#### APPLICATION FOR USE OF PUBLIC RIGHT-OF-WAY FOR EVENT



The following special event has been approved by the Special Events Committee.

Event name:

Event Date:

Street Closure:

Closure Times:

Comments:

# All Mk

Murray L. Miller, Member

Submitted by: Denise Miller Our Lady of Hungary Parish Festival July 13 2024 Chapin St between Calvert St & Bruce St 12:00 pm to 11:00 pm Sidewalk Closure: Yes No Annual parish festival featuring Hungarian & Hispanic food, Flameco Dancers, DJ, and children's games. CITY OF SOUTH BEND, INDIANA **BOARD OF PUBLIC WORKS** 29M Joseph R. Molnar, Vice President Elizabeth A. Maradik, President Day a Dilot Gary A. Gilot, Member Briana Micou, Member

Attest: Theresa M. Heffner, Clerk

Date: June 25, 2024

# AVERAGE STATE OF THE COLUMN ASSESSMENT OF THE

## City of South Bend Special Event Application

### Neighborhood Event

\$25 application fee if filed 30 days or greater (up to 180 days) in advance of event.

<u>Please Bring Completed Application and Payment to:</u>
Public Works Service Center, 731 S. Lafayette Blvd., South Bend, IN

Review the Instructions on the Special Events page before completing the application. Neighborhood Special Event applications must be submitted more than 30 days in advance of the event date or <a href="the application will not be accepted">the application will not be accepted</a>.

Section A - Applicant Information					
Date of Application: 6/5/2024 Organization Name: OUR LADY OF HUNGARY PARISH					
Applicant (Contact) Name: SEPHEN V. DOMONKOS Y DENISE M. DOMONKOS					
Applicant (Contact) Phone: 574-255-1906 Contact Email: denny domonkos egmais com					
Address: 829 W. GALVERT City/State/ZIP: SOUTH BEND, IN 46613					
Secondary Contact Name: KAREN CARRIZOSA					
Contact Phone: 574-287-1700 Contact Email: Karen & Olhab. org					
Address: 731 W. CALVERT City/State/ZIP: SOUTH BEND, IN 46613					
Event Name: DARISH FESTIVAT Expected Attendance: 300 - 500					
Requested Street Closure: CHAPIN STREET					
From (Cross Street): CALVERT					
To (Cross Street): BRUCE					
Provide a brief description of the event:  OUR LADY OF HUNGARY PARISH FESTIVAL WITH HUNGARIAN AND HISPANIC FOOD, FLAMECO DANCERS,  D.J., MUSIC, AND CHILDREN'S GAMES					
Date of Event Setup [mm/dd/yy]: JUY 13, 2024 Time: NOON					
Begin Date of Event [mm/dd/yy]: JULY 13, 2024 Time: NOON					
End Date of Event [mm/dd/yy]: JULY 13, 2024 Time: 9:00 PM					
Event Cleanup Completion [mm/dd/yy]: JULY 13, 2024 Time: 11:00 PM					
Have all residents on the affected block have been notified and invited? Yes You No RESIDENTS WILL AFFECTED!					
Please attach a copy of the door hanger or letter used to notify residents in addition to signature attachment.					
Number of households fronting the proposed street closure:					
Number of households represented by signatures on attached sheet:					
Will this event have music (live or other)? Yes \( \square\) No \( \square\) \( \square\)					

	Section C -	Alcohol			
Will al	cohol be served or sold? 🛮 Yes 🔲 No				
	If Yes:				
0	<ul> <li>The applicant must apply for and receive a temporary liquor license from the Alcohol &amp; Tobacco Commission.</li> </ul>				
	<ul> <li>Application cannot be processed without a copy of this license.</li> </ul>				
0	A refundable \$400.00 deposit paid by card or check (made to City of South Bend) must be submitted with application.				
	<ul> <li>Application cannot be processed without deposit.</li> </ul>				
	<ul> <li>Deposit will be returned upon inspection of event area by the Board of Public Works.</li> </ul>				
0					
	<ul> <li>Fencing around serving area</li> <li>Trash receptacles</li> </ul>				
0		curity. If your event will be hiring a security company,			
		on (a) below. Otherwise, please list the names, phone			
numbers, and qualifications (e.g. Off-duty police officer, professional security guard, or event applican					
	of three (3) security guards in the fields provided in	sub-section (b).			
	urity Company Information				
Compa	any Name: A - 1 SECURITY	Contact Name: GEORGE PEREZ			
Contac	ct Phone: 574-261-0088	Email:			
Addres	ss:	City/State/ZIP: GOSHEN, IN			
(b) Inde	ependent Security Information				
Name:		Contact Phone:			
Qualifi	ications:				

Contact Phone:

Name: \_\_\_\_\_ Contact Phone: \_\_\_\_

Name: \_\_\_\_

Qualifications: \_\_\_\_\_

Qualifications:

· NO UGNOORS, CATERERS, OR FOOD TROOKS
Section D - Food SALL FOOD WILL
Will your event have food sales (food vendors, caterers, food trucks, etc.)? The SALL FOOD WILL  Will your event have food sales (food vendors, caterers, food trucks, etc.)? The Sales of the sales (food vendors, caterers, food trucks, etc.)? The sales of the sales
o If yes, the event coordinator must apply for and receive a St Joseph County Health Department AND YOUNTEERS Temporary Event Permit.
<ul> <li>Vendor(s) must also apply for and receive a St. Joseph County Health permit. Health Permits must be filed with the county 30 days prior to the proposed event. Each vendor must obtain necessary permits to serve on-site and display these permits at the event.</li> <li>All applications and guidelines can be found on the St. Joseph County Health Department Food Service</li> </ul>
website at sichd.org/food-service.  ALL FOOD WILL BE Please select food types:  Food Vendor Caterer Food Truck Other: PREPARED BY PARISHONERS
If a Food Truck, please list company name(s):
Please describe how food will be cooked and served:
ALL FOOD WILL BE PREPARED AND SERVED BY PARISHONERS

#### Section E - Indemnity & Hold Harmless Agreement

# City of South Bend Special Events Committee Indemnity & Hold Harmless Agreement

Date: 6/5/2024 Event Date: 7/13/2024						
Event Name: OUR LADY OF HUNGARY PARIGH FESTIVAL						
Organization: OUR LADY OF HUNGARY PARISH						
Applicant (Contact) Name: STEPHEN J. DOMONKOS Y DENISE M. DOMONKOS						
Applicant (Contact) Phone: 574-255-1906 Alt. Phone: 574-849-3478						
Email: dennydomonkos@gmail.com						
Address: 735 W. CALVERT City/State/ZIP: SOUTH BEND, IN 46613  Event Location (Please describe): OF FICE)						
FESTIVAL WILL BE HELD ON PARISH PROPERTY AND ON BRUCE STREET (CLOSED) BETWEEN CHURCH AND SCHOOL. JULY 13, 2024, MOON TO 9:00 PM						

APPLICANT agrees to indemnify, defend and hold harmless the Civil City of South Bend, Indiana, from any liability, loss, costs, damages or expenses, including attorney fees, which the Civil City of South Bend, may suffer or incur as a result of any claims or actions which may be made against the City, its agents, employees, or subdivisions by any person, including a participant in the activity, arising out of the approval of this request by the Civil City of South Bend, Indiana, through the Board of Public Works, to close a portion of the public right-of-way for the event described above, or for any harm or damage alleged to have occurred because of the holding of the special event. The undersigned certifies that he/she is authorized to bind the APPLICANT to these terms.

Signed on this Date: 6/5/2024

Authorized Organizer Signature

STEPHEN J. DOMONKOS - FESTIVAL CHAIRMAN

Printed Name and Title

#### Section F - Permit & Agreement

- Pursuant to Local Ordinance No. 10628-18, there is a \$25.00 non-refundable fee for applications filed 30 days or greater in advance of the event date. Applications filed less than 30 days in advance of the event date will not be accepted.
- 2. All residents within the affected area must be notified of this event. The APPLICANT must obtain signatures from at least 10 residents that reside along the closed right-of-way and make an attempt to notify all other affected residents. APPLICANTS must include a copy of a brochure or letter of invitation distributed to all affected neighbors describing the event purpose, date, and time.
- The APPLICANT is responsible, prior to the event, for determining if there are any affected residents that
  need assistance accessing their residence. The APPLICANT is responsible for providing said resident(s)
  access or transportation to their property.
- 4. The cones will be delivered to the APPLICANT's address. The APPLICANT assumes full responsibility for clean-up and assures the City that all cones will be maintained and returned undamaged. The APPLICANT will be liable for the replacement cost of \$50.00 per cone as a result of any missing or damaged cones.
- 5. Block parties must end by 8:00 p.m.
- A street will be blocked off from intersection to intersection only. No half-blocks or alleys can be blocked off.
- The Special Events Committee reserves the right to deny any block party application based on traffic and speed limit records. No street may be closed with a speed limit over 30 MPH or considered to be a major arterial.
- 8. The Special Events Committee reserves the right to deny any block party application based on information gathered from the South Bend Police Department or other sources.
- The APPLICANT agrees to allow residents that live on the above-referenced block access in and out of the restricted area as needed.
- The APPLICANT agrees to abide by all terms and conditions of the South Bend Municipal Code and Board of Public Works' policy adopted in Resolution No. 10628-18 on December, 11, 2018.
- Notification of approval/denial of this request will be issued by return of this form, upon signed authorization by the Board of Public Works.
- 12. The City of South Bend Noise Ordinance is in effect at all hours. Between the hours of 11:00 p.m. and 7:00 a.m. certain noises are particularly prohibited. These include operating stereos, speakers, musical instruments, and other sound reproduction devices if audible fifty (50) feet away, as well as shouting, yelling, hooting, whistling, or singing in the streets in a manner to disturb the peace (Municipal Code 13-57).

I have read the Application and the Permit and Agreement for this Special Event and I affirm the truth of the information provided by me to the best of my knowledge. I understand and agree to the above rules and regulations, and any applicable state and federal laws. I also understand that this application may be denied based on any false or incomplete information.

Date: 6/5/2	2024	
Applicant Signature:	tepla J. Da	elsos
Printed Name: STEPH	EN J. DOMON	K05
President	SPECIAL EVENTS COMMITTEE APPR  Member	JA _
Member	Member	Member 6/12/24  Date



# LOCAL AUTHORIZATION FOR TEMPORARY BEER & WINE PERMIT APPLICATION

INSTRUCTIONS:

- 1. Applicant must complete all requested information.
- 2. Please type or print clearly.
- 3. Obtain the required community clearance signatures and upload with the online temporary event application.

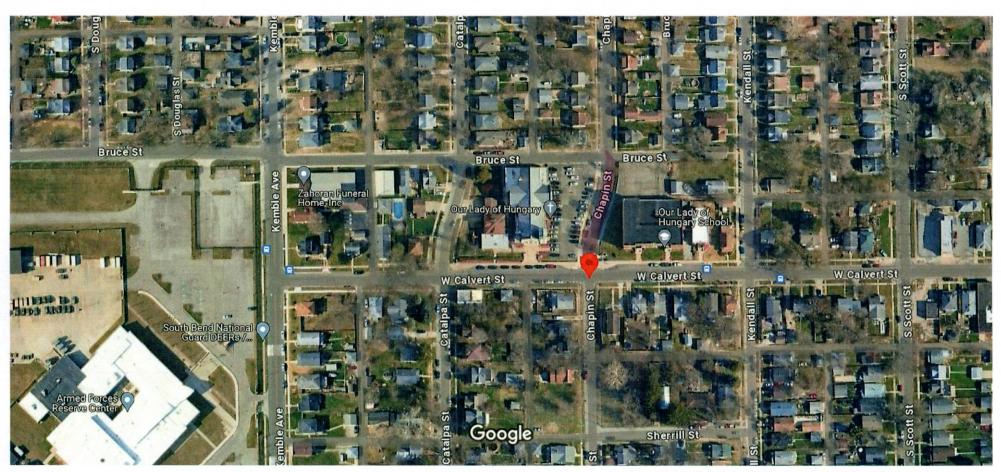
NOTE: THIS FORM IS ONLY TO BE USED WITH ONLINE APPLICATION. Visit https://mylicense.in.gov/eGov/ML1.html to submit the online application.

STEP 1. GENER	AL INFORMATION						
Name of applicant applying for permit (organization, club, corporation, individual - such as XYZ 123 Inc)							
Our Lady of Hungary Parish Fastival							
Our Lady of Hungary Parish Festival Address of applicant (number and street, city, state, and ZIP code)		E-mail address					
735 West Calvert South Bend, IN 46613 Printed name of person making application	Fax number	KarenC@olhsb.org Emergency contact telephone number					
The state of person making approach	( )	574 287-1700					
Printed name of contact person of event		Emergency contact telephone number					
Denise M Domonkos	NT INFORMATION	574 255-1906					
Beginning day (Monday, Tuesday, etc)  Beginning date (month, day, year)	NT INFORMATION  Ending day (Monday, Tuesday, etc)	Ending date (month, day, year)					
Saturday July 13, 2024	Saturday	July 13, 2024					
Time of event Start time	End time 9:00	AM PM					
Type or description of event		Designation Designation of the Control of the Contr					
Parish Festival  Exact address of event (number and street, city, state, and ZIP code)							
735 W Calvert South Bend, IN 46613		,					
	FLOORPLAN						
<i>3</i> .		(D					
N tem	pordry	(Beer + Wine)					
) / / 60	rricade	only					
Bruce St.	X						
	Festival &						
	Festival Z						
1	· Canopy	school					
	0	,					
Church	Fencing						
Church Building Parking Lot	School,	V-					
Building Lat	yard						
	S a gum						
Church Building Parking & School School Yard Family & Bar Gym							
Area Room Din's							
Hoone (School Building)  temporary  under 21  Barricad CALVERT Street  STEP 4. APPLICANT VERIFICATION  The below signed applicant affirms under the penalties of perjury that the information contained in this form is true and accurate.							
- orary 1 No one Louis							
Descriçode CALVERT Street							
Barrie CALVERY ST	reet						
STEP 4. APPLICANT VERIFICATION  The below signed applicant affirms under the penalties of perjury that the information contained in this form is true and accurate.							
Signature of applicant Date signed (month, day, year)							
Deruse M. Domonkor 5.28-2024							
STEP 5. COMMUNITY CLEARANCE  1. Sypnature of Sheriff of county or Chief of Police, or Town Marshall of jurisdiction where the event will be held  Date signed (month, day, year)							
2-31-24							
2. Signature of the mayor (if the event is held in Fort Wayne)  Date signed (month, day, year)							

# W Calvert St & Chapin St

Chapin St between Calvert St and Bruce St

11



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THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER, MICROPRINTING AND SECURITY FEATURES WITH DETAILS ON BACK

**OUR LADY OF HUNGARY PARISH** 

829 WEST CALVERT STREET SOUTH BEND, IN 46613 NOTRE DAME FEDERAL CREDIT UNION

001112

OTHE ORDER OF

Twenty-Five Dollars and Zero Cents

City of South Bend

DATE

**AMOUNT** 

05/23/2024

25.00

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THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER, MICROPRINTING AND SECURITY FEATURES WITH DETAILS ON BACK

**OUR LADY OF HUNGARY PARISH** 

829 WEST CALVERT STREET SOUTH BEND, IN 46613 NOTRE DAME FEDERAL CREDIT UNION

001110

PAY

TO THE ORDER OF

Four Hundred Dollars and Zero Cents

City of South Bend

DATE

**AMOUNT** 

05/23/2024

400.00

A