

Application for Special Events  
within the Town of Wadesboro

Temporary Event Permit Fee \$50.00 (please attach payment to application)

Name of Activity / Event LIVE MUSIC THURSDAYS

Sponsoring Organization Name UPTOWN WADESBORO INC.

ELIZABETH SCHAFER  
Name of Primary Contact Person

JULIAN SWITENBERG  
Alternate Contact Person's Name

121 E. WADE ST.  
Primary Address

107 C E. WADE ST.  
Alternate Address

704/465-9850  
Primary Phone Number/Cell

704/695-1644  
Alternate Phone Number/Cell

southernmedcellar@aol.com Primary E-Mail Address  
uptownwadesboro@windstream.net. Alternate E-Mail Address

Location of Event: E. WADE ST. (SEE ATTACHED SATELLITE PIC)

Availability of Location Confirmed  Yes  No

Description of Event: ACOUSTIC PERFORMANCE & SONGS WITH LIVE MUSICIANS.

Date(s) of Event: THURSDAYS Hours of Operation: 6:30-9:00  
5:30-9:30

Set-up & Break Down time needed: CLOSE DOWN STREET AREA FROM

Number of people involved: 2-8 MUSICIANS. 5:30-9:30

Participants: VARIETY

Entertainment: LIVE MUSIC ACOUSTIC: BLUEGRASS, COUNTRY, POP, BEACH MUSIC, CLASSIC ROCK

Vendors: NONE @ THIS TIME

- All vendors are subject to licensing requirement (fire inspection, health inspection, etc.)

Expected Number of Audience: 20-50+

Entertainment (Show on Site Plan)

Location E. WADE FROM OLIVER'S TO WASHINGTON ST.

Speakers/Microphone  Yes  No Electrical Hook-ups  Yes  No

Other: \_\_\_\_\_

Parking Requirements (Show on Plan):

Number of parking spaces available: — Number of Handicapped Spaces: —

Participants Parking Location: ON STREET

Vendors Parking Location: —

Entertainment Parking Location: ON STREET

Audience Parking Location: ON STREET

(If the audience parking location is insufficient on site, parking arrangement letter(s) from owner(s)/renter(s) of additional sites allowing usage must be attached)

Clean-up Plan/Litter Control: OLIVER'S WILL TAKE RESPONSIBILITY

Name of Waste Hauler: N/A.

Number of Toilets: 0 Location of Toilets: 0

Insurance Policy Naming Town Additional Insured Attached  Yes  No

Additional Comments:

WE ARE ASKING FOR BARRICADES TO BE SET-UP. PEOPLE WILL GATHER & BRING THEIR OWN LAWN CHAIRS, ETC.

109

N Greene St

E Wade St

2155K

*Musicians set-up* →

*drivers*

N Washington St

E Wa

OPEN

n St





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/30/2017

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> ANSON REAL ESTATE & INS CO P O BOX 326  WADESBORO NC 28170		<b>CONTACT NAME:</b> LOUISE THOMAS <b>PHONE (A/C, No, Ext):</b> 704 694-2216 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> ansonins@windstream.net	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> FOREMOST INSURANCE CO GRAND RAPIDS, MI	<b>NAIC #</b>
<b>INSURED</b>		<b>INSURER B:</b>	
JEFFERY OLIVER DBA		<b>INSURER C:</b>	
OLIVER'S		<b>INSURER D:</b>	
196 RED HILL-MT. VERNON CHURCH RD		<b>INSURER E:</b>	
WADESBORO NC 28170		<b>INSURER F:</b>	

**COVERAGES****CERTIFICATE NUMBER:****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	X		PPS08193908	12/01/2016	12/01/2017	EACH OCCURRENCE	\$ 1,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 75,000.00
							MED EXP (Any one person)	\$ 5,000.00
							PERSONAL & ADV INJURY	\$
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000.00
<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
OTHER:								\$
<b>AUTOMOBILE LIABILITY</b>							COMBINED SINGLE LIMIT (Ea accident)	\$
<input type="checkbox"/> ANY AUTO							BODILY INJURY (Per person)	\$
<input type="checkbox"/> OWNED AUTOS ONLY							BODILY INJURY (Per accident)	\$
<input type="checkbox"/> HIRED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$
<input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY								\$
<b>UMBRELLA LIAB</b>							EACH OCCURRENCE	\$
<input type="checkbox"/> EXCESS LIAB							AGGREGATE	\$
<input type="checkbox"/> OCCUR								\$
<input type="checkbox"/> CLAIMS-MADE								\$
DED RETENTION \$								\$
<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>							<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. EACH ACCIDENT	\$
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE	\$
N/A							E.L. DISEASE - POLICY LIMIT	\$

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

LOCATION ADDRESS: 121 EAST WADE STREET, WADESBORO NC 28170

**CERTIFICATE HOLDER****CANCELLATION**TOWN OF WADESBORO  
P O BOX 697

WADESBORO

NC 28170

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

Name: Shelby Emrich

Address: 107 A East Wade St.

Wadesboro NC 28170

Organization: Anson County  
Chamber of Commerce

Date: May 25, 2017

This letter is to express support in favor of the Town of Wadesboro allowing the area on E. Wade St, from Oliver's Restaurant at 121 E. Wade St, to Washington St. to be temporarily closed to allow for community events.

The closing will occur on Thursdays, between the hours of 5:30PM to 9:30PM.

These community events will enhance the town & be a great opportunity for families & individuals to enjoy life in Anson County.

Sincerely,

Shelby Emrich  
Executive Director

Name: JOE DUTTON

Address: 1030 Upper White Star Rd  
Peachland NC

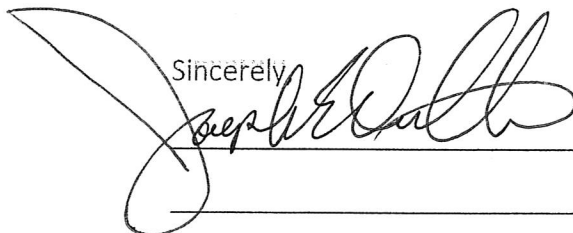
Organization: \_\_\_\_\_

Date: 5/30/17

This letter is to express support in favor of the Town of Wadesboro allowing the area on E. Wade St, from Oliver's Restaurant at 121 E. Wade St, to Washington St. to be temporarily closed to allow for community events.

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Sincerely,  
  
\_\_\_\_\_

Name: Julian Switzenberg II  
Address: 107-C East Wade St.

Organization: Uptown Wadesboro, Inc

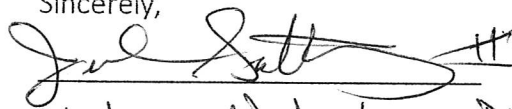
Date: 5/31/2017

This letter is to express support in favor of the Town of Wadesboro allowing the area on E. Wade St, from Oliver's Restaurant at 121 E. Wade St, to Washington St. to be temporarily closed to allow for community events.

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Sincerely,

  
Uptown Wadesboro Director

Name: JAMES Price - Prices Place

Address: 125 E Wade St  
Wadesboro NC.

Organization: Owner - Prices Place

Date: 5-27-17

This letter is to express support in favor of the Town of Wadesboro allowing the area on E. Wade St, from Oliver's Restaurant at 121 E. Wade St, to Washington St. to be temporarily closed to allow for community events.

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Sincerely,

JAMES E Price



Name: John Marek

Address: 107 A East Wade St  
Wadesboro, NC 28170

Organization: Anson EDP

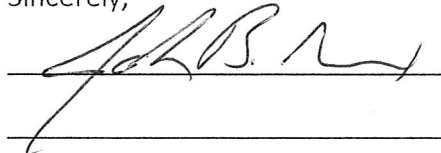
Date: 06/1/2017

This letter is to express support in favor of the Town of Wadesboro allowing the area on E. Wade St, from Oliver's Restaurant at 121 E. Wade St, to Washington St. to be temporarily closed to allow for community events.

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Sincerely,

  
\_\_\_\_\_

Kent Tyson  
Name: New York Life  
Address: 118 E. Wade Street  
Wadesboro, NC  
Organization: New York Life

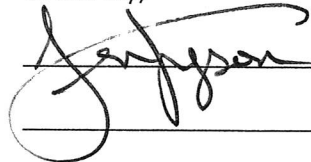
Date: 5-26-17

This letter is to express support in favor of the Town of Wadesboro allowing the area on E. Wade St, from Oliver's Restaurant at 121 E. Wade St, to Washington St. to be temporarily closed to allow for community events.

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Sincerely,

  
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