



**CITY OF GALLUP
EVENT · PARADE · PARKS · FILM
COURT HOUSE SQUARE
PERMIT CHECK LIST**

Office of the City Clerk
P.O. Box 1270
Gallup, New Mexico 87305
(505) 863-1254

Profit _____ Non-Profit X Permit Number _____
Applicant(s) Miyamura High School / Sara Montoya
Mailing & E-Mail Address 680 Boardman Ave / smontoya@gmcs.org
Home/Office/Cell Phone # (505) 721-1907 / (505) 728-0904
Type of Event Parade for Homecoming Date[s] 09/23/2022 Time[s] 2:00 PM - ?
Location(s) Downtown
Parade Route Artec street SEE Parade Route TO 3:00 PM ish

NOTE* Obtain signatures in order shown, attach a written scope of event and provide a Certificate of Insurance for requested event. All street closures are City Council approved, 30 days in advance.

1. CITY POLICE DEPARTMENT: Chief Franklin Boyd or Designee 863-9365

OPD will request
assurances
from other depts
to cover inter section

Assigned Officer(s) Admin Staff and Patrol shift off N/A
Police Department Fees _____ N/A
Special Equipment/Conditions _____ N/A
Security Plan Review _____ N/A
Approved: Disapproved _____

Field Services Signature: Erin Toddona-Pablo Date 09/17/22

2. CITY FIRE DEPARTMENT: Chief Jesus "Chuy" Morales or Designee 722-4195

Fire
Engine
or

Assigned Firefighter/EMT(s) Parade Support Engine with N/A
Special Equipment/Conditions two personnel N/A
Fire Department Fees _____ N/A
Site Review _____ N/A
Approved: Disapproved _____

Fire Department Signature: Jesus Morales Date 9-7-2022

3. CITY COORDINATION: Ben Welch, Community Services Coordinator 863-1275

Single contact coordinates City of Gallup logistics and/or department requirements; Public Works, Gallup Joint Utilities, Parks, & Recreation. **NOTICE:** City of Gallup will not provide security, PA/Sound equipment, tables, chairs, tent{s}, canopies, concessionaires, bleachers, coolers, stages, port-a-potties, heavy equipment, wash basins, generators, extension cords, office equipment, printing, BBQ grills, crock-

pots, food warmers, water/soft drinks, food, volunteers, give-a-way prizes, gift certificates, money/cash etc., etc., and importantly, not limited to the above-mentioned list. **All Street Closures to be approved prior to event. Requests will be heard at regularly scheduled City Council meeting 30 days in advance.**

Below for Event Coordinator use only {based from written scope of event}

Public Works	<u>ASSIST WITH PARADE</u>	N/A
GJU	<u>ASSIST WITH PARADE</u>	N/A
Parks/Recreation	<u>ASSIST WITH PARADE</u>	N/A
Logistics	<u>SEE ATTACHED PARADE ROUTE MAP.</u>	N/A
Additional City staff	<u>FIRE/PD/PARKS/STREETS/PW/SOLID WASTE.</u>	N/A
Special Interest	<u>ANNUAL MICHIGANA HOUSE COMING PARADE.</u>	N/A
Special Equipment/Conditions	<u>ALL DEPARTMENTS ASSIST WITH PARADE</u>	N/A
Street Closures	<u>REQUEST HEARD 9-13-22 @ CITY COUNCIL</u>	N/A

2:43 pm

Pending

Provide Certificate of Insurance for all events. Any amusement ride; including but not limited to, bouncers, jumpers, woolly riding, trains, climbing walls, mechanical bulls, etc., require an additional Certificate of Insurance prior to the event. All food vendors must have approved Certificates from EID to serve food at events.



Approved: _____ Disapproved: _____

Gen. Services Dept. Signature: B. [Signature] Date 09-07-22

4. CITY CLERK'S OFFICE: Alfred Abeita II, City Clerk or Designee 863-1254

Liquor/Alcohol requires "Special Dispenser License" application. Application coordinates with City Manager's office for any requirements and CM signature {no exceptions}. **Signed application must be returned to City Clerks Office.**

Department Fees Received

Police Department	_____
Fire Department	_____
Other City Departments	_____
Alcohol Permit	_____

Loud Speaker Permit: Issued _____ N/A _____
 Application Complete _____ Incomplete _____
 Date/Time Issued For _____ Void After _____

City Clerk Signature: _____ Date _____

NOTICE: NO FIRE ARMS ALLOWED. Inappropriate behavior and/or abuse of "any" City staff or any violations of the City of Gallup Municipal Codes: Unnecessary Noises {Section 5-1-24A thru 5-1-24C} and/or Disorderly Conduct {Section 5-1-10A thru 5-1-10H} shall result in termination/cancellation {before and/or during} events. The "Applicant" understands the City of Gallup reserves the right to cancel or terminate events if required for the Public Health, Safety, and Welfare of City residents. Damages to City property during events is the "Applicant's" responsibility to repair and/or replace at no cost to the City. Copies of applications returned to appropriate departments.

Gallup Parade Route



From 8th St to Puerco on Aztec Avenue



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/7/2022

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 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).

PRODUCER Poms & Associates Insurance Brokers CA License #0814733 5700 Canoga Avenue Woodland Hills, CA 91367	CONTACT NAME: Risk Services PHONE (A/C, No, Ext): (800) 578-8802 FAX (A/C, No): (818)449-9449 E-MAIL ADDRESS: rservices@pomsassoc.com														
INSURED New Mexico Public Schools Insurance Authority Member: Gallup-Mckinley County Public Schools 4110 Old Taos Highway Santa Fe, NM 87501	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td>INSURER A : New Mexico Public Schools Insurance Authority</td> <td style="text-align: center;">N/A</td> </tr> <tr> <td>INSURER B : Safety National</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : New Mexico Public Schools Insurance Authority	N/A	INSURER B : Safety National		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR Owners Contractors Protective Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			MOC NO L0025	07/01/2022	07/01/2023	EACH OCCURRENCE	\$ Tort Limit
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ Tort Limit
							MED EXP (Any one person)	\$ Tort Limit
							PERSONAL & ADV INJURY	\$ Tort Limit
							GENERAL AGGREGATE	\$ Tort Limit
							PRODUCTS - COMP/OP AGG	\$ Tort Limit
						Maximum Liability	\$ 1,050,000	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) Maximum Liability	
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE AGGREGATE	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N					PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	
							Each Occurrence Maximum Liability	

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

See attached New Mexico Tort Claims Act Section 41-4-19: Maximum Liability Summary. Cert Holder is additional insured if required by written contract. General Liability Retention=\$750K.

Evidence of Insurance as respects to Insured's liability arising out of any and all parades held in downtown Gallup for any and all school sites located within the City of Gallup.

CERTIFICATE HOLDER City of Gallup 110 W. Aztec Avenue Gallup, NM 87301	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--

AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY Poms & Associates Insurance Brokers		NAMED INSURED New Mexico Public Schools Insurance Authority	
POLICY NUMBER _____		EFFECTIVE DATE: _____	
CARRIER _____	NAIC CODE _____		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: _____ FORM TITLE: : Notes

**Summary of New Mexico Tort Claims Act Section 41-4-19:
 Maximum Liability Governmental entities and agencies, including
 public schools, public charter schools and community colleges
 and universities are granted immunity from liability.
 Commercial General
 Liability Products and
 Completed Operations
 Professional Liability
 Contractual Liability
 Imposed by New Mexico Tort Claims Act [NMSA 1975 §41-4-1 through 41-4-29]
 \$400,000 Bodily Injury Per Person
 \$200,000 Property Damage Per Property Address
 \$300,000 Medical
 \$750,000 Per Occurrence
 \$1,050,000 Combined Limit/Maximum Liability**