



**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: Corpus Christi Procession

Event Date: June 7, 2026

Street Closure: None - Crossings at intersections between OLOH on W Calvert
and St Matthew's Cathedral on Miami

Closure Times: Walk 1:30 pm to 2:30 pm

Sidewalk Closure: Yes No

Comments: Annual procession between Our Lady of Hungary Catholic Church and St Matthew's Cathedral to celebrate Corpus Christi Sunday.

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

Elizabeth A. Maradik, President

Murray L. Miller, Member

Abigail E. Magas, Member

Joseph R. Molnar, Vice President

Breana N. Micou, Member

Attest: Hillary R. Horvath, Clerk

Date: April 14, 2026



City of South Bend Special Event Application

City and Regional Event

\$50 application fee if filed 60 days or greater (up to 360 days) in advance of event

\$100 expedited application fee if filed 30-59 days in advance of event

4/16/20

**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. City and Regional 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: 3/20/2026 Organization Name: Our lady of Hungary Catholic Church

Applicant (Contact) Name: Fr Ben Landrigan

Applicant (Contact) Phone: 574-287-1700 Contact Email: blandrigan@olhsb.org

Address: 731 W Calvert St City/State/ZIP: South Bend IN 46613

List any ~~professional~~ ^{other church} event organizer, event service provider or ~~commercial fundraiser~~ that is authorized to work on your behalf to plan, produce and/or manage your event.

Organization Name: St Matthew Parish Contact Name: _____

Contact Phone: 574-289-5539 Contact Email: secretary@stmatthewcathedral.org

Address: 1701 Miami St City/State/ZIP: South Bend IN 46613

Section B – Event Information

Event Name: Corpus Christi Procession Event Type: (Festival, Race, Parade, Other): procession

Event Classification: Non-Profit* For-Profit

City (Civic) Sponsored Other (If Other, please describe): CIVIC - religious procession

*The Special Events Committee may request proof of non-profit status.

Provide a brief description and timeline of event (Note: A detailed map plan is required in Section H of this application. The description should be a summary overview.)

Date of Event Setup [mm/dd/yy]: Sunday 06/07/2026 Time: 1:25 pm

Date of Event [mm/dd/yy]: 06/07/2026 Begin Time: 1:30 pm

End Date of Event [mm/dd/yy]: 06/07/2026 End Time: 2:30 pm

Event Cleanup Completion [mm/dd/yy]: 06/07/2026 Time: 2:35 pm

Rain/Alternative Date: If yes, please provide the date: NOTE

Total anticipated attendance: 200

The proposed event will require the closing of: Streets Sidewalks
use of

Is the event ticketed or includes fees? Yes No

IF YES:

- List fees and fee groups below:

Does the event have any partnered sponsorships? Yes No

IF YES:

- List the number of sponsors at each level of partnered sponsorship:

Is this a returning special event or part of a series of special events? Yes No

IF YES: Annual event

- Provide the date, location, and attendance of past special events and/or future planned events in the series:

June 14, 2025
Annually on Corpus Christi Sunday

IF YOUR EVENT IS A PARADE, RACE, OR OTHER PROCESSIONAL -TYPE EVENT, complete Section C. Otherwise, continue to Section D.

Section C – Parades, Races, and other Processional Events

What is the estimated number of parade/race spectators on the proposed route? 200

Describe any sound equipment that will be used in the parade/race: none anticipated.

Although possibly a truck with speakers in back leading prayers.

Does the event have participant categories? For example, a run that has different race divisions or a parade with separate walking/marching groups.

Yes No

IF YES:

- List categories and anticipated participants per category:

IF YOUR EVENT IS A PARADE, please provide a supplement writing describing the approximate number and type(s) of animals, vehicles, and floats participating in the parade? (Note: If using animals in a parade, event organizers are responsible for cleaning up animal waste left on the parade route.) Describe parade participants below: No animals

Procession of people starting at Our Lady of Hungary Catholic Church, ⁸²⁵ ~~725~~ W. Calvert St and walking to St Matthew Cathedral, 1701 Miami St South Bend in honor of Corpus Christi Sunday.

Section D – Equipment, Set-up, and Logistics

Are you hiring a company to provide entertainment, games or inflatables? Yes No

IF YES:

- You must submit proof of insurance for all stage and entertainment companies three (3) weeks before the event.
- Describe any hired entertainment:

Will you be staking any tents, inflatables, portable restrooms or any other anchorings? Yes No

IF YES:

- You must provide proof of locates (locate number) two (2) weeks prior to your event. Locates can be found by calling 811.

Does your event include the use of fireworks or other pyrotechnics? Yes No

IF YES:

- Depending on the potential fire risk, applicants may need to receive approval of the South Bend Fire Department (process facilitated by event coordinator).
- Only consumer grade fireworks can be used during certain time frames (July 4th and New Year's).
 - A permit must be applied for with the Indiana Department of Homeland Security for Commercial Grade Fireworks show.
- All entertainment events should have a permit from the IDHS Amusement and Entertainment Permit.
- Describe the event's proposed fire-related entertainment:

Will there be any musical entertainment features at the event? Yes No

IF YES:

- Describe the type of music, schedule of sound check/performances, and the names of any artists performing:

For stage inspections, contact the Department of Homeland Security at 317-232-2222.

IF YOUR ROUTE CROSSES OVER A STATE ROAD OR A BRIDGE, please contact the following for permission:

State, INDOT: Michael Hurt, mhurt1@indot.in.gov, 219-851-1426

County Bridges: Andy Hayes, ahayes@co.st-joseph.in.us, 574-235-9626

Section E – Food

Are you having food at your event (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 have a City of South Bend business license for Food Vending Vehicle. (Contact Michelle Adams at Madams@southbend.in.gov)
- 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 at the St. Joseph County Health Department Food Service website: sjchd.org/food-service.

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

IF A FOOD TRUCK, please list company name:

Describe how food will be cooked and served as well as any preventative safety measures:

Section F – Alcohol

Will alcohol be served or sold? Yes No

IF NO: Please continue to Section G – Contingency and Strategic Planning.

IF YES:

- The applicant must apply for and receive a temporary liquor license from the Alcohol & Tobacco Commission. Indiana ATC forms are located at in.gov/atc/2409.htm. (Temporary Permits are near the bottom of the form list.) Forms must be filed with the district ATC office five (5) days prior to the requested event date.
 - 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.
- Events with 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).

Company Name: _____ Contact Name: _____

Contact Phone: _____ Email: _____

Address: _____ City/State/Zip: _____

Name: _____ Contact Phone: _____

Qualifications: _____

Name: _____ Contact Phone: _____

Qualifications: _____

Name: _____ Contact Phone: _____

Qualifications: _____

Section G – Contingency and Strategic Planning

For each of the following, please provide detailed descriptions. If you run out of space, attach a response to this application submission:

- **Emergency Safety Plan** – This plan should include, but is not limited to:
 - The number of public safety personnel.
 - If hiring a private security service, provide contact information, proof of insurance and the number of hired event personnel.
 - Proposed internal communications systems and public address systems.

We request an officer precede the procession and follow the procession for safety. We plan to cross both main st and michigan st on Calvert st and would appreciate help there as well

- **Proposed Cleanup Plan** – This plan should include, but is not limited to:
 - Measures in place to collect and remove trash, litter and recyclables.

There should be no trash, litter or recyclables.

- **Inclement Weather Plan** – This plan should include, but is not limited to:
 - Safety measures that will be taken in the event of a tornado warning, tornado watch, thunderstorm, and extreme temperatures.
 - Rain date.
 - Weather information and forecasts can be found at <https://www.weather.gov/>

Church basements

- **Proposed Lost and Found Plan** – This plan should include, but is not limited to:
 - A description of the use of signage, announcements on public address systems or pre-event handouts.

lost and found table at the back of church.

Section H – Site Plan / Route Map

Site Plan / Route Map - For All Events:

Provide an attached map with the geographic locations of all event items listed below.

- Outline of entire event venue including the names of all affected streets and areas.
- Clear markings for street closures and a schedule for each. **Applicants should ensure all roadway (right of way) closure times are specific and separate from the event setup and event start/end times (i.e., roadway closures times may not be perfectly identical or linked to the duration of the event).**
 - All bridge closures require County Engineering approval. (*County Bridges: Andy Hayes, ahayes@co.st-joseph.in.us, 574-235-9626*)
 - All state road Closures require INDOT approval. (*State, INDOT: Michael Hurt, mhurt1@indot.in.gov, 219-851-1426*)
- Location of fencing, barriers, and/or barricades. Indicate any removable fencing and exit locations for emergency purposes. *None*
- Location of all stages, platforms, bleachers, grandstands, tents, booths, cooking areas, vehicles, trailers, and other temporary structures. **Applicants should also clearly mark locations of food and alcohol serving or sales, if applicable.** *None*
- The location(s) and number of all portable toilets and wash stations. *None*
- The location(s) and number of all trash and recycling containers, including dumpsters. *None (except at churches)*
- The location of generators or any source of electricity. *None*
- Traffic plan and map, including proposed loading/drop off areas, barricades, secured areas, vehicle and bicycle parking areas, and considerations for TRANSPO bus route changes.

map on next page

NA



Officer presence ~~at~~
Main / Calvert and Michigan / Calvert
1:45 - 2:05
for crossing main and Michigan Sts.

Section I – Mitigation of Impact

IF YOU ARE USING AND/OR CLOSING PUBLIC SIDEWALKS OR STREETS:

- You are required to notify area business owners and residents in writing 15 days prior to the event.

Attach a copy of the brochure or door hanger distributed to all affected residents/businesses/neighborhood groups describing the event purpose, date and time.

Section J – Insurance

A Certificate of Insurance (copy) confirming the existence of a liability policy (General Liability and Automobile Liability) of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate, which specifically names the City of South Bend, IN as an additionally insured for the event must be submitted. Copy of Certificate of Insurance must be submitted two (2) weeks prior to the date of the event.

Section K – Indemnity & Hold Harmless Agreement

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

Date: 3/20/26 Event Date: 6/17/2026

Event Name: Corpus Christi Procession

Organization: Our lady of Hungary Catholic Church

Applicant (Contact) Name: Fr Ben Landrigan

Applicant (Contact) Phone: 574-287-1700 Alt. Phone: _____

Email: blandrigan@olhsbc.org

Address: 731 W Calvert St City/State/ZIP: South Bend IN 46613

Event Location (Please describe): Procession for 825 W Calvert Street east on Calvert St to Fellows St. North on Fellows St to Dubair St. East on Dubair St to 1701 Miami St.

Length of Event (Dates/Times): 6/17/2026 1:30 - 2:30

Insurance Amount: This event is insured for no less than \$1,000,000 per occurrence and \$2,000,000 in aggregate, and the certificate of insurance includes a rider naming City of South Bend, Special Events Committee, and Board of Public Works as additionally insured for the event.

Organization Name: Our lady of Hungary Catholic Church agrees to indemnify, defend and hold harmless the City of South Bend, Indiana, its agents, officers, and employees (collectively ("City"), from any liability, loss, costs, damages or expenses, including attorney fees, which the City, 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 City, 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: 3/20/2026

Authorized Organizer Signature: Rev. Ben Landrigan

Printed Name and Title: Fr Ben Landrigan, Pastor

Section L – Permit & Agreement

1. Pursuant to Local Ordinance No. 10628-18, there is a \$50.00 non-refundable fee for Tier II and III event applications filed 60 or greater days in advance of the event, or a \$100 non-refundable expedited fee for applications filed between 30 and 59 days in advance of the event.
2. The APPLICANT must comply with all terms and conditions of this Permit and Agreement.
3. The APPLICANT must obtain signatures from and/or make an attempt to notify all residents that reside in the area impacted by the event. **A copy of a brochure or door hanger distributed to all affected residents/businesses describing the event purpose, date, time and contact information must be included with the attachments to this application.**
4. The APPLICANT shall reimburse the City for the actual cost of the event, if the City incurs unexpected, undisclosed expenses related to the event.
5. Notification of approval/denial of this request will be issued by return of this form, upon signed authorization by the Special Events Committee.
6. The APPLICANT shall provide to the Board a Certificate of Insurance showing a liability policy in full force and effect with limits of \$1,000,000.00 per occurrence and \$2,000,000.00 aggregate and the City of South Bend, Special Events Committee, and Board of Public Works listed as an additional named insured for this event.
7. The APPLICANT assumes full responsibility for providing ample disposal containers for refuse/recycling and assures the area will be cleaned up upon the conclusion of the event.
8. The APPLICANT will follow the City of South Bend Noise Ordinance, which 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 radio receiving sets, 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.
9. The APPLICANT assures the City that the area will be closed during the times indicated on the application only. Event end times are pursuant to the recommendations of the South Bend Police Department and such times will be strictly enforced.

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: 3/20/2026

Applicant Signature: Rev. Ben Landrigan

Printed Name: Rev. Ben Landrigan

SPECIAL EVENTS COMMITTEE APPROVAL

[Signature]
President

[Signature]
Member

[Signature]
Member

[Signature]
Member

[Signature]
Member

4/1/26
Date

Certificate of Coverage

Date: 3/24/2026

Certificate Holder
 The Diocese of Fort Wayne-South Bend, Inc.
 Chancery Office
 P O Box 390
 Fort Wayne, IN 46801

This Certificate is issued as a matter of information only and confers no rights upon the holder of this certificate. This certificate does not amend, extend or alter the coverage afforded below.

Covered Location
 OUR LADY OF HUNGARY CHURCH
 829 W CALVERT ST

 SOUTH BEND, IN 46613-0000

Company Affording Coverage
 THE CATHOLIC MUTUAL RELIEF
 SOCIETY OF AMERICA
 10843 OLD MILL RD
 OMAHA, NE 68154

Coverages

This is to certify that the coverages listed below have been issued to the certificate holder named above for the certificate 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 coverage afforded described herein is subject to all the terms, exclusions and conditions of such coverage. Limits shown may have been reduced by paid claims.

	Type of Coverage	Certificate Number	Coverage Effective Date	Coverage Expiration Date	Limits
	Property				Real & Personal Property
	D. General Liability <input checked="" type="checkbox"/> Occurrence <input type="checkbox"/> Claims Made	8679	10/1/2025	10/1/2026	Each Occurrence
					General Aggregate
					Products-Comp/OP Agg
					Personal & Adv Injury
					Fire Damage (Any one fire)
					Med Exp (Any one person)
	Excess Liability				Each Occurrence
					Annual Aggregate
	Other				Each Occurrence
					Claims Made
					Aggregate
					Annual Aggregate
					Limit/Coverage

Description of Operations/Locations/Vehicles/Special Items (the following language supersedes any other language in this endorsement or the Certificate in conflict with this language)
 Our Lady of Hungary Church's Corpus Christi Procession on June 7, 2026.

Holder of Certificate	Cancellation
Additional Protected Person(s) City of South Bend, Special Events Committee, & Board of Public Works Public Works Service Center 731 S. Lafayette Blvd. South Bend, IN	Should any of the above described coverages be cancelled before the expiration date thereof, the issuing company will endeavor to mail <u>30</u> days written notice to the holder of certificate named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.
	Authorized Representative <div style="text-align: right; font-family: cursive; font-size: 1.2em;">Paul A. Peterson</div>
0067005666	

ENDORSEMENT

(TO BE ATTACHED TO CERTIFICATE)

Effective Date of Endorsement 6/7/2026 Charge _____ Credit _____
Cancellation Date of Endorsement 9/8/2026
Certificate Holder The Diocese of Fort Wayne-South Bend, Inc. Chancery Office P O Box 390 Fort Wayne, IN 46801
Location OUR LADY OF HUNGARY CHURCH 829 W CALVERT ST SOUTH BEND, IN 46613-0000

Certificate No. 8679 of The Catholic Mutual Relief Society of America is amended as follows:

SECTION II - ADDITIONAL PROTECTED PERSON(S)

It is understood and agreed that Section II - Liability (only with respect to Coverage D - General Liability), is amended to include as an **Additional Protected Person(s)** the organization(s) shown in the schedule below.

Schedule - ADDITIONAL PROTECTED PERSON(S)

City of South Bend, Special Events Committee, & Board of Public Works
Public Works Service Center
731 S. Lafayette Blvd.
South Bend, IN

Remarks:

Our Lady of Hungary Church's Corpus Christi Procession on June 7, 2026.

However, the following limitations apply to coverage:

1. The maximum limits of coverage provided by Catholic Mutual Relief Society of America to the **Additional Protected Person(s)** named in this endorsement shall not exceed the coverage dollar amount specifically required by contract or agreement and agreed to by the **Protected Person(s)**. In the absence of specific coverage limits within a referenced contract or agreement, the limits of liability afforded to the **Additional Protected Person(s)** must be listed on a separate Certificate of Coverage form attached to this endorsement. All limits of liability extended by this endorsement are inclusive of both Section II Coverage D and Section VII coverages (if applicable).
2. Unless specifically agreed to by contract or agreement, the coverage extended to the **Additional Protected Person(s)** by this endorsement is excess and non-contributory over any other available coverage or insurance.
3. This endorsement does not apply to any **Occurrence** outside the specific date(s) of a facility use agreement or terms of a lease.
4. This endorsement does not extend coverage to the **Additional Protected Person(s)** for **Occurrences** which cannot be attributed to primary acts or omissions of the **Protected Person(s)**.
5. Provided that a premises is utilized by the **Protected Person(s)** in a manner consistent with its intended purpose and in accordance with the applicable contract, agreement, or lease, this endorsement does not extend coverage to the **Additional Protected Person(s)** for premises defects or other **Occurrences** which could not be discovered by the **Protected Person(s)** with reasonable diligence.
6. The limited coverage afforded to the **Additional Protected Person(s)** by this endorsement only applies to the extent permissible by law and shall not apply to non-delegable duties unless specifically agreed to by contract or agreement.

This extension of coverage shall not enlarge the scope of coverage provided to the **Certificate Holder** under this Certificate nor increase the limit of liability thereunder. Unless otherwise agreed by contract or agreement, coverage extended under this endorsement to the **Additional Protected Person(s)** will not precede the effective date of this endorsement or extend beyond the cancellation date.

002195

Bill #	Invoice #	Inv. Date	Comment	Amount
7502	Corpus Christi 2026	3/20/2026	Corpus Christi 2026 procession	50.00
	Check # 2195		Check Date: 3/20/2026	50.00

Pay To: City of South Bend, 215 S Dr. Martin Luther King Jr Blvd, South Bend, IN 46601-2003

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

002195

PAY
TO THE ORDER OF Fifty Dollars and Zero Cents

City of South Bend
215 S Dr Martin Luther King Jr Blvd
South Bend, IN 46601-2003

DATE

AMOUNT

03/20/2026

50.00

[Handwritten Signature]

Mr

Mr

⑈002195⑈ ⑆271291596⑆ 19000508001600⑈