OVERALL STATUS (please circle): ☑ APPROVED □ DENIED □ N/A □ CANCELED

Petition #: 679 Event Name: Detroit Cycling Championship

Event Date: July 13, 2019

Street Closure: First Street, Grand River, Second Avenue & Bagley

Organization Name: DAC Cycling L3C

Street Address: 241 Madison Avenue Detroit, MI 48226

Receipt date of the COMPLETED Special Events Application:

Date of City Clerk’s Departmental Reference Communication:

Due date for City Departments reports:

Due date for the Coordinators Report to City Clerk:

Event Elements (check all that apply):

- [ ] Walkathon
- [ ] Carnival/Circus
- [ ] Concert/Performance
- [ ] Run/Marathon
- [ ] Bike Race
- [ ] Religious Ceremony
- [ ] Political Ceremony
- [ ] Festival
- [ ] Filming
- [ ] Parade
- [ ] Sports/Recreation
- [ ] Rally/Demonstration
- [ ] Fireworks
- [ ] Convention/Conference
- [ ] Other: Expo
- [ ] 24-Hour Liquor License

Petition Communications (include date/time)

3rd Annual professional/amateur bike race at Beacon Park from 6:00am - 8:00pm; with temporary street closures on First Street, Grand River, Second Avenue and Bagley.

** ALL permits and license requirements must be fulfilled for an approval status **

<table>
<thead>
<tr>
<th>Date</th>
<th>Department</th>
<th>N/A</th>
<th>APPROVED</th>
<th>DENIED</th>
<th>Additional Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DPD</td>
<td></td>
<td>☑</td>
<td></td>
<td>DPD Assisted Event; Contracted with City Shield Services to Provide Private Security Services</td>
</tr>
<tr>
<td></td>
<td>DFD/EMS</td>
<td></td>
<td>☑</td>
<td></td>
<td>Pending Inspections; Contracted with DMC to Provide Private EMS Services</td>
</tr>
<tr>
<td></td>
<td>DPW</td>
<td></td>
<td>☑</td>
<td></td>
<td>ROW Permit Required for Street Closures</td>
</tr>
<tr>
<td></td>
<td>Health Dept.</td>
<td></td>
<td>☑</td>
<td></td>
<td>Temporary Food License Required</td>
</tr>
<tr>
<td>Date</td>
<td>Department</td>
<td>N/A</td>
<td>APPROVED</td>
<td>DENIED</td>
<td>Additional Comments</td>
</tr>
<tr>
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</tr>
<tr>
<td></td>
<td>TED</td>
<td>☐</td>
<td>☑</td>
<td>☐</td>
<td>Type III Barricades &amp; Road Closure Signage Required</td>
</tr>
<tr>
<td></td>
<td>Recreation</td>
<td>☐</td>
<td>☑</td>
<td>☐</td>
<td>Application Received &amp; Approved as Presented</td>
</tr>
<tr>
<td></td>
<td>Bldg &amp; Safety</td>
<td>☐</td>
<td>☑</td>
<td>☐</td>
<td>Permits Required for Tents, Generators &amp; Electrical</td>
</tr>
<tr>
<td></td>
<td>Bus. License</td>
<td>☐</td>
<td>☑</td>
<td>☐</td>
<td>Vendors License Required</td>
</tr>
<tr>
<td></td>
<td>Mayor's Office</td>
<td>☐</td>
<td>☑</td>
<td>☐</td>
<td>All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.</td>
</tr>
<tr>
<td></td>
<td>Municipal Parking</td>
<td>☐</td>
<td>☑</td>
<td>☐</td>
<td>Purchase of Parking Meters Required</td>
</tr>
<tr>
<td></td>
<td>DDOT</td>
<td>☐</td>
<td>☑</td>
<td>☐</td>
<td>Low Impact on Buses</td>
</tr>
</tbody>
</table>

**MAYOR'S OFFICE**

Signature: [Signature]

Date: March 14, 2019
DEPARTMENTAL REFERENCE COMMUNICATION

Tuesday, February 12, 2019

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.

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

DPW - CITY ENGINEERING DIVISION    PLANNING AND DEVELOPMENT DEPARTMENT
MAYOR'S OFFICE    POLICE DEPARTMENT
FIRE DEPARTMENT    MUNICIPAL PARKING DEPARTMENT
RECREATION DEPARTMENT    BUSINESS LICENSE CENTER

679    DAC Cycling L3C, request to hold "Detroit Cycling Championship" on July 13, 2019 from 6:00 AM to 8:00 PM with temporary closures of Grand River, Bagley, 1st and 3rd streets.
City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the special events guidelines, please print them out for reference. You are required to complete the information below so that the City of Detroit can gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the City of Detroit Clerk’s Office at least 60 days prior to the first day of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets or maps as needed.

<table>
<thead>
<tr>
<th>Section 1- GENERAL EVENT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event Name: Detroit Cycling Championship</td>
</tr>
<tr>
<td>Event Location: Detroit's Beacon Park (route attached) Fun ride</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 2- ORGANIZATION/APPLICANT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization Name: DACE Cycling L3C</td>
</tr>
<tr>
<td>Organization Mailing Address: 241 Madison Avenue, Detroit, MI 48226</td>
</tr>
<tr>
<td>Business Phone: +1 313-963-9200</td>
</tr>
<tr>
<td>Federal Tax ID #: 81-4729845</td>
</tr>
</tbody>
</table>

If registered as a non-profit, indicate non-profit ID number and attach a copy of the certificate.

| Applicant Name: Detroit Cycling L3C, Ted Gillary |
| Title/Role: Executive Director |
| Email Address: tedg@thedac.com |
| Mailing Address: 241 Madison Ave, Detroit, MI 48226 |
| Business Phone: 313 442-1020/313-220-6840 |
| Event On-Site Contact Person: Rob Barr (Kristin Ritter - 313-910-9868) |
| Mailing Address: 241 Madison Avenue, Detroit, MI 48226 |
| Business Phone: 313 442-1046/313 475-6872 |

List name/phone number of person(s) authorized to make decisions for the organization/event (indicate role/responsibility).

List Event Sponsors: to confirm (see past sponsor list) = Chemical Bank, DTE Energy Foundation, Strategic Staffing Solutions,

Event Elements (check all that apply):

- [ ] Walkathon
- [ ] Run/Marathon
- [ ] Political Event
- [ ] Parade
- [ ] Convention/Conference
- [ ] Carnival/Circus
- [ ] Bike Race
- [ ] Festival
- [ ] Sports/Recreation
- [ ] Fireworks
- [ ] Concert/Performance
- [ ] Religious Ceremony
- [ ] Filming
- [ ] Rally/Demonstration
- [x] Other: Expo
Provide a brief description of your event:

A pro and amateur bike race through the city. Includes healthy living expo, kids bike giveaway to children in the city of Detroit.

<table>
<thead>
<tr>
<th>What are the projected set-up, event and tear down dates and times (must be completed)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Begin Set-up Date &amp; Time: 7/12/19 (8pm) Complete Set-up Date &amp; Time: 7/13/19 (7am)</td>
</tr>
<tr>
<td>Event Start Date &amp; Time: 7/13/19 (6am) Event End Date &amp; Time: 7/13/19 (8pm)</td>
</tr>
<tr>
<td>Begin Tear Down Date: 7/13/19 (8pm) Complete Tear Down Date: 7/13/19 (11pm)</td>
</tr>
<tr>
<td>Event Times (If more than one day, give times for each day):</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Is this the first time you have held this event in the City of Detroit? □ Yes X No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If no, what years has the event been held in Detroit? 2017, 2018</td>
</tr>
<tr>
<td>When was the event last held in Detroit? July 14, 2018</td>
</tr>
<tr>
<td>Where was the event last held in Detroit? Beacon Park, Detroit</td>
</tr>
<tr>
<td>What were the hours last year? Same - 6am - 8pm</td>
</tr>
<tr>
<td>Project Attendance This Year (Minimum - Maximum)? 7 - 10,000</td>
</tr>
<tr>
<td>What is the basis for your projected attendance? DDP est. From 2018 and anticipated growth</td>
</tr>
</tbody>
</table>

Please describe your anticipated/ target audience:

<table>
<thead>
<tr>
<th>Is this going to be an annual event? □ Yes X No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes, do you have a preferred/proposed for next year? July 11-12, 2020 (est.)</td>
</tr>
</tbody>
</table>

If a parade is planned. Indicate elements (check all that apply):

[ ] People
[ ] Balloons
[ ] Floats
[ ] Animals
[ ] Vehicles
[ ] Other: ________________________________
[ ] Bands

If animals included, specify type, number and how used.

Name of business supplying animal(s): ________________________________

Contact Person: ________________________________

Address: ________________________________ Phone: ________________________________

City/State/Zip: ________________________________
Section 3 - LOCATION/SITE INFORMATION

Location of Event: Detroit Beacon Park (see map attached)
Facilities to be used (circle): Street √ Sidewalk Park √ City Facility
Please attach a site plan which illustrates the anticipated layout of your event including the following: Location of First Aid √ Location of fire lane √ Proposed route for walk/run √ Location of tents and canopies √ Sketch of street closure √ Location of bleachers √ Location of press area √ Sketch of proposed light pole banners

Section 4 - ENTERTAINMENT

What type of entertainment will be used? (check all that apply)
[ ] Singers [ ] Magician
[ ] Musicians [ ] Story Telling
[ ] Comedians [ ] Other: DJ √ Announcer
Describe the entertainment for this year's event: community expo around cycling
List proposed entertainers and/or bands performing at the event: N/A - DJ, event ace announcer
Will a sound system be used? √ Yes [ ] No
If yes, what type of sound system?
[ ] Acoustic-audible, sound heard within natural range
[ ] Amplified-augmented, sound increased to broaden range
The amplified sound will be used:
Will the event consist of a musical concert? [ ] Yes √ No
If yes, what type of music? (check all that apply)
[ ] Live [ ] Recorded [ ] Karaoke/Lip-synch
Describe specific power needs for entertainment and/or music:
How many generators will be used? 3
How will the generators be fueled? gas - generators
Name of vendor providing generators:

Contact Person: Todd Villeneuve-Event Theory
20801 Ryan Road
Warren, MI 48091 586-735-0000
Section 5- COMMUNICATION/ADVERTISING STRATEGY

Check all applicable boxes that describe the type of promotion you plan to use to attract participants:

- [x] Radio (Specify stations):
- [x] Television (Specific stations):
- [x] Newspapers (Specify papers):
- [x] Web site (Identify web address):
- [x] Public Relations or Marketing Firm (Specify): TBD (pro-bono)

Contact Info:
- [ ] Raffle (List Item(s)):
- [ ] Billboards
- [x] Flyers
- [x] Street Banners

Location:
- at DAC property, 241 Madison Avenue, Detroit, MI 48226

[ ] Other (Specify):

NOTE: All raffles subject to laws of State/City.

Section 6- SALES INFORMATION

Will there be advanced ticket sales? [x] Yes  □ No  course viewing is
If yes, please describe: VIP tent $75 free to community

Will there be on-site ticket sales? [x] Yes  □ No
If yes, list price(s): $75

Will food be sold? [x] Yes  □ No
If yes, please pick up Special Events Vendor Packet in Suite 105:

Will merchandise be sold? [x] Yes  □ No
If yes, describe:

Will a percentage of the proceeds be distributed to a charitable organization? [x] Yes  □ No
If yes, describe:

If the event is a fundraiser, identify charity or recipient of funds:

Will there be vending or sales? [x] Yes  □ No
If yes, check all that apply:

- Food - Food trucks
- Non-Alcoholic Beverages
- [x] Alcohol Beverage - Beer & wine

Indicate type of items to be sold:
Section 7- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Existing park contract security will be used.

Contact Person: City Shield Services, Al Shenanda
Address: 3420 Cass Avenue
Phone: a1@cityshield.com

City/State/Zip: Detroit, MI 48201
Number of Private Security Personnel Hired Per Shift: TBD

Are the private security personnel (check all that apply):

[ ] Licensed
[ ] Armored
[ ] Bonded

Describe the emergency evacuation plan: please see attached

Describe the parking plan to accommodate anticipated attendance: please see attached

How will you advise attendees of parking options? Via registration on-site

Are you seeking a group parking rate? Yes

Section 8- COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?

Traffic

Have local neighborhood groups/businesses approved your event?
DTE Energy / Human - yes

Indicate what steps you have or will take to notify them of your event:
see example letter

Indicate contact names and phone numbers (for verification) or attach approved letter(s):

Ted Gillary, DAC

Section 9- EVENT SET-UP

Complete the appropriate categories that apply to the event.
Structure

How Many?
3 stages, 2 large 20x30 tents
20 10x10 tents

Size/Height

Booth

Tent (enclosed on 3 sides)
Canopy (open on all sides) 
Staging/Scaffolding 
Bleachers 
Company: 

Grill  
[ ] Gas  [ ] Charcoal  [ ] Electrical  [ ] Propane

Fireworks (Pyrotechnics)  
[ ] Aerial  [ ] Stage

Provide Sketch:

Portable Restrooms:  
[ ] Standard  [ ] ADA Accessible

Vehicles:  
- emergency  - wellness  - shuttles  - golf carts

Type/Weight:  

Other:  

NOTE: Specific requirements must be met and special approval must be received by the Detroit Fire Department.

Will additional electrical wiring need to be installed? Specify locations, voltage, amperage, and phase.  

[ ] NO

Will additional utility services be used (power, water, etc.)? Please describe.  

[ ] NO

Do you plan a fireworks display? List dates, time, location, vendor, and attach certificate of insurance.  

[ ] NO
Section 10- COMPLETE ALL THAT APPLY

Name of Sanitation Company collecting refuse and garbage?
Contact Person: DDP
Address: Phone:
City/State/Zip:

Name of company providing emergency medical services?
Contact Person: DMC & DMC RIM - Patricia Jabbi; Hokin - 313-745-9716
Address: 3990 John R.,
City/State/Zip: Detroit, MI 48201

Name of company providing porta-johns.
Contact Person: Scotties Pot Hies, Tiffany Scotties Potties.com
Address: 2740 Wick St., Phone: 734-421-4000
City/State/Zip: Romulus, MI 48174

Name of private catering company?
Contact Person: Detroit Athletic Club -
Address: 241 Madison
City/State/Zip: Detroit, MI 48226

SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. Neighborhood Signatures must be submitted with application for approval.

First Street, Grand Blvd, Second Ave, Third St, Bagley

Attach a map or sketch of the proposed area for closure.
STREET NAME: (see attached)

FROM
TO

Closure Dates:
Beg. Time:
End Time:
Reopen Date:
Time:
STREET NAME: ____________________________
FROM ____________________________
TO ____________________________
Closure Dates: ____________________________
Beg. Time: ____________________________
End Time: ____________________________
Reopen Date: ____________________________
Time: ____________________________

STREET NAME: ____________________________
FROM ____________________________
TO ____________________________
Closure Dates: ____________________________
Beg. Time: ____________________________
End Time: ____________________________
Reopen Date: ____________________________
Time: ____________________________

STREET NAME: ____________________________
FROM ____________________________
TO ____________________________
Closure Dates: ____________________________
Beg. Time: ____________________________
End Time: ____________________________
Reopen Date: ____________________________
Time: ____________________________

Requested City Equipment

Provided In: ____________________________ (year)
Current Request: ____________________________ (year)

Street Closures:

[ ] Posting no parking signs
[ ] Light pole
[ ] Electrical Services
[ ] Storage for Trailers/Trunks

Barricades are not available from the City of Detroit.

ADDITIONAL INFORMATION

Is there any additional information that you feel is important to mention regarding your event or additional requests?

The Detroit Cycling Championship is a first-rate community event that is attracting people in the community, businesses, and folks from around the globe to compete.
AUTHORIZATION & AFFADAVIT 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, understand and agree 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 regulation 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, on behalf of the Event 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.

[Signature]
1/24/19
Date

On behalf of [Company]

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.
<table>
<thead>
<tr>
<th>RACE</th>
<th>START</th>
<th>DURATION</th>
<th>PRIZES</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAC Cycling Club Race</td>
<td>8:00 AM</td>
<td>0:20</td>
<td>Medals</td>
</tr>
<tr>
<td>Juniors 10-12, 13-14</td>
<td>8:30 AM</td>
<td>0:15</td>
<td>Merch &amp; Medals</td>
</tr>
<tr>
<td>Juniors 15-16, 17-18</td>
<td>8:55 AM</td>
<td>0:25</td>
<td>Merch &amp; Medals</td>
</tr>
<tr>
<td>Women Cat. 3/4/5</td>
<td>9:30 AM</td>
<td>0:25</td>
<td>Merch &amp; Medals</td>
</tr>
<tr>
<td>Men Cat. 4/5</td>
<td>10:05 AM</td>
<td>0:30</td>
<td>Merch &amp; Medals</td>
</tr>
<tr>
<td>Masters 35+ Cat. 3/4</td>
<td>10:45 AM</td>
<td>0:25</td>
<td>$500</td>
</tr>
<tr>
<td>Men’s Cat. 3</td>
<td>11:20 AM</td>
<td>0:40</td>
<td>$1,000</td>
</tr>
<tr>
<td>Master’s 50+ 1/2/3/4</td>
<td>12:10 PM</td>
<td>0:40</td>
<td>$500</td>
</tr>
<tr>
<td>Men’s Cat. 2/3</td>
<td>1:00 PM</td>
<td>0:50</td>
<td>$1,500</td>
</tr>
<tr>
<td>Masters 35+ Cat. 1/2/3</td>
<td>2:00 PM</td>
<td>0:50</td>
<td>$1,000</td>
</tr>
<tr>
<td>Women’s Pro Cat. 1/2</td>
<td>3:00 PM</td>
<td>1:00</td>
<td>$15,000</td>
</tr>
<tr>
<td>Military Veteran (non USA Cycling)</td>
<td>4:10 PM</td>
<td>0:15</td>
<td>Medals</td>
</tr>
<tr>
<td>Kid’s Race</td>
<td>4:30 PM</td>
<td>0:15</td>
<td>Medals</td>
</tr>
<tr>
<td>Men’s Pro Cat. 1</td>
<td>5:00 PM</td>
<td>1:20</td>
<td>$15,000</td>
</tr>
</tbody>
</table>

**QUESTIONS? CONTACT SEAN BROWN AT (313) 695-7572**
EVENT NOTIFICATION

Dear Neighbor,

On Saturday, July 13, 2019, the Detroit Cycling Championship will take place in the Downtown Detroit Entertainment District, around the Beacon Park. The professional and amateur cycling competition is a USA Cycling sanctioned event featuring more than 13 races for men and women athletes throughout the day. The .8 mile race course consists of six turns and requires street closures. We are writing to inform you that street closures will begin approximately 7:00 p.m. on Friday, July 12, 2019, re-open by 5:00 a.m. of Sunday, July 14, 2019. As our valued neighbor, we wanted you to be the first to know about the upcoming race.

A race course map and draft schedule has been included for reference. Additional updates will be available in the Detroit Cycling Championship website at DetroitCycling.com.

In addition, we invite you to get engaged with this community event that will attract racers and spectators from around the world—representing 20 U.S. states and eight countries. In our second year, we hosted 415 professional and amateur cyclists to compete for more than $45K in cash prizes and primes. In the coming months, we will send you additional information to get your business involved and participate in the festivities.

Thank you for your support and we look forward to a first-rate sporting event in the city of Detroit. If you should have any questions, please contact me at +1-313-963-9200 or tedg@thedac.com.

Kind regards,

Ted Gillary
Executive Director
Detroit Athletic Club
Congratulations! The EIN has been successfully assigned.

EIN Assigned: 81-4728645
Legal Name: DAC CYCLING L3C

The confirmation letter will be mailed to the applicant. This letter will be the applicant's official IRS notice and will contain important information regarding the EIN. Allow up to 4 weeks for the letter to arrive by mail.

We strongly recommend you print this page for your records.

Click "Continue" to get additional information about using the new EIN.
2018 Emergency Action Plan

Detroit Cycling Championship

Detroit, Michigan
July 14, 2018

Contents
Emergency Action Plan
Severe Weather Policy
Public Awareness
Assessment of Course

Emergency Action Plan
An emergency situation may arise during the Detroit Cycling Championship event and this is an outline covering how to manage those situations. The race-assigned phones/radios will be the primary form of communication between race staff, course marshals, medicals staff, and
community officials (police and fire departments if present at the race location). **Emergency Action Plan Personnel – Detroit Cycling Championship**

RIM_first aid staff

Universal Ambulance – on standby

Course Marshalls

Official Race Staff (including USA Cycling race officials)

Detroit Police and Fire Officers

**Roles of the Emergency Staff Personnel:**

_RIM___ first aid staff: Assess injury or illness of individual and treat the minor scrapes and bruises that go along with bike racing (providing basic first aid, wound care, etc.), as well as evaluating/handling any major injuries that might occur and determine if more medical care is needed which may include contacting [Universal Ambulance] for medical transport.

Course Marshalls: Alert Chief Referee and medical staff of an injury/accident via the radio communications and determine appropriate action with respect to ongoing race status. Course Marshalls will also be assigned to intersections and course crossings for crowd control and safety during the bike races (see diagram on last page for course marshal stations).

Official Race Staff: Help direct crowd control in the event of a significant emergency situation.

**Basic guidelines for Emergency Team:**

**Immediate care of athlete:** Most qualified individual on the scene should provide direct acute care.

- **Life threatening:** RIM first aid staff [and/or Universal Ambulance]: provides immediate care i.e. CPR, spinal stabilization, control severe bleeding, etc.

- **Orthopedic:** RIM first aid staff [and/or Universal Ambulance]: to assess severity of injury and appropriate transport method i.e. ambulance, transport via cart to first aid tent, athlete able to walk, etc.

- **General medical:** First aid tent – located near start/finish line (Beech St and 1st St)

**EMT Activation:** This should be done as soon as the situation is deemed life threatening in any emergency situation. Either medical staff person or Race official should make the call to Universal Ambulance and/or EMT. The person calling needs to remain calm and have the following information:

- Patients name, caller’s name, phone #, location
- Severity of injuries, # of people involved
- What care is being provided
- Instructions to reach the scene

The communication to EMT will be made by cellular phone or race radio. Once the call is made either a medical staff person or race staff person needs to meet the emergency medical staff at the designated location. **Note: in no circumstances should EMT personnel or ambulance enter onto the racecourse without first consulting with the USA Cycling Chief Referee to make sure the bike race has been “neutralized” (i.e., stopped).**

**Emergency Communication Equipment:**

The main form of communication will be race-assigned radios and cellular phones and at each venue will be checked for level of reception/signal.

**Emergency Equipment:** Emergency equipment such as splints, slings, crutches, etc. will be kept in the first aid tent located near start/finish line (Beech St and 1st St)

**Spectators, Media, Family Members:** Event staff will maintain spectators at a distance to allow medical staff to provide care and emergency medical personnel access to the location. Sports information/marketing personnel will direct media to an appropriate site until a statement is available. Event officials will escort family members to a private area until medical staff is able to communicate the plan of care and give information about the incident.

**Overall:** The importance of being properly prepared cannot be stressed enough to insure the best possible care for a rider in the event of an emergency.

**Severe Weather Policy**

**Lightening/Tornado:**

The Official Race Staff in consultation with the Police Department and/or Fire Department will help to monitor weather conditions and weather alerts that may arise primarily through the use of smart phone technology. The Official Race Staff will keep the Course Marshalls informed of the weather conditions/alerts. The Official Race Staff in consultation with the Police and/or Fire Department will make the determination as to the race being delayed, postponed, etc.

*In the event of a weather interruption, the Official Race Staff will work with the race announcers and Course Marshals to notify riders and spectators of the situation.*

*DCC Staff, participants etc. will be directed into shelter in place for any adverse weather conditions or civil unrest.*

**Detroit Cycling Championship, July 14, 2018**
Event Medical Staff:
RIM first aid staff and Universal Ambulance
Coverage times: 8:00 am to 6:20 pm

Event First Aid Tent
Located near start/finish line (Beech St and 1st St)

Vehicle for Medical Staff:
Contact Universal Ambulance (Channel 10 on radio) and/or dial 911 for ambulance

Emergency Medical Personnel/Transport:
Detroit Fire Department
Located at 115 Montcalm approx .9 mile from the race Start/Finish area and access to all areas of the racecourse via streets that intersect the course.

Nearest Trauma One Hospital:
Detroit Receiving (Level 1)
4201 St. Antoine Detroit, MI 48201
Located approximately 1.9 miles from the Race Course (insert directions to hospital here)

Nearest Hospital: Detroit Receiving Hospital
Located approx. 1.9 miles from the Race Course. (Insert directions to hospital here)

Important Numbers: *
Universal Ambulance (O) 586.939.4350
Detroit Police
Emergency 911.
Non-Emergency (313) 596.1301 (3rd Precinct)
Detroit Fire Department (non-emergency) (313) 596.1660
DMC Receiving General number (313) 745.4696

The Detroit Cycling Championship
July 14, 2018
Day-of Contact Sheet/Race Schedule/Race Course

<table>
<thead>
<tr>
<th>Name</th>
<th>Title/Affiliation</th>
<th>Cell Phone</th>
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<tr>
<td>Local Bike Race Staff</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Title/Role</td>
<td>Phone</td>
</tr>
<tr>
<td>-----------------------------</td>
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<td>-------------</td>
</tr>
<tr>
<td>Kristin Ritter</td>
<td>DAC</td>
<td>313.394.6349</td>
</tr>
<tr>
<td>Rob Barr</td>
<td>DAC</td>
<td>313.475.6872</td>
</tr>
<tr>
<td>Kevin Heidisch</td>
<td>DAC</td>
<td>313.220.5201</td>
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<tr>
<td></td>
<td><strong>City of Detroit</strong></td>
<td></td>
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<tr>
<td></td>
<td><strong>Race Organizers</strong></td>
<td></td>
</tr>
<tr>
<td>Tom Schuler</td>
<td>Event Director</td>
<td>414-899-9048</td>
</tr>
<tr>
<td>Ken Voyles</td>
<td>Marketing Director</td>
<td>313.442.1034</td>
</tr>
<tr>
<td>Andrew Frey</td>
<td>Crew Chief</td>
<td>513 807 5385</td>
</tr>
<tr>
<td>Beth Rice</td>
<td>Stage Manager</td>
<td>908 887 3739</td>
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<td></td>
<td><strong>USA Cycling Race Officials</strong></td>
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</tr>
<tr>
<td>Mitch Beckner</td>
<td>Chief Referee, USA Cycling</td>
<td>937 875 0081</td>
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<td><strong>Detroit Police/Fire Depts.</strong></td>
<td></td>
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<tr>
<td>Conrad Petty</td>
<td>Captain, Downtown Services</td>
<td>313.743.7476</td>
</tr>
<tr>
<td>Mark Carson</td>
<td>Supervising Event</td>
<td>313.805.6960</td>
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<tr>
<td></td>
<td><strong>(First Aid)</strong></td>
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<tr>
<td>Rehabilitation Institute of</td>
<td>Nadia Al’Naimi</td>
<td>248.830.9703</td>
</tr>
<tr>
<td>Michigan (RIM)</td>
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<td><strong>Ambulance</strong></td>
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<tr>
<td>Universal Ambulance</td>
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<td>(O) 586.939.4350</td>
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<tr>
<td>Event</td>
<td>Time</td>
<td>Duration</td>
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<tr>
<td>------------------------------</td>
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</tr>
<tr>
<td>DAC Cycling Club Race</td>
<td>8:00 AM</td>
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<tr>
<td>Juniors 10-12, 13-14</td>
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<td>Women Cat. 3/4/5</td>
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<tr>
<td>Women’s Pro Cat. 1/2</td>
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<td>Military Veteran (non USA Cycling)</td>
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<tr>
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<tr>
<td>Men’s Pro Cat. 1</td>
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Race Course
## Race Schedule

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</tr>
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</table>
Race Course
Hi there Bethanie,

I just realized that I did not attached one file with the streets. As mentioned, the turn by turn covers the course, actual street closures. As mentioned, the time closures would be 12midnight to 10pm on July 13. As indicated on the map.

Plum from 3rd to Grand River

3rd from Plum to Bagley

Bagley from 3rd to Grand River

1st from Bagley to Grand River

Grand River from Service Drive to Cass

W. Elizabeth from grand River to Cass

Adams from Grand River to Cass.

Cass Avenue is open for people to access the parking lots

Access to the MGM garage on 3rd Street remains open during the event.

We rent Olympia Developments parking lot for Pro Racer parking.

Thank you!

Kristin
CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFRS 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).

PRODUCER
Fairly Consulting Group, LLC
1800 S. Washington, Suite 400
Amarillo, TX 79102

CONTACT INFO
Fairly Group Certificates
PHONE: (806) 376-4761
PHONE Ext: 806-337-1859
E-MAIL: certa@fairlygroup.com

INSURED
USA Cycling, Inc.
210 USA Cycling Point, Suite 100
Colorado Springs, CO 80919

INSURER(S) AFFORDING COVERAGE
Lexington Insurance Company
19437

COVERAGES

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 PERMIT, 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.

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<th>ADD'L INSURED</th>
<th>SUBROGATION</th>
<th>POLICY NUMBER</th>
<th>POLICY EFF DATE</th>
<th>POLICY EXP DATE</th>
<th>LIMITS</th>
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<tr>
<td>A</td>
<td>COMMERCIAL GENERAL LIABILITY</td>
<td>CLAIMS-MADE</td>
<td>X Occur</td>
<td>1/15375404</td>
<td>12/31/2018</td>
<td>12/31/2019</td>
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<td>ANY AUTO OWNED</td>
<td>SCHEDULED AUTOS</td>
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Job 2019-913

Endorsement LEXDOC21 (LX8404) SCHEDULE OF NAMED INSURED: Event Organizers and/or Promoters are Named Insureds. It shall be a condition of coverage that all organizers/promoters for whom coverage is afforded under this policy execute a USAC Event Permit Application and coverage will be afforded only for the specific event and date(s) on the permit.

The General Liability policy includes a blanket automatic additional insured endorsement that provides additional insured status to the certificate holder only when there is a written contract between a named insured and the certificate holder that requires such status. Please see attached endorsement LX8409

SEE ATTACHED ACORD 101

CERTIFICATE HOLDER

City Of Detroit
Two Woodward Ave
Detroit, MI 48226

CANCELLATION

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

ACORD 25 (2016/03) © 1988-2015 ACORD CORPORATION. All rights reserved.
The ACORD name and logo are registered marks of ACORD
This endorsement, effective 12:01 AM 12/31/2018

Forms a part of policy no.: 015375404

Issued to: USA CYCLING, INC.

By: LEXINGTON INSURANCE COMPANY

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

(Based on CG2026 04/13)

This endorsement modifies insurance provided by the following:

COMMERCIAL GENERAL LIABILITY POLICY

SCHEDULE

Name of Additional Insured Person(s) or Organization(s)

AS REQUIRED BY WRITTEN CONTRACT

Information required to complete this Schedule, if not shown above, will be shown in the Declarations

A. Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
   1. In the performance of your ongoing operations; or
   2. In connection with your premises owned by or rented to you.

However:
   1. The insurance afforded to such additional insured only applies to the extent permitted by law;
   2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III - Limits Of Insurance:

   If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:
   1. Required by the contract or agreement; or
### ADDITIONAL REMARKS SCHEDULE

**AGENCY**
Fairly Consulting Group, LLC

<table>
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<tr>
<th>POLICY NUMBER</th>
<th>NAIC CODE</th>
<th>EFFECTIVE DATE</th>
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</thead>
<tbody>
<tr>
<td>SEE PAGE 1</td>
<td>SEE P 1</td>
<td>SEE PAGE 1</td>
</tr>
</tbody>
</table>

**NAMED INSURED**
USA Cycling, Inc.
210 USA Cycling Point, Suite 100
Colorado Springs, CO 80919

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:
(06/14) - Additional Insured - Designated Person or Organization.

Event Number: 2019-913
Event Name: Detroit Cycling Championship
Event Location: Detroit, MI
Event Date(s): 07/13/2019
Includes Kids Fun Ride
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations

All other terms and conditions of the policy remain the same.

Authorized Representative
Petition of DAC Cycling L3C, request to hold "Detroit Cycling Championship" on July 13, 2019 from 6:00 AM to 8:00 PM with temporary closures of Grand River, Bagley, 1st and 3rd streets.

REferred to the following Department(s):

DPW - City Engineering Division  Planning and Development Department
Mayor's Office  Police Department
Fire Department  Municipal Parking Department
Recreation Department  Business License