

March 18, 2021

Kathryn Mone
Chief of Police
North Hampton Police Department
233 Atlantic Avenue
North Hampton, NH 03862

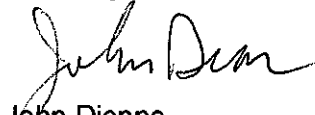
Dear Chief Mone:

As I mentioned in via email we are preparing for our annual event which will occur on Saturday September 18, 2021. 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. Our Certificate of Insurance is renewed every July and the COI's are generally available the first of August. Once it is renewed I will send along the certificate to you.

As part of the Large Assembly Permit I thought perhaps our Covid 19 preparedness is available in this link which also includes a couple of videos: https://run.ragnarrelay.com/covid_general/

I will call your office this summer to schedule the officer details as usual. If you or anyone else has any questions please don't hesitate to call me.

Sincerely,



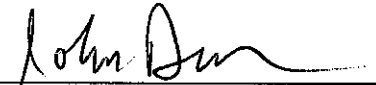
John Dionne
Course Coordinator
Ragnar RTB LLC
Office: 603-888-0870
Cell Phone: 603-305-3382
jdionne@runragnar.com

PERMIT APPLICATION		
Name of Applicant: John Dionne	Organization (if applicable): Ragnar RTB, LLC	
Mailing Address 5570 W 1730S, Suite 1000 Salt Lake City UT 84104		
Contact Person: John Dionne	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: 978 239-3477	
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-mile 24 hour event, we stop at 36 exchanges along to "hand-off" to the next runner. We hope to use the North Hampton School as our 34th exchange. We only need: the parking lot for the vehicles and to place 8-10 portable toilets on site.		
Location of Event: at North Hampton School		
Date(s) of Event: 9/18/21	Hours: ~ 10 hours	
	From: 8:45 AM	End: 6:45 PM
Estimated Attendance: ~ 2000	Minimum No.: ~ 200	Maximum No.: ~ 2,500
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: portable toilets	No. of Units: 8-10	Male: Un serv	Female: UnFrey
Water supply from: NA			
Food will be served from and/or by: NA			
Beverages will be served from and/or by: NA			
Illumination after dark will be provided by NA			
Medical and First Aid Provided by: EMT			
Traffic Control Provided by: Officer Detud		No. of officers: 1	
Parking for <u>~100</u> 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: Ragnar RTB LLC / John Dunne	
Mailing Address: 79 Wethersfield Rd Nashua NH	Phone: 603-858-0870
Email: jdunne@runragnar.com	Cellular Phone: 603-305-3382
<p>I, <u>John Dunne</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>	
Signature: 	Date: 3-17-21
Name of Property Owner (The following MUST BE completed by the owner of the property involved):	
Mailing Address:	Phone Number:
Email:	Cell Phone Number:
<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>	
Signature:	Date:

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: *John G. Jiri* Date: 4/19/2021

Building Inspector/Code Enforcement Officer Signature of Approval: *[Signature]* Date: 4/19/21

Director of Public Works Signature of Approval: *[Signature]* Date: 4/19/21

Approval per Director HUBBARD (KW) Date:

Police Chief Signature of Approval: *Kathy More* Date: 5/11/2021

Department comments or additional conditions:

See ATTACHED -

Applicant: I do hereby agree to the additional requirements:

Applicant's Signature: *John Dan* Date: 3-17-21

PERMIT

Denied Reason:

Approved

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

Date:

Kathryn L. Mone
Chief of Police



Telephone: 603-964-8621
Emergency: 911

Town of North Hampton
Police Department
233 Atlantic Avenue
North Hampton, NH 03862

May 10, 2021

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

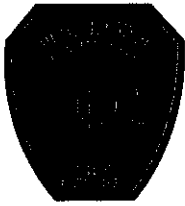
September 18, 2021

The Large Assembly Application for Reach the Beach Relay Road Race. September 18, 2021 is approved based on the following conditions:

1. The Police Department requires three detail officers, with cruisers, from North Hampton Police Department of one of the approved Mutual Aid communities be assigned to this outside detail. The location and scheduling will be determined by the Police Chief of 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. If 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. 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.
4. Facility Use Permit from North Hampton School is required.
5. 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 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.



Kathryn Mone
Chief of Police



Jason M. Lajoie
FIRE CHIEF

North Hampton
FIRE & RESCUE

235 ATLANTIC AVENUE
NORTH HAMPTON, NEW HAMPSHIRE 03862
www.northhampton-nh.gov Bus. Ph. (603) 964-5500



Mark A. Cook
DEPUTY FIRE CHIEF

To: Kathryn Mone – Chief of Police
John Hubbard - Director of Public Works
Travis Murray - Code Enforcement and Building Inspector
Rick Milner – Planning and Zoning Administrator

From: Jason Lajoie, Fire Chief

Date: April 19, 2021

Re: Large Assembly Application

Reach the Beach Relay – Saturday, September 18, 2021

- 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.

Jason M. Lajoie
Chief of Department

Steadfast to Service



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

Today's Date 3-18-21

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

Kathy Mor
Selectmen / Town Manager / Police Chief
(circle one)

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
9/18/21
Approve 8:30am - 7pm
1 + 111
officers Detour

Signed by John Dionne
(Applicant)

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

CERTIFICATE OF INSURANCE		PRINT DATE: 8/4/2021			
		CERTIFICATE NUMBER: 20210804834758			
AGENCY:					
Edgewood Partners Insurance Center 2727 Paces Ferry Road, Building Two, Suite 1500 Atlanta, GA 30339 678-324-3300 (Phone), 678-324-3303 (Fax)		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
NAMED INSURED:		INSURERS AFFORDING COVERAGE:			
USA Track & Field, Inc. Ragnar RTB Relay, LLC 130 East Washington Street, Suite 800 Indianapolis IN 46204		INSURER A: Philadelphia Indemnity Ins. Co. NAIC #: 18058			
EVENT INFORMATION:					
Ragnar Reach the Beach Relay (9/16/2021 - 9/21/2021)					
POLICY/COVERAGE INFORMATION:					
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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.					
INS	TYPE OF INSURANCE:	POLICY NUMBER(S):	EFFECTIVE:	EXPIRES:	LIMITS:
A	GENERAL LIABILITY				
	<input checked="" type="checkbox"/> Occurrence	PHPK2197728	11/1/2020 12:01 AM	11/1/2021 12:01 AM	GENERAL AGGREGATE (Applies Per Event) \$3,000,000
	<input checked="" type="checkbox"/> Participant Legal Liability				EACH OCCURRENCE \$1,000,000
					DAMAGE TO RENTED PREMISES (Each Occ.) \$1,000,000
					MEDICAL EXPENSE (Any one person) EXCLUDED
					PERSONAL & ADV INJURY \$1,000,000
					PRODUCTS-COMP/OP AGG \$3,000,000
A	UMBRELLA/EXCESS LIABILITY				
	<input checked="" type="checkbox"/> Occurrence	PHUB743472	11/1/2020 12:01 AM	11/1/2021 12:01 AM	EACH OCCURRENCE \$10,000,000
					AGGREGATE \$10,000,000
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:					
Coverage applies to USA Track & Field sanctioned events and registered practices, including any directly related activities, such as event set-up and tear-down, participant check-in and award ceremonies.					
The certificate holder is an additional insured per the following endorsement: Additional Insured - Certificate Holders (Form PI-AM-002)					
The General Liability policy is primary and non-contributory with respect to the negligence of the Named Insureds (Form CG 00 01)					
The General Liability policy contains a blanket Waiver of Subrogation as required by contract per Waiver of Transfer of Rights of Recovery Against Others (Form CG 24 04).					
Excess policy follows form of underlying General Liability.					
CERTIFICATE HOLDER:			NOTICE OF CANCELLATION:		
Town of North Hampton, NH 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:		
					