

PERMIT APPLICATION		
Name of Applicant: Emily Christian	Organization (if applicable): National MS Society	
Mailing Address 101A First Ave. Waltham, MA 02451		
Contact Person: Emily Christian	Contact Person who will be present at Event <sup>1</sup> : Kim Blanchard	
Contact Person Phone Number: 781-693-5154	Contact Person will be present at Event Phone Number: 518-593-9353	
Contact Person Cell Number: 434-426-4299	Contact Person will be present at Event Cell Number: 518-593-9353	
Description of Event (Please Attach Additional Sheets of Paper if description cannot fit in the space provided: 100 km bike ride to raise funds for MS research, programs & advocacy.		
Location of Event: Start/Finish - Stratham Hill Park, Route through North Hampton attached		
Date(s) of Event: August 23, 2014	Hours: 8	
	From: 8am	End: 4pm
Estimated Attendance: 225	Minimum No.: 175	Maximum No.: 250
Types of Alcohol to be served: None		

<sup>1</sup> Applicant must be reachable during the entire event at a moment's notice.

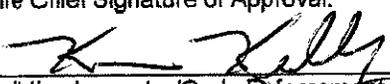
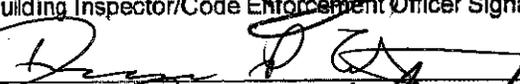
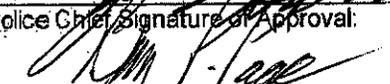
The following facilities will be available for the event:

Sanitation: N/A	No. of Units: N/A	Male: N/A	Female: N/A
Water supply from: N/A			
Food will be served from and/or by: N/A			
Beverages will be served from and/or by: N/A			
Illumination after dark will be provided by N/A			
Medical and First Aid Provided by: Event volunteers (trained nurses ? EMT)			
Traffic Control Provided by: Local police as needed		No. of officers:	
Parking for _____ is planned. <input type="checkbox"/> Attach plan of exact parking location and exact route to be kept open for emergency vehicles <input checked="" type="checkbox"/> Not applicable. Explain: Bike ride is just passing through, not stopping.			

<b>Name of Promoter or Applicant:</b> Drew Davis	
<b>Mailing Address:</b> 1014 First Ave Suite 6 <sup>North Hampton,</sup> MA 02451	<b>Phone:</b> 781.693.5158
<b>Email:</b> Drew.davis@nmss.org	<b>Cellular Phone:</b> 978.866.6955
<p>I <u>Drew Davis</u> do here by accept all responsibility for the above-described event. I agree to adhere to all laws and regulations of the Town of North Hampton and the State of New Hampshire. I do hereby consent to the entry, at any time, in the course of his/her duties, any official of the Town in the performance of their official duties, including but not limited to inspection. I also agree to provide surety that the Town deems necessary. Under the penalty of perjury, I do here by certify that the above is true.</p>	
<b>Signature:</b> 	<b>Date:</b> 6/10/14
<b>Name of Property Owner (The following MUST BE completed by the owner of the property involved):</b>	
<b>Mailing Address:</b>	<b>Phone Number:</b>
<b>Email:</b>	<b>Cell Phone Number:</b>
<p>I _____, have thoroughly discussed the above event with the Promoter and am in agreement with him/her in all areas. I do hereby give my consent to use my property for this even. I do hereby consent to the entry, at any time, in the course of his/her duties, any town officer in the performance of his/her duties, including but not limited to inspection. I agree to adhere to all laws and regulations of the Town of North Hampton and the State of New Hampshire. Under the penalty of perjury I do hereby certify that the above application is true.</p>	
<b>Signature:</b>	<b>Date:</b>

**DO NOT WRITE BELOW THIS SPACE. FOR TOWN USE ONLY**

**Departmental Approvals:** Please attach any comments or special requirements to this application

Fire Chief Signature of Approval: 	Date: 6/11/14
Building Inspector/Code Enforcement Officer Signature of Approval: 	Date: 6/11/14
Director of Public Works Signature of Approval: 	Date: 6/11/14
Police Chief Signature of Approval: 	Date: 6/10/14

Department comments or additional conditions:

Ride does not stop in North Hampton and is spread out over 3.5 hours. Historically has been a safe, organized event. 

**Applicant:** I do hereby agree to the additional requirements:

Applicant's Signature:

Date:

**PERMIT**

**Denied Reason:**

Brian P. Page  
Chief of Police

Date:

**Approved**

Brian P. Page  
Chief of Police

Date:

Select Board Signatures: (If Required under Ordinance amended 3/11/2014)

Date:

TOWN OF NORTH HAMPTON

233 ATLANTIC AVENUE

NORTH HAMPTON, NH 03862

BRIAN P. PAGE  
CHIEF OF POLICE

MICHAEL E. MADDOCKS  
DEPUTY CHIEF



POLICE DEPARTMENT

TELEPHONE

BUSINESS ----- (603) 964-8621

EMERGENCY ---- (603) 679-2225

---- 9-1-1

FAX NO. ----- (603) 964-8831

To: Paul Apple  
Dennis Cote, Chief of the Fire Department  
John Hubbard, Public Works Director  
Kevin Kelley, Code Enforcement/Building Inspector

From: Chief Brian Page

Date: June 10, 2014

Re: Large Gathering Application  
National MS Society Bicycle Ride

Although this event fits the description of the requirement of obtaining a Large Gathering Permit, this bicycle ride merely goes through the Town of North Hampton without stopping for breaks or water stops. Based on this, and the fact we have an Insurance Binder with this application, there is no need for police details to get the bicycles through town. This appears to be an event that will be approved by my office unless of course any of you have any concerns of safety or traffic problems during this event.

Brian P. Page  
Chief of Police

RECEIVED

JUN 11 2014

NORTH HAMPTON POLICE

May 29, 2014

Chief Brian Page  
Town of North Hampton  
233 Atlantic Ave.  
North Hampton, NH 03862

Chief Page,

Although summer is just beginning to arrive, I have begun planning for the 2014 Bike MS NH Seacoast Escape Ride. This year's date is set for Saturday, August 23rd. The purpose of this letter is to ask for permission to use roads within North Hampton and to inform you of the route through the town of North Hampton. I have enclosed written riding directions for you. Our first cyclist (of approximately 250) should enter North Hampton at 11:00 am, and the last cyclist should depart at 2:30 pm.

Our routes feature safety stops every 10-15 miles so that our cyclists remain hydrated and nourished. All cyclists agree to follow rules of the road, and are directed to ride single file. We issue one warning to cyclists not following the rules of the road. On the next infraction, we pull them from the ride and require they ride to the finish in one of our safety vehicles.

We mark our route with small cardboard signs attached to utility poles or stakes. We will begin marking the route on August 21st. A volunteer will follow the route on the day of the ride and remove all signs after the final cyclist has passed.

Please let me know if you have any questions about the ride and/or our route. I can be reached at 781-693-5154.

Sincerely,



Emily Christian  
Logistics Associate  
[Emily.Christian@nmss.org](mailto:Emily.Christian@nmss.org)

# 2014 Bike MS NH Seacoast Escape - 60 mile

NET CONTROL - 781-697-9058

Miles	Direction	Description	Go	Town:
0.00	L	out of Stratham Hill Park onto Route 33	0.60	
0.60	R	onto Squamscott Road	1.10	
1.70	R	onto Route 108	1.00	Newfields
2.70	R	onto New Road @ Ship to Shore Restaurant	0.10	Newmarket
2.80		<b>Caution: Narrow wooden bridge</b>	2.30	
5.10	R	stop sign onto Route 108 (use caution entering town center)	0.60	
5.70	<b>Sharp R</b>	onto Bay Road	0.40	
6.10	BL	to stay on Bay Road	7.00	Durham
13.10	BR	onto Route 108	0.30	
13.40		<b>REST STOP -- Durham Town Offices --Route 108</b>		
13.40	BR	out of rest stopn <b>ROUTE SPLITS</b>	0.10	
13.50	R	at traffic light to continue on Route 108	0.60	
14.10		pass under Route 4	2.30	Madbury
16.40	S	through light	1.00	Dover
17.40	S	through light on Route 108 <b>Caution: busy area</b>	0.10	
17.50	S	through 2 lights, passing under Spaulding Turnpike	0.30	
17.80	BL	to stay on Route 108	0.40	
18.20	S	through light, continue on Route 108	0.30	
18.50	BR	at traffic light, following signs for Routes 4,9 and 108	0.10	
18.60	BL	staying on path for Routes 4,9 and 108	0.10	
18.70	R	onto Portland Avenue	0.10	
18.80	BR	onto unmarked Cocheco Street (towards water)	0.30	
19.10	S	through stop sign	0.40	
19.50	BR	at yield sign onto Gulf Road	1.80	
21.30	X	bridge over water	1.20	Eliot, ME
22.50	R	at light onto Route 236 South	0.40	
22.90	R	onto Route 103 South	1.50	
24.40	R	onto River Road	2.90	
27.30	BR	at yield sign onto Old Road	0.70	
28.00	S	after stop sign onto Route 103 East	0.30	
28.30		<b>REST STOP -- Eliot Elementary School - 1298 State Road</b>		
28.30	L	out of rest stop, staying on Route 103	0.10	
29.35	R	staying on Route 103 East	0.90	
30.25	S	through yellow blinking light	1.70	Kittery, ME
31.95		Pass under I-95	0.30	
32.25	R	staying on Route 103 East	0.40	
32.65	L	onto Government Street	0.10	
32.75	BR	up hill on Government Street	0.20	
32.95	R	onto Route 1 South	0.10	
33.05		Cross bridge back to New Hampshire (stay on sidewalk)	0.50	Portsmouth
33.55	R	onto Harbour Place which becomes State Street	0.10	
33.65		<b>*Follow signs for Strawberry Banke*</b>		
33.45	L	onto Marcy Street	0.30	
33.75	L	onto Route 1B South	1.50	
35.25		<b>Caution: crossing bridge</b>		

L=Left, R=Right, X=Cross, S=Straight, B=Bear, @=at

**2014 Bike MS NH Seacoast Escape - 60 mile**

**NET CONTROL - 781-697-9058**

Miles	Direction	Description	Go	Town:
35.25		<b>Caution: crossing bridge</b>		Newcastle
35.25	<b>BL</b>	to stay on Route 1B South	1.60	Rye
36.85		Walk bike over bridge on wooden walkway	1.10	Portsmouth
37.95	<b>L</b>	at stop sign onto Route 1A South	0.50	
38.45	<b>L</b>	at rotary to stay on Route 1A South	1.80	
40.25		<b>REST STOP - Odiorne State Park -- Route 1A</b>		
40.25	<b>L</b>	out of rest stop, pass Rye Harbor St.Park	7.50	North Hampton
47.75	<b>R</b>	onto Route 111	3.20	
51.85	<b>S</b>	thru traffic light, continue onto Route 111	0.50	
52.35	<b>L</b>	at stop sign	0.10	
52.45	<b>R</b>	at stop sign onto Route 151N	0.10	
52.55	<b>L</b>	onto Walnut Ave.	1.70	
54.25	<b>R</b>	onto Lovering Road	1.40	
55.65	<b>L</b>	onto Post Road	0.10	
55.75	<b>L</b>	onto Winnicut Road	1.70	Stratham
57.45	<b>X</b>	Union Road	2.20	
59.65	<b>R</b>	Onto Route 33/Portsmouth Ave.	1.00	
60.65	<b>S</b>	through stop light	0.30	
60.95	<b>R</b>	into Stratham Hill Park		
	<b>FINISH</b>	<b>Finish Line - Congratulations! You made it!</b>		
<b>Route closes at 4:00PM</b>				

# 2014 Bike MS NH Seacoast Escape - 25 mile

NET CONTROL - 781-697-9058

Miles	Direction	Description	Go	Town:
0.00	L	out of Stratham Hill Park onto Route 33	0.60	
0.60	R	onto Squamscott Road	1.10	
1.70	R	onto Route 108	1.00	Newfields
2.70	R	onto New Road @ Ship to Shore Restaurant	0.10	Newmarket
2.80		<b>Caution: Narrow wooden bridge</b>	2.30	
5.10	R	stop sign onto Route 108 (use caution entering town center)	0.60	
5.70	<b>Sharp R</b>	onto Bay Road	0.40	
6.10	BL	to stay on Bay Road	7.00	Durham
13.10	BR	onto Route 108	0.30	
13.40		<b>REST STOP -- Durham Town Offices - Route 108</b>		
13.40	BR	out of rest stop <b>ROUTE SPLITS</b>	0.10	
13.50	L	at stop sign to continue on Route 108	1.30	Newmarket
14.80	R	Bennet Rd	1.60	
		<b>Caution: Narrow wooden bridge</b>		
16.40	L	Packers Falls	2.00	
		<b>Caution: Look right</b>		
18.40	R	S. Main St	0.50	
18.90	L	Grant	1.10	
20.00	L	Ash Swamp	2.00	
22.00	L	Ash Swamp	0.10	
22.10	R	Rt. 108 South	1.30	
23.40	L	Squamscott Road	1.10	Stratham
24.50	L	Onto Route 33/Portsmouth Ave.	0.60	
25.1	R	Finish Chute		
	<b>FINISH</b>	<b>Finish Line - Congratulations! You made it!</b>		
<b>Route closes at 4:00PM</b>				



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/07/2014

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 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, INC. 445 SOUTH STREET MORRISTOWN, NJ 07960-6454		<b>CONTACT NAME:</b> PHONE (A/C, No. Ext): E-MAIL: ADDRESS:		FAX (A/C, No):	
123456-Stand-13-14                      BEDFO		<b>INSURER(S) AFFORDING COVERAGE</b> NAIC #			
<b>INSURED</b> NATIONAL MULTIPLE SCLEROSIS SOCIETY GREATER NEW ENGLAND CHAPTER 101A FIRST AVENUE, SUITE 6 WALTHAM, MA 02451		<b>INSURER A :</b> Federal Insurance Company		20281	
		<b>INSURER B :</b> Great Northern Insurance Company		20303	
		<b>INSURER C :</b> ACE Property & Casualty Insurance Company		20699	
		<b>INSURER D :</b> Employers Insurance Company Of Wausau		21458	
		<b>INSURER E :</b>			
		<b>INSURER F :</b>			

**COVERAGES**                      **CERTIFICATE NUMBER:** NYC-006819993-03                      **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 SUBR INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			3583-33-49	12/31/2013	12/31/2014	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 1,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC						\$
	AUTOMOBILE LIABILITY			(12)7363-02-37	12/31/2013	12/31/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
							Comp/Coll Deductible \$ 1,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB			M00552835	12/31/2013	12/31/2014	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE \$ 5,000,000
	<input type="checkbox"/> CLAIMS-MADE						\$
	DED RETENTION \$						
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WCC-291-451053-013	12/31/2013	12/31/2014	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A			E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

RE: MS BIKE TOUR  
TOWN OF NORTH HAMPTON IS ADDED AS ADDITIONAL INSURED EXCLUDING WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY POLICY.

**CERTIFICATE HOLDER**                      **CANCELLATION**

TOWN OF NORTH HAMPTON 233 ATLANTIC AVENUE NORTH HAMPTON, NH 03862	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 of Marsh USA Inc. Manashi Mukherjee <i>Manashi Mukherjee</i>