



## CITY COUNCIL WORKSHOP AGENDA

**July 19, 2023 – 4:00 pm**

*This is an in-person meeting at Saugatuck City Hall, 102 Butler St, Saugatuck, MI 49453.  
The meeting will also be available live, virtually on Zoom.*

1. **Call to Order**
2. **Roll Call**
3. **Agenda Changes** (*Additions/Deletions*)
4. **Guest Speaker**
5. **Public Comment on Agenda Items Only** (*Limit 3 minutes*)
6. **Discussion Items:**
  - A. Resolution 230724-A- Investment Services *Pg.2*
  - B. Hardscaping, Heavy Landscaping ROW *Pg.7*
  - C. HDC Reappointment *Pg.8*
  - D. AT&T Wireless Proposal *Pg.15*
  - E. Special Event- Art in the Park Saugatuck *Pg.24*
  - F. Special Event- Labor Day Bridge Walk *Pg.31*
  - G. Special Event- Sidewalk & Studio Sale *Pg.37*
  - H. Right of Way Signage- SCA *Pg.42*
  - I. Right of Way Signage- First Congregational Church *Pg.45*
  - J. Public Art Display *Pg.48*
  - K. Dune Ridge Update
7. **Public Comments** (*Limit 3 minutes*)
8. **Closed Session:**
  - A. Pursuant to MCL 15.268(e) and (h) to discuss confidential written legal opinion regarding the ongoing lawsuit with Dune Ridge SA, LP.
    - a. *Sample Motion:* Motion to enter closed session to discuss confidential written legal opinion regarding the ongoing lawsuit with Dune Ridge SA, LP.
9. **Correspondence**
  - A. G Corwin Stoppel *Pg.53*
10. **Council Comments**
11. **Adjourn** (*Voice Call*)

### **NOTICE:**

Join online by visiting:

<https://us02web.zoom.us/j/2698572603>

Join by phone by dialing:  
**(312) 626-6799 -or-  
(646) 518-9805**

Then enter "Meeting ID":  
**2698572603**

Please send questions or comments regarding meeting agenda items prior to meeting to:  
[ryan@saugatuckcity.com](mailto:ryan@saugatuckcity.com)

Requests for accommodations or interpretive services must be made 48 hours prior to this meeting. Please contact Saugatuck City Clerk at 269-857-2603 or [Wolters@saugatuckcity.com](mailto:Wolters@saugatuckcity.com) for further information.



## City Council Agenda Item Report

**FROM:** Peter Stanislawski, Finance

**TO:** Ryan Heise, City Manager

**MEETING DATE:** July 24, 2023

**SUBJECT:** Resolution 230724-A

**DESCRIPTION:**

The City's investment policy section 7.0 requires the City Council to approve by resolution the authorized listing of institutions, approved depositories, and brokers/dealers. The attached resolution authorizes qualified institutions to provide investment services for the city and authorizes the specific city officers listed to act as signatories on behalf of the city.

**BUDGET ACTION REQUIRED:**

N/A

**SAMPLE MOTION:**

Approve Resolution 240724-A authorizing qualified institutions to provide investment services for the city and authorizing specific city officers to act as signatories on behalf of the city.

**CITY OF SAUGATUCK  
COUNTY OF ALLEGAN  
STATE OF MICHIGAN**

**RESOLUTION NO. 230724-A**

**A RESOLUTION AUTHORIZING QUALIFIED INSTITUTIONS  
TO PROVIDE INVESTMENT SERVICES FOR THE CITY  
AND AUTHORIZING CITY OFFICERS TO ACT AS  
SIGNATORIES ON BEHALF OF THE CITY**

Council Member \_\_\_\_\_, offered the following resolution and moved for its adoption, seconded by Council Member \_\_\_\_\_:

WHEREAS, the City has adopted an Investment Policy (“Policy”) pursuant to Public Act 20 of 1943, which delegates the authority to manage the City’s investment program to the City Treasurer; and

WHEREAS, the Policy provides that the City Treasurer shall maintain a listing of financial institutions and broker/dealers authorized to provide investment services on behalf of the City; and

WHEREAS, the City has determined that Consumers Credit Union, Macatawa Bank, Fifth Third Bank, Huntington National Bank, Mercantile Bank, Michigan Class, Chase Bank, Grand River Bank, Old National Bank, First National Bank, First National America and Horizon Bank meet the requirements for qualified financial institutions or broker/dealers set forth in the Policy; and

WHEREAS, the City wishes to authorize these financial institutions or broker/dealers to provide investment services for the City; and

WHEREAS, Section 7.0 of the Policy provides that the authorized listing of financial institutions, approved depositories, and broker/dealers shall be approved annually by a resolution of the City of Saugatuck City Council; and

WHEREAS, the City further wishes to authorize the City Mayor, City Mayor Pro-Tem, City Manager, and City Treasurer to act as signatories on behalf of the City; and

WHEREAS, the City wishes to authorize and permit the authorized listing of financial institutions, approved depositories, and broker/dealers to allow these signatories, on behalf of, and as an authorized person of the City, to exercise all of the powers necessary to invest City funds in accordance with the Policy;

NOW, THEREFORE, IT IS RESOLVED:

1. The City designates the following financial institutions, depositories, and broker/dealers (“Qualified Institutions”) as depositories for the funds of the City and approves and

authorizes the Qualified Institutions to provide investment services on behalf of the City:

- a. Consumers Credit Union
  - b. Macatawa Bank
  - c. Fifth Third Bank
  - d. Huntington National Bank
  - e. Mercantile Bank
  - f. Michigan Class
  - g. Chase Bank
  - h. Old National Bank
  - i. Horizon Bank
  - j. Grand River Bank
  - k. First National Bank
  - l. First National America
2. The City authorizes the following City Officers to act as signatories (“Authorized Signatories”) on behalf of the City:
- a. Scott Dean, Mayor
  - b. Lauren Stanton-Sharar, Mayor Pro-Tem
  - c. Ryan Heise, City Manager
  - d. Peter Stanislawski, City Treasurer
3. The City authorizes and permits the Qualified Institutions to allow the Authorized Signatories, on behalf of and as an authorized person of, the City, to exercise any powers necessary to invest City funds in accordance with the Policy, including, but not limited to the following:
- a. Open any deposit account(s) in the name of the City;
  - b. Sign checks, drafts, notes, acceptances or other orders for the payment of money or otherwise withdraw or transfer funds on deposit with the Qualified Institutions;
  - c. Endorse checks, drafts, notes, bills, certificates of deposit, or other instruments owned or held by the City for deposit in any account established at a Qualified Institution, or for collection or discount by a Qualified Institution.
  - d. Borrow money on behalf of and in the name of the City;
  - e. Sign, execute, and deliver promissory notes or other evidences of indebtedness;
  - f. Endorse, assign, transfer, mortgage, or pledge property now owned or hereafter owned or acquired by the City as security for sums borrowed;
  - g. Guarantee payment of all bills received, negotiated or discounted;
  - h. Waive demand, presentment, protest, notice of protest and notice of non-payment;
  - i. Enter into a written lease for the purpose of renting, maintaining, accessing and terminating a Safe Deposit Box or Night Drop (Depository) Box;
  - j. Authorize the debiting of any of the City’s accounts for the purpose of purchasing an investment instrument at any of the Qualified Institutions;
  - k. Authorize the holding of investment instruments in a Qualified Institution’s safekeeping area;
  - l. Authorize a Qualified Institution to distribute or reinvest investment funds upon maturity; and

- m. Make any other contracts, agreements, stipulations, or orders which the signatories may deem advisable to effectuate the terms of the Policy.
4. The City authorizes the Authorized Signatories to receive investment rate information via e-mail at the following email addresses:
    - Ryan Heise, City Manager  
ryan@saugatuckcity.com
    - Peter Stanislowski, City Treasurer  
peter@saugatuckcity.com
  5. The City authorizes the Qualified Institutions to honor, receive, certify, or pay all instruments signed by the Authorized Signatories in accordance with this Resolution and agrees to the terms and conditions of an account agreement properly executed by the Authorized Signatories.
  6. Any instrument, document, or other thing authorized to be executed as provided for in this Resolution shall only be effective if signed by at least two of the Authorized Signatories.
  7. This Resolution shall be effective until express written notice of its rescission, revocation, modification or replacement is received by the Qualified Institutions.
  8. The City authorizes the Mayor and Clerk to execute any and all documents necessary to effectuate the terms of this Resolution.
  9. All resolutions and parts of resolutions insofar as they conflict with the provisions of this Resolution are rescinded.

YEAS: Council Members: \_\_\_\_\_

NAYS: Council Members: \_\_\_\_\_

ABSTAIN: Council Members: \_\_\_\_\_

ABSENT: Council Members: \_\_\_\_\_

RESOLUTION NO. 230724-A DECLARED ADOPTED.

Signed:

\_\_\_\_\_  
Scott Dean, Mayor

Dated: \_\_\_\_\_

\_\_\_\_\_  
Jamie Wolters, City Clerk

CERTIFICATION

I, Jamie Wolters, the duly appointed clerk of the City of Saugatuck do hereby certify the foregoing is a true and complete copy of a resolution adopted by the Saugatuck City Council at a regular meeting held \_\_\_\_\_, 2023, in compliance with the Open Meetings Act, Act No. 267 of the Public Acts of Michigan, 1976, as amended, the minutes of the meeting were kept and will be or have been made available as required by said Act.

Attest:

\_\_\_\_\_  
Jamie Wolters, City Clerk



## City Council Agenda Item Report

**FROM:** Ryan Cummins, Director of Planning and Zoning

**MEETING DATE:** July 19, 2023

**SUBJECT:** Hardscaping and Heavy Landscaping in City Right of Way

**DESCRIPTION:**

Complaints have been received and staff have personally observed instances where the installation of hardscaping and heavier landscaping have taken place without proper licensing. In response, City staff have initiated enforcement actions to address these violations.

While the City has established ordinances allowing licenses for certain items in the right of way, there is a lack of clear guidance for more permanent hardscaping and heavier landscaping. This issue raises several important considerations, including:

- Access and improvements to City infrastructure
- Safety
- Visual aesthetics
- Liability (both personal injury and property damage claims)
- Ongoing maintenance

City Attorney Chris Patterson and I will be present at the workshop meeting. We intend to engage in a discussion with the City Council and seek your guidance in order to ensure the appropriate management and regulation of hardscaping and heavier landscaping within the City right of way.

**LEGAL REVIEW:**

Staff has discussed and consulted with the City Attorney on various right of way issues. City Attorney, Chris Patterson, will be present at the workshop meeting.

**SAMPLE MOTIONS:**

N/A at this time.



## City Council Agenda Item Report

**FROM:** Ryan Cummins

**MEETING DATE:** July 24, 2023

**SUBJECT:** Historic District Commission Reappointment

**DESCRIPTION:**

Two members of the Historic District Commission have terms that expire on August 1. The City Clerk provided notice that the City is accepting applications.

Historic District Commissioner, John Cannarsa, has applied for reappointment. Mayor Dean is recommending that John Cannarsa be reappointed to the Historic District Commission.

Historic District Commissioner, Daniel Pannozzo, is not applying for reappointment at this time. An application has been received from Laura Godfrey. An interview with Ms. Godfrey will be held soon. Rosemary Johnson previously interviewed. Staff will be checking with Ms. Johnson to see if she is still interested in being considered for the HDC as well.

**BUDGET ACTION REQUIRED:**

N/A

**COMMITTEE/COMMISSION REVIEW:**

**LEGAL REVIEW:**

N/A

**SAMPLE MOTION:**

Motion to reappoint John Cannarsa to the Historic District Commission with a term ending August 1, 2026.



## Jamie Wolters

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**From:** no-reply@weebly.com  
**Sent:** Wednesday, June 14, 2023 10:52 AM  
**To:** Jamie Wolters  
**Subject:** New Form Entry: Application for Boards & Commissions

You've just received a new submission to your [Application for Boards & Commissions](#).

[Mark as Spam](#)

### Submitted Information:

---

**Name**

John Cannarsa

**Email**

john@cannarsadesign.com

**Home Phone Number**

**Mobile Phone Number**

6166100907

**Address**

333 Culver Street  
PO Box 729  
Saugatuck, MI 49453

**Current Employer**

Self

**Occupation/Position**

Home Designer

**Business Phone Number**

6166100907

**Business Reference Name**

Patsy Ramsey

**Business Reference Phone Number**

989-573-3312

**Business Reference Email**

accounting@cannarsadesign.com

**Does your employer have any business dealings with the City which might present a conflict of interest**

Yes

**If yes, please explain:**

If a client I am working with has a project in the District, I would make it known to the Commission.

**Are you a City of Saugatuck resident?**

Yes

**Are you a registered City of Saugatuck voter?**

Yes

**Serving on a board or commission can be time-consuming. Are you committed to attending all regularly scheduled meetings?**

Yes

**On which boards and/or commissions would you be willing to serve? .Historic District Commission**

1

**Please describe any qualifications, expertise or special interests that relate to your possible appointment:**

Same as previous.

**Digital Signature**

John Cannarsa

## Jamie Wolters

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**From:** no-reply@weebly.com  
**Sent:** Saturday, June 10, 2023 8:54 AM  
**To:** Jamie Wolters  
**Subject:** New Form Entry: Application for Boards & Commissions

You've just received a new submission to your [Application for Boards & Commissions](#).

[Mark as Spam](#)

### Submitted Information:

**Name**

Laura Godfrey

**Email**

godfreylaura10@gmail.com

**Home Phone Number****Mobile Phone Number**

708-308-2853

**Address**

550 Francis Street  
Box 185  
, Michigan Saugatuck

**Current Employer**

Self

**Occupation/Position**

Partner

**Business Phone Number**

**Business Reference Name**

**Business Reference Phone Number**

**Business Reference Email**

**Does your employer have any business dealings with the City which might present a conflict of interest**

No

**If yes, please explain:**

**Are you a City of Saugatuck resident?**

Yes

**Are you a registered City of Saugatuck voter?**

Yes

**Serving on a board or commission can be time-consuming. Are you committed to attending all regularly scheduled meetings?**

Yes

**On which boards and/or commissions would you be willing to serve? .Historic District Commission**

1

**Please describe any qualifications, expertise or special interests that relate to your possible appointment:**

I grew up in the Historic District of Oak Park, Illinois, a few blocks from Frank Lloyd Wright's Home and Studio. Immersed in architecture and design with a love of history, craftsmanship, and all things of enhancement.

Thank you for the opportunity. I look forward to serving with respect and competence.

Regards,  
Laura J. Godfrey

**Digital Signature**

Laura Godfrey

**Submitted Files**

**Resume**

[resumelaurafinalfinal.docx](#)



## City Council Agenda Item Report

**FROM:** Ryan Heise, City Manager  
**MEETING DATE:** July 19, 2023  
**SUBJECT:** AT&T WiFi Proposal for site survey

**DESCRIPTION:**

The City of Saugatuck continues to have issues with telecommunication in the “downtown area.” Verizon downtown small cell seems to be working well, but complaints with AT&T service continue. Attached is a proposal to provide a site survey in the downtown area to provide Wi-Fi communication through AT&T. This will allow:

- 1) An option for business owners to have a point of sale (POS) alternate or total connectivity.
- 2) Tourists to connect and take bandwidth off AT&T cell towers in the region.
- 3) To allow our local visitors bureau (CVB) to have a landing page for the Wi-Fi connectivity.
- 4) The City offer this service free of charge; however the city could consider charging a fee for Wi-Fi connectivity.

Proposed cost not to exceed \$10,000.00.

**LEGAL REVIEW:**

None.

**SAMPLE MOTIONS:**

Approve the AT&T proposal for a comprehensive site survey at a cost not to exceed \$10,000.00.



**Pricing Schedule  
AT&T Network Integration Services  
Services and Equipment Resale**

Agreement No.:  
AT&T Network Integration Tracking ID: GBS400137  
Document Version#: 02/02/2023

<b>CUSTOMER Legal Name</b>	<b>AT&amp;T Corp. ("AT&amp;T") (designate other entity if signing entity other than AT&amp;T Corp)</b>	<b>AT&amp;T Branch Sales Contact Name</b>
	<b>AT&amp;T</b>	<b>Name: Chad Bruder</b>
<b>CUSTOMER Address</b>	<b>AT&amp;T Corp. Address and Contact</b>	<b>AT&amp;T Branch Sales Contact Information</b>
Name: City of Saugatuck Telephone: 269-857-2603 Street Address: 102 Butler St City: Saugatuck State / Province: MI Country: US Domestic / Intl / Zip Code 49453	One AT&T Way Bedminster NJ 07921-0752 Contact: Master Agreement Support Team Email : <a href="mailto:mast@att.com">mast@att.com</a>	Address: 114 Division Ave N City: Grand Rapids State / Province: MI Country: US Domestic / Intl / Zip Code: 49503 Fax: Email: chad.bruder@att.com Sales/Branch Mgr: Rick Lockwood SCVP Name: Greg Fike
<b>CUSTOMER Contact</b>	<b>AT&amp;T Address and Contact</b>	<b>AT&amp;T NI Contact Information</b>
Name: Ryan Heise Title: City Manager Address 102 Butler St State/ Province: MI Domestic / Intl / Zip Code: 49453 Phone: 269-857-2603 E-mail: ryan@saugatuckcity.com	Name: Donna Mundy Telephone: 770-743-3765 Street Address: 11700 Great Oaks Way City: Alpharetta State / Province: Georgia Country: US Domestic / Intl / Zip Code: 30022	Name Name: Title: Address City/State/Zip Country: Phone: E-mail:
<b>CUSTOMER Billing Address</b>	<b>Shipping address/Contact</b>	
Name: City of Saugatuck Title: City Manager Address 102 Butler St City/State/Zip Saugatuck, MI. 49453 Country: US Phone: 269-857-2607 E-mail: ryan@saugatuckcity.com	Name: Title: Address City/State/Zip Country: Phone: E-mail:	

Upon mutual execution hereof, this Pricing Schedule for AT&T Network Integration Equipment Resale ("NI Pricing Schedule") becomes part of the Master Agreement between AT&T and Customer referenced above (the "Agreement").

**AGREED:  
CUSTOMER:**

By: \_\_\_\_\_  
(Authorized Agent or Representative)

(Typed or Printed Name)

(Title)

(Date)

**AGREED:  
AT&T**

By: \_\_\_\_\_  
(Authorized Agent or Representative)

(Typed or Printed Name)

(Title)

(Date)

ATTUID: dm291m





**Pricing Schedule**  
**AT&T Network Integration Services**  
**Services and Equipment Resale**

**1. DEFINITIONS**

All other capitalized terms used but not defined in this NI Pricing Schedule have the meaning given them in the Agreement.

**“Purchased Equipment”** means equipment to which title transfers from AT&T to Customer. Purchased Equipment includes any internal code required to operate such Equipment.

**2. SERVICES AND PURCHASED EQUIPMENT**

This NI Pricing Schedule states the terms and conditions governing Orders for AT&T services (“Services”) and Purchased Equipment. Attached to this NI Pricing Schedule is a SOW or an EOL (collectively, “Attachments”) which become effective and incorporated into this NI Pricing Schedule upon the execution hereof. AT&T may subcontract work to be performed hereunder but shall retain responsibility for all such work.

**3. ATTACHMENTS**

- A. Unless earlier terminated as described below, an Attachment is deemed terminated when the parties’ respective obligations have been fully performed or when it is otherwise terminated according to its terms.
- B. In the event of an inconsistency among terms, the order of priority is: (i) the applicable Attachment; (ii) the NI Pricing Schedule and (iii) the Agreement.

**4. INTELLECTUAL PROPERTY RIGHTS**

- A. All intellectual property and proprietary rights arising by virtue of AT&T’s performance of the Services are and will remain the sole and exclusive property of AT&T, and neither ownership nor title to any such property will pass to Customer.
- B. Customer shall retain those copies of any reports produced and furnished to Customer by AT&T (“Reports”), and Customer is hereby granted, under AT&T’s copyrights, the perpetual, non-exclusive, personal and non-transferable right to reproduce and modify Reports for Customer’s own internal business purposes. For avoidance of doubt, “internal business purposes” exclude public distribution, resale to third parties and revenue generation purposes.
- C. AT&T hereby grants to Customer the non-exclusive, personal, and non-transferable right to use any items other than Reports produced and furnished to Customer by AT&T under this NI Pricing Schedule, solely for Customer’s own internal business purposes during the term of this NI Pricing Schedule, or for such other purposes as may be mutually agreed in writing by the parties.
- D. Except as otherwise specified herein, no other right or license to or under any of AT&T’s intellectual property rights is either granted or implied under this NI Pricing Schedule.

**5. WARRANTY**

The provision of Services and any deliverables hereunder shall be performed in a workmanlike manner that would meet commercial industry standards in the field to which the work pertains, as well as any standards set forth in the applicable SOW.

**6. NON-SOLICITATION**

Customer agrees not to solicit for employment any personnel of AT&T or its subcontractors or agents performing Services hereunder for one (1) year following the termination of this NI Pricing Schedule, or the applicable SOW, without the prior written consent of AT&T; this shall not restrict the ability of Customer to interview and hire personnel unrelated to the Services, or personnel that respond to general public solicitations made in the ordinary course of business.

**7. TERM AND TERMINATION**

This NI Pricing Schedule shall remain in effect until terminated by either party on not less than thirty (30) days’ prior written notice to the other party; *provided that*, the terms and conditions of this NI Pricing Schedule shall continue to govern, through completion of performance (or earlier termination), all Attachments in effect on this NI Pricing Schedule’s termination date. Termination charges, if any, shall be as specified in the applicable Attachment.

**8. PURCHASED EQUIPMENT TERMS**

- A. Orders for Purchased Equipment shall be submitted by Customer to AT&T in written format and shall contain all information required for AT&T to fulfill such Order and shall contain a reference to this NI Pricing Schedule and the applicable AT&T quote. Any information, terms and/or conditions, or other language contained in any document(s) or purchase order(s) furnished by Customer to AT&T in excess of or outside of such information or in conflict with any terms and conditions contained in this NI Pricing Schedule and/or the applicable Attachment(s) are void. AT&T will notify Customer by email whether it has accepted the Order after validation within five (5) business days after receipt of the Order. AT&T reserves the right not to accept an Order.
- B. Customer acknowledges and agrees that AT&T’s ability to deliver Purchased Equipment is contingent upon the supply and delivery schedules of each of the manufacturers. AT&T shall have no liability for delays in any delivery schedule. Title and risk of loss to Purchased Equipment shall pass to Customer upon shipment from AT&T’s Purchased Equipment supplier; Customer is responsible for all shipping-related charges, which AT&T



**Pricing Schedule**  
**AT&T Network Integration Services**  
**Services and Equipment Resale**

shall invoice to Customer at two percent (2%) of the total purchase price of the Order or actual cost, whichever is greater, except that for Orders requiring expedited shipment, in which case it will be the greater of four (4%) percent of Customer's total purchase price or actual cost; and charges incurred, if any, for storage of Purchased Equipment following delivery to the agreed location are the sole responsibility of Customer and are not included in shipping charges.

- C. AT&T shall pass through to Customer any warranties for Purchased Equipment and Vendor Software available from the manufacturer or licensor. The manufacturer or licensor, and not AT&T, is responsible for any such warranty terms and commitments. ALL VENDOR SOFTWARE AND PURCHASED EQUIPMENT IS OTHERWISE PROVIDED TO CUSTOMER ON AN "AS IS" BASIS.

**9. LICENSES AND THIRD PARTY MAINTENANCE**

Purchased Equipment, Vendor Software and maintenance resold to Customer hereunder may be subject to additional license terms and/or other requirements or restrictions imposed by the manufacturer, supplier or publisher. Customer is solely responsible for ensuring its adherence to such terms, requirements, and restrictions, and is deemed to have accepted them upon receipt of the Purchased Equipment or Vendor Software, or on commencement of the maintenance.

**10. LIMITATION OF LIABILITY**

For purposes of this NI Pricing Schedule and Attachments placed hereunder, any limit or cap on liability contained in the "Limitations of Liability" article 6.1(a)(v) of the Agreement is superseded by the following: EACH PARTY'S LIABILITY HEREUNDER SHALL BE LIMITED TO PROVEN DIRECT DAMAGES NOT TO EXCEED THE NET PURCHASE PRICE PAID BY CUSTOMER FOR SERVICES AND/OR PURCHASED EQUIPMENT UNDER THE ATTACHMENT THAT GAVE RISE TO THE LIABILITY. This shall not limit Customer's responsibility for the payment of all charges properly due under the NI Pricing Schedule. AT&T shall have no duty to defend, indemnify and hold Customer harmless for claims arising from the infringement of patents or trademarks or the violation of copyrights by Purchased Equipment, Vendor Software and/or maintenance.

**11. Privacy Terms and Conditions**

11.1. Customer represents and warrants that it has appropriate rights to provide End User data to AT&T in connection with the Service. Customer expressly grants AT&T permission to access information contained in application layer 7 for the sole purpose of managing the performance of the Wi-Fi network.

11.2. AT&T agrees that, in performing the network management function, it will:

- Use or monitor End User data shared with AT&T only for network management purposes and for providing metrics reports, consistent with the AT&T Privacy Policy; and
- Establish data retention protocols so that AT&T retains data shared with it for as long as reasonably necessary for network management purposes.

11.3. Customer agrees that in connection with the network management function, it will:

- Use or monitor End User data made available through the network management function of the Service only for network management purposes, unless it secures additional consent from End Users, or has another lawful basis for processing the data. Purposes beyond the network management function include, but are not limited to, marketing, advertising, and the examination of content and communications;
- Obtain any legally required employee or End User consents, or establish other lawful bases, for the processing or use of End User data, and to assist with this and for guidance purposes only, the attached Exhibit A is a form for providing notice and obtaining End User consent;
- Use only Customer SSIDs;
- Present the End User with Customer's terms of service and applicable privacy policy;
- Establish data retention protocols so that data Customer processes is retained for no longer than is reasonably necessary for network management purposes; and
- Not access, use, or share content of communications, content of email or texts, content of shopping carts, or search term queries, etc.

11.4. Customer is responsible for the way the data is used by Customer; and its employees, guests, and representative's access to and use of the data, content, or communications generated by this Service.

11.5. To the extent that a website or online service is directed to or likely to collect personal information from children under the age of thirteen, Customer agrees to comply with the federal Children's Online Privacy Protection Act and provide parental notice and advance parental consent prior to collecting such personal information.

1.

12. **ICX Switch Warranty** - For ICX switches (excluding removable optics and LEDs), a limited lifetime warranty will begin on the Start Date and continuing for as long as the original End User continues to own and use the CommScope branded equipment, as set forth below.

**How to Request an RMA**



**Pricing Schedule**  
**AT&T Network Integration Services**  
**Services and Equipment Resale**

For return material authorizations, please download the **RMA Request Form**, at [www.arris.com/support/repair-and-return](http://www.arris.com/support/repair-and-return) and email the completed Form to [TAC.Helpdesk@commscope.com](mailto:TAC.Helpdesk@commscope.com).

You may also reach the TAC team via phone.

North America +1-888-944-4357

Outside North America +1-215-323-2345

Spanish Language Support (215) 323-2346 (available M-F 8A-5P EST with translation services available outside of those hours)

Be sure to have the following information ready about the defective unit:

1. Defective Part Number & Serial number
2. Symptom (Detailed description of the failure, including when the product failed (i.e., initial deployment or after a period of time)
3. Company name & ship-to address
4. Contact name, e-mail and a valid phone number

Note: RMA is valid for 30 days.

**13. Wireless Products Warranty** - To obtain the benefit of the foregoing limited warranties, the original purchasing customer must follow the process documented in the CommScope Warranty Guidelines, which include instructions for obtaining a Return Materials Authorization (RMA) number.

- Indoor access points have a limited lifetime warranty
- Outdoor wireless access points have a (one) 1-year warranty

**How to Request an RMA**

For return material authorizations, please download the **RMA Request Form**, at [www.arris.com/support/repair-and-return](http://www.arris.com/support/repair-and-return) and email the completed Form to [TAC.Helpdesk@commscope.com](mailto:TAC.Helpdesk@commscope.com).

You may also reach the TAC team via phone.

North America +1-888-944-4357

Outside North America +1-215-323-2345

Spanish Language Support (215) 323-2346 (available M-F 8A-5P EST with translation services available outside of those hours)

Be sure to have the following information ready about the defective unit:

- 1. Defective Part Number & Serial number**
2. Symptom (Detailed description of the failure, including when the product failed (i.e., initial deployment or after a period of time)
3. Company name & ship-to address
4. Contact name, e-mail and a valid phone number

Note: RMA is valid for 30 days.



**Pricing Schedule  
AT&T Network Integration Services  
Services and Equipment Resale**

**EXHIBIT 1: STATEMENT OF WORK**

**5. Introduction**

This SOW between **AT&T Corp.** ("AT&T") and City of Saugatuck ("Customer") is attached to the NI Pricing Schedule and made a part thereof upon execution.

AT&T reserves the right to withdraw this SOW or modify the prices and any other terms and conditions, including, but not limited to, any section of this SOW (i) if the SOW is not signed by Customer and AT&T by (date), and/or (ii) the engagement does not commence within thirty (30) calendar days of the Effective Date.

**6. Scope of Work**

**6.1 Services**

AT&T will provide Site Survey to locations designated by Customer located at 102 Butler St  
City: Saugatuck State / Province: MI("Site(s)"). Services and/or Equipment not specifically provided for hereunder are outside the scope of this SOW.

**7. On-Site Survey** AT&T will:

- (a) Identify obvious health and safety issues which may affect the installation process
- (b) Assess whether there is space for the potential WLAN equipment (switches, controllers)
- (c) Assess cabling routes and obstructions
- (d) Provide further information including measurements of
- (e) Use a spectrum analysis tool to measure the current RF conditions
  - a. Recommended access point locations
- (f) Identify requirement for WLAN equipment placement (ceiling, wall mount, and wall plate), considering aesthetics, cabling and power
- (g) Identify any specific requests that are outside of normal scope or present specific scope issues

**3. Customer Responsibilities**

Customer is responsible for the following:

- Provide identity and contact information for Customer Project Manager, who shall serve as primary interface to the AT&T Project Manager
- Perform the appropriate Site preparation activities when applicable
- Provide Customer Resources On-Site during installation
- Provide sign-off on the Project Implementation Plan
- Designate an authorized billing contact
- Provide AT&T with a signed LOA when requested

**4. Project Governance**

**4.1 Change Control Process** *Either Party must submit change requests to contractual documents in writing. The party requesting the change must submit a written request to the other party and the receiving party shall issue a written response within five (5) business days of the receipt of the request, including whether the receiving party accepts or rejects the request and/or any changes to the Terms and Conditions.*

**4.2 Engagement Contacts**

	<b>Customer</b>	<b>AT&amp;T</b>
Name	Ryan Hiess	Chad Bruder
Title	City Manager	City:
Address	102 Butler St, Saugatuck, MI	114 Division Ave N , Grand Rapids, MI
Contact Information (Phone/Email)	269-857-2607, ryan@saugatuckcity.com	chad.bruder@att.com

**4.3 Fees and charges**

<b>Description</b>	<b>Fees and Charges</b>	<b>Notes</b>
Site Survey Subtotal	\$10,000	One-Time

**4.4 Additional Pricing Terms and Conditions**

- (a) **Defined Scope.** Pricing is based on the currently defined scope. Any additions or changes to this SOW will necessitate changes in pricing. Pricing herein assumes no project delays will occur that would require AT&T to stop work. AT&T will not be held financially responsible for project delays outside of its control.
- (b) **Invoicing.** AT&T will invoice the Service as defined herein. AT&T will invoice Services monthly and will cover any one-time charges or expenses incurred during the previous calendar month.



**Pricing Schedule**  
**AT&T Network Integration Services**  
**Services and Equipment Resale**

- (c) **Travel and related Expenses.** Charges do not include expenses for AT&T travel to Customer's facilities. Standard business expenses (e.g., transportation, food, lodging) incurred by AT&T in connection with delivery of the Services will be billed at cost as a separate line item on Customer's invoice. AT&T personnel will incur travel expenses only after receiving permission from Customer's Project Manager.
  - (d) **Time and Material ("T&M") Rate.** In the event that the scope of work changes from this SOW or AT&T is requested to perform Services outside of Normal Business Hours, AT&T will bill Customer at a T&M rate of two-hundred fifty dollars (\$250.00) per hour per AT&T consultant for the additional time spent on the change requests. All such out of scope matters will be handled via the Change Control process outlined herein.
- (a) Termination**
- (b) Customer may not terminate this SOW for any reason other than for uncured AT&T's material breach.**
  - (c) In the event Customer terminates this SOW or any portion hereof for any reason other than AT&T's uncured material breach, Customer shall be responsible to pay for all Services rendered, Purchased Equipment ordered and expenses incurred hereunder as well as any charges associated with early termination of AT&T's subcontracts related to this



**Pricing Schedule  
AT&T Network Integration Services  
Services and Equipment Resale**

**APPENDIX B: SAMPLE CHANGE REQUEST FORM**

<b>Type of Request:</b>	
<b>Initiator (Company):</b>	
<b>Change Request Received by:</b>	
<b>Price Impact:</b>	
<b>AT&amp;T Additional Resources Req'd:</b>	

Task Description:

Other information related to Change:

**Impact of Change**  
*Provide a description of the impact of the change (increase in duration, delay in start, cut-over date change, added dependency, additional resources required change to design, change to baseline solution, other).*

**AGREED and ACCEPTED:  
CUSTOMER:**

By: \_\_\_\_\_  
 (Authorized Agent or Representative)

(Typed or Printed Name)

(Title)

(Date)

**AGREED and ACCEPTED:  
AT&T**

By: \_\_\_\_\_  
 (Authorized Agent or Representative)

(Typed or Printed Name)

(Title)

(Date)



**Pricing Schedule  
AT&T Network Integration Services  
Services and Equipment Resale**

**APPENDIX C: SAMPLE SERVICES ACCEPTANCE CHECKLIST**

**(EM, please remove this Appendix if acceptance is not part of this engagement)**

LIST OF ACTIVITIES	Applicable	Completion date	Initial
<u>Customer Responsibilities</u>	√		
	√		
<u>AT&amp;T Responsibilities</u>	√		
	√		
	√		
	√		
	√		
	√		
<u>Delivery &amp; Checkout</u>	√		
	√		
	√		

**Customer Acceptance:**

**AT&T Acknowledgement:**

By: \_\_\_\_\_  
(Authorized Representative)

By: \_\_\_\_\_  
(Authorized Representative)

(Typed or Printed Name)

(Typed or Printed Name)

(Title)

(Title)

(Date)

(Date)



City Council Agenda Item Report

**FROM:** Jamie Wolters  
**MEETING DATE:** July 24, 2023  
**SUBJECT:** Special Event-Art in the Park Saugatuck

**DESCRIPTION:**

Art Entrepreneurs is proposing Art in the Park Saugatuck to be held on September 16, 2023. See attached application and breakdown of event below. City Staff, Fire, Police, and event organizer will meet closer to the event date to discuss specifics needed from each department.

**BREAKDOWN OF EVENT:**

**Name:** Art in the Park Saugatuck  
**Dates:** 9/16/23  
**Hours:** 10am-4pm  
**Location:** Wicks Park  
**Booths:** 40  
**Vendor Parking:** Saugatuck High School via Interurban  
**Music:** 11am-3pm

**BUDGET ACTION REQUIRED:**

N/A

**LEGAL REVIEW:**

N/A

**SAMPLE MOTION:**

Motion to approve/deny the Art in the Park Saugatuck to take place on September 16<sup>th</sup>, 2023 organized by the Artist Entrepreneurs.





<b>Council Action</b>
_____ Approved
_____ Denied
_____ Date

102 Butler Street • P.O. Box 86 • Saugatuck, MI 49453  
 Phone: 269-857-2603 • Website: [www.saugatuckcity.com](http://www.saugatuckcity.com)

## SPECIAL EVENT & PARADE APPLICATION

Must be filled out in its entirety & returned to the City Clerk's Office 60 days prior to scheduled event

### SPONSORING ORGANIZATION INFORMATION

LEGAL BUSINESS NAME: Artist Entrepreneurs TELEPHONE: 616-292-3930  
TAX ID: 85-3228102  
 MAILING ADDRESS: 2522 Grand Vista Ct NW  
Anna Donahue TELEPHONE: 616-292-3930  
 CONTACT NAME: \_\_\_\_\_ TELEPHONE: 616-292-3930  
anna@annadonahue.com  
 E-MAIL ADDRESS: \_\_\_\_\_ CELL PHONE: 616-292-3930

### CONTACT PERSON ON DAY OF EVENT

CONTACT NAME: Anna Donahue TELEPHONE: 616-292-3930  
anna@annadonahue.com  
 E-MAIL ADDRESS: \_\_\_\_\_ CELL PHONE: 616-292-3930

### EVENT INFORMATION

NAME OF EVENT: Art in the Park Saugatuck DATE(S) OF EVENT: 9-16-2023  
 PURPOSE OF EVENT: Community Art Festival RAIN DATE: \_\_\_\_\_

- Non-Profit     
  For-Profit     
  City Operated/Sponsored     
  Co-Sponsored  
 Marathon/Race     
  Festival/Fair     
  Video/Film Production     
  Other \_\_\_\_\_

EVENT LOCATION: Wicks Park, 420 Water Street EVENT HOURS: 10 am - 4 pm

ESTIMATED NUMBER OF ATTENDEES: 1500

ESTIMATED NUMBER OF VOLUNTEERS: 12

ESTIMATE DATE / TIME FOR SET-UP: 3 Hours 7:00  A.M.  P.M.

ESTIMATE DATE / TIME FOR CLEAN-UP: 1 Hour 5:00  A.M.  P.M.

**EVENT DETAILS**

WILL MUSIC BE PROVIDED DURING THIS EVENT:  Yes  No

TYPE OF MUSIC PROPOSED:  Live  Amplification  Recorded  Loudspeakers

PROPOSED TIME MUSIC WILL BEGIN: 11 am END: 3 pm

FOOD VENDORS/CONCESSIONS: (Contact Allegan County Health Department)  Yes  No  
 Provide Copy of Health Department Food Service License

WILL ALCOHOL BE SERVED AT THIS EVENT:  Yes  No  
 Provide Copy of Liquor Liability Insurance (listing the City as additionally insured)  
 Provide Copy of Michigan Liquor Control License

If yes, describe measures to be taken to prohibit the sale of alcohol to minors: \_\_\_\_\_

WILL FIREWORKS BE APART OF EVENT:  Yes  No  
 Provide Copy of Liability Insurance (listing the City as additionally insured)  
 Provide Copy of Fireworks Permit

**EVENT SIGNAGE:** City Council approval is required for any temporary signing in the public right-of-way, across a street or on City property. Which of the following signs are requested for this event:

**“YARD” SIGNS** - Number requested: 12 (Maximum size is 2’ x 2’. Cannot be displayed no more than 15 days prior to first day of event and must be removed 24 hours after end of event.)

**BANNER UNDER SAUGATUCK PALETTE SIGN** - (Size cannot be greater than 14’ x 4’). Cannot be displayed more than 15 days prior to first day of event and must be removed 24 hours after end of event.)

**SIGNAGE AT EVENT SITE** - Location(s): Yard Signs posted near sidewalk and Small Banner on Gazebo  
Colorful, professional signs include event logo and day/time for event. (Digital check mark does not work on this form)  
Description of signs: \_\_\_\_\_  
(Signs at event site cannot be displayed prior to day of the event and must removed at the end of the event.)

**TENTS/CANOPIES/MISC:** The City of Saugatuck does not have tents, stage, tables or chairs available for rental. There are a number of businesses listed in the yellow pages under “Rental Service Stores” that specialize in the rental of event supplies. Will the following be constructed or located in the event area:

**BOOTHS – QUANTITY** 40  **TENTS – QUANTITY** \_\_\_\_\_  
 **AWNINGS – QUANTITY** \_\_\_\_\_  **TABLES – QUANTITY** \_\_\_\_\_  
 **PORTABLE TOILETS – QUANTITY** \_\_\_\_\_

**VENDOR PARKING:** Have you made arrangement for vendor parking?  Yes  No  
If yes, where do you propose your vendors park? At the High School unless under construction

Will the Interurban be utilized?  Yes  No Time(s) 9 A.M. TO 5:00 P.M.  
Yes, if the high school lot is open 9 am - 10 am and 4 pm - 5pm  
IF AVAILABLE

**DEPARTMENT OF PUBLIC WORKS**

APPROVED       DENIED

\_\_\_\_\_  
Authorized Personnel Signature

Will this event require the use of any of the following municipal equipment:     Yes       No

TRASH RECEPTACLES – QUANTITY 4

BARRICADES – QUANTITY 2

TRAFFIC CONES – QUANTITY \_\_\_\_\_

PARKING SIGNS – QUANTITY 4

FENCING       WATER       ELECTRIC

RESTROOM CLEANING

OTHER PLEASE MARK 4 PARKING SPACES IN PARKING LOT NEXT TO WICKS PARK

**POLICE DEPARTMENT**

APPROVED       DENIED

\_\_\_\_\_  
Authorized Personnel Signature

ADDITIONAL OFFICERS REQUIRED?  Yes       No

If yes please describe & include times \_\_\_\_\_

Other (describe): \_\_\_\_\_

**SAUGATUCK TOWNSHIP FIRE DISTRICT**

APPROVED       DENIED

\_\_\_\_\_  
Authorized Personnel Signature

STREET CLOSURES:  Yes       No (use attached map to outline proposed closures)

Street closure date/time: \_\_\_\_\_  A.M.  P.M.

Street re-open date/time: \_\_\_\_\_  A.M.  P.M.

SIDEWALK CLOSURES:  Yes       No (use attached map to outline proposed closures)

Describe Sidewalk Use: \_\_\_\_\_

Sidewalk closure date/time: \_\_\_\_\_  A.M.  P.M.

Sidewalk re-open date/time: \_\_\_\_\_  A.M.  P.M.

PARKING LOT CLOSURES:  Yes ?       No (use attached map to outline proposed closures)

Parking Lot Location: Next to Wicks Park, please section off 4 spaces for officials and Handicap  
SEE ABOVE NOTATION FOR PUBLIC WORKS

Sidewalk closure date/time: \_\_\_\_\_  A.M.  P.M.

Sidewalk re-open date/time: \_\_\_\_\_  A.M.  P.M.

What parking arrangements are proposed to accommodate potential attendance: \_\_\_\_\_ High School if available

## APPLICATION CHECK LIST

- Completed Application
- Event Map (includes detailed event layout for vendors, booths, porta potties, etc.)
- Road/Sidewalk/Parking Lot Closure Map
- Certificate of Insurance (listing the City of Saugatuck as additionally insured)
- Fireworks Permit (if applicable)
- Michigan Liquor Control Commission Special Event License (if applicable)
- Health Department Food Service License (if applicable)

If document is missing, please explain: \_\_\_\_\_

The applicant and sponsoring organization understand and agrees to:

Provide a certificate of insurance with all coverages deemed necessary for the event, name the City of Saugatuck as an additional insured on all applicable policies and submit the certificate to the City Clerk's Office no later than one (1) week following notice of the event approval.

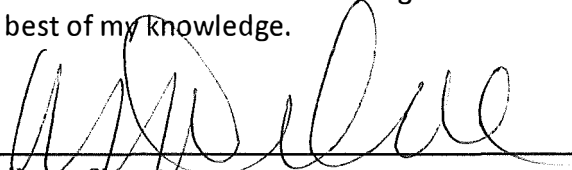
Comply with all City and County Ordinances and applicable State laws, City policies and acknowledges that the special events permit does not relieve the applicant or organization from meeting any application requirements of law or other public bodies or agencies.

Applicant and sponsoring organization further understands the approval of this special event may include additional requirements and/or limitations based on the City's review of this application. The applicant and sponsoring organization understands that it may be necessary to meet with City staff during the review of this application and that City Council approval is necessary.

Applicant understands that he/she is responsible for contacting the Michigan Liquor Control Commission and/or Allegan County Health Department to secure all permits required for this event.

Applicant agrees to defend, indemnify and hold harmless the City of Saugatuck, Michigan from any claim, demand, suit, loss, cost of expense or any damage which may be asserted, claimed or recovered against or from this Special Event by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury or death arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss cost of expense is caused in whole or in part by the negligence of the City of Saugatuck or by third parties, or by the agents, servants, employees or factors of any of them.

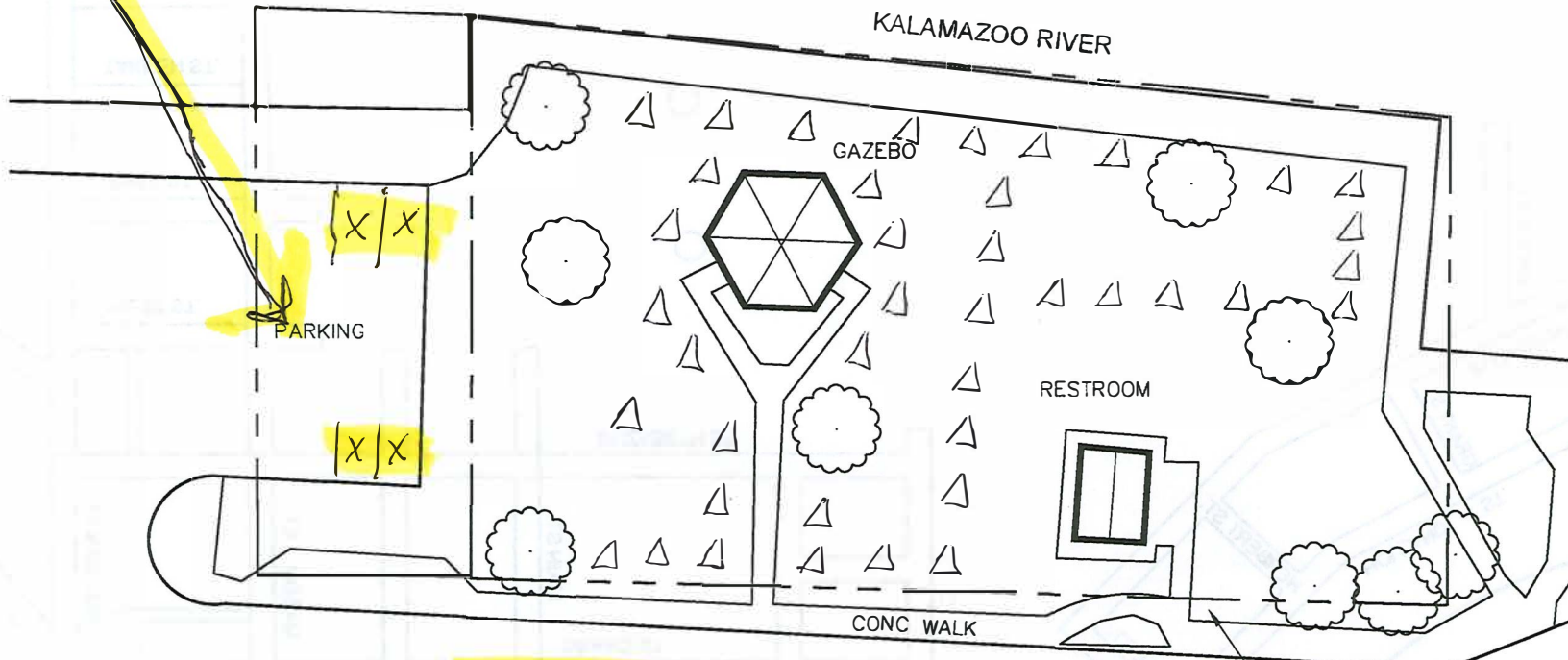
As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event and affirm the above understandings. The information provided on this application is true and complete to the best of my knowledge.

  
\_\_\_\_\_  
Applicant Signature

6-27-2023  
~~12-01-2022~~  
\_\_\_\_\_  
Date

MARK 4 PARKING SPACES HERE

3187\_Wicks Park\ricks 2/3/2016



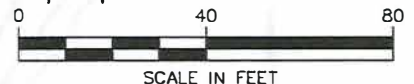
VENDOR BOOTHS = Δ

WICKS PARK BOUNDARY

WATER STREET

MAIN STREET

MARY STREET



APPLICANT TO SKETCH LOCATION OF PROPOSED TEMPORARY STRUCTURES, TENTS, STAGES, EQUIPMENT, TRAILERS, PORTA POTTY'S, ETC...

FLEIS & VANDENBRINK ENGINEERING, INC.

CITY OF SAUGATUCK ALLEGAN COUNTY, MICHIGAN

WICKS PARK PARK USE PERMIT APPLICATION

2016

3187





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/05/2023

**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>  Justin Vander Iest 6840 Northway Drive NE Ste B2  Rockford MI 493417568	<b>CONTACT NAME:</b> Justin Vander Iest <b>PHONE (A/C No, Ext):</b> 616-951-7188 <b>E-MAIL ADDRESS:</b> justin.vanderiest.f0ru@statefarm.com <b>FAX (A/C No):</b>
	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> State Farm Fire and Casualty Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
<b>INSURED</b> ARTIST ENTREPRENEURS 2522 GRAND VISTA CT NW  GRAND RAPIDS MI- 495341371	

**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	ADD INSD	SUB WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	N	N	92-GP-A711-1	04/01/2023	04/01/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED      RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE      OTH-ER \$ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

<b>CERTIFICATE HOLDER</b>  City of Saugatuck --City Clerk 102 Butler St PO Box 86 Saugatuck MI 49453	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  <b>AUTHORIZED REPRESENTATIVE</b>  This form was system-generated on 07/05/2023
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City Council Agenda Item Report

**FROM:** Jamie Wolters  
**MEETING DATE:** July 24, 2023  
**SUBJECT:** Special Event-Labor Day Bridge Walk

**DESCRIPTION:**

SPS Community Recreation is proposing the Labor Day Bridge Walk to be held on September 4, 2023. See attached application and breakdown of event below. City Staff, Fire, Police, and event organizer will meet closer to the event date to discuss specifics needed from each department.

**BREAKDOWN OF EVENT:**

**Name:** Labor Day Bridge Walk  
**Dates:** 9/4/23  
**Hours:** 9:30 a.m. – 10:15 a.m.  
**Location:** Blue Star Bridge between Saugatuck and Douglas

**BUDGET ACTION REQUIRED:**

N/A

**LEGAL REVIEW:**

N/A

**SAMPLE MOTION:**

Motion to approve/deny the Labor Day Bridge Walk to take place on September 4th, 2023, organized by the SPS Community Recreation.



\_\_\_\_\_ Approved  
 \_\_\_\_\_ Denied  
 \_\_\_\_\_ Date

102 Butler Street • P.O. Box 86 • Saugatuck, MI 49453  
 Phone: 269-857-2603 • Website: [www.saugatuckcity.com](http://www.saugatuckcity.com)

## SPECIAL EVENT APPLICATION

Must be filled out in its entirety & returned to the City Clerk's Office 30 days prior to scheduled event

### SPONSORING ORGANIZATION INFORMATION

LEGAL BUSINESS NAME: SPS Community Recreation TELEPHONE: 269.857.1444  
 MAILING ADDRESS: Po Box 818 Douglas MI 49406  
 CONTACT NAME: Scott Kierzek TELEPHONE: 616.886-0577  
 E-MAIL ADDRESS: skierzek@saugatuckps.com CELL PHONE: \_\_\_\_\_

### CONTACT PERSON ON DAY OF EVENT

CONTACT NAME: Same TELEPHONE: \_\_\_\_\_  
 E-MAIL ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

### EVENT INFORMATION

NAME OF EVENT: Labor Day Bridge Walk DATE(S) OF EVENT: Sept 4  
 PURPOSE OF EVENT: Tradition RAIN DATE: None

- Non-Profit     
  For-Profit     
  City Operated/Sponsored     
  Co-Sponsored  
 Marathon/Race     
  Festival/Fair     
  Video/Film Production     
  Other \_\_\_\_\_

EVENT LOCATION: Blue Star Bridge EVENT HOURS: 9:30am 10:15am

ESTIMATED NUMBER OF ATTENDEES: 300

ESTIMATED NUMBER OF VOLUNTEERS: 12

ESTIMATE DATE / TIME FOR SET-UP: 8 \_\_\_\_\_  A.M.  P.M.

ESTIMATE DATE / TIME FOR CLEAN-UP: \_\_\_\_\_ 10 \_\_\_\_\_  A.M.  P.M.



## EVENT DETAILS

WILL MUSIC BE PROVIDED DURING THIS EVENT:  Yes  No

TYPE OF MUSIC PROPOSED:  Live  Amplification  Recorded  Loudspeakers

PROPOSED TIME MUSIC WILL BEGIN: \_\_\_\_\_ END: \_\_\_\_\_

FOOD VENDORS/CONCESSIONS: (Contact Allegan County Health Department)  Yes  No  
 Provide Copy of Health Department Food Service License

WILL ALCOHOL BE SERVED AT THIS EVENT:  Yes  No  
 Provide Copy of Liquor Liability Insurance (listing the City as additionally insured)  
 Provide Copy of Michigan Liquor Control License

If yes, describe measures to be taken to prohibit the sale of alcohol to minors: \_\_\_\_\_

WILL FIREWORKS BE APART OF EVENT:  Yes  No  
 Provide Copy of Liability Insurance (listing the City as additionally insured)  
 Provide Copy of Fireworks Permit

**EVENT SIGNAGE:** City Council approval is required for any temporary signing in the public right-of-way, across a street or on City property. Which of the following signs are requested for this event:

- "YARD" SIGNS - Number requested: \_\_\_\_ (Maximum size is 2' x 2'. Cannot be displayed no more than 15 days prior to first day of event and must be removed 24 hours after end of event.)
- BANNER UNDER SAUGATUCK PALETTE SIGN - (Size cannot be greater than 14' x 4'). Cannot be displayed more than 15 days prior to first day of event and must be removed 24 hours after end of event.)

SIGNAGE AT EVENT SITE - Location(s): 10'x10' pop up tent on Douglas Side - See Map  
Description of signs: \_\_\_\_\_  
(Signs at event site cannot be displayed prior to day of the event and must removed at the end of the event.)

**TENTS/CANOPIES/MISC:** The City of Saugatuck does not have tents, stage, tables or chairs available for rental. There are a number of businesses listed in the yellow pages under "Rental Service Stores" that specialize in the rental of event supplies. Will the following be constructed or located in the event area:

BOOTHS – QUANTITY One  TENTS – QUANTITY \_\_\_\_\_  
 AWNINGS – QUANTITY \_\_\_\_\_  TABLES – QUANTITY \_\_\_\_\_  
 PORTABLE TOILETS – QUANTITY \_\_\_\_\_

**VENDOR PARKING:** Have you made arrangement for vendor parking?  Yes  No

If yes, where do you propose your vendors park? \_\_\_\_\_

Will the Interurban be utilized?  Yes  No Time(s) \_\_\_\_\_

**DEPARTMENT OF PUBLIC WORKS**

APPROVED

DENIED

\_\_\_\_\_  
*Authorized Personnel Signature*

Will this event require the use of any of the following municipal equipment:  Yes  No

TRASH RECEPTACLES – QUANTITY \_\_\_\_\_

BARRICADES – QUANTITY \_\_\_\_\_

TRAFFIC CONES – QUANTITY \_\_\_\_\_

PARKING SIGNS – QUANTITY \_\_\_\_\_

FENCING  WATER  ELECTRIC

RESTROOM CLEANING

OTHER \_\_\_\_\_

**POLICE DEPARTMENT**

APPROVED

DENIED

\_\_\_\_\_  
*Authorized Personnel Signature*

ADDITIONAL OFFICERS REQUIRED?  Yes  No

If yes please describe & include times \_\_\_\_\_

Other (describe): \_\_\_\_\_

**SAUGATUCK TOWNSHIP FIRE DISTRICT**

APPROVED

DENIED

\_\_\_\_\_  
*Authorized Personnel Signature*

STREET CLOSURES:  Yes  No (use attached map to outline proposed closures)

Street closure date/time: \_\_\_\_\_  A.M.  P.M.

Street re-open date/time: \_\_\_\_\_  A.M.  P.M.

SIDEWALK CLOSURES:  Yes  No (use attached map to outline proposed closures)

Describe Sidewalk Use: \_\_\_\_\_

Sidewalk closure date/time: \_\_\_\_\_  A.M.  P.M.

Sidewalk re-open date/time: \_\_\_\_\_  A.M.  P.M.

PARKING LOT CLOSURES:  Yes  No (use attached map to outline proposed closures)

Parking Lot Location: \_\_\_\_\_

Sidewalk closure date/time: \_\_\_\_\_  A.M.  P.M.

Sidewalk re-open date/time: \_\_\_\_\_  A.M.  P.M.

What parking arrangements are proposed to accommodate potential attendance: \_\_\_\_\_

## APPLICATION CHECK LIST

- Completed Application
- Event Map (includes detailed event layout for vendors, booths, porta potties, etc.)
- Road/Sidewalk/Parking Lot Closure Map
- Certificate of Insurance (listing the City of Saugatuck as additionally insured)
- Fireworks Permit (if applicable)
- Michigan Liquor Control Commission Special Event License (if applicable)
- Health Department Food Service License (if applicable)

If document is missing, please explain: \_\_\_\_\_

The applicant and sponsoring organization understand and agrees to:

Provide a certificate of insurance with all coverages deemed necessary for the event, name the City of Saugatuck as an additional insured on all applicable policies and submit the certificate to the City Clerk's Office no later than one (1) week following notice of the event approval.

Comply with all City and County Ordinances and applicable State laws, City policies and acknowledges that the special events permit does not relieve the applicant or organization from meeting any application requirements of law or other public bodies or agencies.

Applicant and sponsoring organization further understands the approval of this special event may include additional requirements and/or limitations based on the City's review of this application. The applicant and sponsoring organization understands that it may be necessary to meet with City staff during the review of this application and that City Council approval is necessary.

Applicant understands that he/she is responsible for contacting the Michigan Liquor Control Commission and/or Allegan County Health Department to secure all permits required for this event.

Applicant agrees to defend, indemnify and hold harmless the City of Saugatuck, Michigan from any claim, demand, suit, loss, cost of expense or any damage which may be asserted, claimed or recovered against or from this Special Event by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury or death arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss cost of expense is caused in whole or in part by the negligence of the City of Saugatuck or by third parties, or by the agents, servants, employees or factors of any of them.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event and affirm the above understandings. The information provided on this application is true and complete to the best of my knowledge.

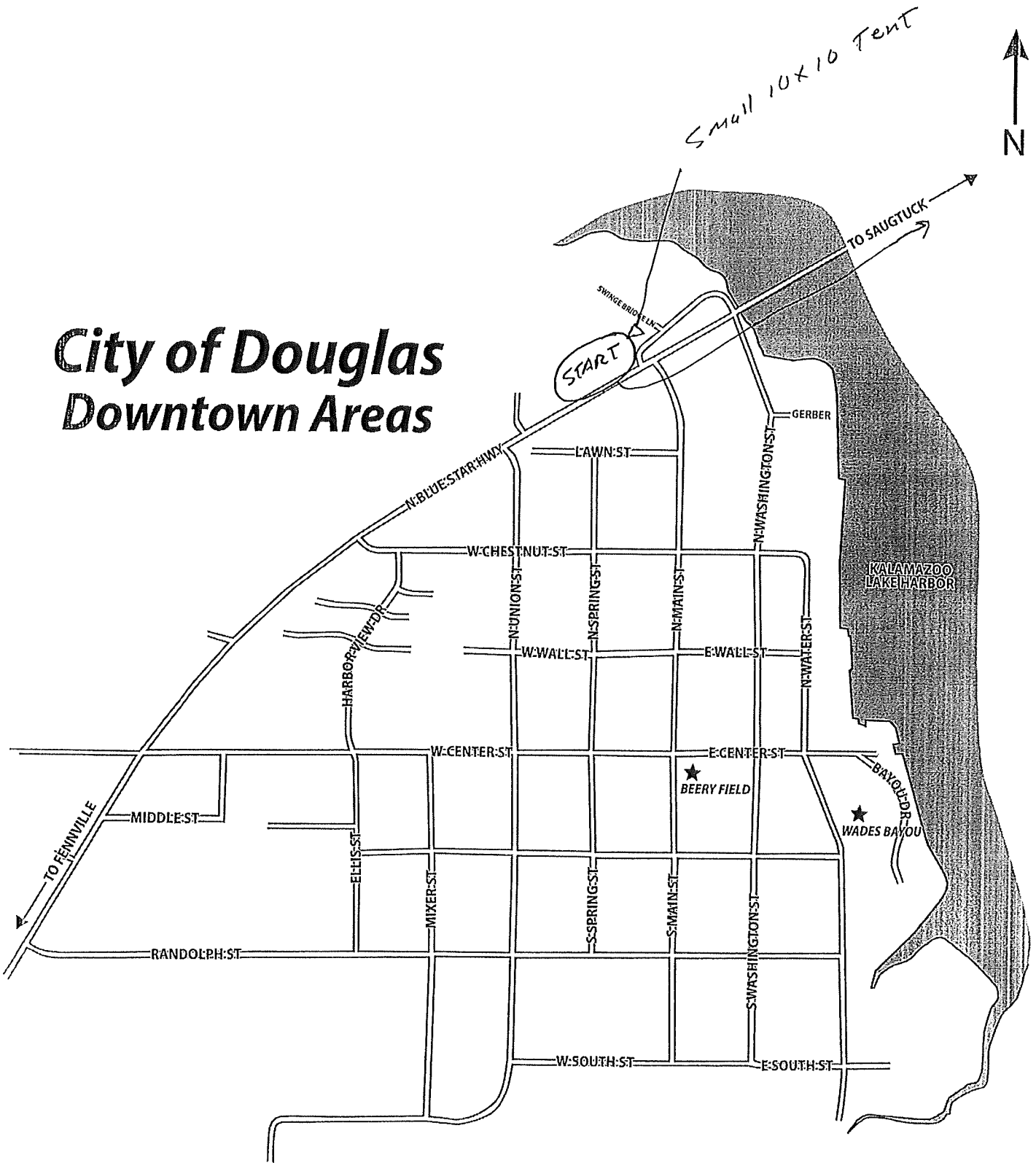


Applicant Signature

6-20-23

Date

# City of Douglas Downtown Areas





City Council Agenda Item Report

**FROM:** Jamie Wolters  
**MEETING DATE:** July 24, 2023  
**SUBJECT:** Special Event-Sidewalk & Studio Sale

**DESCRIPTION:**

SDABA is proposing Sidewalk & Studio Sale to be held on August 17, 2023. See attached application and breakdown of event below. City Staff, Fire, Police, and event organizer will meet closer to the event date to discuss specifics needed from each department.

**BREAKDOWN OF EVENT:**

**Name:** Sidewalk & Studio Sale  
**Dates:** 8/17/23  
**Hours:** 9:00 a.m. – 5 p.m.  
**Location:** Butler, Mason & Hoffman Streets  
**Booths:** 40  
**Vendor Parking:** Saugatuck High School via Interurban, if available  
**Music:** Yes

**BUDGET ACTION REQUIRED:**

N/A

**LEGAL REVIEW:**

N/A

**SAMPLE MOTION:**

Motion to approve/deny Sidewalk & Studio Sale to take place on August 17th, 2023, organized by the SDABA.



<b>Council Action</b>
_____ Approved
_____ Denied
_____ Date

102 Butler Street • P.O. Box 86 • Saugatuck, MI 49453  
 Phone: 269-857-2603 • Website: [www.saugatuckcity.com](http://www.saugatuckcity.com)

## SPECIAL EVENT & PARADE APPLICATION

Must be filled out in its entirety & returned to the City Clerk's Office 60 days prior to scheduled event

### SPONSORING ORGANIZATION INFORMATION

LEGAL BUSINESS NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

### CONTACT PERSON ON DAY OF EVENT

CONTACT NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

### EVENT INFORMATION

NAME OF EVENT: \_\_\_\_\_ DATE(S) OF EVENT: \_\_\_\_\_

PURPOSE OF EVENT: \_\_\_\_\_ RAIN DATE: \_\_\_\_\_

- |  |  |  |                                       |
|--|--|--|---------------------------------------|
| <input type="checkbox"/> Non-Profit    | <input type="checkbox"/> For-Profit    | <input type="checkbox"/> City Operated/Sponsored | <input type="checkbox"/> Co-Sponsored |
| <input type="checkbox"/> Marathon/Race | <input type="checkbox"/> Festival/Fair | <input type="checkbox"/> Video/Film Production   | <input type="checkbox"/> Other _____  |

EVENT LOCATION: \_\_\_\_\_ EVENT HOURS: \_\_\_\_\_

ESTIMATED NUMBER OF ATTENDEES: \_\_\_\_\_

ESTIMATED NUMBER OF VOLUNTEERS: \_\_\_\_\_

ESTIMATE DATE / TIME FOR SET-UP: \_\_\_\_\_  A.M.  P.M.

ESTIMATE DATE / TIME FOR CLEAN-UP: \_\_\_\_\_  A.M.  P.M.

## EVENT DETAILS

WILL MUSIC BE PROVIDED DURING THIS EVENT:  Yes  No

TYPE OF MUSIC PROPOSED:  Live  Amplification  Recorded  Loudspeakers

PROPOSED TIME MUSIC WILL BEGIN: \_\_\_\_\_ END: \_\_\_\_\_

FOOD VENDORS/CONCESSIONS: (Contact Allegan County Health Department)  Yes  No

Provide Copy of Health Department Food Service License

WILL ALCOHOL BE SERVED AT THIS EVENT:  Yes  No

Provide Copy of Liquor Liability Insurance (listing the City as additionally insured)

Provide Copy of Michigan Liquor Control License

If yes, describe measures to be taken to prohibit the sale of alcohol to minors: \_\_\_\_\_

WILL FIREWORKS BE APART OF EVENT:  Yes  No

Provide Copy of Liability Insurance (listing the City as additionally insured)

Provide Copy of Fireworks Permit

**EVENT SIGNAGE:** City Council approval is required for any temporary signing in the public right-of-way, across a street or on City property. Which of the following signs are requested for this event:

**“YARD” SIGNS** - Number requested: \_\_\_\_ (Maximum size is 2’ x2’. Cannot be displayed no more than 15 days prior to first day of event and must be removed 24 hours after end of event.)

**BANNER UNDER SAUGATUCK PALETTE SIGN** - (Size cannot be greater than 14’ x 4’). Cannot be displayed more than 15 days prior to first day of event and must be removed 24 hours after end of event.)

**SIGNAGE AT EVENT SITE** - Location(s): \_\_\_\_\_

Description of signs: \_\_\_\_\_

(Signs at event site cannot be displayed prior to day of the event and must removed at the end of the event.)

**TENTS/CANOPIES/MISC:** The City of Saugatuck does not have tents, stage, tables or chairs available for rental. There are a number of businesses listed in the yellow pages under “Rental Service Stores” that specialize in the rental of event supplies. Will the following be constructed or located in the event area:

**BOOTHS – QUANTITY** \_\_\_\_\_

**TENTS – QUANTITY** \_\_\_\_\_

**AWNINGS – QUANTITY** \_\_\_\_\_

**TABLES – QUANTITY** \_\_\_\_\_

**PORTABLE TOILETS – QUANTITY** \_\_\_\_\_

**VENDOR PARKING:** Have you made arrangement for vendor parking?  Yes  No

If yes, where do you propose your vendors park? \_\_\_\_\_

Will the Interurban be utilized?  Yes  No Time(s) \_\_\_\_\_

**DEPARTMENT OF PUBLIC WORKS**

APPROVED

DENIED

\_\_\_\_\_  
*Authorized Personnel Signature*

Will this event require the use of any of the following municipal equipment:  Yes  No

TRASH RECEPTACLES – QUANTITY \_\_\_\_\_

BARRICADES – QUANTITY \_\_\_\_\_

TRAFFIC CONES – QUANTITY \_\_\_\_\_

PARKING SIGNS – QUANTITY \_\_\_\_\_

FENCING  WATER  ELECTRIC

RESTROOM CLEANING

OTHER \_\_\_\_\_

**POLICE DEPARTMENT**

APPROVED

DENIED

\_\_\_\_\_  
*Authorized Personnel Signature*

ADDITIONAL OFFICERS REQUIRED?  Yes  No

If yes please describe & include times \_\_\_\_\_

Other (describe): \_\_\_\_\_

**SAUGATUCK TOWNSHIP FIRE DISTRICT**

APPROVED

DENIED

\_\_\_\_\_  
*Authorized Personnel Signature*

STREET CLOSURES:  Yes  No (use attached map to outline proposed closures)

Street closure date/time: \_\_\_\_\_  A.M.  P.M.

Street re-open date/time: \_\_\_\_\_  A.M.  P.M.

SIDEWALK CLOSURES:  Yes  No (use attached map to outline proposed closures)

Describe Sidewalk Use: \_\_\_\_\_

Sidewalk closure date/time: \_\_\_\_\_  A.M.  P.M.

Sidewalk re-open date/time: \_\_\_\_\_  A.M.  P.M.

PARKING LOT CLOSURES:  Yes  No (use attached map to outline proposed closures)

Parking Lot Location: \_\_\_\_\_

Sidewalk closure date/time: \_\_\_\_\_  A.M.  P.M.

Sidewalk re-open date/time: \_\_\_\_\_  A.M.  P.M.

What parking arrangements are proposed to accommodate potential attendance: \_\_\_\_\_



## APPLICATION CHECK LIST

- Completed Application
- Event Map (includes detailed event layout for vendors, booths, porta potties, etc.)
- Road/Sidewalk/Parking Lot Closure Map
- Certificate of Insurance (listing the City of Saugatuck as additionally insured)
- Fireworks Permit (if applicable)
- Michigan Liquor Control Commission Special Event License (if applicable)
- Health Department Food Service License (if applicable)

If document is missing, please explain: \_\_\_\_\_

The applicant and sponsoring organization understand and agrees to:

Provide a certificate of insurance with all coverages deemed necessary for the event, name the City of Saugatuck as an additional insured on all applicable policies and submit the certificate to the City Clerk's Office no later than one (1) week following notice of the event approval.

Comply with all City and County Ordinances and applicable State laws, City policies and acknowledges that the special events permit does not relieve the applicant or organization from meeting any application requirements of law or other public bodies or agencies.

Applicant and sponsoring organization further understands the approval of this special event may include additional requirements and/or limitations based on the City's review of this application. The applicant and sponsoring organization understands that it may be necessary to meet with City staff during the review of this application and that City Council approval is necessary.

Applicant understands that he/she is responsible for contacting the Michigan Liquor Control Commission and/or Allegan County Health Department to secure all permits required for this event.

Applicant agrees to defend, indemnify and hold harmless the City of Saugatuck, Michigan from any claim, demand, suit, loss, cost of expense or any damage which may be asserted, claimed or recovered against or from this Special Event by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury or death arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss cost of expense is caused in whole or in part by the negligence of the City of Saugatuck or by third parties, or by the agents, servants, employees or factors of any of them.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event and affirm the above understandings. The information provided on this application is true and complete to the best of my knowledge.



\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



**FROM:** Jamie Wolters, City Clerk  
**MEETING DATE:** July 24, 2023  
**SUBJECT:** SCA Right of Way Signage

**DESCRIPTION**

Susan Poolman, on behalf of the Saugatuck Center for the Arts has submitted an application for the installation of a sandwich board to be displayed on the following days:

1. Tuesday Market Days
2. Friday Market Days

The City Council may approve a banner as an exception, as listed in section 150.30(H). The conditions for approval of the exception are as follows:

1. The sign does not create a traffic vision obstruction;
2. The sign does not create a pedestrian traffic obstruction;
3. The sign is compatible with the surroundings and is not uniquely out of character for the community;
4. The sign does not create a situation which could be detrimental to health safety, or welfare; and,
5. The banner shall be displayed for no more than three 14-day periods between January 1 and December 31 of any year.

**BUDGET ACTION REQUIRED**

N/A

**COMMITTEE/COMMISSION REVIEW**

None

**LEGAL REVIEW**

None

**SAMPLE MOTION:**

Motion to approve/deny the request to install a sandwich board for all Tuesday and Friday market days until September 2023.



### Right of Way Sign Application

**APPLICANTS INFORMATION**

APPLICATION NUMBER \_\_\_\_\_ - \_\_\_\_\_

Name Susan Poolman /SCA Address / PO Box 400 Culver St  
 City Saugatuck State MI Zip 49453 Phone 2698572399  
 E-Mail market@sc4a.org  
 Signature Susan L. Poolman (mkt@sc4a) Date 7-13-2023

**SIGN DESCRIPTION (ATTACH MORE SHEETS IF NECESSARY)**Type: Number of Yard Signs 1 Sandwich Board Number of Banners \_\_\_\_\_Dates to be displayed Tuesday Mkt Days (June - August) & Friday Mkt Days (May - September)

Further Comments: \_\_\_\_\_

We have a shuttle sign for the Interurban. I've set up a few times for the market.~~This has been a major bonus for those that use our local transportation service to attend our market, especially those on food assistance. Guests that have taken advantage of the Interurban are thankful.~~**PLEASE INCLUDE THE FOLLOWING INFORMATION****Pursuant to Section 150.30, please attach the following supporting documents when applying for sign approval**

Y N NA

- Dimensions and type of each proposed sign 25" w x 45" H
- Map showing the location of each sign
- Explanation of how each sign will be attached and secured - weighted

**Pursuant to Section 150.30(H), please to the following questions:**

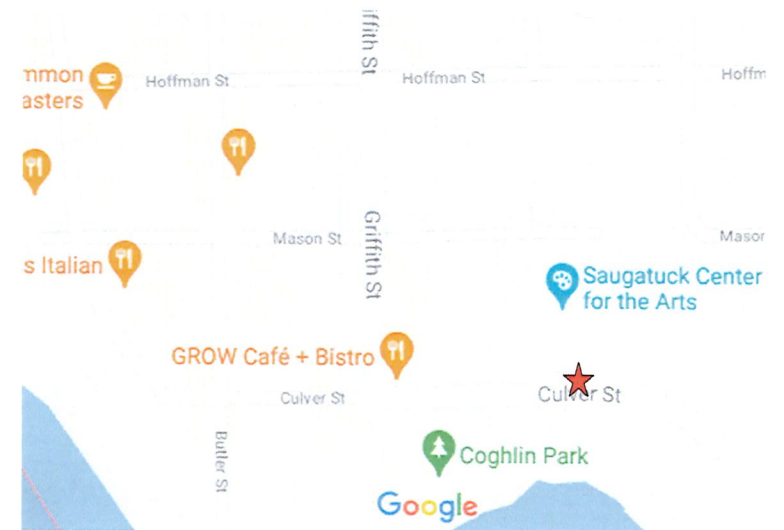
- Will the signs create a traffic vision obstruction?
- Will the signs create a pedestrian traffic obstruction?
- Are the signs compatible with the surroundings and is not uniquely out of character for the community? and
- Do the signs create a situation which could be detrimental to health, safety, or welfare?





Location is on Culver St between the entrance & exit of the SCA Parking Lot.

We've already filled out an application for our yard signage for the season.





**FROM:** Jamie Wolters, City Clerk

**MEETING DATE:** July 24, 2023

**SUBJECT:** First Congregational Church Right of Way Signage

**DESCRIPTION**

First Congregational Church has submitted an application for signage installation, 1 banner and 6 yard signs. See attached map.

The City Council may approve a banner as an exception, as listed in section 150.30(H). The conditions for approval of the exception are as follows:

1. The sign does not create a traffic vision obstruction;
2. The sign does not create a pedestrian traffic obstruction;
3. The sign is compatible with the surroundings and is not uniquely out of character for the community;
4. The sign does not create a situation which could be detrimental to health safety, or welfare; and,
5. The banner shall be displayed for no more than three 14-day periods between January 1 and December 31 of any year.

**BUDGET ACTION REQUIRED**

N/A

**COMMITTEE/COMMISSION REVIEW**

None

**LEGAL REVIEW**

None

**SAMPLE MOTION:**

Motion to approve/deny the request the signage request for First Congregational Church for dates of 7/23/2023-8/5/2023.



# Right of Way Sign Application

**APPLICANTS INFORMATION** **APPLICATION NUMBER** \_\_\_\_ - \_\_\_\_

Name First Congregational Church Address / PO Box 296 Hoffman, Box 633  
 City Saugatuck State MI Zip 49453 Phone 269-857-2929  
 E-Mail office@1stcongregational.net  
 Signature *[Handwritten Signature]* Date 7/6/23

**SIGN DESCRIPTION (ATTACH MORE SHEETS IF NECESSARY)**

Type: Number of Yard Signs 6 24x24 Number of Banners 1 2.5x8  
 Dates to be displayed 7/23 - 8/5/23  
 Further Comments: \_\_\_\_\_

Banner will be displayed on Church property on our building.

Event is a fundraiser Dinner for our Capital Campaign - furnace, AC signs, carpet, steps

**PLEASE INCLUDE THE FOLLOWING INFORMATION**

Pursuant to Section 150.30, please attach the following supporting documents when applying for sign approval

Y N NA

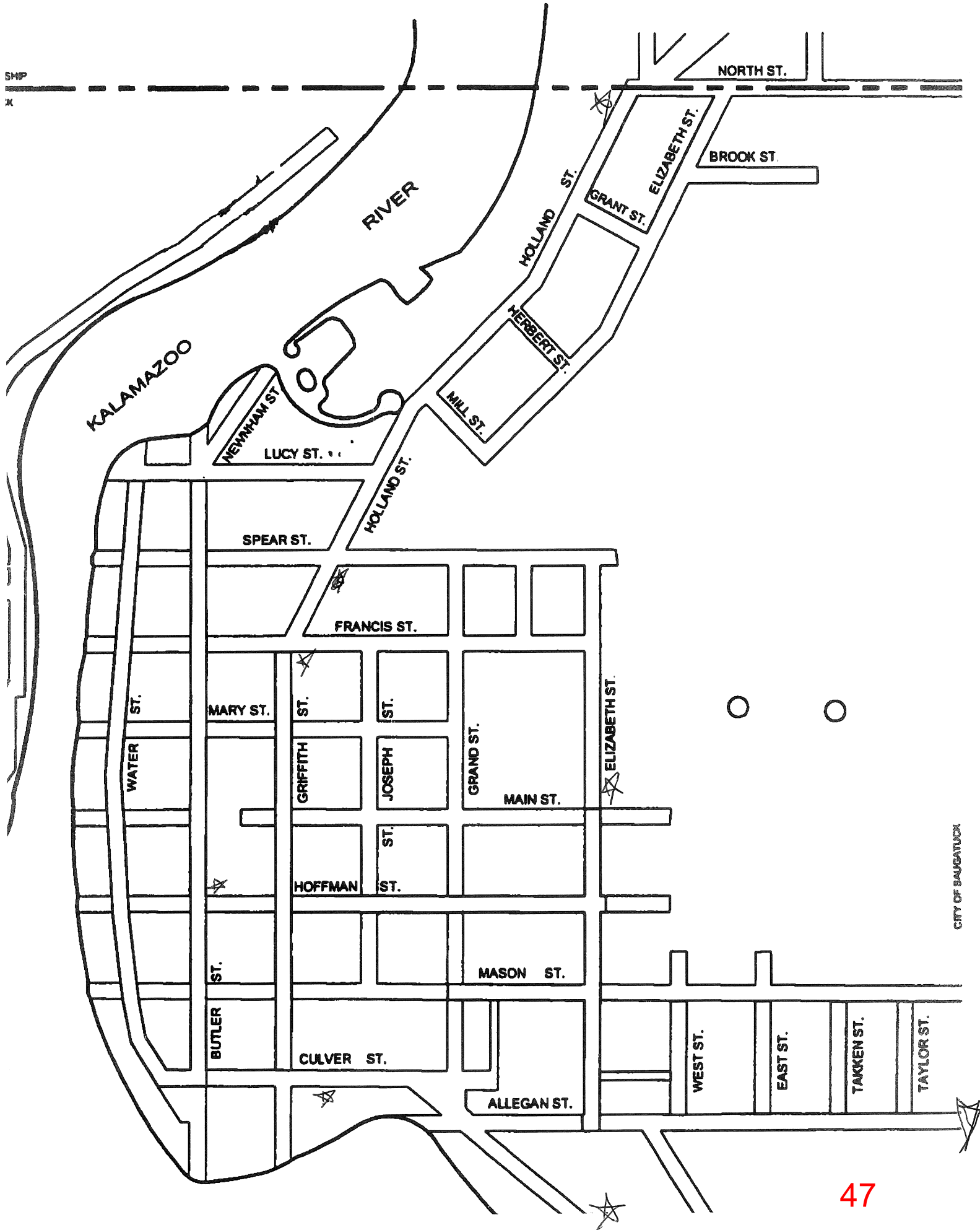
- Dimensions and type of each proposed sign
- Map showing the location of each sign
- Explanation of how each sign will be attached and secured - *coroplast signs stuck in ground w/ wire stands*

Pursuant to Section 150.30(H), please to the following questions:

- Will the signs create a traffic vision obstruction?
- Will the signs create a pedestrian traffic obstruction?
- Are the signs compatible with the surroundings and is not uniquely out of character for the community? and
- Do the signs create a situation which could be detrimental to health, safety, or welfare?



# Downtown Street / Sidewalk Closure(s)



CITY OF SAUGATUCK

## 2023 has been a good year for public art in Saugatuck.

All of the current sculptures have been cleaned.

QR codes are being developed and installed in the near future.

The education component of the codes will engage viewers

The new CVB brochure which provides a trail to the sculptures

The CVB has taken over the care and maintenance of the public art

**Empty Revisited** by Shawn Phillip Morin was damaged a few years ago and has been removed from the Rose Garden.

Shawn viewed the condition of the work. Any repair would destroy the integrity of the piece.

An insurance claim was filed and funds were received that can provide seed money for a replacement

An artist's work that has been integrated into a permanent sculpture collection should follow protocol for a replacement piece.

Morin provided images of two works that would fit the collection focus and enhance the current works. His previous works were stone which can be a fragile material for an outdoor work.

Morin is currently working in a new direction, Welded painted steel.

Some of his earlier works he has temporarily installed to gauge the public reaction to the works.

These new works have been received great reviews and there is strong support for them.



**Canary in a Coal Mine** has been proposed for the City of Saugatuck. It measures 11' in height and can be elevated even higher with a taller base. The bright yellow sculpture will be a prominent focus at any site where it is installed. The cost of the piece is \$4,500. Shawn will provide free installation and delivery (asking for mileage)

“Canary in a Coal Mine” is phrase that began being used in 1911 when the coal miners would take a canary into a mine. The bird would fly out of the mine when the bird sensed carbon monoxide, an environmental danger that could potentially deadly. In 1987, the British coal miners ceased bringing canaries into the mines, yet the phrase is still being used.

The message that Shawn is sending in this sculpture is that **our environment in Saugatuck is in danger and continues down the path of destruction.** Without action and awareness of the current situation the environment dangers that will surround us will become deadly. **We need a canary to wake up all who ignore their carbon foot print.**



A question regarding the appropriateness of bringing this particular work to the current Saugatuck public art collection.

**Of all the sculptures in the world, why would this sculpture be selected?**

**It is replacement for a sculpture created by the same sculptor.**

**The colorful, bright yellow work is bringing energy to a predominately muted sculpture collection.**

**The work is solid and well constructed by a well known national artist and is priced considerably lower than most his work and other comparable painted steel our door work.**

**The theme of the sculpture speaks to environmental issues that relate to the same challenges faced in Saugatuck.**

**Canary in a Coal Mine** is phrase that began being used in 1911 when the coal miners would take a canary into a mine. The bird would fly out of the mine when the bird sensed carbon monoxide, an environmental danger that could potentially be deadly.



The yellow canary (*Crithagra flaviventris*) is a small passerine bird in the finch family



The American **goldfinch** (*Spinus tristis*) is a small North American bird in the finch family found in Michigan

The **domestic canary**, often simply known as the **canary** (*Serinus canaria forma domestica*<sup>[5]</sup>), is a domesticated form of the wild canary, a small songbird in the finch family.

In 1987, the British coal miners ceased bringing canaries into the mines, yet the phrase is still being used. The canary in this work is sending a danger sign is that our environment is being destroyed. Without action and awareness of the current situation the environment dangers will surround us and will become deadly. We need a canary to wake up all who ignore their carbon foot print

.Proposed sites for **Canary in a Coal Mine** would be in a natural environment that is endangered by climate change and abuse.

**Oval Beach** (near the sign) would relate to the fragility of Lake Michigan



**Mt Baldhead  
Park** bringing the  
delicate balance  
of the dune  
environment



**River Bluff Park** calls for an awareness of the forested areas



**Saugatuck Sign at the corner of Blue Star and Holland St.**  
emphasizing the importance of protecting our national resources in Saugatuck.



17 July 2023

Please add this to the council workshop agenda on 19 July

To: Mayor, City Council Members, City Manager

From: G Corwin Stoppel

579 Mason St

Saugatuck, MI 49453

Greetings

We have a potentially serious safety problem on many of the side streets and even the main arteries 'on the hill.' Except in a few areas where permanent no parking signs have been posted, motorists are parking on both sides of the street. That makes the roadway so narrow that a full sized car can barely squeeze through. It would be impossible for a fire or first responder vehicle to get through.

The situation was dangerous enough over Independence Day week end; surprisingly, it was even more dangerous this past week end. We now have Venetian Weekend coming up very quickly. My understanding that the problem will be magnified even more.

I realize that a permanent solution can not be accomplished before Venetian Week end, but I am quite certain there are well established precedents for the yellow "Police Order: No Parking" signs to be placed along one side or the other of our residential streets. I am also very sure it will be unpopular, especially for larger rental groups or those who are looking for a parking place. However, the safety and well-being of residents and visitors takes priority over inconvenience.

G Corwin Stoppel

616 886 8007