



Board of Public Works and Safety

Agenda Item

Cover Sheet

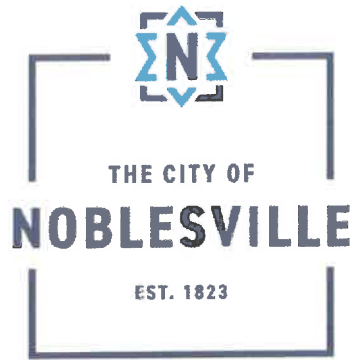
MEETING DATE: April 29, 2025

- ☒ Consent Agenda Item
- ☐ New Item for Discussion
- ☐ Previously Discussed Item
- ☐ Miscellaneous

ITEM #: 4

INITIATED BY: René Gulley

- ☒ Information Attached
- ☐ Verbal
- ☐ No Paperwork at Time of Packets



TO: Noblesville Board of Public Works and Safety

FROM: René Gulley, Operations Manager Street Department

SUBJECT: Board to Consider Annual Indiana Peony Festival Brunch & Blooms 2025

DATE: April 29, 2025

Attached you will find a request from Kelly McVey with the Indiana Peony Festival. This year's Brunch & Blooms event will be held on Saturday, May 17th from 10:00AM to 4:00PM. Set up will begin at 6:00AM and the alleys will reopen at 4:30PM. Please see the attached map for the extended alley activations. Vendors, including food and alcohol, will be set up in the alleys. Two (2) port-o-lets will be placed in the North and East Alleys as well as the in the alley next to 942 Maple Avenue. Additionally, they are requesting to reserve two (2) parking spaces on Logan, N 9th, and Conner Streets in front of each alley for vendor use. This event is in conjunction with the Indiana Peony Festival at Seminary Park.

The committee recommends the Board of Public Works approve this request.

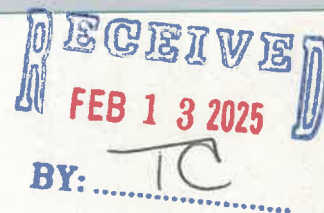


Stefanie Lascoux

ENC2-0095-2025

From: Sent on Behalf of Street Department <no-reply@egovnotices.com>
Sent: Thursday, February 13, 2025 12:25 PM
To: Street Department
Subject: Special Event Encroachment Permit Submitted - Receipt #2025-2SEEW9

EXTERNAL EMAIL - This email was sent by a person from outside your organization. Exercise caution when clicking links, opening attachments or taking further action, before validating its authenticity.



A citizen submitted the following information for one or more item(s) for which you are on the notification list. The information sent to the citizen is as follows.

Confirmation

Thank you for submitting an online Special Event Encroachment Permit. You will be contacted following a review of this application.

**This is required as part of the permit application. * Please email nsd@noblesville.in.gov with a map detailing the location of event (site map), and an event agenda or planned activities. If your event contains a program of various locations, your proposed route must also be attached.*

Confirmation: I agree to the terms and conditions listed above.

ENCROACHMENT LOCATION INFORMATION

Address or Special Event Location: Downtown Alleys - North, East, South, 9th Street Alley and Alley running perpendicular to 9th Street Alley

APPLICANT CONTACT INFORMATION

Organization Name: Indiana Peony Festival
Contact Name: Kelly McVey
Address: 7161 Oakview Circle, NOBLESVILLE, IN 46062
Phone Number: 317-903-9555
Email: ipfkelly@gmail.com
Non-Profit: Yes

EVENT LOGISTICS

Event Name: Indiana Peony Festival - Brunch & Blooms
Type of Event: Entertainment
If other, please explain:
What is the purpose of the event?: To celebrate the state flower

Event Requirements (Click All That Apply): Event Barricades; Trash Pickup

Event Starting Date & Time: 05/17/2025 at 10:00:00 AM

Event Ending Date & Time: 05/17/2025 at 04:00:00 PM

Setup Date & Time: 05/17/2025 at 06:00:00 AM

Tear Down Date & Time: 05/17/2025 at 04:30:00 PM

Total number of anticipated participants (including volunteers, spectators, runners, etc):
35000

Is this a first time event for you or the sponsoring organization at this location?: No

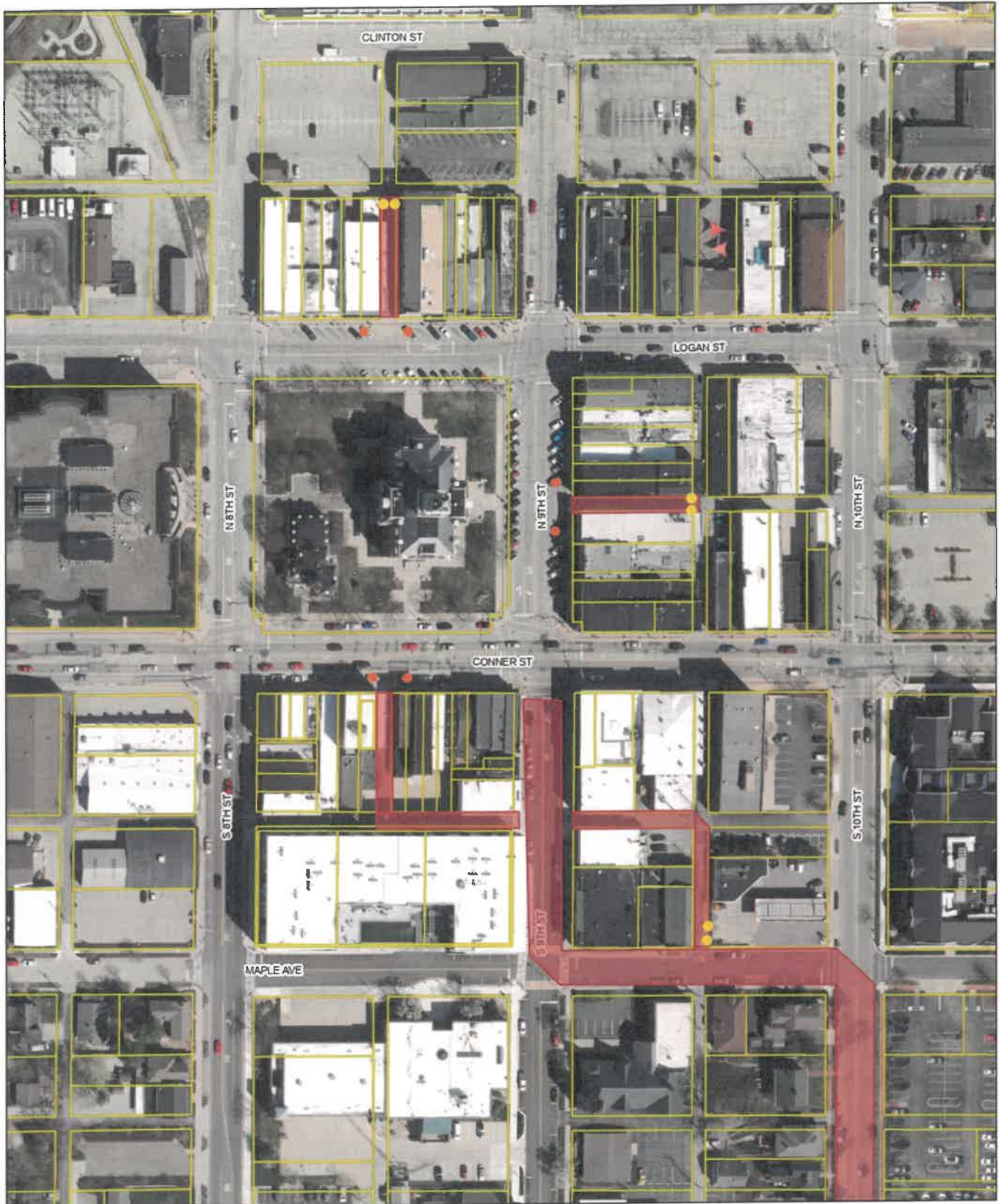
Do you plan to erect temporary structures such as stages, tents, booths, tables, bounce houses, etc for this event?: Yes

***If yes, please describe::** Tables, Chairs, Food and Beverage Stations

To stay up to date you can view the status of this item [here](#).

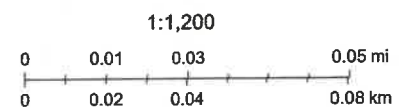
[Noblesville, IN](#)

Indiana Peony Festival Brunch & Blooms



4/2/2025, 2:48:11 PM

- centerlines
- Parcels
- = Port-o-lets - Placement may vary
- = Parking for vendors





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/17/2025

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).

PRODUCER Martin & Martin Insurance Agency 62 S 9th Street Noblesville IN 46060		CONTACT NAME: Jenna Romens PHONE (A/C, No, Ext): E-MAIL: ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: ERIE INS CO INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:		FAX (A/C, No): (317)703-1115 NAIC # 26263
INSURED Indiana Peony Festival Inc 7161 Oakview Circle Noblesville IN 46062				

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Q61-0151002	12/01/2024	12/01/2025	EACH OCCURRENCE \$ 1000000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1000000					
	MED EXP (Any one person) \$ 5000					
	PERSONAL & ADV INJURY \$ 1000000					
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					GENERAL AGGREGATE \$ 2000000
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					PRODUCTS - COMP/OP AGG \$ 2000000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					COMBINED SINGLE LIMIT (Ea accident) \$
						BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
						EACH OCCURRENCE \$
						AGGREGATE \$
						\$
						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)

CERTIFICATE HOLDER

CANCELLATION

City Of Noblesville 16 South 10th Street Noblesville IN 46060	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

Fax:
ACORD 25 (2016/03)

Email:

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