

May 8, 2018,

RE: Large Assembly Application for Reach the Beach Relay Road Race

September 15, 2018

The Large Assembly Application for Reach the Beach Relay Road Race, September 15, 2018 is approved based on the following conditions:

1. The Police Department requires three detail officers, with cruisers, from North Hampton Police Department or one of the approved Mutual Aid communities be assigned to this outside detail. The location and scheduling will be determined by the Police Chief or designee. All traffic control will be conducted by law enforcement officers. Under no circumstances will any volunteer be permitted to conduct traffic control at any intersection or upon any roadway in North Hampton. It is the responsibility of the organizer to call the Police Department in advance to schedule the detail.
2. The Parade Permit attached to the application will need to be approved.
3. In the event there is an outside law enforcement agency that wishes to participate in the event as an escort using emergency warning devices, advanced written approval must be obtained from the Chief of Police or designee.
4. Certificate of Insurance naming the Town of North Hampton as an additional insured must be submitted to the Chief of Police prior to the event.
5. Facility Use Permit from North Hampton School is attached. Large Assembly Permit Application section will need to be completed by School Representative.
6. The Fire Department requires a minimum of one (1) certified EMT on site in North Hampton. Any detail EMT must be a North Hampton Fire and Rescue EMT or a privately hired EMT if no North Hampton Personnel are available. It is the responsibility of the organizer to call the Fire Department in advance to schedule the detail.



Michael T. French

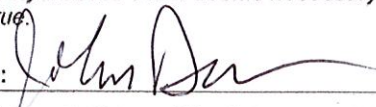

Interim Police Administrator

PERMIT APPLICATION		
Name of Applicant: John Dunne		Organization (if applicable): Ragnar RTTB LLC
Mailing Address 125 W 400 Plr 2 Salt Lake City, UT 84101		
Contact Person: John Dunne	Contact Person who will be present at Event ¹ : Rich Mazzola	
Contact Person Phone Number: 603-305-3382	Contact Person will be present at Event Phone Number: 978-239-3479	
Contact Person Cell Number: Same	Contact Person will be present at Event Cell Number: Same	
Description of Event (Please Attach Additional Sheets of Paper if description cannot fit in the space provided: running relay. 20-miles. Extends From Bretton Woods Ski Resort runs through 33 Towns and ends at Hampton Beach State Park. We will stop at North Hampton School as our 34th stop to exchange runners need the school for parking and placement of toilets		
Location of Event: North Hampton School		
Date(s) of Event: 9/15/18	Hours: 10 From: 8:30 AM End: 6:30	
Estimated Attendance: ~ 250	Minimum No.: ~ 200	Maximum No.: ~ 300
Types of Alcohol to be served: None		

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

The following facilities will be available for the event:

Sanitation:	No. of Units:	Male:	Female:
Water supply from:			
Food will be served from and/or by:			
Beverages will be served from and/or by:			
Illumination after dark will be provided by			
Medical and First Aid Provided by:			
Traffic Control Provided by:		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 type="checkbox"/> Not applicable. Explain:			

Name of Promoter or Applicant: John Dunne	
Mailing Address: 79 Wethersfield Rd Nashua NH 03062	Phone: 603-305-3382
Email: john@rtbrelay.com	Cellular Phone: same
<p>I, <u>John Dunne</u>, do hereby 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 hereby certify that the above is true.</p> <p>Signature:  Date: 2-24-18</p>	
Name of Property Owner (The following MUST BE completed by the owner of the property involved):	
Mailing Address: 201 Atlantic Ave N Hampton NH 03862	Phone Number: 603 964 5501
Email: mdriscoll@saun21.org	Cell Phone Number: 603 502 2501
<p>I, <u>MDriscoll</u>, 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> <p>Signature:  Date: 5/10/18</p>	

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:

Muller

Date:

4/30/18

Building Inspector/Code Enforcement/Health Officer Signature of Approval:

[Signature]

Date:

4/30/18

Administrator of Planning & Zoning Signature of Approval:

Richard Miller

Date:

4/30/18

Director of Public Works Signature of Approval:

[Signature]

Date:

5/2/18

Police Chief Signature of Approval:

[Signature]

Date:

4/23/18

Department comments or additional conditions:

See Attached memo from Police Department
See Attached Memo from Fire Department

Applicant: I do hereby agree to the additional requirements:

Applicant's Signature:

John Den

Date:

2.24.18

PERMIT

☐ **Denied** Reason:

Michael E. Maddocks

Chief of Police

Date:

☒ **Approved**

Michael E. Maddocks

Chief of Police

MICHAEL T. FRENCH
Interim Police Admin

Date:

5/8/18

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

Date:



North Hampton
FIRE & RESCUE
235 ATLANTIC AVENUE
NORTH HAMPTON, N.H. 03862

Michael J. Tully
CHIEF OF DEPARTMENT

TEL: (603) 964-5500
FAX: (603) 964-7249
EMERGENCY: 911

To: Michael French – Chief of Police
John Hubbard - Director of Public Works
Glen Bosworth - Code Enforcement and Building Inspector

From: Michael Tully – Chief of Fire & Rescue

Date: April 30, 2018

Re: Large Assembly Application
Reach the Beach Relay – September 15, 2018 (Saturday)

- There is a condition of a minimum requirement of one (1) certified EMT on site in North Hampton. Any Detail EMT must be either a North Hampton Fire & Rescue EMT or a privately hired EMT if no North Hampton Personnel are available. It is the responsibility of the organizer to call the Fire Department in advance to schedule the detail.


Michael J. Tully
Chief of Department



NORTH HAMPTON FIRE & RESCUE

235 Atlantic Avenue

North Hampton, New Hampshire 03862

Business Phone: 603.964.5500 Fax: 603.964.7249

www.northhampton-nh.gov



Detail Request Form

Date/Time of Detail: _____ Start _____ AM/PM End _____ AM/PM

Number of Firefighters/EMTs requested _____ Number of Paramedics requested _____

Fire Engine YES/NO

Type of Event Detail: _____

Requested by: _____ Phone number: _____

Name of Organization: _____

Where to meet: _____

Billing Information:

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Date submitted: _____ Time: _____ Received by: _____

___ Approved ___ Not Approved Fire Chief or Designee _____

*This form must be approved by the Fire Chief or his designee prior to being filled.

*All private details will be compensated on the basis of a four (4) hour minimum. Private details may be cancelled with four (4) hours notice to the department.

Requesting party signature: _____ Date: _____

Detail assigned to: _____

April 23, 2018

RE: Large Assembly Application for Reach the Beach Relay Road Race

September 15, 2018

The Police Department recommends approval of the Large Assembly Application based on the following conditions:

1. The Police Department requires three detail officers, with cruisers, from North Hampton Police Department or one of the approved Mutual Aid communities be assigned to this outside detail. The location and scheduling will be determined by the Police Chief or designee. All traffic control will be conducted by law enforcement officers. Under no circumstances will any volunteer be permitted to conduct traffic control at any intersection or upon any roadway in North Hampton.
2. The Parade Permit attached to the application will need to be approved.
3. In the event there is an outside law enforcement agency that wishes to participate in the event as an escort using emergency warning devices, advanced written approval must be obtained from the Chief of Police or designee.
4. Certificate of Insurance naming the Town of North Hampton as an additional insured must be submitted to the Chief of Police prior to the event.
5. Facility Use Permit from North Hampton School is attached. Large Assembly Permit Application section will need to be completed by School Representative.

A handwritten signature in dark ink, appearing to read "M. French", is written over a horizontal line.

Michael T. French

Interim Police Administrator

February 26, 2018

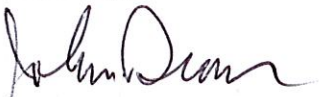
Jessica Miehle
North Hampton Police Department
233 Atlantic Avenue
North Hampton, NH 03862

Dear Jess:

Thanks again for all your help last year in arranging the details. We are preparing for our 20th Anniversary event which will occur on Saturday September 15, 2018. I have enclosed the application for the NH Parade Permit along with the Large Assembly Permit. I have also attached a copy of the site plan for the North Hampton School. As you know the Certificate of Insurance is renewed every summer and that is completed every July. Once the renewal is completed I will send along the certificate to you.

I will call you this summer to schedule the officer details as usual. Also we have a large contingent of EMT's that we have throughout the course and also located at each Transition area. So there will be a couple of EMT's the North Hampton School. If you or anyone else has any questions please don't hesitate to call me.

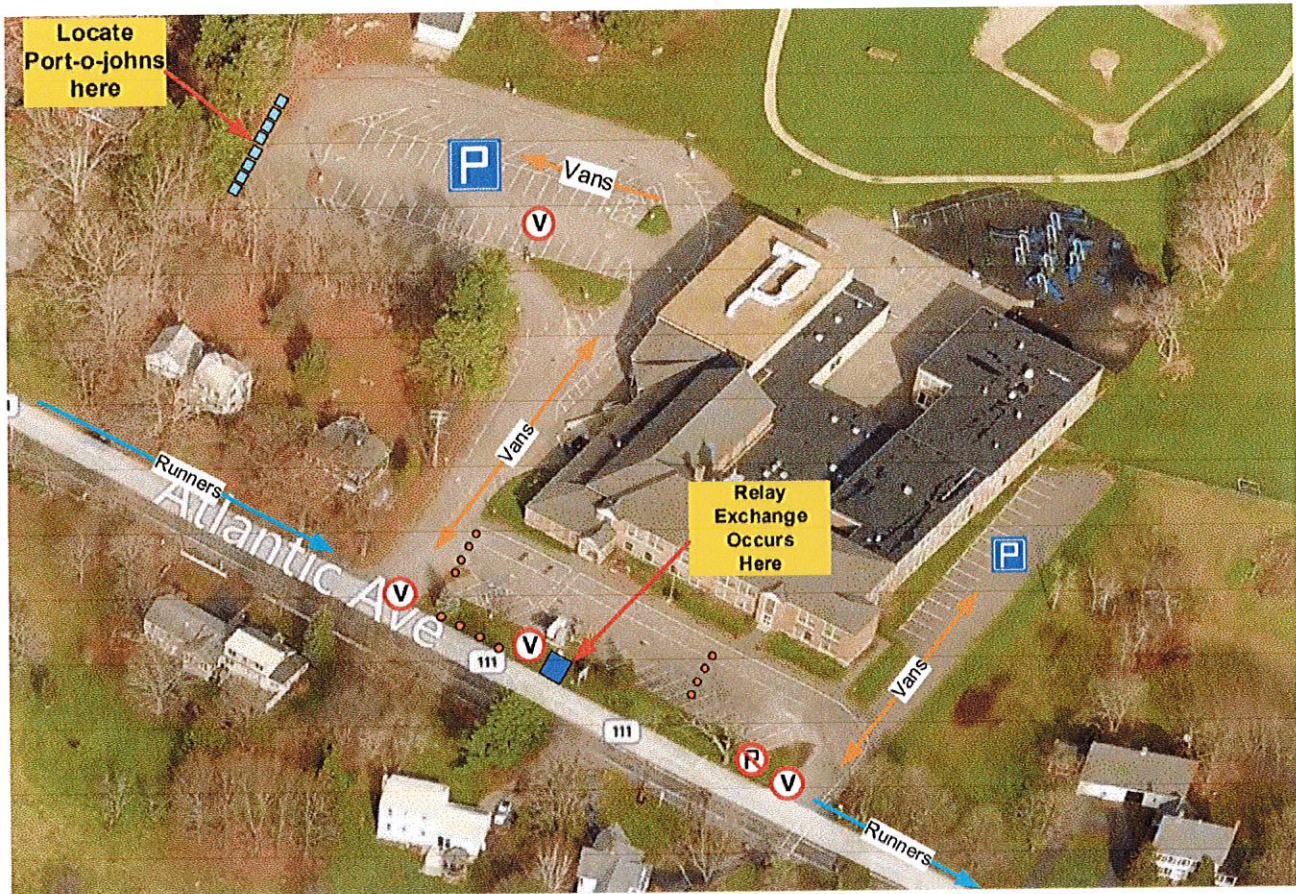
Sincerely,




John Dionne
Course Coordinator
Ragnar RTB LLC
Office: 603-888-0870
Cell Phone: 603-305-3382
john@rtbrelay.com

Exchange 34 – North Hampton School

201 Atlantic Ave, North Hampton, NH 03862



 - Volunteer

 - Parking

 - No Parking

 - Relay Exchange Location

North Hampton School District Policy

Section: K
Code: KF-R
Title: North Hampton Facility Use Policy
Page: 3 of 4

NORTH HAMPTON SCHOOL DISTRICT FACILITY USE PERMIT

**** 48 hour advance notice is required ****

Name of Organization Ragnar RTB, LLC
 Name of Responsible Person for Organization John Dionne
 Mailing Address 79 Wethersfield Rd Nashua NH 03062
 Email Address john@rtbrelay.com Phone Number 603-305-3382
 Event Title Reebok Ragnar Reach the Beach Relay
 Event Description running relay via 33 towns + 36 steps
 Facility/Rooms Requested Parking lot only
 (i.e. gym, cafeteria/kitchen, field)
 Date(s) Requested 9/15/18

Event Times: Start 8:30 AM End 7:30 PM

Advance Set Up Date NA Start Time _____ End Time _____

**Rate charged for custodial and/or kitchen staff will include all necessary time required for preparation of event and clean-up time following event.*

Please enter a number for: Attendance expected: Adults: _____ Children: _____

Chairs _____ Folding Café Tables _____ 8' Tables _____ 6' Tables _____

Extensions Cords _____ Podium _____ Microphones _____

**Additional charges may be incurred for missing or damaged equipment.*

Please list other needed equipment or special requests permission to place 12-15 portable toilets

Insurance: Applicant must attach a current "Certificate of Insurance" naming the North Hampton School as an additional insured

Signature of applicant John Dionne

Kitchen Request form attached: (please circle one) YES NO NA

APPROVED [Signature] DENIED _____ Date _____

Anticipated Fee _____

Signature of Principal or building designee [Signature]

Adopted: November 15, 2007
Reviewed:
Revised: October 15, 2015
Cancellation:

Pls make sure to keep trash & recycling separate as you did last year -
 Maudeth

STATE OF NEW HAMPSHIRE
Application for Parade Permit or Other
Activity Conducted on State Highway System

Today's Date 2-26-18

To: Department of Transportation
Transportation Management Center
PO Box 483, 110 Smokey Bear Blvd
Concord, New Hampshire 03302-0483
Phone (603) 271-6862
Fax (603) 271-8626

Under provisions of RSA 286:2 and RSA 236:1, application is made for a parade / activity on the state highway system.

Indicative data is shown below:

Type of activity?

If so, what type (foot, bike, etc.)?

Will event effect highway safety?

Will highway traffic be delayed?

If so, how long?

Will highway traffic be detoured?

Name of sponsoring organization:

Mail permit to: _____

Phone no. where I may be reached:

Purpose of activity:

Name of Municipality:

Date of activity:

Starting and ending times:

State route(s) to be traveled:

Traffic control provided by:

Approved by Town Officials

Selectmen / Town Manager / Police Chief

(circle one)

Interim Police Administrator

Signed by

John Dionne

(Applicant)

Athletic Event

Running Relay

No

No

N/A

N/A

Ragnar RTB LLC

John Dionne

79 Wethersfield Rd

Nashua, NH 03062

603-305-3382

Sporting Event

North Hampton

9/15/18

Approx 8:30AM - 6:30PM

111 + 1

Officer Detard

Please attach a simple map or sketch plotting the **start, finish, route(s) of travel, detour(s),** and **parking area(s)** if provided.

Recommended:

District Engineer