Roll Call Number	

Agenda	Item	Number
-	0	29

Date October 7, 2013

Communication from the Greater Des Moines Partnership requesting approval of banner design for banners to be displayed in the Western Gateway Park on 13<sup>th</sup> Street between Locust and Grand on October 9 promoting the Healthiest State Walk start and finish lines.

Moved by	to receive, file and approve banner
design.	

COUNCIL ACTION	YEAS	NAYS	PASS	ABSENT
COWNIE				
COLEMAN				
GRIESS				
HENSLEY				
MAHAFFEY				
MEYER				
MOORE				
TOTAL				
MOTION CARRIED	-	,	A	PPROVED

### CERTIFICATE

I, DIANE RAUH, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

	III.	
	N.	City Clerk
Mayor		City Clerk
ATRACTOL		



# City of Des Moines Application for Permission to Temporarily Place Banner(s) or Item(s) Over/Across Public Street and/or Right-of-Way

# Please submit application 45 days in advance (Print or Type)

Applicant: Kate Johnson Martin - Healthiest State Work				
Address: 700 Locust St. Swite 100				
Contact Person: Mahe MuranMartin Alternate Contact Mag Fitz				
<b>Daytime Phone:</b> 515-384-4913 <b>Cell Phone:</b> 515-402-6510				
E-Mail Address: What have desing in esme to confax:				
Date(s) the banner(s) or item(s) will be displayed: October 9, 2013				
Purpose of the banner(s) or item(s): Healthiest State Walk Start Finish				
Preferred Location: Please provide a map or diagram of the street indicating banner location.				
How will the banner(s) or item(s) be anchored?  Neighted base - see attached image  If you plan to anchor to the utility pole, please provide written permission from the utility company or from the City (if poles are City-owned). Such permission is not a substitute for meeting the requirements for receiving this permit.				
Size of banner(s) or item(s):				
Specifications of banner(s) or item(s):				
Type of Material: Fabric - mylon				
Number of grommets used to secure banner or item:				
Sketch of banner or item design: Will you need electricity provided for your item? If electricity is necessary, how would it be obtained:				

#### Indemnification:

To the fullest extent permitted by law, the Applicant agrees to defend, pay on behalf of, indemnify, and hold harmless the City of Des Moines, lowa against any and all claims, demands, suites, or loss, including any and all outlay and expense connected therewith, by reason of personal injury, bodily injury or death, and property damage, which arises out of the Applicant erecting, displaying, maintaining and removing banner or item display.

### Insurance:

A Certificate of Insurance to demonstrate compliance with these requirements shall be submitted to the City's Risk Management Office. Applicant shall purchase and maintain during the period of the banner or item display, including erection, display and removal of banner or item, General Liability Insurance with a limit of no less than \$500,000 per occurrence and/or aggregate occurrence. The General Liability Insurance policy shall include Contractual Liability coverage equivalent to that included in a standard ISO Insurance form. If the banner or item display is part of a special event for which a Street Use Permit is granted, the insurance required for the Street Use Permit will be considered to also cover insurance otherwise required for this permit.

Applicant agrees to provide all maintenance and upkeep of the banner(s) or item(s) for the duration that the banner(s) or item(s) is in place. Banner(s) or item(s) may be removed at the expense of the applicant if required by the City.

Kotie Anymillerh Signature	
Please return to City Clerk's Office 400 Robert D. Ray Drive Des Moines, IA 50309 Phone: (515)283-4209, Ext. 7 Fax: (515)237-2645	
FOR OFFICE USE ONLY:	
Traffic Division Approval:	
Risk Management Approval:	
City Council Approval:	

## HOLD HARMLESS AGREEMENT AND EVIDENCE OF INSURANCE COVERAGE FOR THE CONSTRUCTION, ERECTION, MAINTENANCE AND REMOVAL OF STREET BANNERS IN CITY OF DES MONES RIGHT-OF-WAY

The undersigned, as an authorized representative of the Grater Marthur , acknowledges that the organization is a recognized group or association by the City of Des Moines, Iowa, or is a tax-exempt organization under Section 501 (c) (3) of the United States Internal Revenue Code.

On behalf of the organization or association, the undersigned states that the street banners which are the subject of this Agreement shall be placed in an area generally described as:

Western Gateway Park - 13th between Locust & Grand

The organization or association acknowledges and agrees that it will soley provide for the construction, erection, maintenance and removal of street banners and that the City of Des Moines, its employees, agents and assigns shall have no obligation or responsibility whatsoever for the construction, erection, maintenance and removal of the street banners.

The undersigned acknowledges that any and all activity undertaken by any officer, agent, employee, volunteer and/or assign of the organization or association related to the placement of street banners and associated activity in City owned right-of-way pursuant to authorization of the City of Des Moines, Iowa given in Resolution Number 99-991 dated April 5, 1999 is done solely on behalf of the organization or association and that the undersigned, on behalf of the organization or association, releases and holds the City of Des Moines, Iowa, its officers, agents, employees and assigns harmless from any and all damages which may be asserted, claimed, or recovered against the City of Des Moines, Iowa, its officers, agents, employees and assigns by reason of property damage and/or personal injury, including bodily injury, which arises out of or which is in any way connected or associated with the activity undertaken for the construction, erection, maintenance and removal of the street banners from City owned right-of-way.

The organization or association assumes full responsibility for any and all damages or injuries which may result to any person or property by reason of or in connection with the activities undertaken by or on behalf of the organization or association.

The undersigned further acknowledges that any and all officers, agents, employees, volunteers and/or assigns of the organization or association are not employees or contractors of the City of Des Moines, Iowa and are exempt from the coverage (s) provided by Code of Iowa, Chapters 85, 85A, 85B and any succeeding legislation, and that such individuals shall have no right to make a claim for or receive any compensation from the City of Des Moines, Iowa as provided by Code of Iowa Chapters 85, 85A, 85B or any succeeding legislation.

The organization or association represents that it has the approval of Mid-American
Energy Company to erect street banners on utility or like-poles within the designated
area, and that the above-named organization or association has liability insurance (Policy
Name and Number Divided at Street application ) in
full force and effect which names the organization or association, and as an additional
insured, the City of Des Moines.
The undersigned further represents that the liability insurance will remain in full force
and effect during the period the street banners are located in City owned right-of-way and
agrees that upon expiration, termination or otherwise of the liability insurance coverage,
or if any of the terms of this Agreement cannot or are not met, the authority of the
organization or association to have the street banners placed in City owned right-of-way
will immediately terminate and the banners will be removed.
This Hold Harmless Agreement and Evidence of Insurance Coverage is executed on this
2 day of October . 2013 on behalf of and by the authority of
the Greater DM Partnership

Authorized Representative



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/30/2013

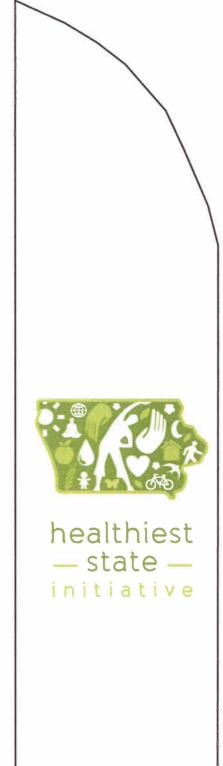
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN 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

t	ne te		f the policy,	cerl	ain p	olicies may require an er				is certificate does not confer	
PRO	DUCE	ΞR			1-80	0-247-7756	CONTA NAME:	CT			
Holmes Murphy & Assoc - WDM			PHONE	ACCEPTED TO		FAX					
PO	Вох	9207					E-MAIL	A. I. A. D. L. A. W. C.		(A/C, No):	
							ADDRE		IIDED/STACEOS	RDING COVERAGE	NAIC#
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		r Des Moines Parts	nership						01 11104141	.ec company	4
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	X	COMMERCIAL GENERAL LIA	ABILITY							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100	0,000
		CLAIMS-MADE X	OCCUR								cluded
										PERSONAL & ADV INJURY \$ 1,000,000	
										GENERAL AGGREGATE \$ 2,000,000	
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В		RKERS COMPENSATION	3			91 WECBJ 2430		03/01/13	03/01/14	X WC STATU- OTH-	
	AN	Y PROPRIETOR/PARTNER/EXE	MPLOYERS' LIABILITY ROPRIETOR/PARTNER/EXECUTIVE			11,12,11			0,000		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		andatory in NH)		N/A				E.L. DISEASE - EA EMPLOYEE \$ 50	0,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below									E.L. DISEASE - POLICY LIMIT \$ 50	
DES	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)										
Re: Healiest State Walk October 9th											
CF	RTIF	FICATE HOLDER					CANO	CELLATION			
							9,5,140				
							SHO	OULD ANY OF T	THE ABOVE D	ESCRIBED POLICIES BE CANCEL	LED BEFORE

Des Moines, IA 50309 USA	Jay Bragdand
700 Locust St Ste 100	AUTHORIZED REPRESENTATIVE
Greater Des Moines Partnership	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
CERTIFICATE HOLDER	CANCELLATION

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