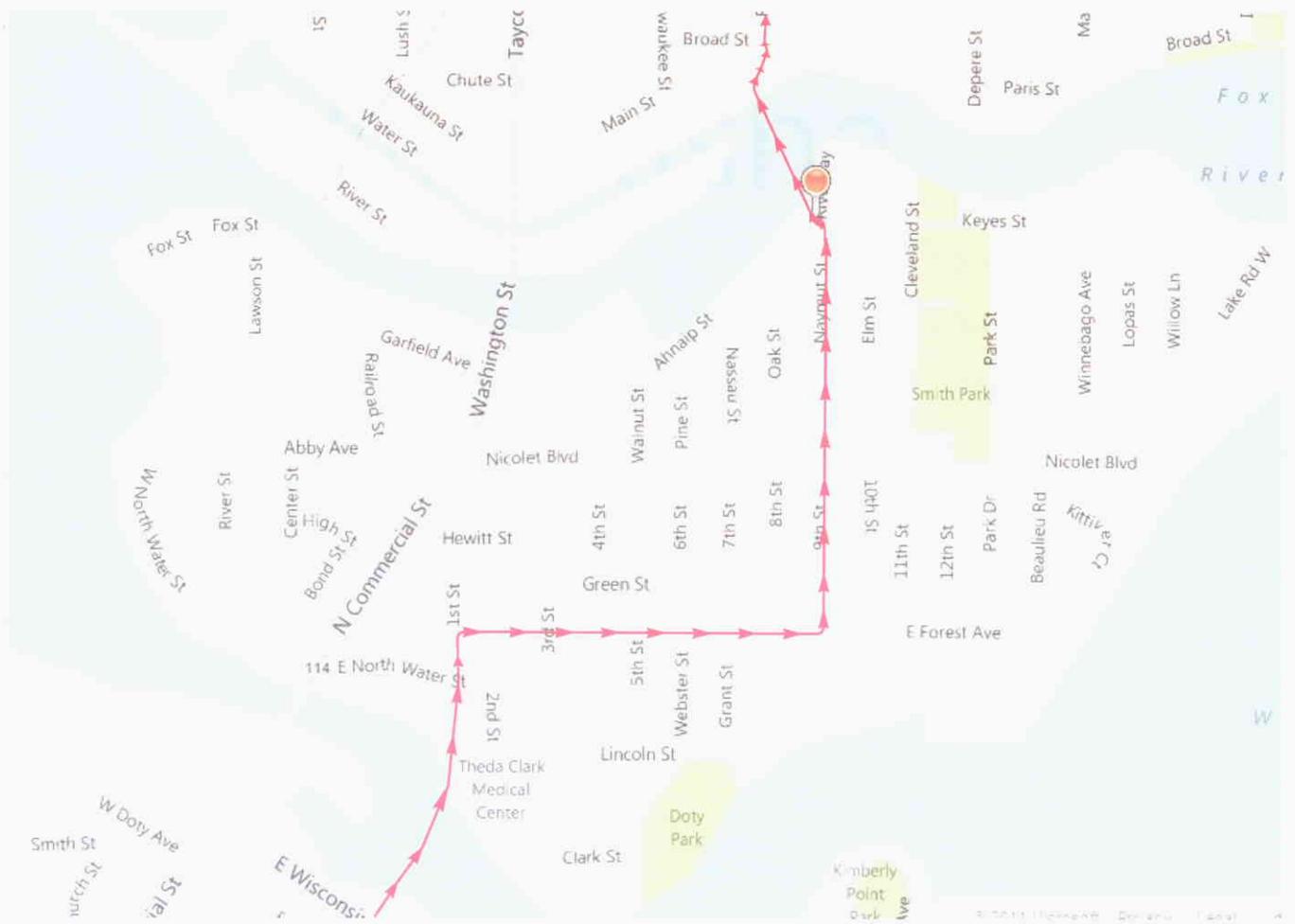
Not Required: _____ Approved: _____ Denied: _____

Scheduled Common Council Review Date: 7-5-11

Approved: _____ Denied: _____

APPROVAL: _____

Police Dept. [Signature] Fire Dept. [Signature] Public Works Dept. MR City Attorney [Signature]





SECURA INSURANCE, A Mutual Company
P. O. BOX 819 APPLETON, WI 54912-0819
COMMERCIAL GENERAL LIABILITY
DECLARATION

POLICY NO. 20-CP-003171639-0/000

ACCOUNT NUMBER: 00007218793
NAMED INSURED AND MAILING ADDRESS

AGENCY AND MAILING ADDRESS 481957 04

MIDWEST SPORTS EVENTS LLC
2079 LAWRENCE DR STE D
DE PERE WI 54115

VALLEY INS ASSOC INC
PO BOX 1937
APPLETON WI 54912-1937

POLICY PERIOD: From 12/13/2010 to 12/13/2011 AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

LOC CLASSIFICATION	CODE	PREMIUM BASIS	PMS RATE	PDTS RATE
SPECIAL EVENT LIABILITY EXPOSURE BASIS IS ATTENDANCE PER DAY SPECIAL EVENT GROUP II 501 TO 1500	20028	OTHER		
SPECIAL EVENT LIABILITY EXPOSURE BASIS IS ATTENDANCE PER DAY SPECIAL EVENT GROUP II 501 TO 1500	20028	OTHER		
SPECIAL EVENT LIABILITY EXPOSURE BASIS IS ATTENDANCE PER DAY SPECIAL EVENT GROUP II 501 TO 1500	20028	OTHER		
GENERAL LIABILITY WRAP CGT1000 0601	44444	OTHER		

ADDITIONAL INSURED(S)

PER FORM: CG2026 (07-04)

CITY OF MENASHA
40 MAIN ST
MENASHA WI 54952

PER FORM: CG2026 (07-04)

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BU

CPP 4506 9601

12-29-10 MLV 1026

Original

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ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

CG-2026R(7-04)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

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:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

SCHEDULE

**Name of Additional Insured
Person(s) or Organization(s)
(Name and Address)**
