



TEMPORARY USE PERMIT APPLICATION

1. Project Name: Apple Day
2. Applicant: Penrose Park and Rec Address: 401 Park Place
City: Penrose State: Colo Zip Code: 81240
Telephone #: 719-429-7002 Facsimile # none
Email Address: treasurer@penroseparkrec.com

Please read the entire application form prior to completion of this application

Property owners and other potential applicants are encouraged to meet informally or communicate with Planning and Zoning Department staff to gain familiarity with the application process prior to formal submittal of an application and to continue the communications throughout the application process. For more details on application meetings, see Section 8.3 of the Fremont County Zoning Resolution (FCZR).

A special event which is to be conducted in whole or part within Fremont County (*non-incorporated areas*) such as spectator events, athletic events, carnivals, circuses, concerts, fairs, flea markets, public recreational events, tent meetings, or other similar uses with similar impacts which are for public participation, requires a Temporary Use Permit (TUP).

An application fee as adopted by resolution of the Fremont County Board of County Commissioners (Board) shall accompany this application.

The applicant shall provide **one (1) original document and an electronic copy (either CD or flash/thumb drive)** and all of its attachments. After submittal, the Department will review the application and all attachments and prepare a Department Submittal Deficiency and Comment Letter (D & C Letter). The letter will state the submittal deficiencies, Department comments and or questions about the application, which must be addressed by the applicant.

The Fremont County Department of Planning and Zoning (Department) shall be entitled to refuse any application for a temporary use permit which is not made on the form provided by the Department, which is incomplete, or is made later than thirty (30) working days prior to the regularly scheduled Board meeting at which the application is proposed to be heard. The application shall not be considered complete unless all information required in the application is provided at the time it is filed.

Once the Department has determined that the application is complete, the application will be scheduled on an agenda of the Board for their consideration of approval. Prior to issuance of a temporary use permit, the event shall be approved by the Board at a regularly scheduled meeting and all contingencies or requirements shall be met or provided. The Board does have the right to request review and recommendations from the Fremont County Planning Commission (Commission) and/or other pertinent entities, if the Board determines that it is necessary for its review. The Board may require professional review at the applicant's expense if deemed necessary by the Board. The Board may require the applicant to provide various professional studies and/or statements concerning the event in order to fully understand the impact of the proposed event. This could result in a longer review process and require more time to complete.

Under certain circumstances, the Department may have approval authority over an annual event which has been granted TUP approval by the Board consecutively for the three (3) previous years. See Section 8.16.2 of the Fremont County Zoning Resolution for requirements.

Attachments can be made to this application to provide expanded narrative for any application item including supportive documentation or evidence for provided application item answers. Please indicate at the application item that there is an attachment and label it as an exhibit with the application item number, a period and the number of the attachment for that item (i.e. the attached document providing evidence in support of the answer given at application item number 12 would be marked - Exhibit 12.1).

For specific regulatory requirements the applicant should refer to the appropriate sections of the Fremont County Zoning Resolution (FCZR) which can be viewed on the Internet at:

<http://www.fremontco.com/planningandzoning/zoningresolution.pdf>

2. Please provide a general description of the event: Apple Day is a yearly event and the park will be having Vendors, food vendors will be reported to Amy at Health Dept, Games, entertainment, contest's, fireworks at 8:30, with fire dept stand by.
3. What is the general location and/or street address of the event? 401 Park Place, which is the whole blk and side streets Illinois and Grant St.
4. What are the dates that the proposed event is scheduled to occur? First Saturday of Oct. which is the 5th.
5. What are the hours of the day that the proposed event is scheduled to occur? Set up at 7:30a with Park opening for public at 12:00p
6. Will there be any signs used to advertise the event? Yes If yes, please provide a statement as to the size (type), location, and how many: Banners hanging in the park on corner of Illinois and Park Place and on corner of Grant St and Park Place, off HWY115,
7. Please provide a statement as to how litter will be disposed and include documentation consisting of agreements and/or contracts with companies providing necessary facilities. the park has several trash containers through out the park and maintenance person to pick up as need and place in Dumpster
8. Address crowd control before, during and after the event. Hard to state since we don't usually get that many people to attend but we will have SO's and hired security officers, who will also be working at the wine and cider tent
9. What are the anticipated off-site impacts that will be created by the proposed event? Parking?
10. Please provide a statement as to a drinking water plan which includes documentation consisting of agreements and signed contracts with companies providing necessary facilities. **NOTE: This will require review and approval by the Fremont County Environmental Health Officer.**
the Park will have bottled water available, along with vendors selling water

11. Please provide a statement as to a sanitation plan which includes documentation of agreements and signed contracts with companies providing necessary facilities. **NOTE: This will require review and approval by the Fremont County Environmental Health Officer.** We have two restrooms, one for men and one for females. Female bathroom has three stalls, mens has two urinals and one stall

12. Please provide a statement as to a concession plan, if any, which includes a list of vendor names and required permits. If vendors are used, please provide documentation of sales tax license. **NOTE: This will require review and approval by the Fremont County Environmental Health Officer.** _____

13. Please provide an emergency service operation plan addressing what emergency services are proposed for the event. The emergency services shall include any agreements, signed contracts, with appropriate agencies or companies and a specific contact person with contact information. _____
Penrose Fire Dept, 1-2 volunteers who are MA's,also have First aid kit, an AED and Narcam on site

14. Will there be any street closures proposed in connection with the special event (*or other provisions deemed appropriate with respect to the provision for safe and adequate vehicular and pedestrian traffic flow and parking associated with the conduct of the special event*)? **Note: If Street closures are proposed, signed approval by the Director of the Fremont County Department of Transportation or Colorado Department of Transportation is required.** _____
and Grant Street to Park Place for a truck show. I was informed we need to provide traffic cones to block off street, they don't have any for our use.

15. Please provide a statement as to how the proposed event parking will be addressed. Such statement will include how many off-street parking spaces will be provided along with the size of spaces and parking area location. **Note: If on-street parking is proposed, signed approval by the Director of the Fremont County Department of Transportation or Colorado Department of Transportation as may be appropriate is required.**
there is street parking, inside Park area (parking for vendors), and usually people park somewhere else and Walk to park after the parade

16. Please provide a statement as to how vehicular and pedestrian traffic for the proposed event will be handled: _____

17. **The following items shall be attached to this application and marked appropriately as exhibits:**
 - a. A drawing of the property on which the event will be held locating items such as natural features (waterways, cliffs, etcetera), existing improvements (structures, driveways, septic systems, etcetera) and components of the special event (stages, parking areas, vendor areas, etcetera).
 - b. Documentation as to acceptance of a fire protection plan, signed by the appropriate agency representative along with a copy of said plan.

- c. Documentation that the Sherriff's Office has been notified of the event and any proposed street closures. There are two (2) options for notification. See FCZR Section 8.16.1.19.1 for details.
- d. Documentation that the Colorado State Patrol has been notified of the event and any proposed street closures. There are two (2) options for notification. See FCZR Section 8.16.1.20.1 for details.
- e. Documentation that the Director of the Fremont County Department of Transportation has been notified of the event and any proposed street closures. There are two (2) options for notification. See FCZR Section 8.16.1.21.1 for details.
- f. If the subject property gains direct access from a roadway under the jurisdiction of Colorado Department of Transportation (CDOT) or if deemed necessary by the Department, documentation that CDOT has been notified of the event and any proposed street closures. There are two (2) options for notification. See FCZR Section 8.16.1.22.1 for details.
- g. Documentation from the Environmental Health Officer as to acceptance and approval of application items number 10, 11 and 12, signed by the appropriate agency representative.
- h. Proof of general liability insurance for the event in amounts deemed appropriate by the Board of County Commissioners.
- i. Cash, surety or other bond deemed necessary and appropriate by the Board of County Commissioners to ensure that the property affected by the special event will be cleaned to the reasonable satisfaction of the County and that damage associated with the conduct of the special event may be repaired or remedied without cost to the County. *If a waiver of this item is requested it shall be in writing, with justification, at the time of application.*

18. Additional Requirements:

- a. The Department of Planning and Zoning shall have the right to require publication, notice to property owners and posting in accordance with Section 8.4.2.1 if it is deemed necessary.
- b. The Board of County Commissioners has the right to:
 - 1) Refer any application for Temporary Use Permit to the Planning Commission requesting its review and recommendations at a regular meeting.
 - 2) Refer any application for Temporary Use Permit to any entity the Board deems could have significant input regarding the potential impacts of the proposed Temporary Use Permit.
 - 3) Right to obtain professional review, at the applicant's expense, for any aspect of the proposed event as deemed necessary by the Board.
 - 4) Require the applicant to submit the following information if in their opinion it is necessary, to fully understand the impacts of the proposed Temporary Use Permit:
 - a) An environmental impact study/statement;
 - b) A roadway impact analysis study;
 - c) A drainage study;
 - d) A socioeconomic impact study/statement;
 - e) Studies, comments, referrals to agencies or professionals whose area or jurisdiction of expertise is applicable and germane to the use being proposed.

By signing this Application, the Applicant, or the representative acting with due authorization on behalf of the Applicant, hereby certifies that all information contained in the application and any attachments to the Application, is true and correct to the best of Applicant's knowledge and belief.

Applicant understands that any required private or public improvements imposed as a contingency for approval of the application may be required as a part of the approval process.

Fremont County hereby advises Applicant that if any material information contained herein is determined to be misleading, inaccurate or false, the Board of Commissioners may take any and all reasonable and appropriate steps to declare actions of the Board regarding the Application to be null and void.

Signing this Application is a declaration by the Applicant to conform to all plans, drawings, and commitments submitted with or contained within this Application, provided that the same is in conformance with the Fremont County Zoning Resolution.

Roberta Newton _____
Applicant Printed Name Signature *R Newton* _____ Date _____



Penrose Fire Department
207 Broadway,
Penrose, CO 81240

Fremont County Sheriff
100 Justice Center Rd,
Cañon City, CO 81212

Colorado State Patrol
Troop 2A
600 West 3rd St/ Suite C
Florence, CO 81226

CDOT
1170 Red Canyon Rd.
Canon City, Co 81212

To whom it may concern:

Penrose Park & Recreation, located at 401 Park Place, Penrose Colorado is holding an Annual event on October 5th, 2024.

We are request that the **Fire Department**, be on standby for the event and to monitor the **Fireworks**.

We are also requesting the **Sheriffs office to assign a couple of Deputies** to also monitor things in the park.

We are **requesting to close off Grant Street from Park Place to 6th St**, in hopes to Have a Truck Show. There is no homes or business that are on that street, that would be affected by this street closure.

This is to Notify all of the above of the plans for Oct.5th, the Annual Apple Day Event.

Questions, please call Lacy Baker at 719-369-4426 or Roberta Newton 719-429-7002

Information on our event:

On October 5th, 2024, Booth vendors and entertainment will also begin to set up their booths in various locations inside the park.

Volunteer(s) will be tasked with supervising activities. Other activities that are being planned are a chili cook-off competition, an apple pie eating contest, and a wine/cider garden. We would like to host a small semi-truck show on the street. The purpose of the truck show would be for the competition itself, an additional activity for the attendees, and a fundraiser for a local family in need.

We are hoping to draw a large crowd and wanted all necessary emergency services to be aware of what is happening during Apple Day Event

To conclude our festivities, people can sit and watch fireworks by J&M Displays, which is the same company that has done the show for years, so they are familiar with the park and the layout, and they work under NFPA 1123.

For the fireworks show, we request the fire department work with J&M Displays and be on standby in case of emergency.

All of the above personnel are invited to join the festivities. We, at the park, appreciate your time and efforts in our community.

Sincerely,

Penrose Park Board of Directors

Environmental Legal Liability Certificate Holder Declaration

Master Policy Number: ER00A9V24
Certificate Number: 24PL-12091-3378
Named Member:
Penrose Park & Recreation District
401 Park Place
Penrose, CO 81240

Insurer: Aspen Specialty Insurance Company
Coverage Period: 1/1/2024 to EOD 12/31/2024
Broker of Record:
NO BROKER

Claims-Made Coverage:

1. **First Party Protection:** For coverages 1.a – 1.d, the pollution incident must be first discovered by the responsible insured and reported to the insurer during the policy period.
 - a. **Clean up:** Covers clean-up costs resulting from a pollution incident on, at, under, or migrating from or through an insured location.
 - b. **Emergency Response:** Covers emergency response cost resulting from a
 - c. **Pollution Incident:** (i) on, at, under or migrating from or through an insured location; (ii) caused by transportation; or (iii) caused by covered operations.
 - d. **Environmental Crisis:** Covers crisis cost resulting from a crisis event.
 - e. **Business Interruption:** Covers business interruption cost and extra expense incurred by the insured and solely and directly by a pollution incident on, at or under an insured location, provided the pollution incident results in clean-up cost covered by this policy.

2. **Legal Liability Protection:** For coverages 2.a – 2.d, the claim for damages because of such bodily injury or property damage, or a claim for such clean-up cost, is first made against an insured and reported to the insurer during the policy period.
 - a. **Insured Location:** Covers sums the insured becomes legally obligated to pay: (1) as damages because of bodily injury or property damage; or (ii) for clean-up costs, resulting from a pollution incident on, at under, or migrating from or through an insured location.
 - b. **Non-owned Site:** Covers sums the insured becomes legally obligated to pay (1) as damages because of bodily injury or property damage; or (ii) for clean-up costs, resulting from a pollution incident on, at under, or migrating from or through any non-owned site.
 - c. **Transportation:** Covers sums the insured becomes legally obligated to pay (1) as damages because of bodily injury or property damage; or (ii) for clean-up costs, resulting from a pollution incident caused by transportation.
 - d. **Covered Operations:** Covers sums the insured becomes legally obligated to pay (1) as damages because of bodily injury or property damage; or (ii) for clean-up costs, resulting from a pollution incident caused by covered operations or completed operations.

Limits of Liability: \$1,000,000 Each Pollution Incident
\$5,000,000 Total Policy and Program Aggregate – Shared All Members
Sublimits: \$500,000 Environmental Crisis Aggregate
\$250,000 Business Interruption Aggregate
\$100,000 Perfluorinated Compounds Aggregate

Member Deductible: \$1,000 Each Pollution Incident

Retroactive Date: January 1, 2009 (unless otherwise specified)

Defense Costs: Legal defense expenses and settlement shall erode the Limits of Liability

Partial List of Exclusions:

Asbestos, Contractual Liability, Criminal Fines and Criminal Penalties, Cross Liability (Insured vs. Insured), Damage to Insured's Product/Work, Divested Property, Employers Liability, Fraud or Misrepresentation, Intentional Non-Compliance, Internal Expenses, Known Conditions, Lead-Based Paint, Material Change in Risk, Non-Owned Disposal Sites, Underground Storage Tanks and Above Ground Storage Tanks excluded unless scheduled, Vehicle Damage, War or Terrorism, Workers Compensation, Lead at all gun or shooting ranges, Maintenance, Upgrades, Improvements or Installations where required by law, Microbial Matter with carveback for sudden and accidental water intrusion; 10-day discovery period/30 day reporting period, Prior Claims, Communicable Disease

Policy Forms:

ASPENV110 06 17	Environmental Legal Liability Policy
ASPENV098 11 17	Cap on Losses from Certified Acts of Terrorism
ASPENV340 05 17	Insured Location(s) Schedule Endorsement
ASPENV310 05 17	Known Conditions Exclusion Endorsement
ASPENV316 05 17	Legal Expense Aggregate Limit of Liability Endorsement
ASPENV117 11 17	Self-Insured Retention Aggregate (Erosion by Underlying Policies)
ASPENV117 11 17	Sewage Back-up Deductible Amendatory Endorsement
ASPENV117 11 17	Perfluorinated Compounds, Sublimit and Retroactive Date Amendatory Endorsement
ASPENV117 11 17	Cancellation Amendatory Endorsement
ASPENV117 11 17	Microbial Matter Exclusion Endorsement
ASPENV117 11 17	Maintenance, Upgrade, Improvements or Installations Exclusion Endorsement
ASPENV117 11 17	Retroactive Date All Coverage Endorsement
ASPENV117 11 17	Microbial Matter Sudden and Accidental Coverage Limitation Amendatory Endorsement
ASPENV117 11 17	Insured Location/Acquired Property Endorsement
ASPENV117 11 17	Public Entity Amendatory Endorsement
ASPENV322 05 17	Minimum Earned Premium Endorsement
ASPENV341 05 17	Named Insured Schedule Endorsement
ASPENV118 11 17	Nuclear, Biological, Chemical, or Radiological Terrorism Exclusion
ASPENV003 05 17	Other Insurance Condition Amendatory Endorsement
ASPER334 01 14	Prior Claim Exclusion Endorsement
ASPENV338 04 19	Schedule of Crisis Management Firms Endorsement
ASPENV431 11 17	Aspen Environmental Emergency Response Hotline
SNCO 1021	Colorado Surplus Lines Notice
ASPENV117.EL.0920.X	Communicable Disease Exclusion

Additional Endorsements Applicable to Named Member:

This Certificate Holder Declaration is made and is mutually accepted by the CSD Pool and the Named Member subject to all coverage terms under the Pollution Liability Policy #EV00A9V23 issued by Aspen Specialty Insurance Company. This Certificate represents a brief summary of coverages. Please refer to the Master Coverage Document for all coverage terms, conditions and exclusions.

Countersigned by:  _____
Authorized Representative

Volunteer Accident Certificate Holder Declaration

Master Coverage Policy Number:
XHH000001

Insurer:
QBE Insurance Company

Certificate Number: 24PL-12091-3378

Coverage Period: 1/1/2024 to EOD 12/31/2024

Named Member:
Penrose Park & Recreation District
401 Park Place
Penrose, CO 81240

Broker of Record:
NO BROKER

Eligible Persons:

Registered* community volunteers while performing their assigned duties for the Member Districts supervised and sponsored volunteer activities excluding those volunteers compensable under workers' compensation coverage including, but not limited to, volunteer board members acting in their administrative duties for the Member District and volunteer firefighters.

Indemnity Benefits:

Accidental Death and Dismemberment:
Loss must occur within 365 days of the covered accident

<u>Covered Loss</u>	<u>Benefit Amount</u>
Loss of Life	\$15,000
Loss of Two or More Hands or Feet	\$50,000
Loss of Sight of Both Eyes	\$50,000
Loss of One Hand or Foot and Sight in One Eye	\$50,000
Loss of Speech and Hearing	\$50,000
Quadriplegia	\$50,000
Paraplegia	\$50,000
Hemiplegia	\$50,000
Loss of One Hand or Foot	\$25,000
Loss of Sight in One Eye	\$25,000
Loss of Speech	\$25,000
Loss of Hearing in Both Ears	\$25,000
Loss of Thumb and index Finger of the Same Hand	\$12,500
Loss of Thumb and Index Finder of the Same Hand	\$12,500
 All Member Aggregate – All Conditions	 \$500,000

Accident Medical Expense Benefits:
Full Excess Medical Expense (Other Health Care Plan Reduction 50%)

Maximum for all Accident Medical Expense	\$25,000
First Covered Expense Incurred within	90 days after a covered accident
Benefit Period	One year from the date of the covered accident
Deductible Each Covered Accident	\$0

Indemnity Benefits continued:

Covered Expense

Benefit Amount

In-Patient Hospital Services ICE or CCU Benefit	100%, up to two times the average semi-private room rate
Daily In-Hospital Benefit	100% of the average semi-private room rate
In Hospital Miscellaneous Services Benefit	100%
Ambulatory Medical Center	100%
Emergency Room Treatment	100%
Physician Services – Surgery Benefit	100%
Physician Services – Assistant Surgeon	100%
Physician’s Surgical Facility	100%
Second Opinion or Consultation	100%
Physician’s Assistant	100%
Anesthesia Benefit	100%
Inpatient Visits	100%
Office Visits	100%
Outpatient X-Ray, CT Scan, MRI & Laboratory Tests	100%
Outpatient Physiotherapy	100%
Nursing Services	100%
Ambulance Services	100%
Medical Equipment Rental	100%
Medical Services and Supplies	100%
Dental Services	100%
Prescription Drug Benefit	100%

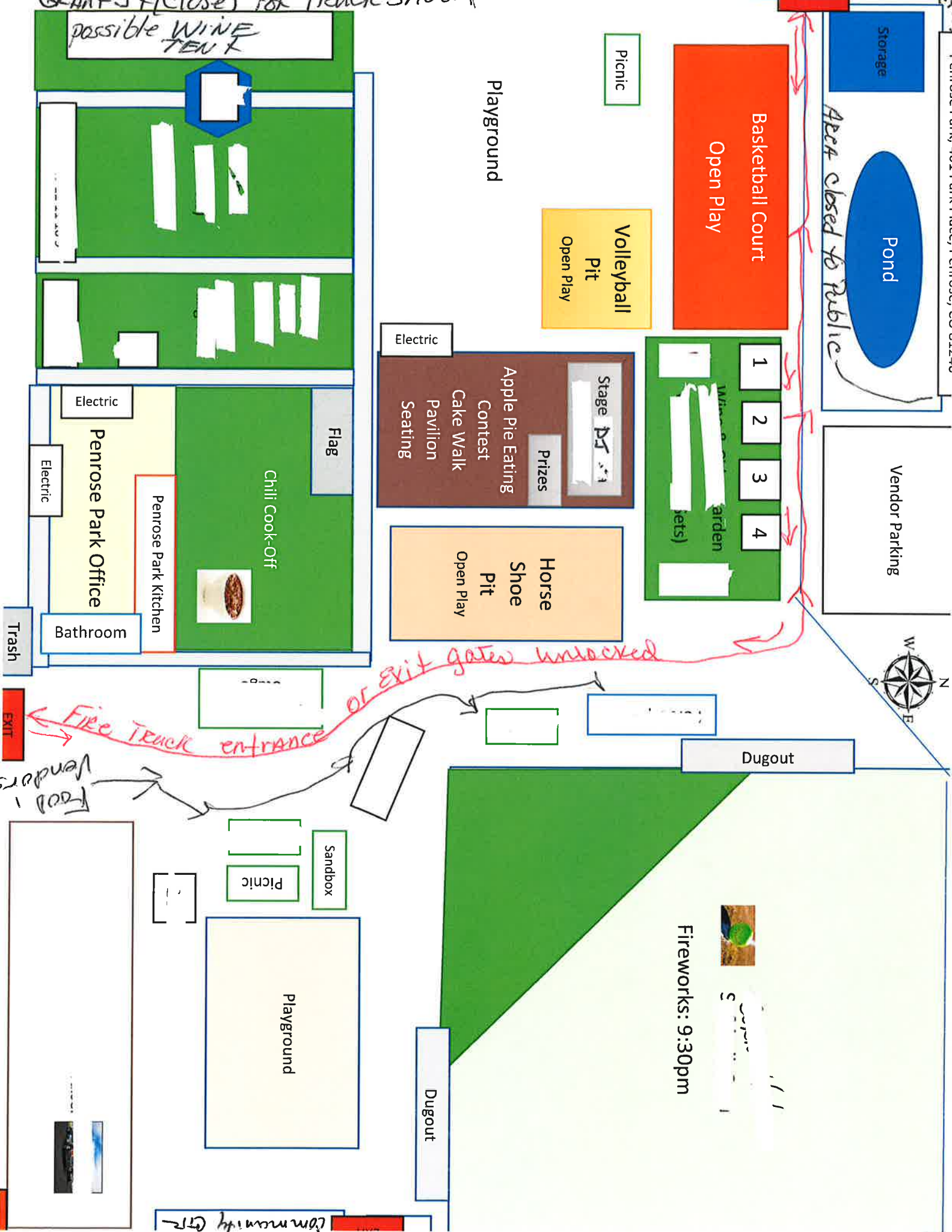
Report all Claims to: Phone: (800) 318-8870, ext. 1
Email: claims@csdpool.org

This Certificate Holder Declaration is made and is mutually accepted by the CSD Pool and the Named Member subject to all terms which are made a part of the Volunteer Accident Coverage Policy. This Certificate represents only a brief summary of coverages. Please refer to the Master Coverage document for actual coverage, terms, conditions, and exclusions.

Countersigned by:  _____
Authorized Representative

Grant St (Close) for TRUCK SHOW

possible WINE TENT



Area closed to Public

Basketball Court
Open Play

Volleyball
Pit
Open Play

Stage
Prizes
Apple Pie Eating
Contest
Cake Walk
Pavilion
Seating

Horse
Shoe
Pit
Open Play

Wine Garden
(Tents)
1
2
3
4

Chili Cook-Off

Penrose Park Office
Penrose Park Kitchen

EXIT



Fireworks: 9:30pm

Dugout

Playground

Sandbox

Picnic

Community CTR

Fire Truck entrance or exit gates unlocked

Food Vendors

possible WINE TENT

Grant St (Close) for TRUCK SHOW

File w/ P # 2



FREMONT COUNTY FIRE PROTECTION PLAN AND DISTRICT COMMENT FORM

The Fremont County Subdivision Regulations and Fremont County Zoning Resolution require a fire protection plan be submitted with many different types of applications, at the time of application submittal. In order to provide consistency in the information received, it shall be required that these plans be submitted on this form.

The Fremont County Department of Planning and Zoning (Department), Fremont County Planning Commission (Commission) and Fremont County Board of County Commissioners (Board) take into consideration the responses of the Applicant and the District during their respective review process.

Attachments can be made to this form to provide expanded narrative for any application item including supportive documentation or evidence for provided form item answers. Please indicate at the form item that there is an attachment and label it as an exhibit with the application item number, a period and the number of the attachment for that item (*as an example, the first attached document providing evidence in support of the answer given at application item number 4 would be marked - Exhibit 4.1, the fifth attached document supporting the narrative provided for application item 4 would be marked - Exhibit 4.5*). Exhibit numbers should be placed in either the lower right hand area or the upper right hand area of the exhibit.

If the subject property is not in a fire protection district, only applicants' information and map are required. A copy of the Colorado State Forest Service Wildfire Hazard Area Map with the subject property clearly and accurately located, shall be attached and marked as Exhibit A.

APPLICANT INFORMATION

1. Project Name PENROSE "APPLE DAY"

2. Type of application:

- | | |
|--|--|
| <input type="checkbox"/> Zone Change #1 | <input type="checkbox"/> Special Review Use Permit |
| <input type="checkbox"/> Zone Change #2 – Use Designation Plan | <input type="checkbox"/> Conditional Use Permit |
| <input type="checkbox"/> Zone Change #2 – Final Development Plan | <input checked="" type="checkbox"/> Temporary Use Permit |
| <input type="checkbox"/> Commercial Development Plan | <input type="checkbox"/> Change of Use of Property |
| <input type="checkbox"/> Commercial Development Modification | <input type="checkbox"/> Subdivision Preliminary Plan |
| <input type="checkbox"/> Expansion of an existing Business or Industrial Use | <input type="checkbox"/> Minor Subdivision |

3. The subject property is located at:

401 PARK PLACE, PENROSE, CO 81240

Address and or General Location (*If general location only is used, it will be required that a legal description of the subject property be attached Marked as Exhibit 3.1*) An exhibit is attached.

4. Fire protection will be provided in what manner and with what resources? STAND BY
FOR FIREWORK DISPLAY @ APPROX 8:00PM

5. The source of water for fire protection is:

--- Water District – Name of District: PENROSE WATER DISTRICT

--- Well - Colorado Division of Water Resources Well Permit Number: _____
Is the well approved for fire protection? Yes --- No Please explain: _____

---Cistern - What is the cistern capacity? _____ Gallons - What is the water source for filling the cistern? _____

6. What is the distance from the subject property to the nearest fire hydrant? _____

7. What public roadways provide access to the subject property? GRANT ST + PARK PLACE

8. How many accesses to public roadways will the subject property have? TWO

9. Are the interior roadways existing and or proposed for the subject property adequate for fire vehicle access? Yes --- No Please explain by providing right-of-way and surface widths, length of roadway, surface types for all interior existing and proposed roadways and turning radii for cul-de-sacs. _____

10. What are the existing and or proposed interior roadway names? GRANT + PARK PLACE

11. Is the subject property located within a fire protection district? Yes --- No
If yes, please provide the district name: _____

If the subject property is not located within a fire protection district please answer the following questions and the form will be considered completed for submittal. If the subject property is located within a fire protection district then answers to the following will not be required, however the remainder of the form shall be addressed by a representative of the fire protection district in which the subject property is located.

a. What is the name of the fire protection district closest to the subject property? PENROSE
Fire Department

b. What is the distance from the subject property to the nearest fire protection district boundary? _____

c. Is it logical and feasible to annex the subject property to a fire protection district?
 Yes ----- No Please explain: _____

d. What types of fire protection improvements are proposed for the subject property and or structures to be housed on the property? Please explain: _____

By signing this Application, the Applicant, or the agent/representative acting with due authorization on behalf of the Applicant, hereby certifies that all information contained in the application and any attachments to the Application, is true and correct to the best of Applicant's knowledge and belief.

Applicant understands that any required private or public improvements imposed as a contingency for approval of the application may be required as a part of the approval process.

Fremont County hereby advises Applicant that if any material information contained herein is determined to be misleading, inaccurate or false, the Board of Commissioners may take any and all reasonable and appropriate steps to declare actions of the Board regarding the Application to be null and void.

Signing this Application is a declaration by the Applicant to conform to all plans, drawings, and commitments submitted with or contained within this Application, provided that the same is in conformance with the Fremont County Zoning Resolution.

ROBERTA Newton
Applicant Printed Name

R Newton
Signature

8-12-24
Date

Owner Printed Name

Signature

Date

FIRE PROTECTION AUTHORITY INFORMATION

1. The name of the fire protection authority is: _____
2. Name of contact person: _____
Title: _____ Telephone: _____
3. The name and address of the responding fire station is: _____

4. The distance from the subject property, by public roadway, to the responding fire station is: _____
5. The estimated response time to the subject property is: _____
6. The location of the closest fire hydrant to the subject property is: _____

7. Is the existing hydrant size and location adequate for the existing neighborhood and the proposed development? Yes --- No Please explain: _____

8. Are the existing public roadways accessing the subject property adequate for fire vehicle access? Yes --- No Please explain: _____

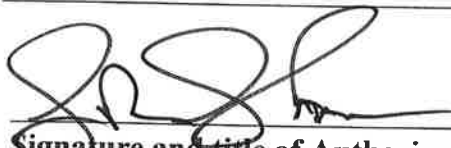
9. Are the interior roadways existing and or proposed for the subject property adequate for fire vehicle access? Yes --- No Please explain: _____

10. Are the proposed fire protection measures adequate for any existing or proposed structures to be housed on the subject property? Yes --- No Please explain: _____

11. What are the wildfire hazard classifications for the subject property, as prepared by the Colorado State Forest Service? _____

12. Recommendations concerning fire protection in general, fire protection improvements, suggested road names, for this project are as follows: **NOTE:** Be sure to list type, size and location of improvements recommended (i.e.; hydrants, water lines, cisterns, dry hydrants, roadway improvements, etc.). **Please indicate whether recommendations or requirements are the result of codes or regulations, and provide supporting information which will assist the Planning Commission and the Board of County Commissioners to determine whether to adopt any or all of the recommendations as requirements of the permit.**

F.I.D ACCESS WILL BE ALLOWED ON BROADWAY IF NECESSARY. AS WELL AS EMS

 FFAD BOMBA DIRECTOR 16 AUG 24
Signature and title of Authorized Fire Protection Representative Date



FREMONT COUNTY
DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT
201 N 6TH STREET
CANON CITY, CO 81212
(719) 276-7450 FAX NUMBER (719) 276-7451
amy.jamison@fremontco.com

Amy

Event Coordinator Application

TURN IN APPLICATION AT LEAST 2 WEEKS PRIOR TO EVENT

EVENT INFORMATION

Name of the Event: APPLE DAY

Date(s) of the Event: October 5th, 2024

Location of the Event: 401 PARK PLACE

Hour of the Event: (Days and times) 7:30 setup to open to public 12:00p

Expected number of patrons: Approx 100

Expected peak day(s) if event is longer than 1 day: 1-4pm, small crowd @ 8:00pm

Anticipated Number of Food Booths: Approx 5 (Complete Vendor Information List and attach)

Event Coordinators Name: LACY BAKER

Coordinator's Phone Number: (719-) 369-4426

Coordinator's Fax Number: NONE

Coordinator's Mailing Address: 401 PARK PLACE, P

City Penrose State CO Zip Code 81240

Coordinator's E-mail address: president@penrosenparkrec.com

Contact Person during the Event (if different from above): _____

Contact phone number for the day of the Event: (_____) _____

Water Supply:

- There is access to a potable water taps on site.
- Vendors must bring their own water supplies.

Wastewater:

- There will be liquid waste collection tanks / receptacles on site.
- Vendors must arrange for their own wastewater disposal.

Electricity:

- There will be no electricity supplied on site.
- There is access to electricity on site.
- Generators will be provided for vendor use.
- Vendors are allowed to use generators on site.

Trash / Refuse:

- There will be trash receptacles throughout the event for the public.
 - There will be dumpsters on site for vendor and public trash removal.
- How often will they be serviced? As needed

Toilet Facilities:

- Water carrying public restrooms. How many? 2
 - Portable toilets. How many? _____
- How often will they be serviced? _____

Hand Wash Facilities:

- Water carrying public restrooms. How many? _____
 - Portable hand wash stations. How many? _____
- How often will they be serviced? _____

Other Services:

- Refrigerated truck
- Commissary kitchen (Provide a list of available equipment in kitchen.)
- Ice

TEMPORARY EVENT SITE MAP

Provide a labeled map of the entire Temporary Event area and include the following:

- Toilet facilities (portable and fixed)
- Hand washing facilities
- Trash containers
- Electrical hook-up points and generator locations
- Potable water taps for vendors
- Location of all food preparation and service areas on the event grounds
- Food booth vendors
- Roadways, sidewalks, and walkways
- Refrigerated truck (if applicable)
- Commissary kitchen (if applicable)
- Petting Zoo (if applicable)

Vendor Information List

Booth #	Vendor/Booth Name	Contact Person	Contact Phone	Contact Email	Menu Items
	Sypur 2 Kettle Corn	Jennifer Thruay	719 214-5546	Jenlovesken1989@gmail.com	
	Danotas Hot Dog Cart	Anastu Smith	760 508-9630		Hot Dogs
	Rooney Mt. Barkley	Jamie Higzel	719 220 4870		DOG freests
	Baryard BBQ	Tom			
	Run a muck farm	Jessica petts	719 280 7258	Jessmye23@gmail.com	cottage
	mommas Betty Barn	Amenda kaise-	719 437 0545	mommasbettybarn@gmail.com	cottage
	lulu's Sweet treats	Elizabeth Schlip	719 371 4797	luz@penrose.ca	cottage
	Ashley Rickman		719 389 8089	ashley1984marie@yahoo.com	
	Brent buchanan				
	Zero G Quail Farms LLC		555 227 6773	zerquailfarms@gmail.com	Quail eggs

Closed To Public

Garage

Shed

Pond

Shed

Basketball

Playground & Games

Volleyball

Stage

Agenda For Evening
Contact
S. L. White Ave

Handicap Access

Wine & Cider Garden

Carrels

Vendors

Vendors

Part Kitchen

Restrooms

Shed

Softball Field

Prosecco Shop

Shed

Band

Food Trucks

Popcorn

Concession

March

Peirce Community Building