

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

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



Submitted by: Denise Miller

Event name: Northeast Neighborhood Back to School Picnic

Event Date: September 26 2025

Street Closure: Howard St between St Louis and St Peter

Closure Times: 4:00 pm to 7:30 pm

Sidewalk Closure: ☐ Yes ☒ No

Comments: Annual back to school cookout open to the neighborhood families and off campus ND students in Kelly Park.

**CITY OF SOUTH BEND, INDIANA
BOARD OF PUBLIC WORKS**

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Elizabeth A. Maradik, President

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Murray L. Miller, Member

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Joseph R. Molnar, Vice President

Breana Micou

Breana Micou, Member

Hillary R. Horvath

Attest: Hillary R. Horvath, Clerk

Date: September 23, 2025



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.

Please Bring Completed Application and Payment to:
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 the application will not be accepted.

Section A - Applicant Information

Date of Application: 9/4/25 Organization Name: Northeast Neighborhood Council
Applicant (Contact) Name: LuElla Webster
Applicant (Contact) Phone: 574-303-4013 Contact Email: lwebste1@nd.edu
Address: 701 Howard St City/State/ZIP: South Bend, IN 46617
Secondary Contact Name: Patty Walsh
Contact Phone: 574-210-0695 Contact Email: patty@pattywalsh.com
Address: 315 Walsh St City/State/ZIP: South Bend, IN 46617

Section B - Event Information

Event Name: Northeast Neighborhood Back to School Picnic Expected Attendance: 250
Requested Street Closure: Howard St
From (Cross Street): St Louis
To (Cross Street): St Peter

Provide a brief description of the event:

Date of Event Setup [mm/dd/yy]: 09/26/2025 Time: 3:00 pm to 4:00 pm
Begin Date of Event [mm/dd/yy]: 09/26/2025 Time: 5:30 pm to 7:30 pm
End Date of Event [mm/dd/yy]: 09/26/2025 Time: 7:30 pm
Event Cleanup Completion [mm/dd/yy]: 09/26/2025 Time: 8:00 pm

Have all residents on the affected block have been notified and invited? ☒ Yes ☐ No

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: 3

Number of households represented by signatures on attached sheet: _____

Will this event have music (live or other)? ☒ Yes ☐ No

Section C – Alcohol

Will alcohol be served or sold? ☐ Yes ☒ No

If Yes:

- The applicant must apply for and receive a temporary liquor license from the Alcohol & Tobacco Commission.
 - Application cannot be processed without a copy of this license.
- A refundable \$400.00 deposit paid by card or check (made to City of South Bend) must be submitted with application.
 - Application cannot be processed without deposit.
 - Deposit will be returned upon inspection of event area by the Board of Public Works.
- The applicant must submit a map or drawing of:
 - Fencing around serving area
 - Trash receptacles
- Events that will have alcohol sales must provide security. If your event will be hiring a security company, please provide its contact information in sub-section (a) below. Otherwise, please list the names, phone numbers, and qualifications (e.g. Off-duty police officer, professional security guard, or event applicant) of three (3) security guards in the fields provided in sub-section (b).

(a) Security Company Information

Company Name: _____ Contact Name: _____

Contact Phone: _____ Email: _____

Address: _____ City/State/ZIP: _____

(b) Independent Security Information

Name: _____ Contact Phone: _____

Qualifications: _____

Name: _____ Contact Phone: _____

Qualifications: _____

Name: _____ Contact Phone: _____

Qualifications: _____

Section D – Food

Will your event have food sales (food vendors, caterers, food trucks, etc.)? ☐ Yes ☒ No

- If yes, the event coordinator must apply for and receive a St Joseph County Health Department Temporary Event Permit.
- 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.
- All applications and guidelines can be found on the St. Joseph County Health Department Food Service website at sjchd.org/food-service.

Please select food types: ☐ Food Vendor ☐ Caterer ☐ Food Truck ☐ Other: _____

If a Food Truck, please list company name(s):

Please describe how food will be cooked and served:

Section E - Indemnity & Hold Harmless Agreement

City of South Bend Special Events Committee

Indemnity & Hold Harmless Agreement

Date: 09/4/2025 Event Date: 09/26/2025
Event Name: Northeast Neighborhood Back to School Picnic
Organization: Northeast Neighborhood Council
Applicant (Contact) Name: LuElla Webster
Applicant (Contact) Phone: 574-303-4013 Alt. Phone: 574-210-0695
Email: lwebste1@nd.edu
Address: 701 Howard St City/State/ZIP: South Bend, IN 46617
Event Location (Please describe):

Length of Event (Dates/Times): 09/26/2025 between 4:00 pm and 8:00 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: 9/4/2025

Patricia Walsh

Authorized Organizer Signature

Patricia Walsh, Nene Secretary

Printed Name and Title

Section F – Permit & Agreement

1. 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.**
3. 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.
6. A street will be blocked off from intersection to intersection only. No half-blocks or alleys can be blocked off.
7. 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.
9. The APPLICANT agrees to allow residents that live on the above-referenced block access in and out of the restricted area as needed.
10. 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.
11. 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: 9/4/2025

Applicant Signature: Patricia Walsh

Printed Name: Patricia Walsh

SPECIAL EVENTS COMMITTEE APPROVAL

[Signature]
President

[Signature]
Member

[Signature]
Member

[Signature]
Member

[Signature]
Member

9/10/25

Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/7/2023

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

PRODUCER

The Horton Group
10320 Orland Parkway
Orland Park IL 60467

CONTACT

NAME: Courtlynn Daniels

PHONE (A/C, No, Ext): 708-675-7336

FAX (A/C, No):

E-MAIL ADDRESS: Courtlynn.Daniels@bpo.thehortongroup.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Auto-Owners Insurance Company

18988

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

INSURED

NORTNEI-01
Northeast Neighborhood Council
City of South Bend In
803 N. Notre Dame Avenue
South Bend IN 46617-1536

COVERAGES

CERTIFICATE NUMBER: 1101360892

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 INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		934602-09507935-22	9/21/2022	9/21/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		934602-09507935-22	9/21/2022	9/21/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Property		934602-09507935-22	9/21/2022	9/21/2023	BPP B/EE Deductible \$44,640 \$50,000 \$250

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: Back to School Picnic event on September 8, 2023 at Kelly Park.

CERTIFICATE HOLDER

City of South Bend

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

Northeast Neighborhood Council, Inc.

803 N. Notre Dame Avenue

South Bend, IN 46617

574-235-9675



**Board of
Directors**

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President

Solomon Anderson

Mozell Arthur Bowens

Mattie Hoover

Kisha Hoover

Chuck Nelson

Gwen O'Brien

Derrick Perry

Beth Sanford

Erin Shell

Marguerite A. Taylor

Nan Tulchinsky

Patty Walsh

LuElla Webster

September 20, 2025

Dear Howard Street Neighbor,

The Northeast Neighborhood Council and the Robinson Community Learning Center will be holding the annual Back To School community picnic on Friday evening, September 26th. As in the past, Howard Street will be closed between 5:30pm and 7:30pm on that day. This is to ensure safety and accommodate the fire and police vehicles that will be attending.

Thank you,

LuElla Webster, Board Member
Northeast Neighborhood Council

Northeast Neighborhood

BACK TO SCHOOL PICNIC

WE ARE HAVING A COOKOUT FOR
All Neighborhood Families and Off-Campus Students

FRIDAY, OCTOBER 4 • 5:30 – 7:30 PM
KELLY PARK

750 Howard St. (corner of Howard & St. Peter)

Free Food • Attractions • Music • Games

Sponsored By

Northeast Neighborhood Council

Robinson Community Learning Center • University of Notre Dame



Northeast
Neighborhood
Council



ROBINSON
COMMUNITY
LEARNING
CENTER



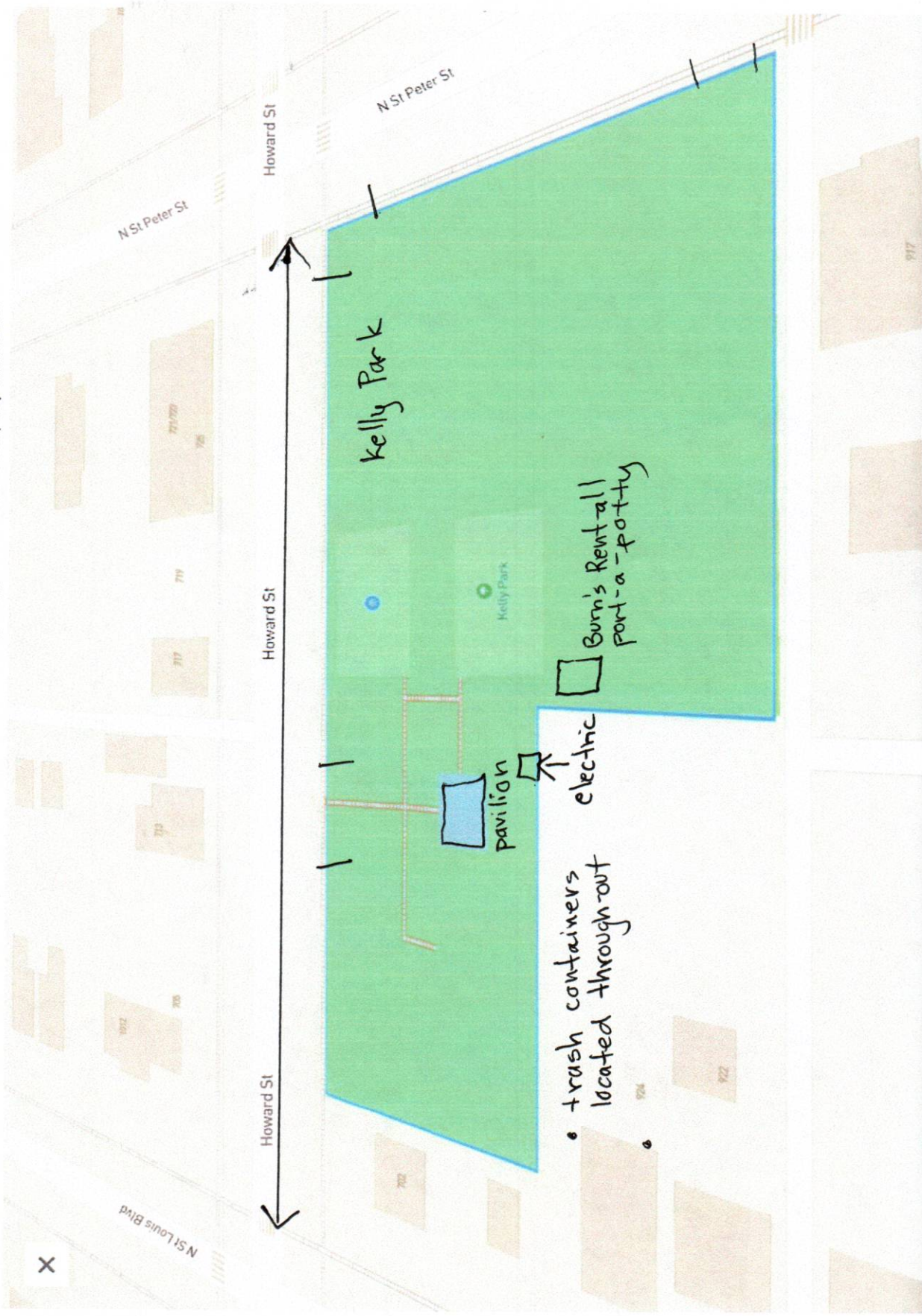
UNIVERSITY OF
NOTRE DAME

SECTION 4: Route Map

street closure request: Howard St. between St. Louis Blvd & St. Peter St.

9/8/25, 11:59 AM

Kelly Playground in South Bend | Map and Routes



6749401

CITY OF SB SPECIAL EVE
731 S LAFAYETTE BLVD
SOUTH BEND, IN 46601

09/08/2025

13:27:44

MID: XXXXXXXXXXXX401

TID: XXXXX371

CREDIT CARD

VISA SALE

Card # XXXXXXXXXXXX6531

Chip Card: VISA DEBIT

AID: A0000000031010

SEQ #: 1

Batch #: 50

INVOICE 1

Approval Code: 631056

Entry Method: Contactless

Mode: Issuer

SALE AMOUNT \$25.00

I agree to pay above total amount
according to card issuer agreement.
(Merchant agreement if Credit Voucher)

X _____
VISA CARDHOLDER

MERCHANT COPY