

Janice M. Winfrey
City Clerk

City of Detroit
OFFICE OF THE CITY CLERK

Andre P. Gilbert II
Deputy City Clerk

DEPARTMENT PETITION REFERENCE COMMUNICATION

To: The Department or Commission Listed Below

From: Janice M Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council. June

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

Petition No.	2024-201
Name of Petitioner	Old Western Market
Description of Petition	Petition Old Western Market (#2024-201), request to hold "Old Western Market" at 2640 Michigan Avenue on July 26 th , 2024 through January 11 th , 2025, from 12:00 PM to 8:00 PM. Set-up to begin July 18 th , 12:00 PM and completed by July 24 th at 5:00 PM with tear-down to begin January 12 th , at 11:00 AM and completed by January 19 th 5:00 PM
Type of Petition	Special Event
Submission Date	6/21/24
Concerned Departments	Buildings, Safety Engineering, and Environmental Department (BSEED), Department of Public Works (DPW), Detroit Department of Transportation (DDOT), Detroit Fire Department (DFD), General Services Department (GSD), Media Services Department, Municipal Parking Department, Police Department (DPD)
Petitioner Contact	Cathy Schneider Old Western Market (516) 698-7975 oldwesternmarket@aol.com

2 Woodward Ave. Coleman A. Young Municipal Center Rm. 200, Detroit, MI 48226

(313) 224 - 3260 | Fax: (313) 224 - 1466

City of Detroit Special Events Application Authorizations

AUTHORIZATION & AFFIDAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understood and agreed to abide by the rules and regulations governing the proposed special event, and I understand that this application is made subject to the rules and regulations established by the Mayor or the Mayor's designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to special events. I further agree to abide by these rules, and further certify that I agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the event to the City of Detroit.

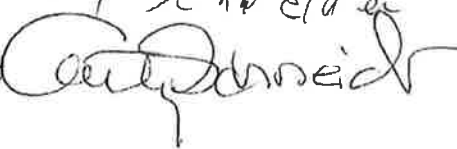
Applicant Signature:  **Date:** 5-1-24

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

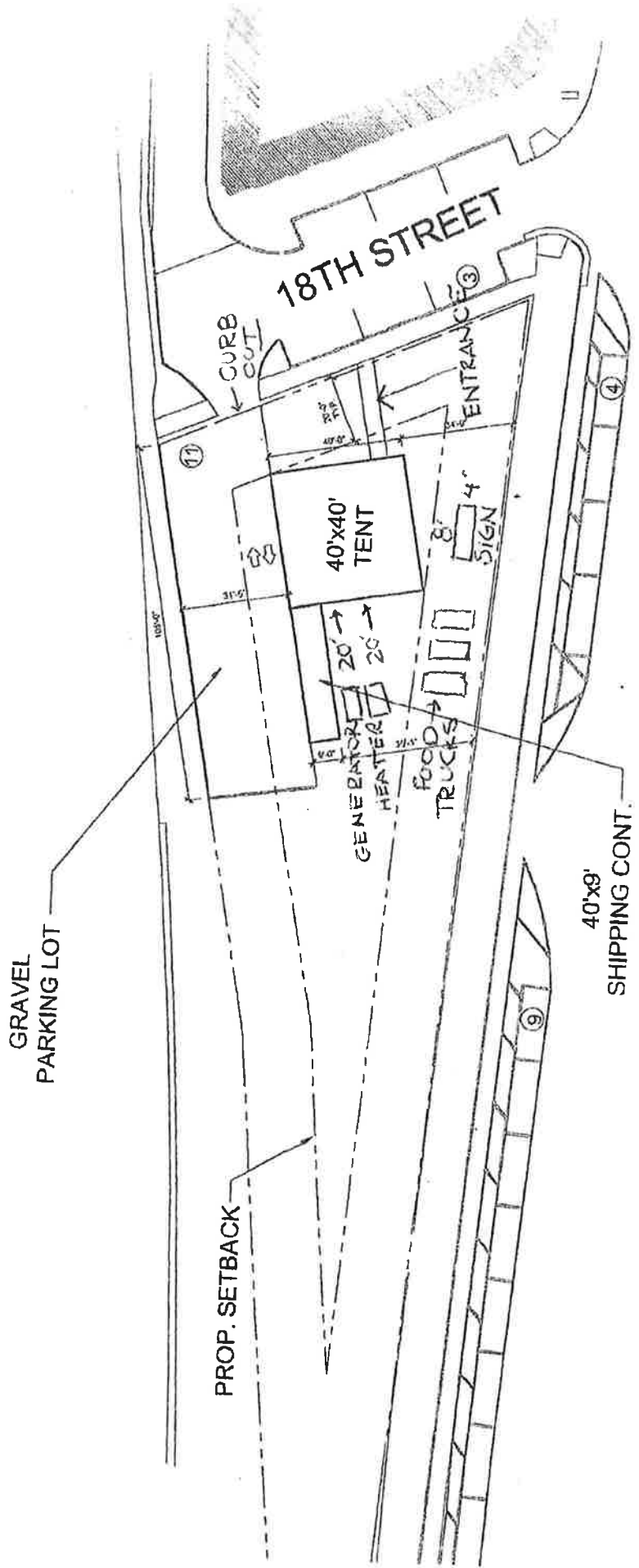
HOLD HARMLESS AND INDEMNIFICATION

The Applicant agrees to indemnify and hold the City of Detroit (which includes its agencies, officers, elected officials, appointed officials and employees) harmless from and against injury, loss, damage or liability (or any claims in respect of the foregoing including claims for personal injury and death, damage to property, and reasonable outside attorney's fees) arising from activities associated with this permit, except to the extent attributable to the gross negligence or intentional act or omission of the City.

Applicant affirms that Applicant has read and understands the Hold Harmless and Indemnification provision and agrees to the terms expressed therein.

Event Name: Old Western Market **Event Date:** 7/25/2024
Event Organizer: Cathy Schneider
Applicant Signature:  **Date:** 5-1-24

OLD WESTERN MARKET SITE PLAN



MICHIGAN AVE.



PORTABLE RESTROOMS • SEPTIC TANK SERVICES • EXCAVATING



4941 White Lake Rd

Clarkston MI 48348

Office: 248-698-5000

www.brendelseptic.com

DATE: 4/16/2024

COMPANY: Old Western Market

ATTN: Richard Noto

RE: Sanitation Equipment Rental

PROPOSAL #: BS-2024-0416

ADDRESS: 2752 Michigan Ave,
Detroit, MI

DELIVERY ADDRESS: 2640 Michigan Ave,
Detroit, MI

PHONE: 516-698-7975

EMAIL: oldwesternmarket@aol.com

DATE(S) FOR RENTAL(S): Mid June-Dec 2024

Delivery Date: TBD June-

We hereby submit specifications and estimates for: Sanitation Equipment Rental(s)

QTY:	<Type of units :>	Monthly:
1	Regular unit	\$130/month
1	Regular unit w/ hand sanitizer	\$155/month

Service:

- Units will be serviced on a route day, 1X week.
- Units will be delivered on an assigned route day.
- Our Billing is 28 days
- We accept, ACH payments, credit cards, check.

Delivery:

- Place unit next to tent
- Units must be serviceable a route truck should be able to pull up and service.

***** PLEASE, PROVIDE TRASH CANS, SO UNITS ARE NOT USED FOR TRASH.**

***** SIGNED PROPOSAL MUST BE RECEIVED 2 WEEKS BEFORE DELIVERY DATE**

This proposal may be withdrawn by Brendel's Septic if not accepted with 30 days of receipt.

All agreements contingent upon strikes, accidents, natural disasters or delays beyond our control. We will not be responsible for any damage(s) to sprinkler systems, sidewalks, driveways, utility lines, electric lines, etc. Owner/Customer assumes all responsibility.

Proposal prepared by: Susan Armstrong, Susan Armstrong, Owner

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to perform the work as stated above. Payment due upon project completion.

To accept this proposal:

Signature:

Print Name:

TENT SETUP BREAKDOWN SCHEDULE

Setup date start 7/18/2024 12pm

Complete setup 7/24/2024 5pm

Breakdown start 1/12/ 12 pm

Complete breakdown 1/19/2025 5pm



DEPARTMENT OF
Appeals & Hearings

APPLICATION FOR DAH BLIGHT CLEARANCE

PLEASE PRINT & COMPLETE IN FULL

Please send my clearance by: FAX MAIL EMAIL or I'll PICK-UP in Office

I am an Applicant for a Buildings Safety Engineering & Environmental (BSEED): (Pick One) → permit certificate variance

FOR: Property Address: 2640 Michigan Ave Detroit MI 48216

Property Owner's Name:

Cathy S Saman-Schneider

Applicant's Name: Cathy S Saman-Schneider
(Person's name not Company name) First Last

Applicant is: Property Owner

Contractor

Other:

Applicant's Address: 2572 Michigan Ave Detroit MI 48216

Street Address, City & State & Zip

Phone: 5166987975

(area code) xxx-xxxx

Email: oldwesternmarket@aol.com

Applicant's Company Name & Address: Old Western Market 2572 Michigan Ave Detroit MI 48216

List All Property Addresses in the city of Detroit that are owned/have been owned by: APPLICANT, PROPERTY OWNER and related entities
(use a separate sheet if needed), IF GRANTED THE CLEARANCE WILL ONLY BE FOR THE ADDRESS ABOVE:
2572 Michigan Ave Detroit MI 48216 2640 Michigan Ave Detroit MI 48216

I certify that the information above is true to the best of my knowledge and understand that providing false information may deem me, my company AND the owner of the property ineligible for BSEED permit, certificate or variance.

Applicant Signature: _____ Date: 4-19-2024

Return this form to DAH via: Email: dah_cs@detroitmi.gov Mail/In-Person: Department of Appeals & Hearings
Fax: 313 224-7923 2 Woodward Ave., Suite 1004, Detroit, MI 48226

DO NOT WRITE IN THIS SECTION - DAH STAFF ONLY

GRANTED Date/Time: _____

DENIED Reviewed by: _____ Date/Time: _____

By: _____

Old Western Market Event Clean Up Plan

The major cleanup that will be necessary after each session of the market is the removal and depositing of paper goods. Garbage receptacles will be scattered throughout the market for attendees and vendors to use. The garbage bags collected will be disposed through our commercial weekly pick up. The total property 2640 Michigan Avenue will be inspected and cleared of debris as necessary.

A special holding tank will be available for grey water and disposed of properly. The water in the porta potty and hand wash area is collected by holding tanks and disposed by the contracted company.

Security plan

Our security plan meets the criteria for less than 300 people. Emergencies of a general nature including medical general issues, cardiac issues and allergic reaction will be prepared for. Our director of the market is a retired physician who will be available for medical triage. For fire, lost child, weather emergency or any other announcing needs a mega phone and an air horn will be available for the staff to use. A fire extinguisher will be available for controlling a fire. 911 will be called for all emergencies.

Build and Breakdown Schedule

The Market is a 180 day event that will take place on my privately owned land. The land will need to be prepared to establish the market including ground work for the tent, walkways and parking before the tent is setup. The timeline will reflect this.

TIME LINE

- 1.0 Preparation prior to the event: 6 weeks
- 2.0 Breakdown at the end of 180 days: by 2 weeks

SPECIAL EVENTS PETITION

Petition No: 2024-201

Event Name: Old Western Market

Event Status: In Review- Clerk's Office (Step 2 of 6)

Petitioner Name / Organization: Old Western Market

Event Location: 2640 Michigan Avenue

Event Date(s) and Time(s): 07/26/24 12:00 PM to 01/11/25 8:00 PM

Type of Event: Other

Applicant Contact:
Cathy Schneider
oldwesternmarket@aol.com
+1 (516) 698-7975

Submission Date:	05/01/24 3
Date of Clerk's Office Referral:	06/21/24
Date of City Departments Sign Off:	6/18/24
Date Referred to Council:	6/21/24

Department Approvals

DPD	DFD	EMS	GSD	DDOT	MPD	DPW	DHD
DPD Reviewed- Ready for Council	DFD Reviewed- Ready for Council	EMS Reviewed- Ready for Council	GSD Approval Not Required	DDOT Approval Not Required	MPD Approval Not Required	DPW Approval Not Required	DHD Reviewed- Ready for Council

BSEED
BSEED Reviewed- Ready for Council

Mayor's Office Special Events Signature: *Gaksima Fife*

Date: June 21, 2024

General Event Information

Has this event been hosted before? No

Has the applicant (individual or organization) ever applied for a Special Event with the City of Detroit before? No

Is this an annual event? Yes

Event Website: N/A to be established.

Which spaces will be used? Private Facility

Will this event include the use or sale of marijuana? No

Event Description

Brief Event Purpose & Description:

Old Western Market will sit on the land of the former Western Market, an iconic market that served Corktown for almost a century. The market will seek to provide vendors selling basic products as well as unique foods, cheeses, wine and artisans products. This Six month term is to show the support of the market so a two million dollar funded permanent complex could be built on the land. It is expected that vendors of the market will graduate to one of the fifteen 400 sq/ft storefronts that will be constructed on the complex. The market will help alleviate the food desert of our area.

Estimated Peak Attendance: 36

Estimated Total Attendance: 100 /day for six months

Is this a public event? Yes

Will there be ticket sales or admission charged? No

Does this event use Hart Plaza? No

Will there be merchandise sold? Yes

Will you be taking donations? No

Is this a charity event? No

Does this event involve campers, tents and/or RVs? No

Will this event involve a petting zoo or tattoo art (not including temporary tattoos)? No

Contact Information

Organization / Petitioner Name: Old Western Market

Mailing Address: 2572 Michigan Avenue

Detroit Michigan 48216

Primary Contact:	Secondary Contact:
Cathy Schneider	Richard Noto
oldwesternmarket@aol.com	amaddogg@aol.com
+1 (586) 929-8136	+1 (516) 698-7975

Organization Type: Corporation

Organization Website: N/A

Event Setup & Breakdown

Begin Setup: 07/18/24 12:00 PM

Complete Setup: 07/24/24 5:00 PM

Setup Location(s): 2640 Michigan Avenue

Event Start: 07/26/24 12:00 PM

Event End: 01/11/25 8:00 PM

Begin Tear Down: 01/12/25 11:00 AM

Complete Tear Down: 01/19/24 5:00 PM

Number of Trash Containers: 2 Number of Recycling Containers: 2

Cleaning Service Vendor: Old Western Market

Other Waste Elements:
A special holding tank will be available for grey water and disposed of properly. The water in the porta potty and hand wash area is collected by holding tanks

Street Closures & Parking

How many streets will be closed: 0 _____

Will you be closing any part of Woodward Avenue? _____

Street Closures (if there are 1-4 closed streets):

1. _____

2. _____

3. _____

4. _____

Will you charge attendees for parking? No _____

Valet parking or blocking metered parking spaces? Neither _____

Describe the parking plan to accommodate anticipated attendance:
Local street parking will be available. On site parking will be developed.

Food & Beverage

Will food be served? Yes _____

Will food be prepared on site? Yes _____

Number of food trucks: 3 _____ Number of non-truck food vendors: 2 _____

Food & Beverage (cont.)

Will any type of alcohol be served (including beer)? No

Will there be sales, service and/or consumption of alcohol in public at the event? _____

What type(s) of alcohol will be served? _____

Day(s) and time(s) alcohol will be served: _____

Will ice be used in any served beverages? Yes

Stages, Tents, & Structures

Is a stage being built? No

How many stages will be used? _____

Do any of the stages have a canopy? _____

Number of tents 10' x 10' and smaller: 5

Number of tents larger than 10' x 10': 1

Tent Contractor: Celina Tents

What other structures will your event include? none

Will your event use any grills? No

What kind of grills? _____

Utilities & Portable Restrooms

Event Utilities that will be used: Generators

How will generators be fueled? gasoline

Generator contractor: in house

Will additional wiring be installed? Yes

Does the event require access to a hydrant? No

Will there be amplified sound? Yes

Will a sound system be used? Yes

Will you be providing Port-a-johns? Yes

Security & Emergency Plans

Will the event have a security contractor? No

Security Contractor: _____

Number of private personnel per shift: _____

Which of these apply to the private security personnel? _____

Will you contract emergency medical services? No

Name of emergency medical services contractor: _____

Does this event include fireworks? No

Day(s) and time(s) of fireworks: _____

Fireworks vendor: _____

Attachments

<input checked="" type="checkbox"/>	Applicant Signature Page (required)
<input checked="" type="checkbox"/>	Event Clean Up Plan (required)
<input type="checkbox"/>	Security Plan (500 or less attendees)
<input type="checkbox"/>	Emergency Response Plan & Medical Procedures (500+ attendees)
<input checked="" type="checkbox"/>	Communication and Community Impact Plan (500+ attendees)
<input type="checkbox"/>	Maintaining of Traffic Plan (1000+ attendees or if closing a street)
<input checked="" type="checkbox"/>	Build and Breakdown Schedule (if you are erecting any structures)
<input checked="" type="checkbox"/>	Site Map Plan (if event involves any temporary elements including tents)
<input type="checkbox"/>	Emergency Medical Contractor Agreement (if applicable)
<input type="checkbox"/>	Barricades Provider Agreement (if applicable)
<input type="checkbox"/>	Security Contractor Agreement (if applicable)
<input checked="" type="checkbox"/>	Port-a-john Contractor Agreement (if applicable)
<input type="checkbox"/>	Sanitation Contractor Agreement (if applicable)

City Council Member: _____

Resolved, The Mayor's Office is hereby authorized and directed to issue permits to Cathy Schneider to host "Old Western Market" (2024-201) on July 26, 2024 through January 11, 2025 at 2640 Michigan Avenue Detroit, MI 48216 from 11:00 AM to 5:00 PM

PROVIDED, that there will be DPD Assisted Event; and be it further

PROVIDED, that there will be DFD Pending Inspections; and be it further

PROVIDED, that there will be BSEED Permits Required for Tents, Generators and be it further

PROVIDED, that there will be Health Department Inspections Required; and be it further

PROVIDED, that there will be Business License Required; and be it further

PROVIDED, that there will be a Business License Required obtained following City Council approval; and be it further

PROVIDED, that all necessary permits must be obtained prior to the event. If permits are not obtained, departments can enforce closure of event.