



**INTER-OFFICE MEMORANDUM
BOARD OF PUBLIC WORKS**

DATE: 5/26/2026
TO: Chris Dressel, Community Investment
Derek Erquhart, Fire Department
Brad Rohrscheib, Police Department

FROM: Hillary Horvath, Clerk hhorvath@southbendin.gov

SUBJECT: **TRANSIENT MERCHANT LICENSE RENEWAL
RECOMMENDATION**

APPLICANT: St. Joe Valley Watercolor Society

LOCATION: Leeper Park

DATE OF EVENT: June 20 and June 21

**PLEASE INSERT YOUR RECOMMENDATION IN THE APPROPRIATE FIELD BELOW,
BASED ON THE FOLLOWING ORDINANCE CRITERIA (sec. 4-60):**

Community Investment: Favorable Recommendation

Police: Favorable recommendation

Fire: Favorable Recommendation

CK1417
REC. 380288 914000

LICENSE APPLICATION FOR – TRANSIENT MERCHANT MUNICIPAL CODE SECTION - 4-60

I. APPLICATION TYPE Check One: New Renewal

II. BUSINESS DATA

- A. Name of Event: Leeper Park Art Fair
 - B. Business Name: St. Joe Valley Watercolor Society
 - C. Business Address: 54991 Willow Creek Dr
City: Mishawaka State: IN Zip: 46545
 - D. Mailing Address (if differs): _____
City: _____ State: _____ Zip: _____
 - E. Business Telephone Number: 574-850-1037
 - F. Business Fax Number: _____
 - G. E-Mail Address: rjkeller@hotmail.com
 - H. Indiana State Retailer License number: _____
 - I. Proposed location where business will be conducted: Leeper Park
 - J. Description of building or premises to be used: Leeper Park all near the fountain.
 - K. Proposed Dates of Operation: June 20 & June 21
 - L. Proposed Hours of Operation: 10-6 & 10-5
 - M. Types of goods to be sold: Fine Art
 - N. Scales will be used in business transactions: Yes _____ No
- If yes, please attach certificate from the Sealer of Weights and Measures.
- O. Food will be served in ready-to-eat condition: Yes No _____
 - P. Description of nature of proposed advertising: Billboards, social media

For Office Use Only

Application Filed MAY 13 2026 Public Works Approval _____
 Application Fee Paid MAY 13 2026 License Fee Paid MAY 13 2026
 Sent to Dept. 5/21/2026 License Number TRM2026-004

MAY 21 2026 - Rec Cert. of Ins.

will provide vendor list as they apply.

Not Approved _____
Reason _____

CITY OF SOUTH BEND, INDIANA
BOARD OF PUBLIC WORKS

Elizabeth A. Maradik

Elizabeth A. Maradik, President

Murray L. Miller

Murray L. Miller, Member

Abigail E. Magas

Abigail E. Magas, Member

Joseph R. Molnar

Joseph R. Molnar, Vice President

Breana N. Micou

Breana N. Micou, Member

Hillary R. Horvath

Attest: Hillary R. Horvath, Clerk

Date: June 9, 2026

LICENSE APPLICATION FOR – TRANSIENT MERCHANT
MUNICIPAL CODE SECTION - 4-60

II. BUSINESS DATA (Continued)

Q. Contact person to be responsible for customer complaints and available at least sixty(60) days following last date of business:

Contact's Legal Name: Nedy Lane
Residential Address: 1839 N. Lowell Ave
City: Chicago State: IL Zip: 60639
Telephone Number: 571-435-6217
E-mail: nedylane@yahoo.com

III. PERSONAL DATA (Applicant)

A. Applicant's Legal Name: Nedy Lane
B. Residential Address: _____
City: _____ State: _____ Zip: _____
C. Residential Telephone Number: _____
D. Cellphone Number: _____
E. Position with business: _____
F. Social Security Number: _____
G. Gender: _____
H. Date of birth: _____
I. Race: _____

IV. PERSONAL DATA (Owner, if differs)

A. Owner's Legal Name: Renee Keller
B. Residential Address: 54991 Willow Creek Dr.
City: Mishawaka State: IN Zip: 46545
C. Residential Telephone Number: _____
D. Cellphone Number: 574-850-1037
E. Position with business: Member
F. Social Security Number: _____
G. Gender: _____
H. Date of birth: _____
I. Race: _____

**LICENSE APPLICATION FOR – TRANSIENT MERCHANT
MUNICIPAL CODE SECTION - 4-60**

V. PERSONAL DATA (Additional Owner, if applicable)

A. Owner's Legal Name: _____

B. Residential Address: _____

City: _____ State: _____ Zip: _____

C. Residential Telephone Number: _____

D. Cellphone Number: _____

E. Position with business: _____

F. Social Security Number: _____

G. Gender: _____

H. Date of birth: _____

I. Race: _____

VI. INCLUDE \$5.00 PROCESSING FEE WITH APPLICATION

VII. INCLUDE NAMES, ADDRESSES, AND TELEPHONE NUMBERS OF ALL GROUP EVENT PARTICIPANTS.

VIII. INCLUDE A CURRENT CERTIFICATE OF LIABILITY INSURANCE WITH THE CITY OF SOUTH BEND LISTED AS THE CERTIFICATE HOLDER.

IX. AFFIRMATION

I, hereby, certify and affirm that all of the information I have given in this application is true and accurate to the best of my knowledge. I further certify that I have in no way attempted to mislead the City in this application by omitting facts known to me. I understand that the completed application must be filed no later than thirty days before the planned event is to begin. I have read and understand the regulations of the Transient Merchant license found in the City of South Bend Municipal Code, Section 4-60.



Signature



Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/31/2026

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 Banc Insurance Agency 67 Hunt Street Ste. 203A Agawam MA 01001		CONTACT NAME: PHONE (A/C, No. Ext): FAX (A/C, No.): E-MAIL ADDRESS:	
		INSURER(S) AFFORDING COVERAGE INSURER A: Ohio Security Insurance Company NAIC # 24082 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
INSURED St. Joe Watercolor Society 54991 Willow Creek Dr Mishawaka IN 46545			

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.

INSTR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVR	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 GENTL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		Y	BLS59616886	3/18/2026	3/18/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPOP AGG \$ 2,000,000 PKG01 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY						COMBINED SINGLE LIMIT (EA accident) \$ 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) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 The Certificate Holder is named as additional insured with respect to General Liability.

CERTIFICATE HOLDER The City of South Bend 227 W. Jefferson Blvd. South Bend IN 46601	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 Brian Mayo
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/31/2026

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PRODUCER Banc Insurance Agency 67 Hunt Street Ste. 203A Agawam MA 01001		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS:		FAX (A/C, No):	
		INSURER(S) AFFORDING COVERAGE			NAIC #
		INSURER A : Ohio Security Insurance Company			24082
		INSURER B :			
		INSURER C :			
		INSURER D :			
		INSURER E :			
		INSURER F :			
INSURED St. Joe Watercolor Society 54991 Willow Creek Dr Mishawaka IN 46545					

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR 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 type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		BLS59616886	3/18/2026	3/18/2027	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$ 15,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
							PKG01	\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	EXCESS LIAB						AGGREGATE	\$
	DED							\$
	RETENTION \$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				OTH-ER	
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

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

The Certificate Holder is named as additional insured with respect to General Liability.

CERTIFICATE HOLDER**CANCELLATION**

The City of South Bend 227 W. Jefferson Blvd. South Bend IN 46601	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE <i>Brian Mayo</i></p>
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Leeper Park 2026 Artists

Clay

Joe Chomyn	South Bend, IN	joseph.chomyn@yahoo.com
Kelly Kaatz	Oakland Township, MI	kellykaatzceramics@gmail.com
Janet Leazenby	Hendersonville, NC	janleazenby@yahoo.com
Linda Lindner	Hartland, WI	info@tddesigngroup.com
Kyoko Magari-Ball	South Bend, IN	kyokoceramic.1@gmail.com
Scott Martin	Schoolcraft, MI	Scottmartinpottery@yahoo.com
Jason Parsley	Cincinnati, OH	parsleypottery@gmail.com
Brad Patterson	Grand Haven, MI	brad@bradleygallery.com
Doug, Schmidt	La Porte, IN	schmidt4marken@aol.com
Jeffery Shawhan	Racine, WI	jeff.shawhan@cuw.edu
Jeff Unzicker	Union City, IN	unzpottery@gmail.com
Linda Winegar	LaPorte, IN	winegarpottery.com

Digital Art

Eric Lee	Northbrook, IL	eric.leegraphic@gmail.com
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Fiber

Cindy Cumming	Chelsea, MI	Cindybelladesigns@gmail.com
Jackie Gray	Valparaiso, IN	jaclyngraydesign@gmail.com
Philippe Laine	Palm Beach Gardens, FL	philippedujour@yahoo.com
Mari Lydic	Pace, FL	Tallgalstudiosllc@gmail.com
Anna Repke	Chillicothe, IL	rrepkes@gmail.com
Samuel Yao	Ann Arbor, MI	am48103@gmail.com
Chandra Williams	Niles, MI	goddessofthemoonleather.com

Glass

Heidi Barron	Ada, MI	bardes242@gmail.com
Reinhard Herzog	Ballwin, MO	herzoglass@gmail.com
Faith Wickey	Centreville, MI	faith@faithwickey.com
Carolyn/Leonard Wilson	McHenry, IL	lwilson@mc.net

Jewelry

Megan Horan	West Chester, PA	mgnhoran@yahoo.com
Greg Jordan	Fort Wayne, IN	jorartjlry@gmail.com
Judy Ladd	Estero, FL	Studio266@aol.com
Damen Mroczek	South Bend, IN	dmroczek73@gmail.com
Robert Nilsson	Sebastian, FL	bertnil@msn.com
Dave Parsons	Plymouth, IN	ptscdave1@gmail.com
Sally Phillips	Indianapolis, IN	kidnapbygypsies@aol.com
Bobbie Rafferty	Chicago, IL	beadsongjewelry@gmail.com
Mark Slaven	North Port, FL	Kslaven@wegotglass.com
Sharon Spry	Milford, MI	AirDelight@AOL.com
Bart Ziegler	Burlington, WI	zieglerdesignsjewelry@gmail.com

Mixed Media

Wayne Gao	Diamond Bar, CA	colorfulartists@yahoo.com
Ruth Jellema	Rockford, MI	rdfabrications@runbox.com
Nicario Jimenez	Naples, FL	nicarioj@gmail.com
Boubakary Konseimbo	Santa Fe, NM	boubakons@yahoo.fr
Promila Kumar	Libertyville, IL	promkumar70@gmail.com
James Mosier	Ballston Lake, NY	jmosier1958@gmail.com
Esmeralda Ruiz	Naples, FL	ms.ruiz@emeraldartgallery.com
Marcus Ryan	Marietta, GA	marcus@marcusryanstudios.com
Babs Schnabl	Lake Geneva, WI	schnabls2000@yahoo.com

Painting

Catherine Adamkiewicz	Dearborn Heights MI	sienabecket@gmail.com
Cyndy Callog	Pentwater, MI	gmikulyuk9522@charter.net
Rosa Chavez	Naples, FL	Rosachavezartwork@gmail.com
Diane Dorn	Granger, IN	dianedorn@verizon.net
Amy Huisinga	Chicago, IL	amyartworks@yahoo.com
Liping Jackson	Clinton MS	pennyclayturtles@gmail.com
Isiaka Lawal	Glenwood, IL	lawali4@yahoo.com
Stephanie McDairmant	Warsaw, IN	stephanie@canaryartwork.com
Araik Minasyan	Charlotte, NC	araikmurals@yahoo.com
Gary Odmark	Holland, MI	odmark@charter.net
Vladimir Pailodze	Lake Zurich, IL	vovapai@yahoo.com
Anne Parks	West Lafayette, IN	anneparksart@gmail.com

Ben Roseland
Joan Spohrer
Barbara Walsh
Jim Zhang

Granger, IN
South Bend, IN
Granger, IN
Peachtree Corners, GA

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Yjzhangart@gmail.com

Photography

Karin Connolly
Derek Dammann
Jana Epstein
Michelle Herrli
Tom Lazar
Deb Potis
Scott Sternberg

Orlando, FL
Cincinnati, OH
Atlanta, GA
South Bend, IN
Brookfield, WI
Osceola, IN
Tremont, IL

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scott@scottsfineart.com

Printmaking and Drawing

Chris Plummer
Sarah Skiold-Hanlin
Jay Wennersten
W. Michael Winston

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Collinsville, IL
Carol Stream, IL
Twinsburg, OH

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JayWenner@aol.com
markerart@roadrunner.com

Sculpture

Chad Anderson
Jim Babala
Dallas Galbraith
Sunda Mahaja
Janice/ Rick Moore
Thomas Yano

Cedar Springs, MI
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Huntington, IN
Goshen, IN
Bryan, OH
Vermilion, OH

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mahajaarts@gmail.com
tjrartwork@gmail.com
thomyano@yahoo.com

Wood

Richard Barnhart
Jennifer Boles
Paul Callog
Pat Dillon
Tina Hospers
Donald Markham

Paw Paw, MI
Shepherdsville, KY
Niles, MI
Goshen, IN
Middlebury, IN
Russiaville, IN

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dillonswoodturning@yahoo.com
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Aimee Wesling

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