

## Consent Agenda – Special Events

<b>Event Organizer</b>	<b>Type of Event</b>	<b>Location</b>	<b>Date</b>	<b>Rain Date</b>
Kind Hearts for Kids	Kindness Festival	Buzzards Bay Park	9/7/24	9/8/24
Habitat for Humanity	Bike Ride	Town Roads	9/15/24	n/a
Habitat for Humanity	One Day Liquor License	Aptucxet Trading Post	9/15/24	n/a
Denise Wright	Pickleball Fundraiser	Clarke Field	6/29/24	6/30
PanMass Challenge	Bike Ride	Town Roads	8/3-8/4	n/a
PanMass Challenge	One Day Liquor License	Mass Maritime Academy (101 Academy Dr)	8/3/24	n/a
BHS Girls Lacrosse	Car Wash	Pocasset Fire Station	5/4/24	5/11
Samantha Moran	Wedding Ceremony	Buzzards Bay Park	10/5/24	n/a
Rachel Edwards	1 <sup>st</sup> birthday party	Buzzards Bay Park	4/20/24	n/a
Amanda Bryant	Family Reunion	Buzzards Bay Park	7/27/24	n/a
Best Buddies International	Bike Ride	Town Roads	6/1/24	n/a



EA-23-66

Use of Town Property Event Application  
(old)

Status: Active

Submitted On: 10/31/2023

Applicant



Lauren DeGregorio



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## Primary Contact Information

Name\*

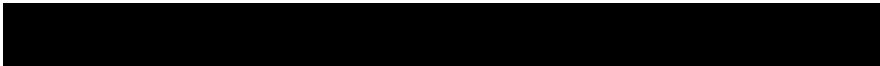
Lauren DeGregorio

Business/Organization Name (if applicable)

Kind Hearts for Kids inc

Mailing Address\*

Cell Phone No.\*



Email\*

kindheartforkidsinc@gmail.com

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## Event Information

Organization/Individual Hosting the event\*

Kind Hearts for Kids Inc.

Type of Organization (LLC, non-profit)

Non Profit

Type of Event (i.e.  
banquet/concert/fundraiser/party)\*

Festival

Location of Event\*

Buzzards Bay Park



Certain events taking place at Buzzards Bay Park may also require an additional permit from the U.S. Army Corps of Engineers. Based on your responses, you will be notified if you are required to apply.

Events held at Buzzards Bay Park are required to upload a site plan detailing where things will be set up. You will be able to upload this later in the application.

Date(s) of Event\*

9/7/24

Set up/Clean up Dates ?

9/7/24

Rain Date

09/08/2024

Hours (start and end times)\*

11-3 (set up 9am)

Estimated overall attendance\*

500

# of Staff/Volunteers\*

10

Description of Event\*

Kindness Festival - Food Trucks, Vendors, Petting Zoo, DJ Stephanie Viva, Kids Zone

Will your event impact traffic?\*

Yes

Will you event impact parking?\*

Yes

Any event that will impact parking or traffic must reach out to the Police Department four weeks prior to event.

Is event open to the public?\*

Yes

Will admission be charged?\* ?

No

**Will there be alcohol service/ on-premise consumption?\***

No



**Will there be food?\***

Yes

**Describe type of food\* ?**

Shore Fire, Kono, Frosty Friends

**Will there be vendors?\***

Yes

**Type of Vendors\***

Both

**# Informational Vendors**

20

**# of Retail Vendors**

40

**Will a tent be used?\***

No

**Will the vendors be using tents?**

Yes

**Size of tents**

up to 10x10

**# of tents up to 10x10**

—

**No stakes are allowed at Buzzards Bay Park. No grills, propane tanks, space heaters, or smoking under tent. A clear exit and fire extinguisher is required. A separate tent application from the building department may be required.**

**Will you be holding a raffle?**

No

**Use of Electricity/generators?\***

Yes

**If Yes for what purpose\* ?**

DJ at the Gazebo

Electricity is not available or guaranteed at every location. Based on your responses and location you will be notified if you need a generator. If a generator is required, it is the responsibility of the event organizer.

Are you providing portable toilets?\*

No

Will you be placing a banner across Main Street?\*

No

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## Hold Harmless Agreement

Signature\*

✓ Lauren DeGregorio  
Oct 31, 2023

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## Signature

Signature

✓ Lauren DeGregorio  
Oct 31, 2023

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## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Application Content and Attachments	10/31/2023, 9:59:00 AM	3/4/2024, 12:12:16 PM	Maria Simone	-	Completed
✓ Police Department Comments	3/4/2024, 12:12:16 PM	3/11/2024, 2:56:49 PM	Theodore Economides	3/10/2024	Completed
✓ Fire Department Comments	3/4/2024, 12:12:16 PM	3/4/2024, 1:03:59 PM	David Pelonzi	-	Completed
✓ DPW Comments	3/4/2024, 12:12:16 PM	3/5/2024, 10:07:16 AM	Matthew Quinn	-	Completed

Label	Activated	Completed	Assignee	Due Date	Status
✓ Building Inspector Comments	3/4/2024, 12:12:16 PM	3/6/2024, 8:40:31 AM	Ann Gutterson	-	Completed
✓ Health Agent Comments	3/4/2024, 12:12:16 PM	3/4/2024, 1:08:05 PM	Kaitlyn Shea	-	Completed
✓ Town Administrator's Comments	3/11/2024, 2:56:50 PM	3/28/2024, 2:22:46 PM	Maria Simone	-	Completed
✓ Select Board Vote	3/28/2024, 2:22:47 PM	-	Maria Simone	4/3/2024	Active
📄 Temporary Event Permit Issued	-	-	-	-	Inactive



Town of Bourne, MA

Mar 29, 2024

EA-23-66

## Health Agent Comments

Use of Town Property Event Application (old)

**Status:** Complete

**Became Active:** Mar 4, 2024

**Assignee:** Kaitlyn Shea

**Completed:** Mar 4, 2024

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### Applicant

Lauren DeGregorio  
oplaysisspaces@gmail.com



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### Comments

Kaitlyn Shea, Mar 4, 2024

If any additional food trucks or retail food vendors join, please let the Health Department know so that we can verify all food vendors have the appropriate permits, thank you.



Town of Bourne, MA

Mar 29, 2024

EA-23-66

## Fire Department Comments

Use of Town Property Event Application (old)

**Status:** Complete

**Became Active:** Mar 4, 2024

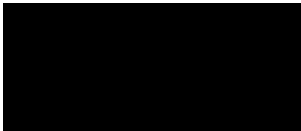
**Assignee:** David Pelonzi

**Completed:** Mar 4, 2024

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### Applicant

Lauren DeGregorio  
oplaysisspaces@gmail.com



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### Comments

David Pelonzi, Mar 4, 2024

Will need an inspection. Any propane >42 pounds not attached to a good truck will require a permit



Town of Bourne, MA

Mar 29, 2024

EA-23-66

## Police Department Comments

Use of Town Property Event Application (old)

**Status:** Complete

**Became Active:** Mar 4, 2024

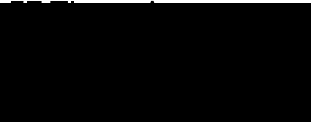
**Assignee:** Theodore Economides

**Completed:** Mar 11, 2024

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### Applicant

Lauren DeGregorio  
oplaysisspaces@gmail.com



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### Comments

**Theodore Economides, Mar 11, 2024**

With the number of people expected, 1 detail officer needed for crosswalk/crowd. Please contact department 3 weeks prior to the event to work out details

INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAR 11 2019

KIND HEARTS FOR KIDS INC  
5 SEA LANE  
SAGAMORE BEACH, MA 02562-0000

Contact Person:  
CUSTOMER SERVICE ID# 31954  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
509(a) (2)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
January 16, 2019  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/6/2024

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).

<b>PRODUCER</b> RogersGray, A Baldwin Risk Partner 410 University Ave Westwood MA 02090	<b>CONTACT NAME</b> PHONE (A/C, No, Ext) 800-553-1801 FAX (A/C, No) 877-816-2156 E-MAIL ADDRESS mail@rogersgray.com
License#: PC-514062 KINDHEA-01	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A</b> United States Liability Insura <b>INSURER B</b> Mount Vernon Fire Insurance Co <b>INSURER C</b> <b>INSURER D</b> <b>INSURER E</b> <b>INSURER F</b>
<b>INSURED</b> Kind Hearts For Kids Inc. 4 Barlows Landing Rd STE 18 Pocasset MA 02559	<b>NAIC #</b> 25895 26522

**COVERAGES**

CERTIFICATE NUMBER: 540838303

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE L MIT APPL ES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			NBP1557740D	2/11/2024	2/11/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 0 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 0 COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			XL 2561216A	3/25/2023	3/25/2024	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 PER STATUTE OTH-ER
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCR PTION OF OPERATIONS below	Y / N <input type="checkbox"/>	N / A				E.L. EACH ACC DENT \$ 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)

When Required by Written Contract, the Following Applies  
General Liability - Additional Insured Ongoing Operations (BP 145 NPP 06-10)

Event is 9/7/24 (9/8 rain day)  
The Town of Bourne is named as Additional Insured

**CERTIFICATE HOLDER****CANCELLATION**

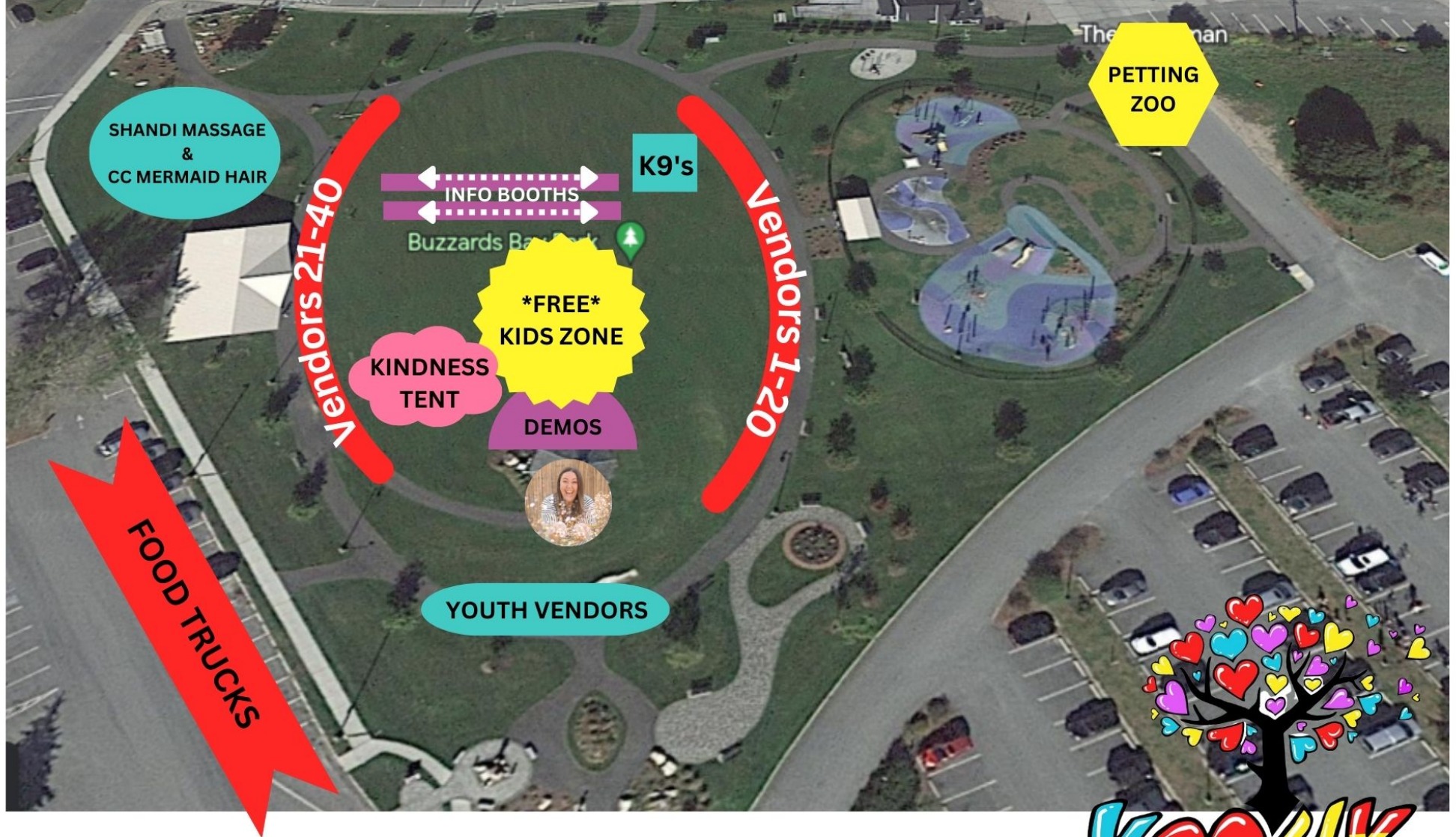
Town of Bourne  
24 Perry Avenue  
Buzzards Bay MA 02532

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

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# 4TH ANNUAL KINDNESS FESTIVAL








## EA-24-5


### Use of Town Property Event Application (old)

Status: Active


Submitted On: 2/2/2024

### Applicant

 Adrianne Wytas

 508-362-3559 x18

 events@habitatcapecod.org

 411 Main Street, Suite 6  
Yarmouth Port, MA 02675

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## Primary Contact Information

### Name\*

Adrianne Wytas

### Business/Organization Name (if applicable)

Habitat for Humanity of Cape Cod

### Mailing Address\*

411 Main Street, Suite 6

### Cell Phone No.\*

774-313-7255

### Email\*

events@habitatcapecod.org

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## Event Information

### Organization/Individual Hosting the event\*

Habitat for Humanity of Cape Cod

### Type of Organization (LLC, non-profit)

non-profit

### Type of Event (i.e. banquet/concert/fundraiser/party)\*

fundraiser

### Location of Event\*

Town Roads

### Date(s) of Event\*

9/15/24

### Set up/Clean up Dates

9/14-15/24

**Rain Date**

—

**Hours (start and end times)\***

7am - 12pm

**Estimated overall attendance\***

80

**# of Staff/Volunteers\***

20

**Description of Event\***

Fundraising Bike Ride

**Will your event require road closures?\***

No

**Will your event impact traffic?\***

No

**Will you event impact parking?\***

No

**Is event open to the public?\***

Yes

**Will admission be charged?\*** ?

No

**Will there be alcohol service/ on-premise consumption?\*** ?

Yes

**Alcoholic beverages are not permitted on Town property without a One Day Liquor License issued by the Select Board. A separate application and fee is required.**

**Will there be food?\***

Yes

**Describe type of food\*** ?

catered BBQ

**Will there be vendors?\***

No

**Will a tent be used?\***

No

Will you be holding a raffle?

No

Use of Electricity/generators?\*

No

Are you providing portable toilets?\*

No

Will you be placing a banner across Main Street?\*

No

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## Hold Harmless Agreement

Signature\*

✓ Adrienne Wytas/Habitat Cape Cod  
Feb 2, 2024

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## Signature

Signature

✓ Adrienne Wytas/Habitat Cape Cod  
Feb 2, 2024

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## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Application Content and Attachments	2/2/2024, 9:57:46 AM	3/5/2024, 3:37:56 PM	Maria Simone	-	Completed
✓ Police Department Comments	3/5/2024, 3:37:57 PM	3/13/2024, 9:25:10 AM	Theodore Economides	3/11/2024	Completed
✓ Fire Department Comments	3/5/2024, 3:37:57 PM	3/6/2024, 9:54:06 AM	David Pelonzi	-	Completed
✓ DPW Comments	3/5/2024, 3:37:57 PM	3/6/2024, 12:48:26 PM	Matthew Quinn	-	Completed

Label	Activated	Completed	Assignee	Due Date	Status
✓ Health Agent Comments	3/5/2024, 3:37:57 PM	3/5/2024, 4:09:48 PM	Kaitlyn Shea	-	Completed
✓ Town Administrator's Comments	3/13/2024, 9:25:11 AM	3/28/2024, 2:20:49 PM	Maria Simone	-	Completed
✓ Select Board Vote	3/28/2024, 2:20:50 PM	-	Maria Simone	4/3/2024	Active
📄 Temporary Event Permit Issued	-	-	-	-	Inactive



Town of Bourne, MA

Mar 29, 2024

EA-24-5

## Police Department Comments

Use of Town Property Event Application (old)

**Status:** Complete

**Became Active:** Mar 5, 2024

**Assignee:** Theodore Economides

**Completed:** Mar 13, 2024

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### Applicant

Adrianne Wytas  
events@habitatcapecod.org  
411 Main Street, Suite 6  
Yarmouth Port, MA 02675  
508-362-3559 x18

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### Comments

**Theodore Economides, Mar 13, 2024**

Staff not allowed to be in roadway or direct vehicle traffic, can only guide riders. No flaggers allowed on Bourne roadways. Otherwise no PD concerns



## 20 MILE ROUTE

Begin at the **Aptucxet Trading Post Museum**

Take a right onto the **Cape Cod Canal access road** and follow to the Sandwich end

Turn around and head back down the **Canal access road** to the end, by the Railroad Bridge

At the end, cross the **railroad tracks** and enter the parking lot on the right, look for **Bell Road** on the left **(there are bathrooms here - go straight through the parking lot and onto the next access road, they will be on your left)**

Follow **Bell Road** to **Shore Road**

Take a right onto **Shore Road** at the Stop Sign

Stay right onto **Monument Neck Road**

Right onto **President's Road**

Bear left to stay on **President's Road**

Bear left onto **President's Road** – you will see a sign for Mashnee Village

**President's Road** becomes **Mashnee Road**

Follow onto Mashnee Island

Take the first right once you are on the island onto **Channel Road**

Bear left onto **Rope Walk Road**, follow to the end

Take a left onto **Captains Row**

Take a left onto **Clipper Road**

Take a left onto **Mooring Road**

Take a right onto **Mashnee Road**

Take a left onto **Monument Neck Road** at Stop Sign

This merges with **Shore Road** at the next Stop Sign, continue straight here

Take a left onto **Bell Road**

Take a right at the parking lot and back onto the **Canal** to the finish at **Aptucxet**





## 40 MILE ROUTE

Take a left onto the **Cape Cod Canal access road** and follow to the end

Cross the **railroad tracks** and enter the parking lot on the right, look for **Bell Road** on the left

Follow **Bell Road** to **Shore Road**

Take a right onto **Shore Road** at the Stop Sign

Bear right onto **Monument Neck Road**

Right onto **President's Road**

Bear left to stay on **President's Road**

Bear left onto **Mashnee Road** – you will see a sign for Mashnee Village

Follow onto Mashnee Island

Take the first right once you are on the island onto **Channel Road**

Bear left onto **Rope Walk Road**, follow to the end

Take a left onto **Captains Row**

Take a left on **Clipper Road**

Take a left on **Mooring Road**

Take a right onto **Mashnee Road**

Follow **Mashnee Road**, bear right onto **President's Road**

Take a left onto **Monument Neck Road**

Take a right onto **Shore Road**

Follow **Shore Road**

Keep right to stay on **Shore Road**

**CAUTION METAL DRAWBRIDGE AHEAD - DISMOUNT BIKE TO CROSS**

Turn right onto **Red Brook Harbor Road**

**CAUTION RAILROAD TRACKS AHEAD – DISMOUNT BIKE TO CROSS**

Go straight at the Stop sign and tennis courts, turns into **Squeteague Harbor Road**

Bear right to stay on **Squeteague Harbor Road**

Turn right onto **Megansett Road**, this turns into **Garnett Ave**

**FLAGGERS HERE** - At Stop sign, take a left onto **County Road** and follow to the beginning of the Shining Sea Bike Path

**THE BEGINNING OF THE BIKE PATH IS ACROSS THE STREET ON THE RIGHT**

Follow **Shining Sea Bike Path** all the way to the end. You'll be at the Steamship Authority Terminal Building, where the Ferrys dock. **(RESTROOMS AVAILABLE AT STEAMSHIP AUTHORITY TERMINAL BUILDING & THERE WILL BE A HABITAT VOLUNTEER MANNED WATER STOP AND CHECK IN)**

Turn around in the Steamship Authority parking lot and follow the Bike Path back to the end (look for Water Stop table)

Turn left on **County Road**

Go straight through the Stop sign

**FLAGGERS HERE** - Bear right on **Garnet Ave**

**Garnet Ave** turns into **Megansett Road**

Turn left onto **Squeteague Harbor Road**

Bear left to stay on **Squeteague Harbor Road**

Go straight across **Scraggy Neck Road** onto **Red Brook Harbor Road**

**CAUTION RAILROAD TRACKS AHEAD – DISMOUNT BIKE TO CROSS**

At Stop Sign, turn left on **Shore Road**

**CAUTION METAL DRAWBRIDGE AHEAD - DISMOUNT BIKE TO CROSS**

Slight right to stay on **Shore Road**

Quick left to stay on **Shore Road**

Take a left onto **Bell Road**

Follow along the **Canal** to the finish at **Aptuxet Museum**



## ODLL-24-2


One Day Liquor License (old version)

Status: Active


Submitted On: 2/2/2024

### Applicant

 Adrianne Wytas

 508-362-3559 x18

 events@habitatcapecod.org

 411 Main Street, Suite 6  
Yarmouth Port, MA 02675

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## Applicant Information

**Contact/Manager Name\***

Adrianne Wytas

**Contact/Manager Phone\***

508-362-3559 x18

**Contact/Manager Email\***

events@habitatcapecod.org

**Type of Organization\***

Non profit

**Name of Organization\***

Habitat for Humanity of Cape Cod

**Type of License**

All Alcoholic -\$50

**Organization Address\***

411 Main Street, Yarmouthport, MA  
02675

**Is this application in relation to an event on town property?**

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## Premises to be Licensed

**Venue Name\***

Aptucxet Trading Post Museum

**Address\***

Aptucxet Road, Bourne

**Venue Contact Person**

Adrianne Wytas

**Venue Phone Number**

**Is this event indoors or outdoors?\***

Outdoors

A site plan will be required for all events. The plan should indicate where alcohol will be served and consumed. Additional details should include parking, tents, food setup, guest seating, etc. A hand drawn plan is acceptable.

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## Event Information

**Type of event\***

Fundraising Bike/Run/Walk

**Provide a brief description of event\***

This is our 7th year holding this event at this location. Riders, walkers, and runners will travel along the Canal, and the roads through Bourne.

**Date of Event\***

09/15/2024

**Start Time\***

7am

**End Time\***

1pm

**Admission Charge\***

0

**Estimated Hourly Attendance**

100

**Describe how alcohol will be served and managed/monitored\***

Professional Bartending Service, Tony Jeffries, will be on hand serving canned beer, wine, cocktails.

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## Additonal Permits

**Will there be food?**

Yes

**Brief description of food**

BBQ

**Will a tent(s) be used?**

Yes

**Size of tent(s)**

up to 10x10

**Number of tents**

3

**Will there be a raffle?**

No

**Will there be vendors?**

No

**Will there be entertainment?**

Yes


**Brief description of entertainment**

Singer with guitar

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## Liability Disclaimer

**Signature\***

 Adrienne Wytas/Habitat Cape Cod  
Feb 2, 2024

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# Signature



## Signature

✓ Adrienne Wytas/Habitat Cape Cod  
Feb 2, 2024

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## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
 Original Submission	2/2/2024, 10:19:11 AM	2/2/2024, 10:19:11 AM	-	-	Completed
✓ Application Content and Attachments	2/2/2024, 10:19:11 AM	3/4/2024, 12:19:06 PM	Maria Simone	-	Completed
✓ Police Department	3/4/2024, 12:19:07 PM	3/14/2024, 2:00:07 PM	James Czyryca	3/10/2024	Completed
✓ Department of Public Works	3/4/2024, 12:19:07 PM	3/5/2024, 10:11:40 AM	Matthew Quinn	-	Completed
✓ Building	3/4/2024, 12:19:07 PM	3/6/2024, 9:12:52 AM	Ann Gutterson	-	Completed
✓ Fire Department	3/4/2024, 12:19:07 PM	3/4/2024, 12:57:06 PM	David Pelonzi	-	Completed
✓ Board of Health	3/4/2024, 12:19:07 PM	3/5/2024, 4:10:58 PM	Kaitlyn Shea	-	Completed
✓ Town Administrator Approval	3/14/2024, 2:00:08 PM	3/28/2024, 2:21:31 PM	Maria Simone	-	Completed
✓ License Commission Board Vote	3/28/2024, 2:21:33 PM	-	Maria Simone	4/3/2024	Active

Label	Activated	Completed	Assignee	Due Date	Status
 Fee Payment	-	-	Adrienne Wytas	-	Inactive
 One-Day Liquor License	-	-	-	-	Inactive

**From:** [REDACTED]  
**To:** [Adrianne Wytas](#)  
**Cc:** [Adrianne Wytas](#)  
**Subject:** Re: Habitat Cape Cod's Ride for Homes  
**Date:** Saturday, September 23, 2023 6:10:50 AM  
**Attachments:** [image001.png](#)

---

**CAUTION:** This email originated from outside of your organization. Do not click on links or open attachments unless you recognize the sender's address and trust the content to be safe.

So pleased you had a great event!  
We have the date saved.

Diane

[Sent from the all new AOL app for iOS](#)

On Wednesday, September 20, 2023, 10:43 AM, Adrianne Wytas <[events@habitatcapecod.org](mailto:events@habitatcapecod.org)> wrote:

We had another great event on Sunday! It's such a fantastic spot and works so well for our Ride for Homes. Everyone loved it and it was nice to have the museum and gift shop open.

We have our 2024 date set – is Sunday September 15<sup>th</sup> 2024 available for our 7<sup>th</sup> Annual Ride.

Thanks Diane!

**Adrianne Wytas**

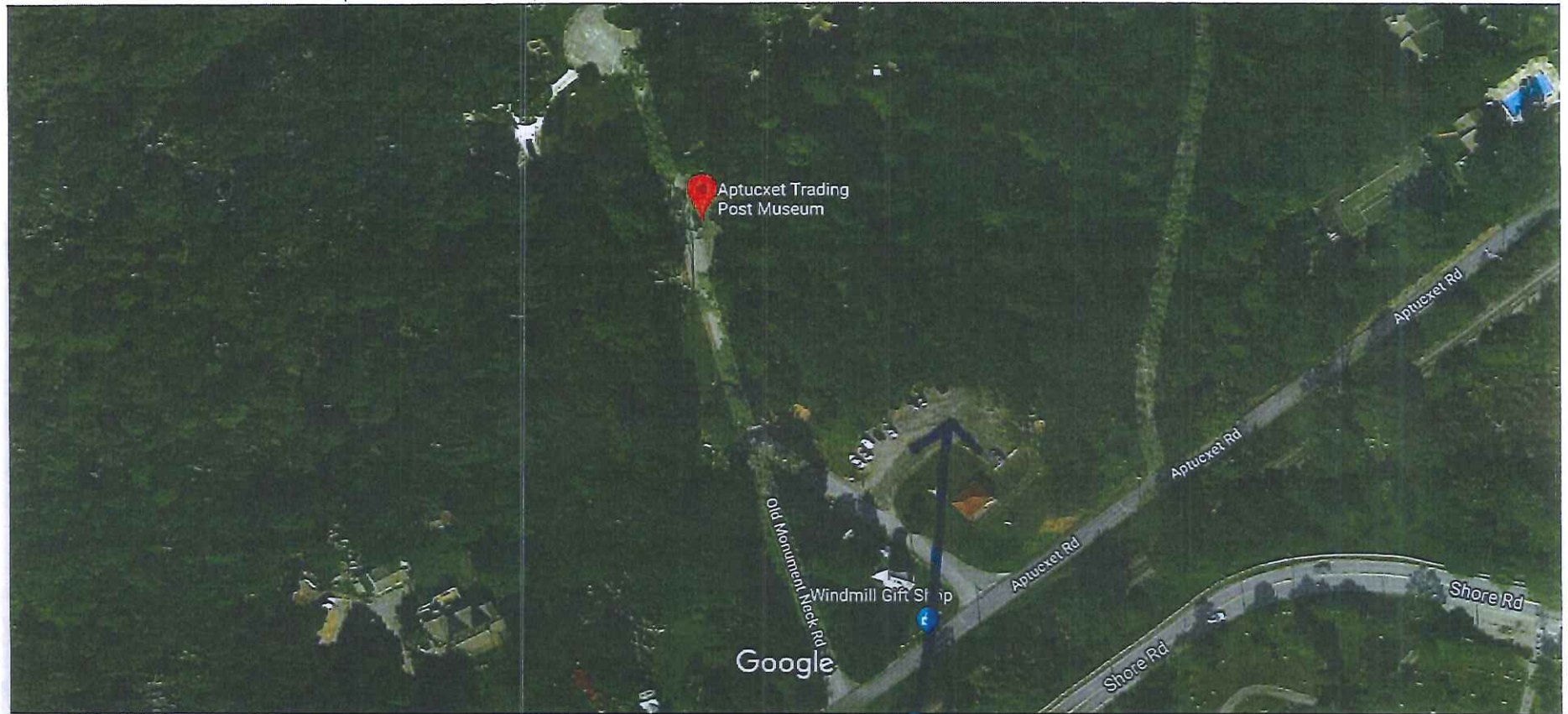
**Events Coordinator**

Habitat for Humanity of Cape Cod  
411 Main Street, Suite 6  
Yarmouth Port, MA 02675  
[HabitatCapeCod.org](http://HabitatCapeCod.org)  
508-362-3559 x18

Follow us on [Facebook](#)  
[Donate](#) your vehicle to Habitat Cape Cod  
Remodeling? [Donate](#) your cabinets and appliances



Google Maps Aptucxet Trading Post Museum



Imagery ©2019 Google, Map data ©2019 Google 100 ft





3/28/2019

Old Monument Neck Rd - Google Maps

Google Maps Old Monument Neck Rd



Image capture: Sep 2011 © 2019 Google

Bourne, Massachusetts



Street View - Sep 2011

















We build strength, stability, self-reliance and shelter.

January 13, 2023

HFH of Cape Cod  
411 Main St. Ste 6  
Yarmouthport, MA 02675

**RE: HFH of Cape Cod, Tax Exempt Verification #22-2900430**

Dear Affiliate:

This letter will confirm that HFH of Cape Cod with employer identification number 22-2900430 is considered a subordinate under the group tax exemption umbrella of Habitat for Humanity International, Inc. ("HFHI") under Section 501(c)(3) of the Internal Revenue Code.

The group exemption number assigned to HFHI by the IRS is 8545. This number may be provided to prospective donors, foundations, and other grant organizations as they request it and is required on certain IRS forms.

Enclosed is a copy of the determination letter dated December 1, 2021 provided by the IRS as evidence of HFHI's tax exempt status as well as its group exemption. The determination letter, together with this letter, confirms HFH of Cape Cod subordinate status and provides evidence of its tax-exempt status under Section 501(c)(3) of the Code.

In partnership,

A handwritten signature in blue ink, appearing to read "Jim Mellott".

**Jim Mellott**  
VP Finance

Enclosure

# Certificate of Completion

This Certificate of Completion of  
**eTIPS Concessions 3.0**  
For coursework completed on July 31, 2022  
provided by Health Communications, Inc.  
is hereby granted to:

**Hank Henderson**

Certification to be sent to:

Habitat for Humanity  
300 Buck Island Rd Apt 20D  
West Yarmouth MA, 02673-2541 USA



HEALTH COMMUNICATIONS, INC.

This document is not proof of TIPS certification. It signifies only that you have completed the course. Valid certification documents will be forwarded to you.





# Certificate of Completion

This Certificate of Completion of  
**eTIPS Concessions 3.0**  
For coursework completed on August 5, 2022  
provided by Health Communications, Inc.  
is hereby granted to:

**Karen Henderson**

Certification to be sent to:

**Habitat for Humanity**  
**300 Buck Island Rd Apt 20D**  
**West Yarmouth MA, 02673-2541 USA**



HEALTH COMMUNICATIONS INC.



This document is not proof of TIPS certification. It signifies only that you have completed the course. Valid certification documents will be forwarded to you.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/12/2024

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).

<b>PRODUCER</b> McKay Insurance Agency, Inc. 106 East Main Street P O Box 151 Knoxville IA 50138	<b>CONTACT NAME</b> PHONE (A/C, No, Ext) (641) 842-2135 FAX (A/C, No) (641) 828-2013 E-MAIL ADDRESS sports@mckayinsagency.com																		
<b>INSURED</b> Silent Sports Association - NBTS SE Habitat for Humanity of Cape Cod 411 Route 6A, Suite 6 Yarmouth Port MA 02675	<b>INSURER(S) AFFORDING COVERAGE</b> <table><tr><td>INSURER A</td><td>Evanston Insurance Company</td><td>NAIC # 35378</td></tr><tr><td>INSURER B</td><td>Gerber Life Insurance Company</td><td>70939</td></tr><tr><td>INSURER C</td><td></td><td></td></tr><tr><td>INSURER D</td><td></td><td></td></tr><tr><td>INSURER E</td><td></td><td></td></tr><tr><td>INSURER F</td><td></td><td></td></tr></table>	INSURER A	Evanston Insurance Company	NAIC # 35378	INSURER B	Gerber Life Insurance Company	70939	INSURER C			INSURER D			INSURER E			INSURER F		
INSURER A	Evanston Insurance Company	NAIC # 35378																	
INSURER B	Gerber Life Insurance Company	70939																	
INSURER C																			
INSURER D																			
INSURER E																			
INSURER F																			

**COVERAGES****CERTIFICATE NUMBER:** CL2431264892**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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLA MS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Includes Athletic Participants GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: Event	Y	N	3607AH010099-6	09/15/2024	09/16/2024	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV NJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b> <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						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY NJURY (Per person) \$ BODILY NJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> 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 ACC DENT \$ E L DISEASE - EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$
B	Accident Medical			15-070944-23	09/15/2024	09/16/2024	Excess \$25,000 Deductible \$250

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

Ride for Homes - Bicycle Ride and Run/Walk: September 15, 2024. Certificate holder is an additional insured but only with respect to liability arising out of the operations of the above named insured. "This policy is issued, pursuant to Iowa Code section 515.147, by a nonadmitted company in Iowa and as such is not covered by the Iowa Insurance Guaranty Association."

**CERTIFICATE HOLDER****CANCELLATION**

Town of Bourne 24 Perry Avenue Room 101 Buzzard Bay MA 02532	<b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b> <b>AUTHORIZED REPRESENTATIVE</b> 
--	---

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ODLL-24-2

## Police Department

One Day Liquor License (old version)

**Status:** Complete

**Became Active:** Mar 4, 2024

**Assignee:** James Czyryca

**Completed:** Mar 14, 2024

---

### Applicant

Adrianne Wytas  
events@habitatcapecod.org  
411 Main Street, Suite 6  
Yarmouth Port, MA 02675  
508-362-3559 x18

### Primary Location

6 APTUCXET RD  
Bourne, MA 02532

### Owner:

SOCIETY  
BOURNE, MA 02532-0795

---

### Comments

**James Czyryca, Mar 11, 2024**

Liability insurance not uploaded. Site plan for alcohol service is an arial picture with an arrow. No containment area. appears folks can walk the grounds with alcohol and abuts the Canal Service Rd.

**Adrianne Wytas, Mar 12, 2024**

Hi James, We are still waiting for the liability insurance policy and it should be here this week. I'll upload it as soon as I have it. We don't contain the area for the BBQ, but we can if needed. I uploaded some images to show how we set up the area. The picnic tables are grouped in the front of the museum building and we have the grill and bar set up again the building. During the BBQ, the riders sit and eat and listen to speakers - Habitat homeonwers, etc. then leave. They don't really hang around or wander, once lunch is finished, they leave. Please let me know how you'd like us to proceed. Thank you, Adrianne

**James Czyryca, Mar 14, 2024**

The only Police concern is the close proximity of the Canal Service Road that abuts the food/alcohol service area. All Liquor must remain on the property within the dining/eating area be it by containment or staff overseeing that area for compliance. Must follow all liquor laws.

**James Czyryca, Mar 14, 2024**

Please upload the liability insurance policy when received.

**Adrienne Wytas, Mar 14, 2024**

Liability has been uploaded. Thank you. Sorry, I thought I did that on the 12th but it must not have taken.



ODLL-24-2

## Board of Health

One Day Liquor License (old version)

**Status:** Complete

**Became Active:** Mar 4, 2024

**Assignee:** Kaitlyn Shea

**Completed:** Mar 5, 2024

---

### Applicant

Adrianne Wytas  
events@habitatcapecod.org  
411 Main Street, Suite 6  
Yarmouth Port, MA 02675  
508-362-3559 x18

### Primary Location

6 APTUCXET RD  
Bourne, MA 02532

### Owner:

SOCIETY  
BOURNE, MA 02532-0795

---

### Comments

**Kaitlyn Shea, Mar 4, 2024**

Is the BBQ food catered?

**Adrianne Wytas, Mar 5, 2024**

Hi Katilyn, Yes it will be catered by Treats Catering, cooking by Brad Boyd. They have done the BBQ every year for the past 7 years at our Ride. I submitted their license through the portal.

**Kaitlyn Shea, Mar 5, 2024**

Great thank you! MTF-91 under review by Health Department.




## GPEV-24-1

General Use of Town Property  
Application

Status: Active

Submitted On: 2/21/2024

## Applicant

 Denise wright



## Applicant Information

**Applicant Name\***

American Cancer Society

**Organization Name (if applicable)**

**Mailing Address**



**City**

bourne

**State**

**Zip Code**

02562

**Primary Contact Person\***

Denise Wright

**Primary Email\***

pickleball.fundraiser1@gmail.com

**Primary Phone**

**Additional Contact Person**

**Additional Email**

**Additional Phone**

Applicant Affiliation (check all that apply)

**Veteran Affiliation**

☐

**Town of Bourne**

☐

**For-Profit Business in the Town of Bourne**

☐

**Educational Institution in the Town of Bourne**

☐

**Residential or Non-Profit in the Town of Bourne**

☐

**Resident or Non/For-Profit outside of the Town of Bourne**

☒

---

## Event Information

**Event Name/Title\***

pickleball tournament

**Location\***

Clark Park

**Is this a new event or a renewal?\***

Renewal Event

**Expected Event Staff**

10

**Expected Public Attendance\***

32

**Is this a multi-day event?\***

No

**Public or Private Event?\***

Private

**Admission Fee**

**Purpose of Event ?**

To raise money for cancer

**Type of Event (check all that apply)**

**Festival/Fair**

☐

**Charity Benefit/Fundraiser**

☒

**Ceremony**

☐

**Farmers Market**

☐

**Parade/Procession**

☐

**Run and/or Bike Race**

☐

**Block Party**

☐

**Filming**

☐

**Other**

☐

**Set Up Date**

06/29/2024

**Set up Start/End Time**

**Clean Up Date**

06/29/2024

**Clean Up Start/End Time**

**Event Start Date\***

06/29/2024

**Event Start/End Time\***

**Event End Date\***

06/29/2024

**Event End Start/End Time\***

**Rain Date**

06/30/2024

**Will you be participating in the Town's Green Events initiative?**

—

---

## Public Safety

Private Security?

No

On-Site Medical Services

No

Will propane be used at event?

No

Will portable heaters be provided at event?

—

Will the event be filmed?

—

Will media/press be present at your event?

—

---

## Public Works

Will this event require road closures?

No

Will town owned cones/barrier be needed?

No

Are town comfort stations being requested (if available)?

No

Will portable toilets be on site?

No

Private Waste Removal?

—

Will a dumpster be used on site?

No

# of General Waste Bins

—

# of Recyclable Bins

—

Will a Portable Generator be on site?

—

Is Town Electricity being requested?

—



**Will vehicles need to be on the property?**

—

---

## Inspectional Services

**Tents**

No

**Will chairs/tables be provided by event?**

No

**Will a temporary stage be erected?**

No

**Will temporary fencing be installed?**

—

**Signs/Banners**

No

**Main Street Banner?**

—

**Will inflatables be on site?**

No

---

## Health

**Will food be offered at the event?**

No

**Are animals part of the event (petting zoo, pony rides)?**

No

---

## Licensing and Town Clerk

**Will your event have beer/wine?**

No

**Will your event have entertainment?**

No

**Will your event have amplification?**

No

**Will a raffle/live auction be included in event?**

No

Will vendors be at event?

No

---

## Indemnification

### Signature

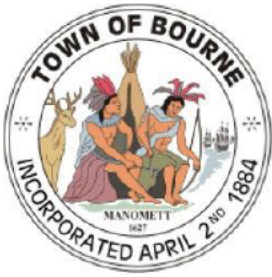
✓ Denise Wright  
Feb 21, 2024

---

## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Intake Review	2/21/2024, 6:41:38 PM	3/4/2024, 12:21:26 PM	Maria Simone	-	Completed
✓ Police Department	3/4/2024, 12:21:26 PM	3/12/2024, 10:11:50 AM	Theodore Economides	-	Completed
✓ Fire Department	3/4/2024, 12:21:26 PM	3/4/2024, 12:51:39 PM	David Pelonzi	-	Completed
✓ Public Works	3/4/2024, 12:21:26 PM	3/5/2024, 10:15:46 AM	Matthew Quinn	-	Completed
✓ Inspectional Services/Building Department	3/4/2024, 12:21:26 PM	3/6/2024, 8:44:28 AM	Ann Gutterson	-	Completed
✓ Health Department	3/4/2024, 12:21:26 PM	3/4/2024, 1:16:52 PM	Kaitlyn Shea	-	Completed
✓ Clerk's Office	3/4/2024, 12:21:26 PM	3/5/2024, 6:51:31 AM	Syreeta Amaral	-	Completed
✓ Licensing	3/4/2024, 12:21:26 PM	3/4/2024, 1:21:21 PM	Maria Simone	-	Completed

Label	Activated	Completed	Assignee	Due Date	Status
✓ Select Board Hearing Date	3/12/2024, 10:11:50 AM	3/28/2024, 2:18:45 PM	Maria Simone	-	Completed
✓ Select Board Decision	3/28/2024, 2:18:46 PM	-	Maria Simone	4/3/2024	Active



# Town of Bourne

## Select Board



[www.townofbourne.com](http://www.townofbourne.com)



24 Perry Ave, Bourne, MA 02532

### Special Events: Safety Plan

Event Name:

*Please describe in the space provided below the planned steps to be taken to manage all safety and security precautions. Depending on your event, this could be something as basic as having a first aid kit available or more involved like having professional EMTs on site. Please attach more pages as needed.*

Inspect the pickleball court for any hazards, uneven surfaces or obstacles that could pose a risk.

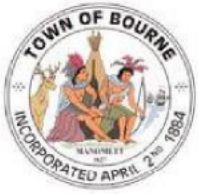
Encourage players to warm up and stretch before the match to prevent injuries.

Check to see if players are wearing appropriate shoes to prevent slips and falls

Provide the balls for the type of surface

Provide water

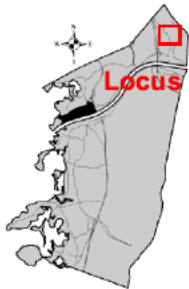
Have a First Aid kit available



**Clark Field:  
Parking and  
Field Area  
Location Map**

- Tennis Courts (2)
- Basketball Court
- Playground
- Baseball Field
- Soccer Field
- Football Field
- Walking Trail

Town of Bourne  
Locus Map






## GPEV-24-2

### General Use of Town Property Application

Status: Active

Submitted On: 2/23/2024

### Applicant

 Glynn Hawley



---

## Applicant Information

### Applicant Name\*

Glynn Hawley

### Organization Name (if applicable)

Pan-Mass Challenge

### Mailing Address



### City

Needham

### State

MA

### Zip Code

02494

### Primary Contact Person\*

Glynn Hawley

### Primary Email\*

glynn@pmc.org

### Primary Phone



### Additional Contact Person

Justine Darmanian

### Additional Email

justine@pmc.org

### Additional Phone



Applicant Affiliation (check all that apply)

**Veteran Affiliation**

☐

**Town of Bourne**

☐

**For-Profit Business in the Town of Bourne**

☐

**Educational Institution in the Town of Bourne**

☐

**Residential or Non-Profit in the Town of Bourne**

☐

**Resident or Non/For-Profit outside of the Town of Bourne**

☒

---

## Event Information

**Event Name/Title\***

Pan-Mass Challenge

**Location\***

Town Roads

**Is this a new event or a renewal?\***

Renewal Event

**Expected Event Staff**

15

**Expected Public Attendance\***

5400

**Is this a multi-day event?\***

Yes

**Public or Private Event?\***

Public

**Admission Fee**

no

**Purpose of Event ?**

Bike a thon to raise money for Dana Farber Cancer Institute

Type of Event (check all that apply)

**Festival/Fair**

☐

**Charity Benefit/Fundraiser**

☐

**Ceremony**

☐

**Farmers Market**

☐

**Parade/Procession**

☐

**Run and/or Bike Race**

☐

**Block Party**

☐

**Filming**

☐

**Other**

☒

**Other\***

Bicycle ride

**Set Up Date**

08/03/2024

**Set up Start/End Time**

7:00 am /10:00am

**Clean Up Date**

08/04/2024

**Clean Up Start/End Time**

7:00am / 9:00am

**Event Start Date\***

08/03/2024

**Event Start/End Time\***

10:00 am / 7:00 pm

**Event End Date\***

08/04/2024

**Event End Start/End Time\***

4:30 am / 7:00 am

**Rain Date**

—



List all additional dates and times

August 3rd - August 4th 2024

Will you be participating in the Town's Green Events initiative?

No

---

## Public Safety

Private Security?

No

On-Site Medical Services

Yes

Company Name

Fallon Ambulance

Will propane be used at event?

No

Will portable heaters be provided at event?

No

Will the event be filmed?

No

Will media/press be present at your event?

Yes

Please provide more detail: (companies, number of people, vehicles, etc)

We are sponsored by WBZ tv & the Boston Globe. Both organizations will be at our event.

---

## Public Works

**Will this event require road closures?**

No

**Will town owned cones/barrier be needed?**

Yes

**Are town comfort stations being requested (if available)?**

No

**Will portable toilets be on site?**

No

**Private Waste Removal?**

No

**Will a dumpster be used on site?**

No

**# of General Waste Bins**

0

**# of Recyclable Bins**

0

**Will a Portable Generator be on site?**

No

**Is Town Electricity being requested?**

No

**Will vehicles need to be on the property?**

Yes

**Please describe need:**

We have road crew support vehicles with bike mechanical support & medical support if our riders need assistance.

---

## Inspectional Services

**Tents**

No

**Will chairs/tables be provided by event?**

No

**Will a temporary stage be erected?**

No

**Will temporary fencing be installed?**

No

**Signs/Banners**

Yes

**Types of signs/banners**

directional road signs

**Number of Signs/Banners**

50

**Main Street Banner?**

No

**Will inflatables be on site?**

No

---

## Health

**Will food be offered at the event?**

No

**Are animals part of the event (petting zoo, pony rides)?**

No

---

## Licensing and Town Clerk

**Will your event have beer/wine?**

No

**Will your event have entertainment?**

No

**Will your event have amplification?**

No

**Will a raffle/live auction be included in event?**

No

**Will vendors be at event?**

No

---

# Indemnification

## Signature

✓ glynn hawley  
Feb 23, 2024

---

## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Intake Review	2/23/2024, 2:23:12 PM	3/6/2024, 10:05:16 AM	Maria Simone	-	Completed
✓ Police Department	3/6/2024, 10:05:17 AM	3/24/2024, 4:20:41 PM	Theodore Economides	-	Completed
✓ Fire Department	3/6/2024, 10:05:17 AM	3/6/2024, 10:42:25 AM	David Pelonzi	-	Completed
✓ Public Works	3/6/2024, 10:05:17 AM	3/6/2024, 12:53:05 PM	Matthew Quinn	-	Completed
✓ Inspectional Services/Building Department	3/6/2024, 10:05:17 AM	3/6/2024, 10:46:27 AM	Ann Gutterson	-	Completed
✓ Health Department	3/6/2024, 10:05:17 AM	3/6/2024, 11:00:35 AM	Kaitlyn Shea	-	Completed
✓ Clerk's Office	3/6/2024, 10:05:17 AM	3/7/2024, 1:05:42 PM	Syreeta Amaral	-	Completed
✓ Licensing	3/6/2024, 10:05:17 AM	3/12/2024, 2:30:44 PM	Maria Simone	-	Completed
✓ Select Board Hearing Date	3/24/2024, 4:20:42 PM	3/28/2024, 2:16:32 PM	Maria Simone	-	Completed
✓ Select Board Decision	3/28/2024, 2:16:33 PM	-	Maria Simone	4/3/2024	Active



Town of Bourne, MA

Mar 29, 2024

GPEV-24-2

## Police Department

General Use of Town Property Application

**Status:** Complete

**Became Active:** Mar 6, 2024

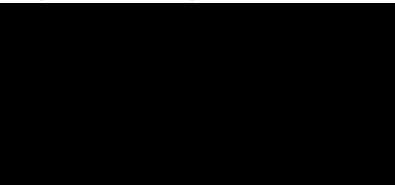
**Assignee:** Theodore Economides

**Completed:** Mar 24, 2024

---

### Applicant

Glynn Hawley



---

### Comments

**Theodore Economides, Mar 24, 2024**

PanMass to meet with PD one month prior to the event to finalize logistics regarding traffic and safety plans. No unregistered vehicles on public roads including golf carts that are not registered low speed vehicles. No parking in restricted areas. Event staff are not authorized to stand in any public roadways or direct traffic. Event staff can be positioned off the road and provide instruction to participants. All bicycles must abide by all laws related to operation on the roadway, including following traffic signals and stop signs. PanMass will be responsible for all costs related to traffic enforcement/crowd control.

Day	SEQ	Dir	Street	Miles		Town	First, Lst Elpsd	Signs	
Rte			(Remarks)				Rider Time	Guide	PD?
Sat	91	S	Morton Rd.	0.6	87.9	Freetown	9:30 AM 6:20		
1			(bear R) Rt 18 goes L				3:50 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	92	S	North Ave.	2.6	90.5	Rochester	9:37 AM 6:32		
1			cross Rt 105 @ 0.4				4:09 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	93	R	Neck Rd.	2.1	92.6	Rochester	9:43 AM 6:41		
1							4:24 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	94	L	Burgess Ave.	1.1	93.7	Rochester	9:46 AM 6:45		
1							4:31 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	95	R	Walnut Plain Rd.	0.8	94.5	Rochester	9:48 AM 6:49		
1							4:37 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	96	L	High St.	2.5	97.0	Rochester	9:55 AM 7:00		
1			"Varella Corner" Robin's Nest Ice Cream				4:55 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	97	L	County Rd.	0.3	97.3	Wareham	9:55 AM 7:02		
1			no town sign				4:57 PM	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sat	98	R	Pierceville Rd.	0.1	97.4	Wareham	9:56 AM 7:02		
1							4:58 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	99	R	Papermill Rd.	1.0	98.4	Wareham	9:58 AM 7:07		
1			(old RR tracks @ 0.5)				5:05 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	100	R	Main St.	0.8	99.2	Wareham	10:01 AM 7:09		
1			no street sign				5:10 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	101	R	***WATERSTOP***	0.2	99.4	Wareham	10:01 AM 7:11		
1			Deca's Elementary School				5:12 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	102	R	Main St.	1.0	100.4	Wareham	10:04 AM 7:15		
1			cross under Rt 195, STOP sign @ 0.3, yield @ 0.7				5:19 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	103	R	Gibbs Ave.	0.1	100.5	Wareham	10:04 AM 7:15		
1							5:19 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	104	L	High St.	0.5	101.0	Wareham	10:05 AM 7:18		
1			traffic light @ 0.3				5:23 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	105	R	Kennedy Ln.	0.1	101.1	Wareham	10:06 AM 7:18		
1							5:24 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	106	L	Church Ave.	0.5	101.6	Wareham	10:07 AM 7:20		
1							5:27 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	107	L	Warr Ave.	0.2	101.8	Wareham	10:08 AM 7:21		
1			(no sign)				5:29 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	108	L	Main St.	0.2	102.0	Wareham	10:08 AM 7:22		
1			Tobey Hospital on L				5:30 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	109	R	Sandwich Rd.	0.1	102.1	Wareham	10:08 AM 7:23		
1							5:31 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	110	R	Narrows Rd.	0.5	102.6	Wareham	10:10 AM 7:24		
1							5:34 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	111	S	Minot Ave.	1.3	103.9	Wareham	10:13 AM 7:30		
1							5:43 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	112	R	Onset Ave.	3.3	107.2	Wareham	10:22 AM 7:45		
1							6:07 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	113	R	Cranberry Hwy (Rt 6)	0.3	107.5	Wareham	10:23 AM 7:46		
1							6:09 PM	<input type="checkbox"/>	<input type="checkbox"/>
Sat	114	S	Cranberry Hwy (Rt 6)	0.2	107.7	Bourne	10:24 AM 7:46		
1							6:10 PM	<input type="checkbox"/>	<input type="checkbox"/>

<i>Day</i>	<b>SEQ</b>	<b>Dir</b>	<b>Street</b>	<b>Miles</b>	<b>Town</b>	<b>First,Lst Elpsd</b>	<b>Signs</b>	
<i>Rte</i>			<i>(Remarks)</i>			<b>Rider</b>	<b>Time</b>	<b>Guide PD?</b>
Sat	<b>115</b>	<b>R</b>	<b>Academy Dr.</b>	<b>0.5</b>	108.2 <b>Bourne</b>	10:25 AM	7:49	
1						6:14 PM		<input type="checkbox"/>
Sat	<b>116</b>	<b>S</b>	<b>**MASS. MARITIME ACADEMY</b>	<b>0.0</b>	108.2 <b>Bourne</b>	10:25 AM	7:49	
1			<i>end of Day 1</i>			6:14 PM		<input type="checkbox"/>

# 2023 PMC Route: Bourne to Provincetown



Day Rte	SEQ	Dir	Street (Remarks)	Miles		Town	First,Last Rider	Elpsd Time	Signs Guide	PD?
Sun 1	201	S	Academy Dr.	0.6	0.6	Bourne	4:32 AM	0:02		
							4:34 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	202	R	Main St. (Rt 6)	1.1	1.7	Bourne	4:35 AM	0:07		
							4:42 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	203	R	Rt 25/28 (Bourne Bridge)	1.3	3.0	Bourne	4:38 AM	0:13		
			Left at rotary, then up ramp to bridge				4:51 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	204	R	Veterans Way	0.1	3.1	Bourne	4:38 AM	0:14		
							4:52 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	205	R	Sandwich Rd.	0.1	3.2	Bourne	4:39 AM	0:14		
			sign: Veterans Way ***VANS 901 to 904***				4:53 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	206	L	Service Rd. (Canal)	4.5	7.7	Bourne	4:51 AM	0:33		
							5:24 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	207	S	Service Rd. (Canal)	0.9	8.6	Sandwich	4:53 AM	0:38		
							5:31 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	208	R	Freezer Rd.	0.3	8.9	Sandwich	4:54 AM	0:39		
			***VANS RESUME***				5:33 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	209	L	Tupper Rd.	0.4	9.3	Sandwich	4:55 AM	0:41		
							5:36 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	210	S	Tupper Rd.	0.5	9.8	Sandwich	4:57 AM	0:42		
			crosses 6A				5:39 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	211	L	Main St.	0.1	9.9	Sandwich	4:57 AM	0:43		
			monument				5:40 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	212	R	Water St. (Rt 130)	1.5	11.4	Sandwich	5:01 AM	0:49		
							5:50 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	213	L	Service Rd.	4.8	16.2	Sandwich	5:14 AM	1:10		
			Meetinghouse Rd @ 2.0, Chase Rd. @ 4.3				6:24 AM		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sun 1	214	S	Service Rd.	1.7	17.9	Barnstable	5:19 AM	1:17		
							6:36 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	215	L	Meetinghouse Way	0.2	18.1	Barnstable	5:19 AM	1:19		
			Rotary - station Crew vehicle				6:38 AM		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sun 1	216	R	Church St.	1.1	19.2	Barnstable	5:22 AM	1:24		
							6:46 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	217	L	Parker Rd.	1.8	21.0	Barnstable	5:27 AM	1:31		
							6:58 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	218	R	Main St. (6A)	3.0	24.0	Barnstable	5:35 AM	1:44		
							7:19 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	219	R	County Complex	0.0	24.0	Barnstable	5:35 AM	1:44		
							7:19 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	220	L	***WATERSTOP***	0.4	24.4	Barnstable	5:37 AM	1:45		
			Barnstable County Complex				7:22 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	221	R	Main St. (Rt 6A)	1.9	26.3	Barnstable	5:42 AM	1:54		
							7:36 AM		<input type="checkbox"/>	<input type="checkbox"/>
Sun 1	222	S	Main St. (Rt 6A)	3.1	29.4	Yarmouth (Port)	5:50 AM	2:08		
							7:58 AM		<input type="checkbox"/>	<input type="checkbox"/>





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/20/2024

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).

<b>PRODUCER</b> MARSH USA, LLC. 99 HIGH STREET BOSTON, MA 02110 Attn: Boston.Certrequest@marsh.com Fax: 212-948-4377  CN128549194-PMC-GAU-24-25	<b>CONTACT</b> <b>NAME:</b> <b>PHONE</b> (A/C. No. Ext): <b>E-MAIL</b> <b>ADDRESS:</b>  <b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A :</b> National Casualty Company <b>INSURER B :</b> <b>INSURER C :</b> <b>INSURER D :</b> <b>INSURER E :</b> <b>INSURER F :</b>	<b>FAX</b> (A/C. No):  <b>NAIC #</b> 11991
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## COVERAGES

CERTIFICATE NUMBER:

NYC-011894807-01

REVISION NUMBER: 1

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	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> GEN'L AGG LIMIT PER EVENT GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			9R-AIP-00034503534-00	01/01/2024	01/01/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 Liquor Liability Agg \$ 1,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			9Z-AIX-00034502037-01	01/01/2024	01/01/2025	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N (Mandatory in NH) 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 \$

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

For the Pan-Mass Challenge occurring on August 2 - 4, 2024.  
Certificate Holder is named additional insured where required by written contract.

## CERTIFICATE HOLDER

## CANCELLATION

Town of Bourne 24 Perry Avenue Buzzards Bay, MA 02532	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  <i>Marsh USA LLC</i>
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## ODLL-24-3

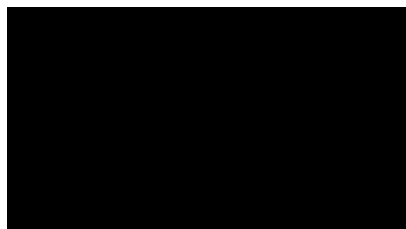
One Day Liquor License (old version)

Status: Active

Submitted On: 2/23/2024

Applicant

 Glynn Hawley



---

## Applicant Information

Contact/Manager Name\*

Glynn Hawley

Contact/Manager Phone\*



Contact/Manager Email\*

glynn@pmc.org

Type of Organization\*

Non profit

Name of Organization\*

Pan Mass Challenge

Type of License

—

Organization Address\*



Is this application in relation to an event on town property?

No

---

## Premises to be Licensed

Venue Name\*

Massachusetts Maritime Academy

Address\*

101 academy Drive Bourne, MA 02532

Venue Contact Person

Alexa Huppe

Venue Phone Number



Is this event indoors or outdoors?\*

Outdoors

A site plan will be required for all events. The plan should indicate where alcohol will be served and consumed. Additional details should include parking, tents, food setup, guest seating, etc. A hand drawn plan is acceptable.

---

## Event Information

Type of event\*

Bike a thon to raise \$\$ for Dana Farber  
Cancer Institute

Provide a brief description of event\*

Day 1 finish for bike a thon. MMA parade field where riders can enjoy food & drink.

Date of Event\*

08/03/2024

Start Time\*

11:00 am

End Time\*

7:00 pm

Admission Charge\*

0

Estimated Hourly Attendance

5000

**Describe how alcohol will be served and managed/monitored\***

Served by TIPS Certified volunteers supported by Boston Beer Works & Martignetti's staff. PMC has hired security as well as MMA security in addition to meeting with Bourne PD before the event. We Do hire Bourne PD details, but mostly for road support outside of MMA.

---

## Additonal Permits

**Will there be food?**

Yes

**Brief description of food**

BBQ

**Will a tent(s) be used?**

Yes

**Size of tent(s)**

over 10x10

**Number of tents**

13

**Will there be a raffle?**

No

**Will there be vendors?**

No

**Will there be entertainment?**

Yes


**Brief description of entertainment**

Live music

---

## Liability Disclaimer

**Signature\***

 glynn e hawley  
Feb 23, 2024

---

# Signature

## Signature

✓ glynn e hawley  
Feb 23, 2024

## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Application Content and Attachments	2/23/2024, 10:42:46 AM	3/4/2024, 12:21:51 PM	Maria Simone	-	Completed
✓ Police Department	3/4/2024, 12:21:52 PM	3/11/2024, 4:33:29 PM	James Czyryca	3/10/2024	Completed
✓ Department of Public Works	3/4/2024, 12:21:52 PM	3/5/2024, 10:16:34 AM	Matthew Quinn	-	Completed
✓ Building	3/4/2024, 12:21:52 PM	3/6/2024, 9:11:49 AM	Ann Gutterson	-	Completed
✓ Fire Department	3/4/2024, 12:21:52 PM	3/4/2024, 12:50:51 PM	David Pelonzi	-	Completed
✓ Board of Health	3/4/2024, 12:21:52 PM	3/4/2024, 1:32:25 PM	Kaitlyn Shea	-	Completed
✓ Schedule Hearing	3/11/2024, 4:33:30 PM	3/28/2024, 2:17:26 PM	Maria Simone	-	Completed
✓ License Commission Board Vote	3/28/2024, 2:17:27 PM	-	Maria Simone	4/3/2024	Active
📅 One-Day Liquor License	-	-	-	-	Inactive

The Commonwealth's



Leadership University™

Alexa Huppe • 101 Academy Drive • 508-830-6607 • ahuppe@maritime.edu

February 23rd, 2024

Town of Bourne  
Select Board  
24 Perry Avenue  
Buzzards Bay, MA 02532-3441

To Whom It May Concern,

Please accept this letter as authorization by Massachusetts Maritime Academy for the application of both an Event/Alcohol Permit and Entertainment Permit by Glynn Hawley of Pan-Mass Challenge ("PMC") for events on-site at 101 Academy Drive, Buzzards Bay, MA 02532 on August 8th, 2024.

Per our agreement with PMC, assuming the receipt of adequate insurance coverage and the necessary permits from the Town of Buzzards Bay, the Academy will allow alcohol service and consumption as approved by the permit, on the Parade Field between the hours of 1100-1900.

We look forward to a safe, successful, and celebratory event! Please contact Alexa Huppe anytime for any additional questions and concerns.

Respectfully,

A handwritten signature in black ink, appearing to read "Alexa Huppe", written over a horizontal line.

Alexa Huppe, Event Management



MMA Parade  
field

Alcohol Tent

Security around Parade field  
as well as in Tent where Alcohol  
is served



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/20/2024

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<b>PRODUCER</b> MARSH USA, LLC. 99 HIGH STREET BOSTON, MA 02110 Attn: Boston.Certrequest@marsh.com Fax: 212-948-4377	<b>CONTACT</b> NAME PHONE (A/C, No, Ext) FAX (A/C, No) E-MAIL ADDRESS
CN128549194-PMC-GAU-24-25	<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A National Casualty Company INSURER B INSURER C INSURER D INSURER E INSURER F
<b>INSURED</b> Dana-Farber Cancer Institute, Inc. & Pan-Mass Challenge, Inc. 450 Brookline Ave. Boston, MA 02215-5450	NAIC # 11991

## COVERAGES

CERTIFICATE NUMBER:

NYC-011894807-01

REVISION NUMBER: 1

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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 <input checked="" type="checkbox"/> GEN'L AGG LIMIT PER EVENT GEN'L AGGREGATE L MIT APPL ES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			9R-AIP-00034503534-00	01/01/2024	01/01/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 Liquor Liability Agg \$ 1,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			9Z-AIX-00034502037-01	01/01/2024	01/01/2025	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCR PTION OF OPERATIONS below	Y / N N	N / A				PER STATUTE OTH-ER E.L. EACH ACC DENT \$ 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)

For the Pan-Mass Challenge occurring on August 2 - 4, 2024.

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## CERTIFICATE HOLDER

## CANCELLATION

Town of Bourne 24 Perry Avenue Buzards Bay, MA 02532	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  <i>Marsh USA LLC</i>
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**eTIPS On Premise 3.1**

**CERTIFIED**

**New York**

**Issued: 01/29/2022**

**Expires: 01/29/2025**



**Katherine M Iwanowicz**

NY Wine & Grape Foundation  
1 Keuka Business Park Ste 208  
Penn Yan, NY 14527 USA

Valid for New York ATAP certification



Town of Bourne, MA

Mar 29, 2024

ODLL-24-3

## Police Department

One Day Liquor License (old version)

**Status:** Complete

**Assignee:** James Czyryca

**Became Active:** Mar 4, 2024

**Completed:** Mar 11, 2024

---

### Applicant

Glynn Hawley

### Primary Location

101 ACADEMY DR  
Bourne, MA 02532

**Owner:**

DEPARTMENT OF EDUCATION  
BUZZARDS BAY, MA 02532

---

### Comments

James Czyryca, Mar 11, 2024

No Police concerns. Must follow all liquor laws. All Liquor must remain inside venue tent.



**CW-24-1**

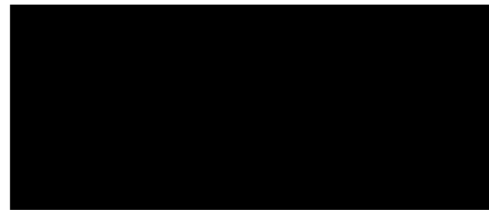
**Car Wash on Town Property**

Status: Active

Submitted On: 3/21/2024

**Applicant**

 Eva Sheehy



---

## Organizer Information

**Event Manager Name\* ?**

Eva Sheehy

**Event Manager E-mail\***



**Event Manager Phone Number**



**Organization Name**

Bourne High School Girls Lacrosse

**Total Number of Participants\***

15

**Will there be participants under the age of 18?\***

Yes

Juvenile/Youth events must have at minimum 2 adults over the age of 21 be present during the event, and an additional 1 adult per 10 children after 20 children associated with said event.

**Number of Participants under 18**

15

**Number of Chaperones over 21**

2

**Have you previously held a car wash in the town?\***

Yes

Reason for Event


Fundraiser

Car Wash Information

Location of Car Wash	Date of Car Wash
Fire Station 4 (Pocasset)	05/04/2024
Start/End Time	Rain Date
8:45-12:15	05/11/2024


Rules and Regulations

I agree to the above conditions


 Eva Sheehy  
Mar 21, 2024

Liability

Signature

 Eva Sheehy  
Mar 21, 2024

Timeline

Label	Activated	Completed	Assignee	Due Date	Status
 Intake Review	3/21/2024, 3:51:26 PM	3/21/2024, 4:11:27 PM	Maria Simone	-	Completed

Label	Activated	Completed	Assignee	Due Date	Status
✓ Fire Department	3/21/2024, 4:11:28 PM	3/21/2024, 4:16:08 PM	David Pelonzi	3/25/2024	Completed
✓ Police Department	3/21/2024, 4:11:28 PM	3/24/2024, 4:03:01 PM	Theodore Economides	3/25/2024	Completed
✓ Public Works	3/21/2024, 4:11:28 PM	3/22/2024, 7:42:25 AM	Matthew Quinn	3/25/2024	Completed
✓ Schedule Hearing	3/24/2024, 4:03:01 PM	3/28/2024, 1:32:43 PM	Maria Simone	-	Completed
✓ Hearing Results	3/28/2024, 1:32:44 PM	-	Maria Simone	-	Active



EA-24-7

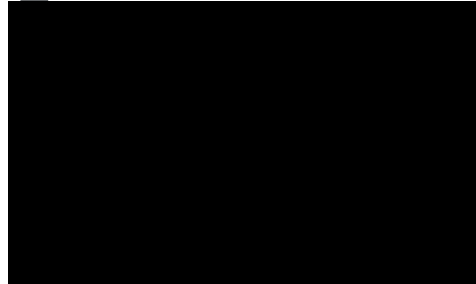
Use of Town Property Event Application  
(old)

Status: Active

Submitted On: 2/8/2024

Applicant

 Samantha Moran



---

## Primary Contact Information

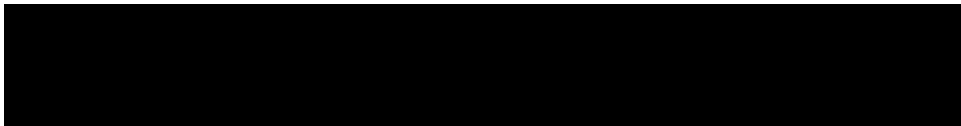
Name\*

Samantha Moran

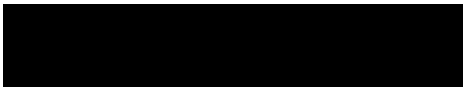
Business/Organization Name (if applicable)

Mailing Address\*

Cell Phone No.\*



Email\*



---

## Event Information

Organization/Individual Hosting the event\*

Samantha Moran

Type of Organization (LLC, non-profit)

Type of Event (i.e.  
banquet/concert/fundraiser/party)\*

Wedding

Location of Event\*

Buzzards Bay Park

Certain events taking place at Buzzards Bay Park may also require an additional permit from the U.S. Army Corps of Engineers. Based on your responses, you will be notified if you are required to apply.

Events held at Buzzards Bay Park are required to upload a site plan detailing where things will be set up. You will be able to upload this later in the application.

Date(s) of Event\*

10/05/2024

Set up/Clean up Dates ?

10/05/2024

Rain Date

—

Hours (start and end times)\*

2pm-5pm

Estimated overall attendance\*

130

# of Staff/Volunteers\*

0

Description of Event\*

Wedding ceremony to take place here wedding reception will be held elsewhere.

Will your event impact traffic?\*

No

Will you event impact parking?\*

No

Is event open to the public?\*

No

Will admission be charged?\* ?

No

Will there be alcohol service/ on-premise consumption?\*

No

?

Will there be food?\*

No

Will there be vendors?\*

No

Will a tent be used?\*

No

Will you be holding a raffle?

No

Use of Electricity/generators?\*

No

Are you providing portable toilets?\*

No

Will you be placing a banner across Main Street?\*

No

---

## Hold Harmless Agreement

Signature\*

✓ Samantha Moran  
Feb 8, 2024

---

## Signature

Signature

✓ Samantha Moran  
Feb 8, 2024

---

## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Application Content and Attachments	2/8/2024, 2:40:20 PM	2/16/2024, 9:36:10 AM	Maria Simone	-	Completed
✓ Police Department Comments	2/16/2024, 9:36:10 AM	2/16/2024, 11:34:34 AM	Brandon Esip	2/22/2024	Completed



Label	Activated	Completed	Assignee	Due Date	Status
✓ Fire Department Comments	2/16/2024, 9:36:10 AM	2/16/2024, 11:00:15 AM	David Pelonzi	-	Completed
✓ DPW Comments	2/16/2024, 9:36:10 AM	2/20/2024, 2:15:43 PM	Matthew Quinn	-	Completed
✓ Town Administrator's Comments	2/20/2024, 2:26:24 PM	3/28/2024, 2:14:22 PM	Maria Simone	-	Completed
✓ Select Board Vote	3/28/2024, 2:14:22 PM	-	Maria Simone	4/3/2024	Active
📄 Temporary Event Permit Issued	-	-	-	-	Inactive



## GPEV-24-9

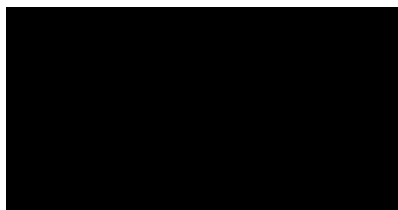
### General Use of Town Property Application

Status: Active

Submitted On: 3/14/2024

### Applicant

 Rachel Edwards



---

## Applicant Information

**Applicant Name\***

Rachel Edwards

**Organization Name (if applicable)**

**Mailing Address**



**City**

Plymouth

**State**

MA

**Zip Code**

02360

**Primary Contact Person\***

Rachel Edwards

**Primary Email\***



**Primary Phone**



**Additional Contact Person**

Benjamin Canning

**Additional Email**



**Additional Phone**

Applicant Affiliation (check all that apply)

**Veteran Affiliation**

☐

**Town of Bourne**

☐

**For-Profit Business in the Town of Bourne**

☐

**Educational Institution in the Town of Bourne**

☐

**Residential or Non-Profit in the Town of Bourne**

☐

**Resident or Non/For-Profit outside of the Town of Bourne**

☐

---

## Event Information

**Event Name/Title\***

Natalie's First Birthday

**Location\***

Buzzards Bay Park Pavillion

**Is this a new event or a renewal?\***

New Event

**Expected Event Staff**

None

**Expected Public Attendance\***

None

**Is this a multi-day event?\***

No

**Public or Private Event?\***

Private

**Admission Fee**

0.00

**Purpose of Event ?**

Celebrate my first and only babies 1st birthday!

Type of Event (check all that apply)

**Festival/Fair**

☐

**Charity Benefit/Fundraiser**

☐

**Ceremony**

☐

**Farmers Market**

☐

**Parade/Procession**

☐

**Run and/or Bike Race**

☐

**Block Party**

☐

**Filming**

☐

**Other**

☒

**Other\***

Intimate Birthday party

**Set Up Date**

04/20/2024

**Set up Start/End Time**

11am-12pm

**Clean Up Date**

04/20/2024

**Clean Up Start/End Time**

2pm-3pm

**Event Start Date\***

04/20/2024

**Event Start/End Time\***

12pm

**Event End Date\***

04/20/2024

**Event End Start/End Time\***

2pm

Rain Date

04/20/2024

Will you be participating in the Town's Green Events initiative?

No

---

## Public Safety

Private Security?

No

On-Site Medical Services

No

Will propane be used at event?

No

Will portable heaters be provided at event?

No

Will the event be filmed?

No

Will media/press be present at your event?

No

---

## Public Works

Will this event require road closures?

No

Will town owned cones/barrier be needed?

No

Are town comfort stations being requested (if available)?

No

Will portable toilets be on site?

No

Private Waste Removal?

Yes

Will a dumpster be used on site?

No

# of General Waste Bins

—

# of Recyclable Bins

—

**Will a Portable Generator be on site?**

No

**Is Town Electricity being requested?**

No

**Will vehicles need to be on the property?**

No

---

## Inspectional Services

**Tents**

No

**Will chairs/tables be provided by event?**

No

**Will a temporary stage be erected?**

No

**Will temporary fencing be installed?**

No

**Signs/Banners**

Yes

**Types of signs/banners**

"Wild ONE Happy Birthday"

**Number of Signs/Banners**

1

**Main Street Banner?**

No

**Will inflatables be on site?**

No

---

## Health

**Will food be offered at the event?**

Yes

**Will food be prepared off site?**

Yes

**Will food be prepared on site?**

No

**Prepackaged food?**

Yes

**Will raw shellfish be offered?**

No

**Will food trucks be at event?**

No

**How many hand washing stations?**

0

**Are animals part of the event (petting zoo, pony rides)?**

No

---

## Licensing and Town Clerk

**Will your event have beer/wine?**

No

**Will your event have entertainment?**

No

**Will your event have amplification?**

No

**Will a raffle/live auction be included in event?**

No

**Will vendors be at event?**

No

---

## Indemnification

**Signature**

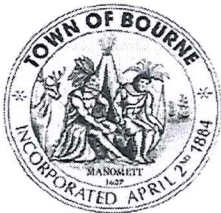
☒ Rachel May Edwards  
Mar 14, 2024

---

## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Intake Review	3/14/2024, 7:48:58 AM	3/14/2024, 3:47:44 PM	Maria Simone	-	Completed
✓ Police Department	3/14/2024, 3:47:46 PM	3/15/2024, 2:25:25 PM	Theodore Economides	-	Completed
✓ Fire Department	3/14/2024, 3:47:46 PM	3/15/2024, 10:22:50 AM	David Pelonzi	-	Completed
✓ Public Works	3/14/2024, 3:47:46 PM	3/19/2024, 2:55:45 PM	Matthew Quinn	-	Completed
✓ Inspectional Services/Building Department	3/14/2024, 3:47:46 PM	3/14/2024, 4:03:26 PM	Ann Gutterson	-	Completed
✓ Health Department	3/14/2024, 3:47:46 PM	3/14/2024, 4:17:00 PM	Kaitlyn Shea	-	Completed
✓ Select Board Hearing Date	3/19/2024, 2:55:45 PM	3/28/2024, 2:08:25 PM	Maria Simone	-	Completed
✓ Select Board Decision	3/28/2024, 2:08:26 PM	-	Maria Simone	-	Active





**BUZZARDS BAY PARK  
SITE PLANNING MAP**

**Legend**

PavementMarkingLine

**LandscapeArea**

Other

**Surface Type**

Garden/Shrub

Mowed Lawn

Sports Turf

**StreetPavement**

**Surface Type**

Asphalt

Athletic Track

Brickpaver

Chip and Seal

Cobblestone

Concrete

Dirt

Gravel

Hardcourt

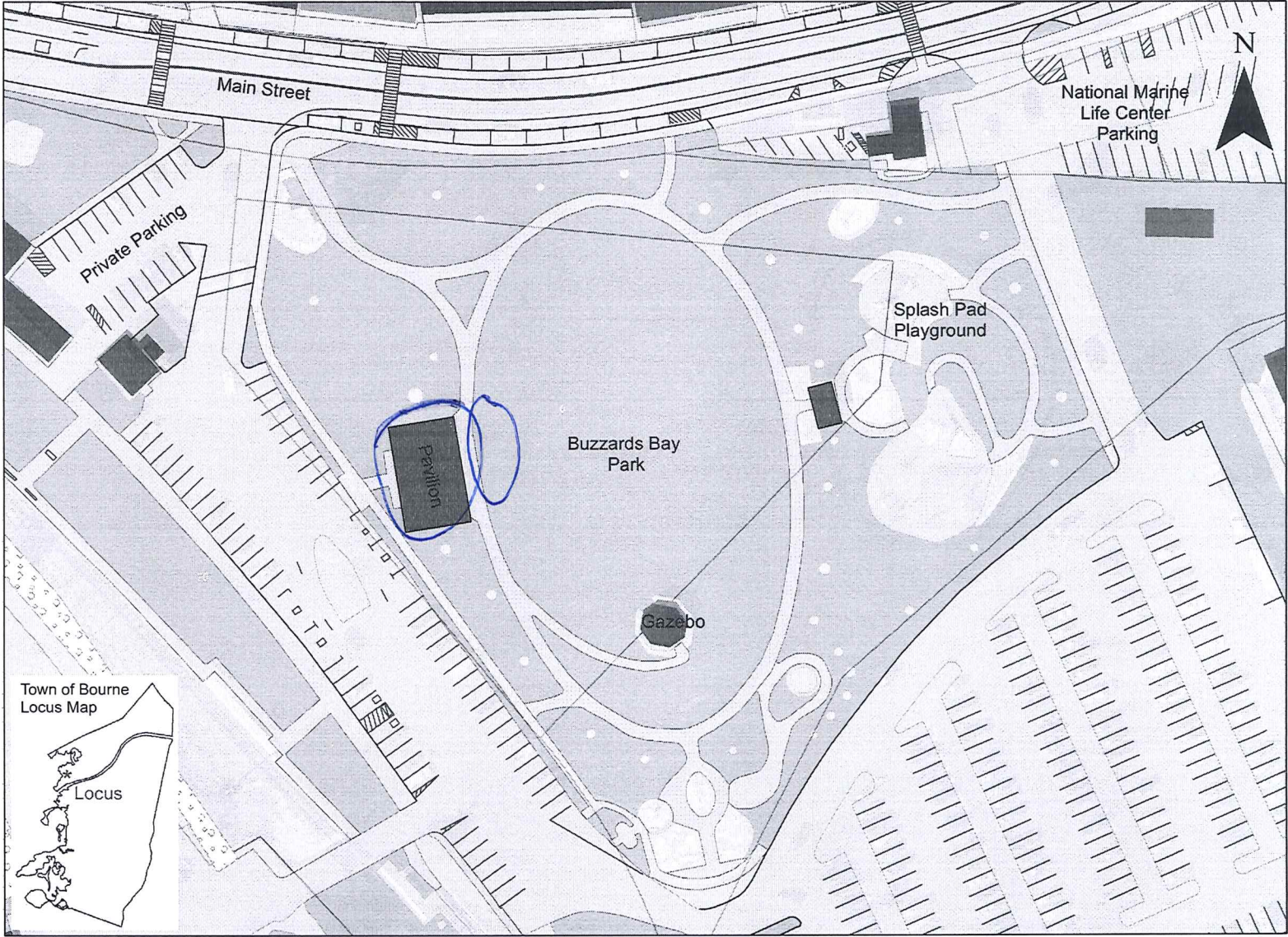
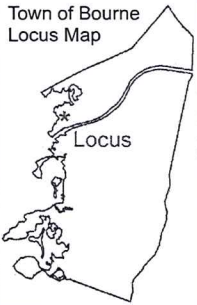
Other

Shell

Unknown

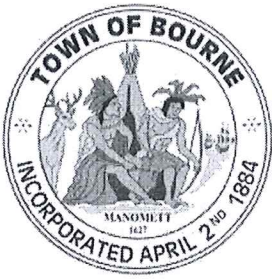
SidewalkPoly

0 25 50 100 Feet



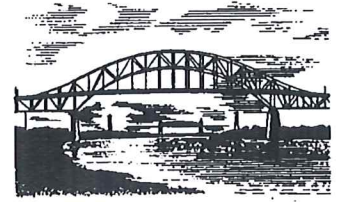
would like to use entirety of pavilion  
as well as small area on lawn for  
corn hole and yard game





# Town of Bourne

## Select Board



www.townofbourne.com



24 Perry Ave, Bourne, MA 02532

### Special Events: Safety Plan

Event Name:

Natalie's 1st birthday

Please describe in the space provided below the planned steps to be taken to manage all safety and security precautions. Depending on your event, this could something as basic as having a first aid kit available or more involved like having professional EMTs on site. Please attach more pages as needed.

- Adult Supervision on all children
- all allergies accounted for
- first aid kit on site



## GPEV-24-6

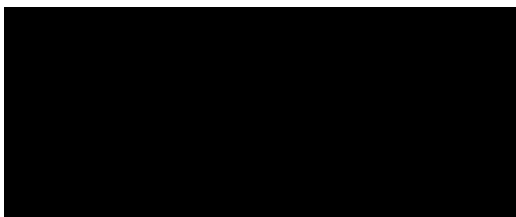
### General Use of Town Property Application

Status: Active

Submitted On: 3/4/2024

### Applicant

 AMANDA BRYANT



---

## Applicant Information

**Applicant Name\***

Amanda Bryant

**Organization Name (if applicable)**

**Mailing Address**



**City**

Onset

**State**

MA

**Zip Code**

02538

**Primary Contact Person\***

Amanda Bryant

**Primary Email\***



**Primary Phone**



**Additional Contact Person**

**Additional Email**

**Additional Phone**

Applicant Affiliation (check all that apply)

**Veteran Affiliation**

☐

**Town of Bourne**

☐

**For-Profit Business in the Town of Bourne**

☐

**Educational Institution in the Town of Bourne**

☐

**Residential or Non-Profit in the Town of Bourne**

☐

**Resident or Non/For-Profit outside of the Town of Bourne**

☒

---

## Event Information

**Event Name/Title\***

Bryant Family Reunion

**Location\***

Buzzard's Bay Park

**Is this a new event or a renewal?\***

New Event

**Expected Event Staff**

**Expected Public Attendance\***

60

**Is this a multi-day event?\***

No

**Public or Private Event?\***

Private

**Admission Fee**

**Purpose of Event ?**

Bryant Family Reunion

**Type of Event (check all that apply)**

**Festival/Fair**

☐

**Charity Benefit/Fundraiser**

☐

**Ceremony**

☐

**Farmers Market**

☐

**Parade/Procession**

☐

**Run and/or Bike Race**

☐

**Block Party**

☐

**Filming**

☐

**Other**

☒

**Other\***

**Set Up Date**

Sat Jul 27 2024 00:00:00 GMT-0400  
(Eastern Daylight Time)

**Set up Start/End Time**

10:00/11:00

**Clean Up Date**

Sat Jul 27 2024 00:00:00 GMT-0400  
(Eastern Daylight Time)

**Clean Up Start/End Time**

7:00/8:00

**Event Start Date\***

Sat Jul 27 2024 00:00:00 GMT-0400  
(Eastern Daylight Time)

**Event Start/End Time\***

11:00/7:00p

**Event End Date\***

Sat Jul 27 2024 00:00:00 GMT-0400  
(Eastern Daylight Time)

**Event End Start/End Time\***

7:00p

**Rain Date**

—

**Will you be participating in the Town's Green Events initiative?**

No

---

## Public Safety

**Private Security?**

No

**On-Site Medical Services**

No

**Will propane be used at event?**

No

**Will portable heaters be provided at event?**

No

**Will the event be filmed?**

No

**Will media/press be present at your event?**

No

---

## Public Works

**Will this event require road closures?**

No

**Will town owned cones/barrier be needed?**

No

**Are town comfort stations being requested (if available)?**

No

**Will portable toilets be on site?**

No

**Private Waste Removal?**

No

**Will a dumpster be used on site?**

No

**# of General Waste Bins**

—

**# of Recyclable Bins**

—

**Will a Portable Generator be on site?**

No

**Is Town Electricity being requested?**

No

**Will vehicles need to be on the property?**

No

---

## Inspectional Services

**Tents**

No

**Will chairs/tables be provided by event?**

Yes

**Company Name**

**Will a temporary stage be erected?**

No

**Will temporary fencing be installed?**

No

**Signs/Banners**

No

**Main Street Banner?**

No

**Will inflatables be on site?**

No

---

## Health

Will food be offered at the event?

Yes

Will food be prepared off site?

Yes

Will food be prepared on site?

No

Prepackaged food?

Yes

Will raw shellfish be offered?

No

Will food trucks be at event?

No

How many hand washing stations?

Are animals part of the event (petting zoo, pony rides)?

No

---

## Licensing and Town Clerk

Will your event have beer/wine?

No

Will your event have entertainment?

No

Will your event have amplification?

No

Will a raffle/live auction be included in event?

No

Will vendors be at event?

No

---



# Indemnification

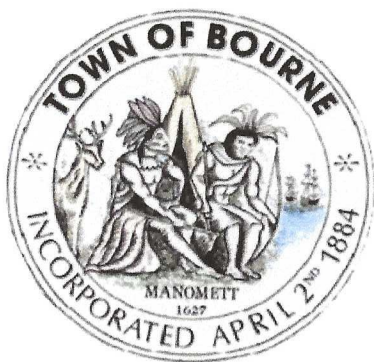
## Signature

✓ Amanda Bryant  
Mar 4, 2024

---

## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Intake Review	3/4/2024, 2:15:26 PM	3/4/2024, 4:24:19 PM	Maria Simone	-	Completed
✓ Police Department	3/4/2024, 4:24:20 PM	3/12/2024, 10:19:54 AM	Theodore Economides	-	Completed
✓ Fire Department	3/4/2024, 4:24:20 PM	3/5/2024, 9:15:46 AM	David Pelonzi	-	Completed
✓ Public Works	3/4/2024, 4:24:20 PM	3/5/2024, 10:22:09 AM	Matthew Quinn	-	Completed
✓ Inspectional Services/Building Department	3/4/2024, 4:24:20 PM	3/5/2024, 9:50:46 AM	Cassie Hammond	-	Completed
✓ Health Department	3/4/2024, 4:24:20 PM	3/4/2024, 4:28:46 PM	Kaitlyn Shea	-	Completed
✓ Select Board Hearing Date	3/12/2024, 10:19:54 AM	-	Maria Simone	-	Active
✓ Select Board Decision	-	-	-	-	Inactive



## BUZZARDS BAY PARK SITE PLANNING MAP

### Legend

#### PavementMarkingLine

#### LandscapeArea

Other

#### Surface Type

Garden/Shrub

Mowed Lawn

Sports Turf

#### StreetPavement

#### Surface Type

Asphalt

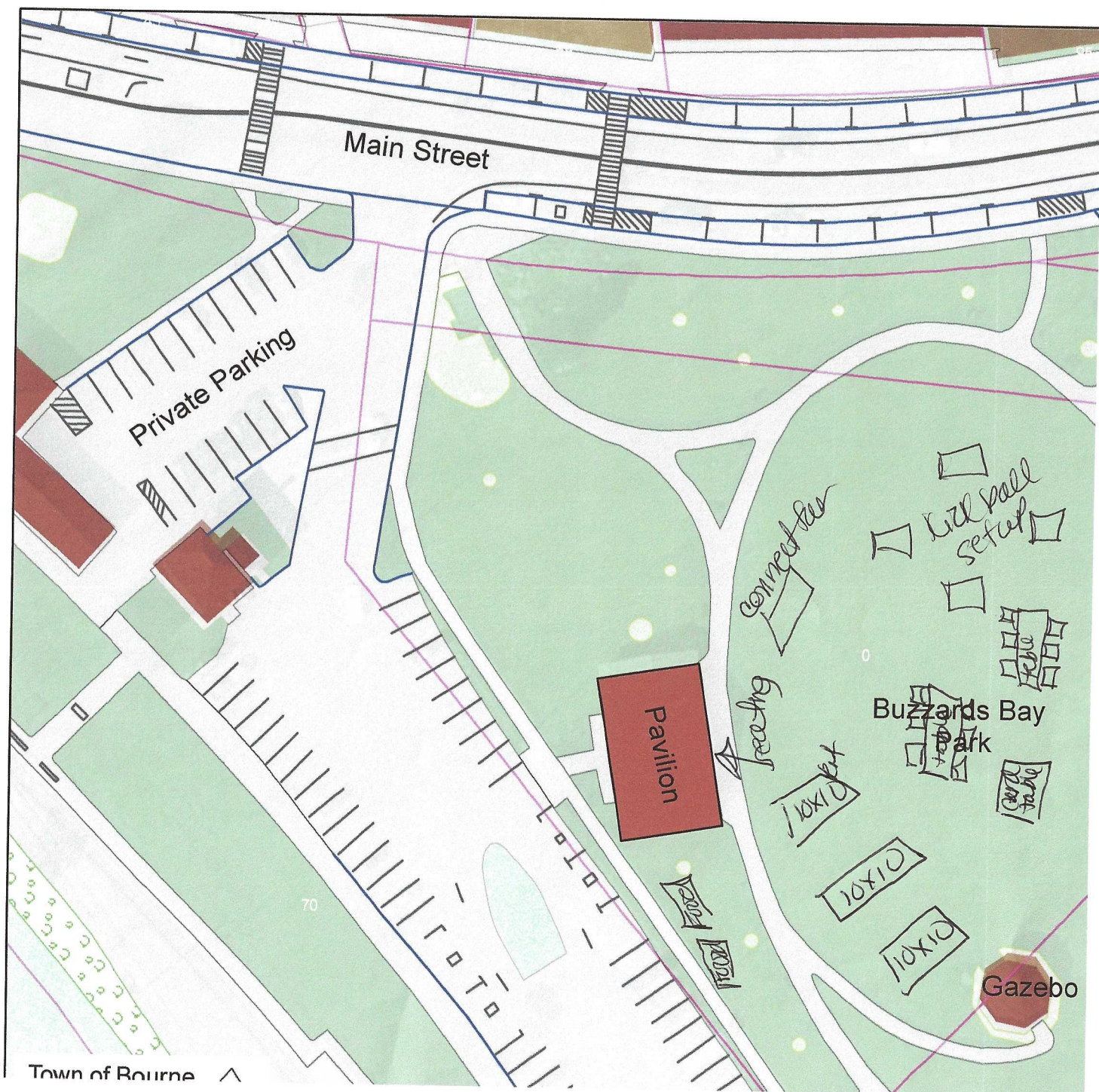
Athletic Track

Brickpaver

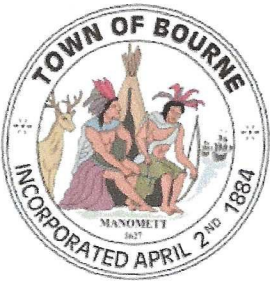
Chip and Seal

Cobblestone

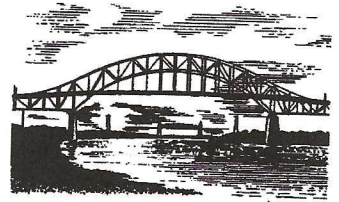
Concrete







# Town of Bourne Select Board



[www.townofbourne.com](http://www.townofbourne.com)



24 Perry Ave, Bourne, MA 02532

## Special Events: Safety Plan

Event Name:

Please describe in the space provided below the planned steps to be taken to manage all safety and security precautions. Depending on your event, this could be something as basic as having a first aid kit available or more involved like having professional EMTs on site. Please attach more pages as needed.

\* First aid kit  
\* 3 nurses will be onsite  
\* Coolers w/ bottled water will be available



EA-24-6

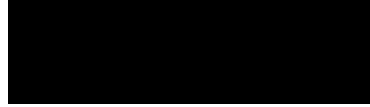
Use of Town Property Event Application  
(old)


Status: Active

Submitted On: 2/5/2024

Applicant

 Paul Curley



 Best Buddies International  
96, Partridge Circle  
Taunton, MA 02780

---

## Primary Contact Information

Name\*

Paul Curley

Business/Organization Name (if applicable)

Best Buddies International

Mailing Address\*

96 Partridge Cir., Taunton, MA 02780

Cell Phone No.\*

508 942 4621

Email\*



---

## Event Information

Organization/Individual Hosting the event\*

Best Buddies International

Type of Organization (LLC, non-profit)

nonprofit 501(c)(3)

Type of Event (i.e.  
banquet/concert/fundraiser/party)\*

Best Buddies Challenge - Hyannis Port is  
a 100 mile long bicycle ride

Location of Event\*

Town Roads

**Date(s) of Event\***

Saturday, June 1, 2024

**Set up/Clean up Dates ?**

none

**Rain Date**

—

**Hours (start and end times)\***

10 am - 2:30 pm

**Estimated overall attendance\***

450

**# of Staff/Volunteers\***

20

**Description of Event\***

cyclists will travel at their own pace; riders are required to wear helmets and abide by the rules of the road

**Will your event require road closures?\***

No

**Will your event impact traffic?\***

Yes

**Will you event impact parking?\***

No

**Any event that will impact parking or traffic must reach out to the Police Department four weeks prior to event.**

**Is event open to the public?\***

Yes

**Will admission be charged?\* ?**

Yes

**Will there be alcohol service/ on-premise consumption?\***

No

?

**Will there be food?\***

No

Will there be vendors?\*

No

Will a tent be used?\*

No

Will you be holding a raffle?

No

Use of Electricity/generators?\*

No

Are you providing portable toilets?\*

No

Will you be placing a banner across Main Street?\*

No

---

## Hold Harmless Agreement

Signature\*

✓ paul curley  
Feb 5, 2024

---

## Signature

Signature

✓ paul curley  
Feb 5, 2024

---

## Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Application Content and Attachments	2/5/2024, 10:31:30 AM	3/4/2024, 12:20:28 PM	Maria Simone	-	Completed
✓ Police Department Comments	3/4/2024, 12:20:28 PM	3/29/2024, 9:07:18 AM	Theodore Economides	3/10/2024	Completed
✓ Fire Department Comments	3/4/2024, 12:20:28 PM	3/4/2024, 12:52:12 PM	David Pelonzi	-	Completed



Label	Activated	Completed	Assignee	Due Date	Status
✓ DPW Comments	3/4/2024, 12:20:28 PM	3/5/2024, 10:14:57 AM	Matthew Quinn	-	Completed
✓ Town Administrator's Comments	3/29/2024, 9:07:18 AM	-	Mary Rebello	-	Active
✓ Select Board Vote	-	-	-	-	Inactive
📄 Temporary Event Permit Issued	-	-	-	-	Inactive



Town of Bourne, MA

Mar 29, 2024

EA-24-6

## Police Department Comments

Use of Town Property Event Application (old)

**Status:** Complete

**Became Active:** Mar 4, 2024

**Assignee:** Theodore Economides

**Completed:** Mar 29, 2024

---

### Applicant

Paul Curley

[REDACTED]  
Best Buddies International  
96, Partridge Circle  
Taunton, MA 02780  
15089424621

---

### Comments

**Theodore Economides, Mar 29, 2024**

Organizer to reach out to PD 3 weeks prior to discuss detail officer requirements. Staff and volunteers cannot be in roadway directing traffic.

**2024 Best Buddies Challenge**

<b>Leg</b> <b>(Mile)</b>	<b>Total</b> <b>(Mile)</b>	<b>Traffic</b> <b>Signs</b>	<b>Police or</b> <b>Marshall</b>	<b>Direction</b>
-----------------------------	-------------------------------	--------------------------------	-------------------------------------	------------------

**PLYMOUTH:**

0.2	65			bear right
1.6	66.6			straight
0.5	67.1		M-2	right
0.0	67.1			right
0.2	67.3			bear left
0.1	67.4			straight
0.1	67.5			straight
1.8	69.3	ss	P	right
0.5	69.8	BL		straight
0.5	70.3	L	P	straight
4.1	74.4		P	straight
1.7	76.1	ss	P	right
0.1	76.2		M-2	straight

**BOURNE:**

1.1	77.3		P	bear left
1.7	79	ss		straight
0.1	79.1		M-3	right
0.4	79.5	ss		right
0.2	79.7		M-1	
0.1	79.8		M-1	straight
0.5	80.3			bear left
0.1	80.4	ss	P	left
0.2	80.6	ss	P	right
0.1	80.7			straight
0.3	81	L		straight
0.3	81.3		M-3	straight

**SANDWICH:**

0.1	81.4			
0.2	81.6		P	left
0.7	82.3		M-2	right
0.1	82.4		P w Cru	right
0	82.4		M-2	left
0.1	82.5	ss	M-1	right
0.4	82.9	L	P	straight
0.6	83.5	ss	P	left
0.1	83.6		P	bear right
0.8	84.4			straight
0.3	84.7	L	M-2	straight
0.1	84.8	L	M-2	straight
0.3	85.1		P	left
2.1	87.2	ss	P	straight
0.2	87.4			straight
2	89.4	ss		right

## Location (roads of travel in Bold Italic)

on **Lower College Pond Rd**  
on **Lower College Pond Rd**  
into College Pond Recreation Area **Rest Stop #4**  
on **Lower College Pond Rd**  
on **Lower College Pond Rd**  
on **Lower College Pond Rd**  
onto **Alden Rd**  
onto **Long Pond Rd**  
on **Long Pond Rd**  
on **Long Pond Rd**  
onto **Hedges Pond Rd**  
onto **Rte 3A South**  
continue left past signs for Rte 3 exits to Boston and Cape Cod (right)

onto **Old Plymouth Rd** at Scusset Fish Pier sign  
on **Old Plymouth Rd** cross Scusset Beach Rd  
onto **Hunters Brook Rd**  
onto **Canal Rd** along Cape Cod Canal  
**use sidewalk on left for Sagamore Bridge crossing**  
up left sidewalk of Sagamore Bridge...**walk bike!**  
off bridge thru guardrail cut for Christmas Tree Shop  
onto **Adams St (keep right, one way street)**  
onto **Sandwich Rd/ Rte 6A East**  
on **Sandwich Rd/ Rte 6A East**  
on **Sandwich Rd/ Rte 6A East**  
on **S. Sandwich Rd/ Rte 6A East**

continue on **Rte 6A**  
onto **Tupper Rd**  
onto **Merchants Rd**  
into **CVS - Rest stop #5, 20 MILE RIDE START (10:30am)**  
onto **Merchants Rd**  
onto **Tupper Rd**  
on **Tupper Rd**  
onto **Main St/Rt 130 (South)**  
onto **Water St/Rt 130 (South)**  
on **Water St/Rt 130 (South)**  
on **Rt 130**  
on **Rt 130**  
onto **Service Rd**  
on **Service Rd**  
on **Service Rd**  
onto **Chase Rd**

## Landmarks

Bare Hill Rd on left  
W Cranford Rd on right  
Myles Standish Forest  
  
Cranford Rd on right  
Upper Col Pond Rd on right

Plymouth South High Sch  
Clark Rd (to exit 3/Rt 3)

Herring Pond Rd, right

Rte 3A, straight

quick  
Sagamore Recreation Area  
at Friendly Ice Cream  
walk over bridge per BPD

Canal Restaurant, left  
Louis Market  
Montessori School  
Ben Abbey Rd  
Cranberry Hwy

town line/Rt 130 on right

Sandwich Rd/Rt 6A  
Town Hall, First Church

at Beal Ave  
ramp to Rte 6 West (right)  
ramp to Rte 6 East (right)

at Quaker Meetinghouse Rd  
Sandwich Hollows Golf

<b>Approx Arrival <u>Fastest</u></b>	<b>Approx Arrival <u>Slowest</u></b>
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9:45 AM	1:07 PM
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10:10 AM	1:36 PM
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10:20 AM	1:57 PM
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10:28 AM	2:12 PM
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10:50 AM	2:53 PM
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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/02/2024

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).

<b>PRODUCER</b> Mark Edward Partners LLC 505 Park Ave.  New York NY 10022		<b>CONTACT NAME</b> Barry Zimberg <b>PHONE (A/C, No, Ext)</b> (212) 355-5005 <b>FAX (A/C, No)</b> (212) 813-8085 <b>E-MAIL ADDRESS</b> bjz@mepinsurance.com	
<b>INSURED</b>  Best Buddies International, Inc. 100 Southeast Second Street Suite 2200 Miami FL 33131		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A</b> AmGUARD Insurance Company <b>INSURER B</b> <b>INSURER C</b> <b>INSURER D</b> <b>INSURER E</b> <b>INSURER F</b>	
		<b>NAIC #</b> 42390	

**COVERAGES****CERTIFICATE NUMBER:** CL2362912448**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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			C1GP404668	06/30/2023	06/30/2024	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLA MS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV NJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 3,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ 3,000,000
	OTHER:						\$
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY NJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY						BODILY NJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS ONLY						
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE \$
	<input type="checkbox"/> OCCUR						\$
	<input type="checkbox"/> CLA MS-MADE						
	DED						
	RETENTION \$						
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						PER STATUTE
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N					OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				E L EACH ACC DENT \$
							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)

RE: Best Buddies Challenge: Hyannis Port June 1, 2024

The certificate holder is included as an additional insured as required by written contract, subject to the terms and conditions of the policy.

**CERTIFICATE HOLDER****CANCELLATION**

Town of Bourne 24 Perry Ave.  Buzzards Bay MA 02532	<b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b>  <b>AUTHORIZED REPRESENTATIVE</b>  Mark Edward Partners LLC
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**BEST BUDDIES CHALLENGE.**  
**HYANNIS PORT**

January 5, 2024

Army Corps of Engineers

Re: Best Buddies Challenge: Hyannis Port

Dear Corps Official,

The 25th annual *Best Buddies Challenge: Hyannis Port* is set to take place **Saturday, June 1, 2024**. This is the annual fund raising event that will raise money for Best Buddies International. Best Buddies is a nonprofit 501(c)(3) organization dedicated to establishing a global volunteer movement that creates opportunities for one-to-one friendships, integrated employment and leadership development for people with intellectual and developmental disabilities (IDD).

The Best Buddies Challenge - Hyannis Port is a 100 mile long bicycle ride starting in Boston and finishing at Craigville Beach in Hyannis Port. We also have a 50 mile start in Carver and a 20 mile start in Sandwich. Through my involvement with this event over the last twenty years I recognize the support your communities offer to the safety of our ride. I have enclosed our route information regarding your community and we greatly appreciate your continued help. Police details are marked in the police column of the route notes and approximate times are noted on the right, as in the past, I will work with each department to hire the appropriate number of officers as we get closer to the event. The number of riders participating in this event has been approximately 250 at the 100 mile; 200 at the 50 mi. and 100 at the 20 mi. The cyclists will travel at their own pace; riders are required to wear helmets and abide by the rules of the road. We plan to follow all guidelines put in place by the CDC, state, city and other local agencies to keep everyone safe.

Should you have any questions or concerns, please contact me by phone at [REDACTED]. Please sign this letter acknowledging your awareness of our event and return it to me as soon as possible so I may acquire the proper permitting from MADOT. City/Town Hall, Police and Fire Dept. signatures are needed from each community the ride passes.

Thank you,

Paul Curley  
Route Manger

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Signature

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Please print your name and title

---

Date