

**NOTICE OF PUBLIC MEETING
COUNCIL CHAMBERS-VILLAGE HALL
102 South Huron Avenue
Phone: 231-436-5351**

7:00 PM

March 17, 2016

**AGENDA-REGULAR MEETING
MACKINAW CITY VILLAGE COUNCIL**

- I. Roll Call**
 - II. Pledge of Allegiance**
 - III. Agenda Approval**
 - IV. Public Comments**
 - V. Consent Agenda:**
 - A. Correction and Approval of Minutes: Public Hearing/Special Meeting February 29, 2016
Regular Meeting March 03, 2016**
 - B. Special Event Applications 2016-SE-037, 2016-SE-038 and 2016-SE-040**
 - VI. Managers Report:**
 - VII. President's Report/Department Head Reports**
 - VIII. Committee Reports:**
 - Finance and Human Resources Subcommittee Report-Trustee Newman, Chair**
 - Ordinance and Policy Subcommittee Report- Trustee Michalak, Chair**
 - Facilities and Streets Subcommittee Report- Trustee Mollen, Chair**
 - XI. Old Business: None**
 - X. New Business:**
 - A. Special Event Application-2016-SE-041-Jeeps on the Mac**
 - B. Etherington Street -Shepler's Mackinac Island Ferry Co. Request**
 - C. MERS Defined Benefit Plan Adoption Agreement**
 - D. Ord. No 116 Merchant Outdoor Sales and Displays - Article II-Amendment
Reading and Adoption**
 - XII. Scheduling of Committee Meetings**
 - XIII. Accounts Payable**
 - X. Adjourn**
- FINANCE AND HUMAN RESOURCE SUBCOMMITTEE:
REVIEW BILLS @ 6:45 PM**

UNAPPROVED
MINUTES REGULAR COUNCIL MEETING
MACKINAW CITY

7:00 PM

March 03, 2016

I. Roll Call:

President Robert R. Heilman called the meeting to order and with the following Trustees present–Belinda Mollen, Scott Newman, Mario Rodriguez, Tom Chastain, and Paul Michalak. Absent-Trustee Robert Glenn. Also present- David White-Village Manager, and Lana Jaggi- Clerk.

DEPARTMENT HEADS PRESENT

Fred Thompson-Fire Chief/Zoning Administrator

Patrick Rivera, W/S Superintendent

Visitors List Attached

II Pledge of Allegiance

III. Agenda Approval

Motion Chastain seconded Newman to approve amending the agenda as presented with addition of Marina Subcommittee Report. Voice vote, motion carried unanimously.

IV. Public Comment:

Joann Leal-Village Resident -read letter on behalf of Ron Wallin regarding casino

V. Consent Agenda

Motion Newman seconded Michalak to approve consent agenda as presented. Voice vote, motion carried unanimously.

A. Correction and Approval of Minutes: Public Hearing/ Regular Meeting of

February 18, 2016 Closed Session Minutes of February 04, 2016

B. Communication Letters

1. Rep. Lee Chatfield

2. Thank You to DPW Crew-Pancake Chef

3. Top of Michigan Trail Council

C. Special Event Applications 2016-SE-032 and 2016-SE-033

VI. Managers Report as presented and submitted for file.

Additions:

-Fishing Pier Grant

VII. President's Report

VIII. Committee Reports were presented and submitted for file.

-Public Safety Subcommittee Report-presented by Trustee Rodriguez, Chair

Motion Rodriguez seconded Newman to recommend the Fire Advisory Board Appointment Policy is president appoints, council affirms and term should not exceed fire contract or three years, whichever is less. Voice vote, motion carried unanimously.

UNAPPROVED
MINUTES REGULAR COUNCIL MEETING
MACKINAW CITY

7:00 PM

March 03, 2016

Page 2

Ordinance and Policy Subcommittee Report-presented by Trustee Michalak, Chair
Marina Subcommittee Report-presented by Trustee Chastain, Chair

- XI. Old Business:**
SAW Grant-Progress Update-presentation by Larry Fox, C2AE, and placed on file a Summary of Project Activities (Scope of Work).
- X. New Business:**
- A. Special Event Application 2016-SE-034**
Motion Michalak seconded Newman to approve special event application 2016-SE-034 Star Line Chicago Yacht Race Banners Only. Voice vote, motion carried unanimously.
- B. Special Event Application 2016-SE-035**
Motion Newman seconded Mollen to approve special event application 2016-SE-035 Star Line Zoon De Mac. Voice vote, motion carried unanimously.
- C. Special Event Application 2016-SE-036**
Motion Michalak seconded Mollen to approve special event application 2016-SE-036 Shepler's Luggage Tent. Voice vote, motion carried unanimously.
- D. Ordinance No. 138, Amendment- Time Limit for Submission of Appeals to ZBA**
Reading and Adoption
Motion Newman seconded Mollen to waive the reading to amend Ord. No. 138. Voice vote, motion carried unanimously.
Motion Newman second Chastain to amend Ordinance No. 138, Time Limit for Submission of Appeals to ZBA. Roll Call: Yeas-Mollen, Newman, Rodriguez, Heilman, Chastain, Michalak. Absent-Glenn. Motion carried.
- E. Receive Engineer Recommendation /Acceptance for SAW Sanitary/Storm Sewer CCTV**
Motion Newman seconded Mollen to approve the the recommendation to award the Sanitary/ Storm Sewer CCTV bid to Tunnel Vision, Pipeline Services, Escanaba, MI for \$109,864.70. Roll Call: Yeas- Newman, Rodriguez, Heilman,Chastain, Michalak, Mollen. Absent- Glenn. Motion carried.
- F. Downtown Development Authority Board Appointment**
Pres. Heilman recommended the appointment of Sarah Grant, Mackinaw Crossings, to the DDA Board.
Motion Mollen seconded Michalak to appoint Sarah Grant, Mackinaw Crossing, to the DDA Board for term ending April 2018. Voice vote, motion carried unanimously.

UNAPPROVED
MINUTES REGULAR COUNCIL MEETING
MACKINAW CITY

7:00 PM

March 03, 2016

Page 3

- XII Scheduling of Subcommittee meetings:**
Facilities Subcommittee, Tuesday March 8th @ 3:30 pm
A. Ducharme Building
B. Surplus Village Property
- Finance and Human Resource Subcommittee, Tuesday March 8th @ 8:30 am**
1. Fee Schedule
- III. Accounts Payable**
Motion Newman seconded Mollen to pay accounts payable for March 03, 2016
in the amount of \$105,962.47 Roll call: Yeas- Rodriguez, Heilman, Chastain, Michalak,
Mollen, Newman. Absent - Glenn Motion carried.
- IX. Adjournment: 8:04 PM**

Respectfully submitted,

Robert R. Heilman; President

Lana Jaggi; Clerk

UNAPPROVED
MINUTES PUBLIC HEARING
MACKINAW CITY

4:00 P.M.

February 29, 2016

I. ROLL CALL TO ORDER/WELCOME

President Robert Heilman called the meeting to order and with the following Trustees present – Belinda Mollen, Scott Newman, Mario Rodriguez, Tom Chastain and Paul Michalak. Absent – Robert Glenn.

II DRAFT RECREATION PLAN AMENDMENT

No public comments

III. ADJOURN PUBLIC HEARING: 4:03 PM

Respectfully submitted:

Robert Heilman; President

Lana Jaggi; Clerk

UNAPPROVED
MINUTES SPECIAL COUNCIL MEETING
MACKINAW CITY

4:03 P.M.

February 29, 2016

I. ROLL CALL TO ORDER/WELCOME

President Robert Heilman called the meeting to order and with the following Trustees present – Belinda Mollen, Scott Newman, Mario Rodriguez, Tom Chastain and Paul Michalak. Absent – Robert Glenn.

II PLEDGE OF ALLEGIANCE

III. PUBLIC COMMENTS: None

IV. RESOLUTION TO ADOPT RECREATION PLAN AMENDMENT

Motion Mollen support Newman to waive the reading of the Resolution to adopt Recreation Plan Amendment. Voice vote, motion carried unanimously.

Motion Newman support Chastain to adopt the Resolution for amendment to the Recreation Plan of the Village of Mackinaw City. Roll Call: Yeas – Newman, Rodriguez, Heilman, Chastain, Michalak and Mollen. Absent – Glenn.
Motion carried.

III. ADJOURN PUBLIC HEARING: 4:06 PM

Respectfully submitted:

Robert Heilman; President

Lana Jaggi; Clerk

Special Events for Council March 17, 2016

1. 2016-SE-037-Zoo-De-Mack Finish Line Party-May 21, 2016 to be held at the Stage area at the Crossings. This is an ongoing event and all department heads have signed off. There are no fees.
2. 2016-SE-038-Sidewalk Sales within the Crossings on August 19 thru August 21, 2016. This is year number 3 for this event. All department heads have signed off. There are no fees.
3. 2016-SE-040-Hopps of Fun- September 9 and 10, 2016. This event will take place within the Crossings. This is an ongoing event and all department heads have signed off. There are no fees.
4. 2016-SE-041-Jeeps on the Mac- April 22, 2016 from 1pm-5pm. This event is sponsored by the St. Ignace Events Committee and is very similar to the Mini Cooper Bridge Crossing. They have letters of permission from: the City of St. Ignace, Darrow Bros. and The Bridge Authority. They have included a site map and a sample of signage. They will provide porta potties. Garbage cans from the DPW will be needed and I will bill after the event for these. They will also need the PD for traffic control and this will also be billed out after the event. All department heads have signed off with only one stipulation-the Chief has asked that they not start the parade until 3:15 pm instead of the requested 3:00 pm. This is so traffic has time to clear at the school. Mrs. Peterson has agreed to this but stated that all of their print advertising is complete so the advertisements will still read 3:00 pm.

2016-SF-037

To Admin. Staff: _____

To Council: 3-17-16

Decision: Approved Denied

Minutes to Applicant: _____

SPECIAL EVENT APPLICATION
VILLAGE OF MACKINAW CITY
102 S. HURON AVENUE, MACKINAW CITY, MI 49701
(231) 436-5351

Must be filled out in its entirety and returned to the Village Clerk's Office 45 days prior to scheduled event

SPONSORING ORGANIZATION INFORMATION

LEGAL BUSINESS NAME: MACKINAW CROSSINGS TELEPHONE: 231-436-5030

MAILING ADDRESS: PO Box 3 Mackinaw City MI 49701

CONTACT NAME: SARAH GRANT TELEPHONE: 231-420-2047

E-MAIL ADDRESS: Sgrant@mackinawcrossings.com CELL PHONE: 231-420-2047

CONTACT PERSON ON DAY OF EVENT

CONTACT NAME: SARAH GRANT TELEPHONE: 231-436-5030

E-MAIL ADDRESS: Sgrant@mackinawcrossings.com CELL PHONE: 231-420-2047

EVENT INFORMATION

NAME OF EVENT: Zoo-De-mack Finish Line Party

PURPOSE OF EVENT: Keep bike riders in Mackinaw City longer

Non-Profit For-Profit Village Operated/Sponsored Co-Sponsored

Marathon/Race Festival/Fair Arts & Crafts Show Other _____

DATE(S): May 21 FROM 12:00 A.M. P.M. TO 9:00 A.M. P.M.

FROM _____ A.M. P.M. TO _____ A.M. P.M.

FROM _____ A.M. P.M. TO _____ A.M. P.M.

FROM _____ A.M. P.M. TO _____ A.M. P.M.

RAIN DATE(S): _____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

FROM _____ A.M. P.M. TO _____ A.M. P.M.

EVENT LOCATION: Stage Area Center Court

ESTIMATED NUMBER OF ATTENDEES: 4,000

WILL YOU UTILIZE SHOWERS: Yes No

ESTIMATED NUMBER OF VOLUNTEERS: 0

ESTIMATE DATE/TIME FOR SET-UP: May 20 4:00 A.M. P.M.

ESTIMATE DATE/TIME FOR CLEAN-UP: May 21 9:00 A.M. P.M.



PARADE PERMIT

Includes runs, walks, and other uses of the Village public right-of-way.

POLICE ESCORT NEEDED: Yes No

PARADE ROUTE PROVIDED WITH APPLICATION: Yes No

PROPOSED ROUTE: _____

Date and time Parade will start: _____ A.M. P.M.

Date and time Parade will end: _____ A.M. P.M.

EVENT DETAILS

SITE MAP: All applicants must provide a drawing of the event area and are due at application. Site map must be legible, be pre approved by Village Staff, and include and/or identify the following, if applicable:

- Lot lines
- Fire Hydrants
- Tents
- Table and chair diagram
- Bicycle Routes (including route into and out of town)
- All bicycle events will utilize the Village's Hike and Bike Trail
- Label roads and closest cross roads
- Locate and label buildings
- Portable Restrooms
- Placement of food vendors
- Sidewalks
- Parking lots
- Ingress and egress points
- Parade Route
- All proposed modifications

WILL MUSIC BE PROVIDED DURING THIS EVENT: Yes No

TYPE OF MUSIC PROPOSED: Live Amplification Recorded Loudspeakers

PROPOSED TIME MUSIC WILL BEGIN: 12:00 END: 8:00
(NO LATER THAN 10 P.M.)

FOOD VENDORS/CONCESSIONS: (Contact Emmet or Cheboygan 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

See page 4 for required language naming the Village as an additional insured

Provide Copy of Michigan Liquor Control License

If yes, describe measures to be taken to prohibit the sale of alcohol to minors: Orange snow fence
Surrounding serving area. Security at both entrances.

COPY OF LIABILITY INSURANCE PROVIDED WITH APPLICATION: Yes No

Date insurance binder provided: _____
See page 4 for required language naming the Village as an additional insured

WILL FIREWORKS BE APART OF EVENT: Yes No

Provide Copy of Liability Insurance

Provide Copy of Fireworks Permit

See page 4 for required language naming the Village as an additional insured

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

"YARD" SIGNS - Number requested: 6 (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.)

SIGNAGE AT EVENT SITE - Location(s): Mackinaw Crossings entrance(s)

Description of signs: ZOO Do Mack Finish Line Party
(Signs at event site cannot be displayed prior to day of the event and must at the end of the event.)

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

If yes, where do you propose your vendors park? _____

EVENT LONG TERM PARKING: Will there be long term parking? Yes No

If yes, from date _____ to ending date: _____

Long term parking identified on the site map? Yes No

OVERNIGHT CAMPING: Will there be camping over night? Yes No

Name of Facility where camping: _____

If yes, from date: _____ to ending date: _____

Camp sites identified on the site map? Yes No

TENTS/CANOPIES/MISC: The Village of Mackinaw City does have tables and/or chairs available for rental. You will need to provide a diagram of the area for set up. Will the following be constructed or located in the event area?:

BOOTHS – QUANTITY _____

Size _____

TENTS – QUANTITY _____

CHAIRS – QUANTITY _____

AWNINGS – QUANTITY _____

TABLES – QUANTITY _____

Seating diagram for booths, awnings, tables and chairs provided with application: Yes No

PORTABLE RESTROOMS/TOILETS

Have you made arrangements to provide portable restroom facilities at your event? Yes No

If yes, total number of portable toilets: _____ Number of ADA accessible portable toilets: _____

If no, explain: Ample bathrooms Available

Restroom Company Name: _____

Address Street: _____

City: _____ State: _____ Zip: _____

Telephone Day: _____ Evening: _____ Fax: _____ Cell: _____

Equipment set up: Date: 8/27 Time: _____

Equipment pick up: Date: _____ Time: _____

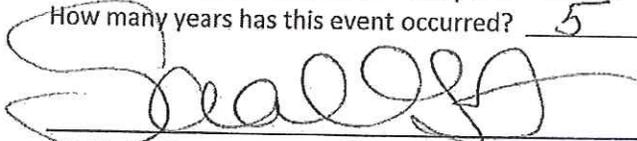
Portable restrooms identified on the site map? Yes No

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 Village of Mackinaw City 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.

The Village of Mackinaw City expressly reserves the right in its sole discretion to cancel a private event for Village purposes and the Site user agrees, as a term of its use of a site, to release and waive all claims of any kind (including a claim for consequential damages), against the Village, its officers or employees arising out of cancellation of the user's event.

Is this an annual event? Yes No
Is this event expected to occur next year? Yes No
How many years has this event occurred? 5


Applicant Signature
Print name of applicant: SARAH GRANT

2/25/10
Date

VILLAGE USE ONLY – Department representative please initial if approved

DPW FACILITY SERVICES
 POLICE FIRE [] AMBULANCE
[] RECREATION

VILLAGE COUNCIL COUNCIL APPROVAL DATE: _____

CONDITIONS, IF ANY: _____

AUTHORIZED BY: _____ DATE: _____
VILLAGE MANAGER



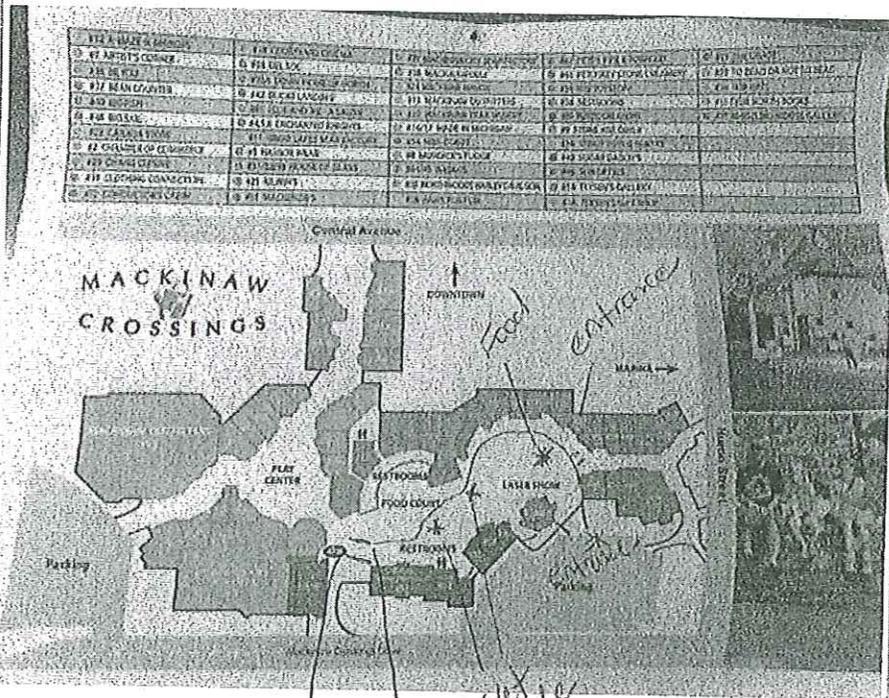
Move to... ▾

- Folders
- Inbox (3)
- Drafts
- Sent
- Trash

Subject **IMG_5784.JPG**
 Sender Mackinaw Crossings
 Recipient sgrant@mackinawcrossings.com
 Date Today 08:49

IMG_5784.JPG

Sent from my iPhone



entrance
 ticket table
 ticket table

2016-SE - 038

Each Store ~~will~~ + Will maintain proper flow of traffic on sidewalk

To Admin. Staff: _____
To Council: 3-17-16
Decision: Approved Denied
Minutes to Applicant: _____

SPECIAL EVENT APPLICATION
VILLAGE OF MACKINAW CITY
3. HURON AVENUE, MACKINAW CITY, MI 49701
(231) 436-5351

Must be filled out in its entirety and returned to the Village Clerk's Office 45 days prior to scheduled event

SPONSORING ORGANIZATION INFORMATION

LEGAL BUSINESS NAME: Mackinaw Crossings TELEPHONE: 231-436-5030
MAILING ADDRESS: PO Box 3 Mackinaw City MI 49701
CONTACT NAME: SARAH GRANT TELEPHONE: 231-436-5030
E-MAIL ADDRESS: Sgrant@mackinawcrossings.com CELL PHONE: 231-420-2047

CONTACT PERSON ON DAY OF EVENT

CONTACT NAME: SARAH GRANT TELEPHONE: 231-436-5030
E-MAIL ADDRESS: Sgrant@mackinawcrossings.com CELL PHONE: 231-420-2047

EVENT INFORMATION

NAME OF EVENT: Side walk sales to coincide with our Renaissance Festival
PURPOSE OF EVENT: Create a marketplace environment

- Non-Profit For-Profit Village Operated/Sponsored Co-Sponsored
 Marathon/Race Festival/Fair Arts & Crafts Show Other SALE

DATE(S): 8/19/16 FROM 10:00 A.M. P.M. TO 10:00 A.M. P.M.
8/20/16 FROM 10:00 A.M. P.M. TO 10:00 A.M. P.M.
8/21/16 FROM 10:00 A.M. P.M. TO 10:00 A.M. P.M.

RAIN DATE(S): _____ FROM _____ A.M. P.M. TO _____ A.M. P.M.
_____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

EVENT LOCATION: Mackinaw Crossings

ESTIMATED NUMBER OF ATTENDEES: 400

WILL YOU UTILIZE SHOWERS: Yes No

ESTIMATED NUMBER OF VOLUNTEERS: 0

ESTIMATE DATE/TIME FOR SET-UP: 8/19/16 9:00 A.M. P.M.

ESTIMATE DATE/TIME FOR CLEAN-UP: 8/21/16 10:00 A.M. P.M.

RECEIVED
3-1-16

PARADE PERMIT

Includes runs, walks, and other uses of the Village public right-of-way.

POLICE ESCORT NEEDED: Yes No

PARADE ROUTE PROVIDED WITH APPLICATION: Yes No

PROPOSED ROUTE: _____

Date and time Parade will start: _____ A.M. P.M.

Date and time Parade will end: _____ A.M. P.M.

EVENT DETAILS

SITE MAP: All applicants must provide a drawing of the event area and are due at application. Site map must be legible, be pre approved by Village Staff, and include and/or identify the following, if applicable:

- Lot lines
- Fire Hydrants
- Tents
- Table and chair diagram
- Bicycle Routes (including route into and out of town)
- All bicycle events will utilize the Village's Hike and Bike Trail
- Label roads and closest cross roads
- Locate and label buildings
- Portable Restrooms
- Placement of food vendors
- Sidewalks
- Parking lots
- Ingress and egress points
- Parade Route
- All proposed modifications

WILL MUSIC BE PROVIDED DURING THIS EVENT: Yes No

TYPE OF MUSIC PROPOSED: Live Amplification Recorded Loudspeakers

PROPOSED TIME MUSIC WILL BEGIN: _____ END: _____
(NO LATER THAN 10 P.M.)

FOOD VENDORS/CONCESSIONS: (Contact Emmet or Cheboygan 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
See page 4 for required language naming the Village as an additional insured
- Provide Copy of Michigan Liquor Control License

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

COPY OF LIABILITY INSURANCE PROVIDED WITH APPLICATION: Yes No

Date insurance binder provided: _____
See page 4 for required language naming the Village as an additional insured

WILL FIREWORKS BE APART OF EVENT: Yes No

- Provide Copy of Liability Insurance
- Provide Copy of Fireworks Permit
See page 4 for required language naming the Village as an additional insured

EVENT SIGNAGE: Village Council approval is required for any temporary signing in the public right-of-way, across a street or on Village 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.)

SIGNAGE AT EVENT SITE - Location(s): Each entrance (3) Signs
each road sign Central + Huron Entrance

Description of signs: Mackinaw Crossings Sidewalk Sales
(Signs at event site cannot be displayed prior to day of the event and must at the end of the event.)

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

If yes, where do you propose your vendors park? _____

EVENT LONG TERM PARKING: Will there be long term parking? Yes No

If yes, from date _____ to ending date: _____

Long term parking identified on the site map? Yes No

OVERNIGHT CAMPING: Will there be camping over night? Yes No

Name of Facility where camping: _____

If yes, from date: _____ to ending date: _____

Camp sites identified on the site map? Yes No

TENTS/CANOPIES/MISC: The Village of Mackinaw City does have tables and/or chairs available for rental. You will need to provide a diagram of the area for set up. Will the following be constructed or located in the event area?:

BOOTHS - QUANTITY _____

Size _____

TENTS - QUANTITY _____

CHAIRS - QUANTITY _____

AWNINGS - QUANTITY _____

TABLES - QUANTITY _____

Seating diagram for booths, awnings, tables and chairs provided with application: Yes No

PORTABLE RESTROOMS/TOILETS

Have you made arrangements to provide portable restroom facilities at your event? Yes No

If yes, total number of portable toilets: _____ Number of ADA accessible portable toilets: _____

If no, explain: _____

Restroom Company Name: _____

Address Street: _____

City: _____ State: _____ Zip: _____

Telephone Day: _____ Evening: _____ Fax: _____ Cell: _____

Equipment set up: Date: _____ Time: _____

Equipment pick up: Date: _____ Time: _____

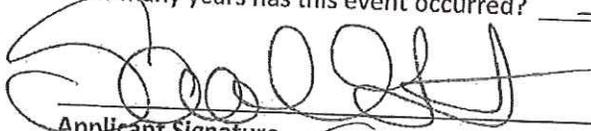
Portable restrooms identified on the site map? Yes No

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 Village of Mackinaw City 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.

The Village of Mackinaw City expressly reserves the right in its sole discretion to cancel a private event for Village purposes and the Site user agrees, as a term of its use of a site, to release and waive all claims of any kind (including a claim for consequential damages), against the Village, its officers or employees arising out of cancellation of the user's event.

Is this an annual event? Yes No
Is this event expected to occur next year? Yes No
How many years has this event occurred? 3


Applicant Signature _____
Print name of applicant: SAAT GRANT

2/26/16
Date

VILLAGE USE ONLY – Department representative please initial if approved

<input checked="" type="checkbox"/> DPW	<input checked="" type="checkbox"/> FACILITY SERVICES	
<input checked="" type="checkbox"/> POLICE	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> AMBULANCE
<input type="checkbox"/> RECREATION		

VILLAGE COUNCIL COUNCIL APPROVAL DATE: _____

CONDITIONS, IF ANY: _____

AUTHORIZED BY: _____ DATE: _____

VILLAGE MANAGER

2016-SE-040

To Admin. Staff: 3-9-16
To Council: 3-17-16
Decision: Approved Denied
Minutes to Applicant: _____

**SPECIAL EVENT APPLICATION
VILLAGE OF MACKINAW CITY
102 S. HURON AVENUE, MACKINAW CITY, MI 49701
(231) 436-5351**

Must be filled out in its entirety and returned to the Village Clerk's Office 45 days prior to scheduled event

SPONSORING ORGANIZATION INFORMATION

LEGAL BUSINESS NAME: Mackinaw Crossings TELEPHONE: 231-436-5080
MAILING ADDRESS: PO Box 370 Mackinaw City MI 49701
CONTACT NAME: SARAH GRANT TELEPHONE: 231-436-5030
E-MAIL ADDRESS: Sgrant@mackinawcrossings.com CELL PHONE: 231-420-2047

CONTACT PERSON ON DAY OF EVENT

CONTACT NAME: SARAH GRANT TELEPHONE: 231-436-5030
E-MAIL ADDRESS: Sgrant@mackinawcrossings.com CELL PHONE: 231-420-2047

EVENT INFORMATION

NAME OF EVENT: Hopps of fun
PURPOSE OF EVENT: Celebrate Summer

- Non-Profit For-Profit Village Operated/Sponsored Co-Sponsored
 Marathon/Race Festival/Fair Arts & Crafts Show Other _____

DATE(S): Sept 9 FROM 5:00 A.M. P.M. TO 10:00 A.M. P.M.
Sept 10 FROM 1:00 A.M. P.M. TO 10:00 A.M. P.M.
_____ FROM _____ A.M. P.M. TO _____ A.M. P.M.
_____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

RAIN DATE(S): N/A FROM _____ A.M. P.M. TO _____ A.M. P.M.
_____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

EVENT LOCATION: Entertainment Ct Mackinaw Crossings

ESTIMATED NUMBER OF ATTENDEES: 2,000

WILL YOU UTILIZE SHOWERS: Yes No

ESTIMATED NUMBER OF VOLUNTEERS: N/A

ESTIMATE DATE/TIME FOR SET-UP: Sept 9 10:00 A.M. P.M.

ESTIMATE DATE/TIME FOR CLEAN-UP: Sept 11 10:00 A.M. P.M.



PARADE PERMIT

Includes runs, walks, and other uses of the Village public right-of-way.

POLICE ESCORT NEEDED: Yes No

PARADE ROUTE PROVIDED WITH APPLICATION: Yes No

PROPOSED ROUTE: _____

Date and time Parade will start: _____ A.M. P.M.

Date and time Parade will end: _____ A.M. P.M.

EVENT DETAILS

SITE MAP: All applicants must provide a drawing of the event area and are due at application. Site map must be legible, be pre approved by Village Staff, and include and/or identify the following, if applicable:

- Lot lines
- Fire Hydrants
- Tents
- Table and chair diagram
- Bicycle Routes (including route into and out of town)
- All bicycle events will utilize the Village's Hike and Bike Trail
- Label roads and closest cross roads
- Locate and label buildings
- Portable Restrooms
- Placement of food vendors
- Sidewalks
- Parking lots
- Ingress and egress points
- Parade Route
- All proposed modifications

WILL MUSIC BE PROVIDED DURING THIS EVENT: Yes No

TYPE OF MUSIC PROPOSED: Live Amplification Recorded Loudspeakers

PROPOSED TIME MUSIC WILL BEGIN: 1:00 END: 10:00
(NO LATER THAN 10 P.M.)

FOOD VENDORS/CONCESSIONS: (Contact Emmet or Cheboygan 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
See page 4 for required language naming the Village as an additional insured

Provide Copy of Michigan Liquor Control License

If yes, describe measures to be taken to prohibit the sale of alcohol to minors: Orange Snow fence, Security at entrance.

COPY OF LIABILITY INSURANCE PROVIDED WITH APPLICATION: Yes No

Date insurance binder provided: _____
See page 4 for required language naming the Village as an additional insured

WILL FIREWORKS BE APART OF EVENT: Yes No

Provide Copy of Liability Insurance

Provide Copy of Fireworks Permit

See page 4 for required language naming the Village as an additional insured

EVENT SIGNAGE: Village Council approval is required for any temporary signing in the public right-of-way, across a street or on Village 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.)

SIGNAGE AT EVENT SITE - Location(s): 3 location signs Central Huron entrance and main entrance signs

Description of signs: 20th Annual Hopps of Huron Need size of signs
(Signs at event site cannot be displayed prior to day of the event and must at the end of the event.)

VENDOR PARKING: Have you made arrangement for vendor parking? Yes No
If yes, where do you propose your vendors park? _____

EVENT LONG TERM PARKING: Will there be long term parking? Yes No
If yes, from date _____ to ending date: _____

Long term parking identified on the site map? Yes No

OVERNIGHT CAMPING: Will there be camping over night? Yes No
Name of Facility where camping: _____

If yes, from date: _____ to ending date: _____

Camp sites identified on the site map? Yes No

TENTS/CANOPIES/MISC: The Village of Mackinaw City does have tables and/or chairs available for rental. You will need to provide a diagram of the area for set up. Will the following be constructed or located in the event area?:

BOOTHS - QUANTITY _____

Size _____

TENTS - QUANTITY _____

CHAIRS - QUANTITY _____

AWNINGS - QUANTITY _____

TABLES - QUANTITY _____

Seating diagram for booths, awnings, tables and chairs provided with application: Yes No

PORTABLE RESTROOMS/TOILETS

Have you made arrangements to provide portable restroom facilities at your event? Yes No

If yes, total number of portable toilets: _____ Number of ADA accessible portable toilets: _____

If no, explain: ample restrooms in Mackinaw Crossing

Restroom Company Name: _____

Address Street: _____

City: _____

State: _____

Zip: _____

Telephone Day: _____

Evening: _____

Fax: _____

Cell: _____

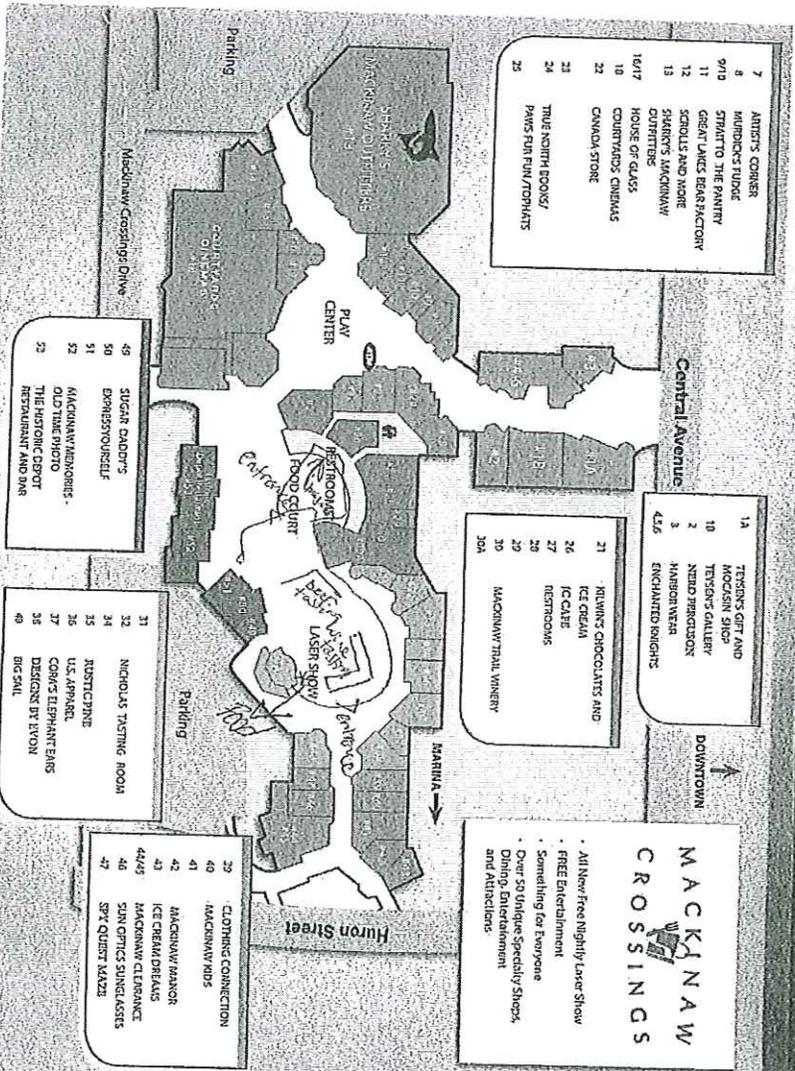
Equipment set up: Date: _____ Time: _____

Equipment pick up: Date: _____ Time: _____

Portable restrooms identified on the site map? Yes No

Mackinaw Crossings

+/-600 to +/-1800 SF Retail Space Available
 248 S. Huron, Mackinaw City, Michigan 49701



- 7 ARTIST'S CORNER
- 8 MAURICK'S FUDGE
- 9/10 STRAIT TO THE PANTY
- 11 GREAT LINKS BEAS FACTORY
- 12 SCHOOLS AND MORE
- 13 PHARRIS'S MACKINAW
- 14/17 HOUSE OF GLASS
- 18 COUNTDOWN CINEMAS
- 22 CANADA STORE
- 23 TRUE NORTH BOOKS/
- 24 PAYS FUN FUN/TOPHATS
- 25

- 14 TESSON'S GIFT AND
- 18 MOCOSIN SHOP
- 2 TESSON'S GALLERY
- 3 NEMO PERFECTION
- 3 HARBORWEAR
- 456 ENCHANTED NIGHTS
- 21 RIVINS' CHOCOLATS AND
- 26 ICE CREAM
- 27 IC CAFE
- 28 RESTROOMS
- 29
- 30
- 30A MACKINAW TRAIL WINERY

- 49 SUGAR BABY'S
- 50 BROWNSTOUTS
- 51
- 52 MACKINAW MAGNOLIES -
- 52 Q&A TIME PHOTO
- 52 THE HISTORIC DEPOT
- 52 RESTAURANT AND BAR

- 31 MICHIGAN TASTING ROOM
- 32
- 34
- 35 RUSTIC CHINE
- 35 U.S. APPAREL
- 37 CORN'S ELEPHANT EARS
- 38 DESIGN BY IVON
- 49 BIG PAUL

- 39 CLOTHING CONNECTION
- 40 MACKINAW KIDS
- 41
- 42 MACKINAW MANOR
- 43 ICE CREAM BERRIES
- 44/45 MACKINAW CLUBHOUSE
- 46 SUN OPTICS SUNGLASSES
- 47
- 47 SPY QUIET MAZE

MACKINAW CROSSINGS

- All New Free Nightly Live Show
- FREE Entertainment
- Something for Everyone
- Over 30 Unique Specialty Shops, Dining, Entertainment and Attractions.

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 Village of Mackinaw City 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.

The Village of Mackinaw City expressly reserves the right in its sole discretion to cancel a private event for Village purposes and the Site user agrees, as a term of its use of a site, to release and waive all claims of any kind (including a claim for consequential damages), against the Village, its officers or employees arising out of cancellation of the user's event.

Is this an annual event? Yes No
Is this event expected to occur next year? Yes No
How many years has this event occurred? 20

Sarah Graf
Applicant Signature
Print name of applicant: Sarah Graf

3/4/16
Date

VILLAGE USE ONLY – Department representative please initial if approved

DPW FACILITY SERVICES
 POLICE FIRE [] AMBULANCE
[] RECREATION

VILLAGE COUNCIL COUNCIL APPROVAL DATE: _____

CONDITIONS, IF ANY: _____

AUTHORIZED BY: _____ DATE: _____
VILLAGE MANAGER

3 → 3'5'

Welcome to the 20th
Annual Hops of FUN
With logo → Frog →

(3) Small yard signs with arrows
Hops of FUN →

To: Mackinaw City Council
From: David M. White, Village Manager
Date: March 11, 2016
Re: Manager Report for March 17, 2016, Council Meeting

X. New Business:

- A. Special Event Application-2016-SE -041- Jeeps on the Mac-** This event is new this year and is similar to the Mini Cooper event which took place last year. The event is to take place April 22nd with Jeeps arriving in the morning and the parade to start at 3:15 pm per Chief Wyman's request so as not to be in conflict with the release of students from School. They have requested Trash cans from the DPW and traffic control from the Police Department. These services will be billed to the organizers after the event. All required documentation has been received and staff recommends approval of this application with the requirement that the parade start at 3:15pm so as not to conflict with student release traffic at the School. I would be happy to address any questions Trustees may have regarding this request.
- B. Etherington Street- Shepler's Mackinaw Island Ferry Co. Request-** This is a request from Chris Shepler for Shepler's Mackinaw Island Ferry Co. to acquire a section of Etherington Street for additional parking. The Village by law cannot lease public Right-of- Way. In the section of Etherington Street under discussion there are Public utilities in the right of way in which an easement would be needed should the Village give up ownership. Mr. Shepler is planning to be in attendance to answer any questions the Council may have.

C. MERS Defined Benefit Plan Adoption Agreement- This agreement is an amendment to the existing MERS agreement for the Police Department. This amendment will address an issue with the current agreement that caps the retirement contribution for the Village at 10%. Some years the fund increase is above 10% which the employee should pay per the collective bargaining agreement but currently are not allow to. This amendment now allows employee contributions to cover any yearly increases over the Village provided 10%. I would be happy to address any questions that Council may have.

D. Ordinance No. 116 Customized Product Sales-Amendment Reading and Adoption- The amendments to this ordinance address some issues regarding customized product sales. In this amendment a set template provided by the Clerk will now be required for all written estimates with additional information required to protect both the consumer and business owners. This amendment also outlines how the required sign is to be hung and that it is now provided by the Village. In prior years the businesses were allowed to produce the sign and they varied by business. These amendments to ordinance 116 standardize two items in which in the past were addressed by each business individually. I would be happy to address any questions Trustee's may have.

**ARRESTS MADE BY THE MACKINAW CITY POLICE DEPARTMENT
YEAR TO DATE THROUGH FEBRUARY 29**

CRIME TYPE	2011	2012	2013	2014	2015	2016
CRIMES AGAINST PERSON	2	1	0	10	1	0
PROPERTY CRIMES	5	2	3	4	1	0
MORALS/DECENCY CRIMES	10	0	0	1	1	0
PUBLIC ORDER CRIMES	0	7	21	7	16	19
TOTAL	17	10	24	22	19	19

Citations Issued Year To Date 2016:	33
Citations Issued Year To Date 2015:	23
Citations Issued Year To Date 2014:	14

**COMPLAINTS RECEIVED BY THE MACKINAW CITY POLICE DEPARTMENT
YEAR TO DATE THROUGH FEBRUARY 29**

	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>
Traffic Crash:						
Public Roadway	4	5	3	5	6	3
Private Property	2	4	2	4	0	3
Personal Injury Crash	1	0	0	1	0	1
TOTAL	7	9	5	10	6	7
Breaking and Entering:						
Business	0	0	0	0	0	0
Residence	0	0	0	1	0	0
Other	0	0	0	0	0	0
TOTAL	0	0	0	1	0	0
Larceny:						
From Bldg./Veh./Pub. Place	4	2	2	0	0	0
Fail to Pay for Services	3	0	2	2	0	0
Bad Check/Fraud	0	1	0	0	0	0
TOTAL	7	3	4	2	0	0
Malicious Destruction of Property:	1	2	0	3	0	1
Domestic/Civil:	5	8	7	4	3	4
Assault:	3	5	0	4	1	2
Stolen Vehicle:	0	0	0	0	0	0
Reports Taken to Date:	111	110	102	92	94	130

MACKINAW CITY FIRE DEPARTMENT
Activity Report

	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>
Runs						
January	7	5	3	9	9	3
February	4	3	4	5	3	1
March	3	5	3	2	3	
April	3	4	2	5	5	
May	7	7	6	8	5	
June	3	8	14	7	7	
July	9	10	8	5	11	
August	12	10	11	5	8	
September	9	9	7	6	3	
October	11	3	9	7	6	
November	7	6	5	6	4	
December	4	2	2	5	6	
TOTAL RUNS FOR YEAR	79	72	74	70	70	4
Training						
January	2	1	2	2	2	2
February	3	2	2	2	2	2
March	2	2	2	4	2	
April	1	2	2	2	2	
May	2	2	2	2	2	
June	2	2	2	2	2	
July	2	3	2	2	2	
August	2	3	2	2	2	
September	1	1	2	1	1	
October	3	2	4	2	2	
November	2	2	2	2	2	
December	1	0	1	3	2	
TOTAL TRAININGS FOR YEAR	23	22	25	26	23	4

**Village of Mackinaw City
Monthly Report – Water & Wastewater For February 2016**

Routine Maintenance and Usage

<u>WATER FLOW</u>	<u>2016</u>	<u>2015</u>	<u>WASTEWATER FLOW</u>	<u>2016</u>	<u>2015</u>
MAXIMUM	.241 MG	.273 MG	MAXIMUM	.232 MG	.277 MG
AVERAGE	.155 MG	.193 MG	AVERAGE	.181 MG	.188 MG
TOTAL	4.507 MG	5.396 MG	TOTAL	5.263 MG	5.286 MG

- Number of water turn-ons during the month: 0
- Number of water shutoffs during the month: 0
- Number of new water service connections during the month: 0
- Number of new sewer service connections during the month: 0
- Continue to maintain plant operation to efficiently treat wastewater
- Submit wastewater report to the state of Michigan DEQ & EPA
- Continue to conduct operation to meet the village's national pollution discharge permit
- Continue lab operations that efficiently and accurately measure wastewater operation parameters
- Conduct daily monitoring of the village's eight wastewater lift stations to maintain efficiency and reliable pumping operations
- Continue to operate our water system to meet state and federal drinking water standards
- Perform daily monitoring of the village's four municipal water wells
- Coordinate and perform water analysis for quality and to maintain safety of drinking water
- Conduct routine maintenance to our water system
- Continue performing monthly checks and required testing of necessary safety equipment
- Exercise emergency backup equipment to ensure reliability

New and Continued Projects:

- Pat Rivera has completed a DEQ seminar in Lansing (continuing education credits).
- The water department continues working on the Cross Connection program with H2O Compliance Services.
- Several meetings took place regarding the SAW Grant program, including the bid opening for the CCTV portion of the grant. Tunnel Vision out of Escanaba will be doing sewer and storm cleaning and televising.
- Pat Rivera, Mike Karll and the Mr. White attended a meeting with the DEQ David Lindsay (senior geologist) and Mr. Craig Oakley (senior environmental quality analyst). The meeting was about our WHPP (Wellhead Protection Program) and the potential for contamination sites such as underground storage, old and new fuel stations, heating oil tanks, old village dumps, etc.
- The water department continued to work on the safety program including safety checks and safety discussions.
- The water department received our DEQ drinking water monitoring schedule for 2016, outlining the requirements for our public water supply.
- Pat Rivera and Mike Karll conducted meetings regarding a possible water main project on West Central.
- Meetings will be necessary to plan the implementation phase and information gathering regarding the private and geothermal well ordinances.

Notable Events Affecting Water & Wastewater Department:

The Water & Sewer department had 3 callouts during the month, two of which were system callouts and one which was a frozen water service.

DPW/Facilities Progress for February 2016

The DPW has been working on many things over the month of February. The work completed is as follows but is not limited to.

Roads

- Patching of roads has still been limited due to being covered with snow and ice but will be done when the material can be applied properly.
- Roads have been plowed and sanded/salted as needed.
- It was determined that because of an endangered bat and limitations on when certain trees can be cut that the DPW would do the tree removals along W Central in preparation for the road project.

Equipment

- Routine maintenance continues to be done on vehicles and equipment.
- Equipment needs for the upcoming maintenance season is being evaluated.

Water/Sewer

- Miss Dig locating has been done as locate tickets come in for work being done in the area.
- Catch basins were cleared of snow and ice to allow for drainage.
- Areas where the snow was blocking natural drainage paths where drains are not present have been cleared.

Parks/VPO/DDA

- More benches have been repainted and freshened for the upcoming warmer weather.
- Building supplies have been inventoried and a new method of stocking and tracking usage is being evaluated.
- Continued cleaning and reorganizing of buildings/storage.
- Doors inside the Rec Center were painted and outside doors will also be painted when weather warms.
- Lawn irrigation startup is being evaluated to determine the most efficient way to handle our systems.

COMMITTEE REPORT
VILLAGE OF MACKINAW CITY
102 S. Huron Avenue, Mackinaw City, MI 49701

COMMITTEE: FINANCE DATE 3/8/16

AGENDA ITEMS: REVIEW OF FEE SCHEDULE

PRESENT: PAUL MICHALAK, SCOTT NEWMAN, D. WHITE, P. PEPLER, J. BAKROFT

ABSENT: BOB GLENN

REPORT: REVIEWED FEE SCHEDULE. PATTY & JANELE WILL
MAKE REVISIONS FOR REVIEW BY COMMITTEE ONE MORE TIME.

COMMITTEE DATA BASE SUMMARY INFORMATION

ITEM

STATUS/RECOMMENDATION

ITEM	STATUS/RECOMMENDATION

COMMITTEE REPORT

COMMITTEE: Ordinance and Policy

DATE: March 4, 2016

- AGENDA ITEMS:** 1.) Draft Ferry Ordinance
2.) Amendment to Ordinance No. 116, Article II - Customized Product Sales
3.) Amendment to Ordinance No. 82 - Hawkers and Peddlers

PRESENT: Rodriguez, Newman, Michalak, White ABSENT: _____

PUBLIC ATTENDEES: E. Doerr, M. North, C. Shepler

REPORT:

- 1.) Reviewed Previously Committee Identified Revisions Provided by Legal Relative to the Proposed Draft Ferry Ordinance.
- 2.) Reviewed Language Revisions Proposed by Staff to Ordinance 116, Article II: Customized Product Sales.
- 3.) Introduced Amendment to Ordinances No. 82 - Hawkers and Peddlers.

COMMITTEE DATABASE SUMMARY INFORMATION

<u>ITEM</u>	<u>STATUS/RECOMMENDATION</u>
--------------------	-------------------------------------

- | | |
|-----|--|
| 1.) | <u>Committee Recommends Forwarding Proposed Ferry Ordinance to Council for Consideration.</u> |
| 2.) | <u>Committee Recommends Forwarding Amended Ordinance 116 Article II: Customized Product Sales to Council for Consideration.</u> |
| 3.) | <u>As Ordinance No. 82 Hawkers and Peddlers Has Been Identified as an Element Associated with Council/Committee Priorities Concerning Inconsistency Between Related Ordinances, Specifically, Ord. No. 10 Auctioneers and Public Criers; Ord. No. 27 Beggars, Tramps, and Vagrants; Ord. No. 82 Hawkers and Peddlers; Ord. No. 83 Transient Merchants; and, Ord. No. 116 Merchant Outdoor Sales and Displays, Committee Has Decided to Review These Ordinances and Has Requested Insight From Village Staff and Legal.</u> |

COMMITTEE REPORT
VILLAGE OF MACKINAW CITY
102 S. Huron Avenue, Mackinaw City, MI 49701

COMMITTEE: Facility DATE 3-8-16

AGENDA ITEMS: _____

① Ducharme Bldg

② Surplus Property

PRESENT: Rodriguez, Michalak, Mallen, White

ABSENT: 0

REPORT: ① Ducharme Bldg = discussed uses

② surplus property - reviewed the list

COMMITTEE DATA BASE SUMMARY INFORMATION

ITEM

STATUS/RECOMMENDATION

① recommend that old fire truck & facility storage & other dept storage

② recommend town w/ council of the whole before a final decision is made regarding surplus properties

2016-SE-041

To Admin. Staff: 3-9-16
To Council: 3-17-16
Decision: Approved Denied
Minutes to Applicant: _____

SPECIAL EVENT APPLICATION
VILLAGE OF MACKINAW CITY
102 S. HURON AVENUE, MACKINAW CITY, MI 49701
(231) 436-5351

Must be filled out in its entirety and returned to the Village Clerk's Office 45 days prior to scheduled event

SPONSORING ORGANIZATION INFORMATION

LEGAL BUSINESS NAME St. Ignace Events Committee TELEPHONE 906-643-6950

MAILING ADDRESS 6 Spring Street, St. Ignace, MI 49781

CONTACT NAME Janet Peterson TELEPHONE 906-643-8717

E-MAIL ADDRESS sicc@lighthouse.net CELL PHONE 906-298-0217

CONTACT PERSON ON DAY OF EVENT

CONTACT NAME Janet Peterson TELEPHONE 906-643-8717

E-MAIL ADDRESS sicc@lighthouse.net CELL PHONE 906-298-0217

EVENT INFORMATION

NAME OF EVENT: Jeeps on the Mac

PURPOSE OF EVENT: Promote tourism in the Straits region.

- Non-Profit For-Profit Village Operated/ Sponsored Co-Sponsored
- Marathon/ Race Festival/ Fair Arts & Crafts Show Other _____

DATE(S): April 22 FROM 1:00 A.M. P.M. TO 5:00 A.M. P.M.

_____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

_____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

_____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

RAIN DATE(S): _____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

_____ FROM _____ A.M. P.M. TO _____ A.M. P.M.

EVENT LOCATION: Jeeps will be staged at Darrow's Pit on Central Avenue.

ESTIMATED NUMBER OF ATTENDEES 200 Jeeps/400 People

WILL YOU UTILIZE SHOWERS Yes No

ESTIMATED NUMBER OF VOLUNTEERS 30

ESTIMATE DATE/ TIME FOR SET-UP: April 22 9:00 A.M. P.M.

ESTIMATE DATE/ TIME FOR CLEAN-UP: April 22 5:00 A.M. P.M.

✓ Letter from: City of St Ignace
Bridge Authority
Darrow Bros

✓ Ins Cert

1

Request garbage cans from DPW - will bill after event
PD for Traffic Control

RECEIVED
3-8-16

✓ Site Map
✓ Signage

PARADE PERMIT

Includes runs, walks, and other uses of the Village public right-of-way.

POLICE ESCORT NEEDED: Yes No

PARADE ROUTE PROVIDED WITH APPLICATION: Yes No

PROPOSED ROUTE: Leave Darrow's Pit, travel east on Central Avenue
to light, turn left and exit to Mackinac Bridge across from Audie's.

Date and time Parade will start: April 22 3:00 A.M. P.M.

Date and time Parade will end: April 22 5:00 A.M. P.M.

EVENT DETAILS

STEMAP: All applicants must provide a drawing of the event area and are due at application. Site map must be legible, be pre approved by Village Staff, and include and/or identify the following, if applicable:

- Lot lines
- Fire Hydrants
- Tents
- Table and chair diagram
- Bicycle Routes (including route into and out of town)
- All bicycle events will utilize the Village's Hike and Bike Trail
- Label roads and closest cross roads
- Locate and label buildings
- Portable Restrooms
- Placement of food vendors
- Sidewalks
- Parking lots
- Ingress and egress points
- Parade Route
- All proposed modifications

WILL MUSIC BE PROVIDED DURING THIS EVENT: Yes No

TYPE OF MUSIC PROPOSED: Live Amplification Recorded Loudspeakers

PROPOSED TIME MUSIC WILL BEGIN: _____ END: _____
(NO LATER THAN 10 P.M.)

FOOD VENDORS/ CONCESSIONS (Contact Emmet or Cheboygan 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
See page 4 for required language naming the Village as an additional insured
- Provide Copy of Michigan Liquor Control License

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

COPY OF LIABILITY INSURANCE PROVIDED WITH APPLICATION: Yes No

Date insurance binder provided: _____
See page 4 for required language naming the Village as an additional insured

WILL FIREWORKS BE A PART OF EVENT: Yes No

- Provide Copy of Liability Insurance
- Provide Copy of Fireworks Permit
See page 4 for required language naming the Village as an additional insured

EVENT SIGNAGE Village Council approval is required for any temporary signing in the public right-of-way, across a street or on Village 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.)

SIGNAGE AT EVENT SITE- Location(s): TBD - sample of sign included.

Description of signs: _____
(Signs at event site cannot be displayed prior to day of the event and must at the end of the event.)

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

If yes, where do you propose your vendors park? N/A

EVENT LONG TERM PARKING: Will there be long term parking? Yes No

If yes, from date N/A to ending date: _____

Long term parking identified on the site map? Yes No

OVERNIGHT CAMPING: Will there be camping over night? Yes No

Name of Facility where camping: N/A

If yes, from date: _____ to ending date: _____

Camp sites identified on the site map? Yes No

TENTS/ CANOPIES/ MISC: The Village of Mackinaw City does have tables and/or chairs available for rental. You will need to provide a diagram of the area for set up. Will the following be constructed or located in the event area?:

BOOTHS- QUANTITY _____ TENTS- QUANTITY _____

Size _____ CHAIRS- QUANTITY _____

AWNINGS- QUANTITY _____ TABLES- QUANTITY _____

Seating diagram for booths, awnings, tables and chairs provided with application: Yes No

PORTABLE RESTROOMS/ TOILETS

Have you made arrangements to provide portable restroom facilities at your event? Yes No

If yes, total number of portable toilets: 8-10 Number of ADA accessible portable toilets: 1-2

If no, explain: Depending on number of participants.

Restroom Company Name: Hakola's or St. Louis Portables

Address Street: _____

City: _____ State: _____ Zip: _____

Telephone Day: _____ Evening: _____ Fax: _____ Cell: _____

Equipment set up: Date: _____ Time: _____

Equipment pick up: Date: _____ Time: _____

Portable restrooms identified on the site map? Yes No

Location dependent on number of participants.

APPLICATION CHECK LIST

A = Applicant V = Village

- | | |
|--------------------------|---|
| <u>A</u> | <u>V</u> |
| <input type="checkbox"/> | <input type="checkbox"/> Completed Application |
| <input type="checkbox"/> | <input type="checkbox"/> Special Event Fee received on _____, receipt no _____
amount: \$ _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Event Map Received (includes detailed event layout for vendors, booths, portable restrooms, fire hydrants, parking, ingress, egress, roads, sidewalks, table and chair diagram, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> Bicycle Route Map (use of the Mackinaw Qty Bike Trail is required) |
| <input type="checkbox"/> | <input type="checkbox"/> Certificate of Insurance (listing the Village of Mackinaw Qty, its Village Council, Boards and Commissions, Citizens, Employees and Agents, 102 S Huron Avenue, Mackinaw Qty, MI 49701 as an additional insured) |
| <input type="checkbox"/> | <input type="checkbox"/> Ambulance Standby included with Application paid on _____, receipt no. _____
amount \$ _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Fireworks Permit (if applicable) |
| <input type="checkbox"/> | <input type="checkbox"/> Michigan Liquor Control Commission Special Event License (if applicable) |
| <input type="checkbox"/> | <input type="checkbox"/> 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 coverage deemed necessary for the event, naming the Village of Mackinaw Qty, its Village Council, Boards and Commissions, Citizens, Employees and Agents, 102 S Huron Avenue, Mackinaw Qty, MI 49701, as an additional insured on all applicable policies and submit the certificate to the Village Clerk's Office no later than thirty (30) days prior to the event.

Comply with all Village Ordinances and Policies and applicable State laws, and acknowledges that the special event 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 Village's review of this application. The applicant and sponsoring organization understand that it may be necessary to meet with Village staff during, as well as after the event, for the review of this application and that Village Council approval is necessary.

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

Applicant further agrees to defend, indemnify and hold harmless the Village of Mackinaw Qty, 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 Village of Mackinaw City 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.

The Village of Mackinaw City expressly reserves the right in its sole discretion to cancel a private event for Village purposes and the Site user agrees, as a term of its use of a site, to release and waive all claims of any kind (including a claim for consequential damages), against the Village, its officers or employees arising out of cancellation of the user's event.

Is this an annual event? Yes No
Is this event expected to occur next year? Yes No
How many years has this event occurred? New in 2016

Janet Peterson
Applicant Signature
Print name of applicant: Janet Peterson

3/8/16
Date

VILLAGE USE ONLY – Department representative please initial if approved

[mm] DPW [GU] FACILITY SERVICES
[PKW] POLICE [W] FIRE [] AMBULANCE
[] RECREATION

VILLAGE COUNCIL COUNCIL APPROVAL DATE _____ *3-10-16 - Janet*

CONDITIONS IF ANY: CAN IT LEAVE PIT AT 1515 SO AS NOT TO INTERFERE W/ SCHOOL PICKUP ON A FRIDAY?

AUTHORIZED BY: _____ DATE _____
VILLAGEMANAGER

FOR VILLAGE USE ONLY

DEPARTMENT OF PUBLICWORKS

APPROVED

DENIED

Will this event require the use of any of the following municipal equipment:

Yes No

- LOADER- MODEL _____ TOTAL MEN _____ TOTAL MAN HOURS _____
- PICK UP TRUCKS _____ TOTAL MEN _____ TOTAL MAN HOURS _____
- OTHER EQUIPMENT _____ TOTAL MEN _____ TOTAL MAN HOURS _____

OTHER SERVICES PROVIDED OR REQUIRED _____

SITEMAP APPROVED: Yes No

FACILITIES SERVICES DEPARTMENT

APPROVED

DENIED

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 _____

SITEMAP APPROVED: Yes No

MACKINAW CITY POLICE DEPARTMENT

APPROVED

DENIED

ADDITIONAL OFFICERS REQUIRED? Yes No

If yes please describe & include times 1500 3-4 TRAFFIC CONTROL

Other (describe): _____

PARADE ROUTE RECEIVED AND APPROVED: Yes No

POLICE ESCORT NEEDED: Yes No LIQUOR APPLICATION RECEIVED AND REVIEWED: Yes No

SITEMAP APPROVED: Yes No

MACKINAW CITY FIRE DEPARTMENT

APPROVED

DENIED

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.

SITEMAP APPROVED: Yes No

RECREATION DEPARTMENT

APPROVED

DENIED

- SHOWERS Yes No
- TABLES Yes No Quantity: _____
- CHAIRS Yes No Quantity: _____
- CAMPING: Yes No (identified on map)
- LONG TERM PARKING: Yes No (identified on map)
- PORTABLE RESTROOMS Yes No (identified on map)

SITEMAP APPROVED: Yes No



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/08/2016

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 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 Madigan/Pingatore Ins Services 105 W. Water Street Sault Ste. Marie, MI 49783 Sonja J Reinhart	CONTACT NAME: Sonja Reinhart	FAX (A/C, No): 906-632-1612	
	PHONE (A/C, No, Ext): 906-635-5233	E-MAIL ADDRESS:	
INSURED St Ignace Visitors Bureau 6 Spring Street Saint Ignace, MI 49781	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: West Bend Mutual Insurance Com		15350
	INSURER B: Hastings Mutual Insurance Co.		14176
	INSURER C:		
	INSURER D:		
	INSURER E:		
INSURER F:			

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 INSD	SUBR 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 type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	X		1831544	03/13/2016	03/13/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 200,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per parson) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC 9894230	03/13/2016	03/13/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Darrow Bros. Excavaing and Kathleen Darrow Trust are named as additional insured for the following events: Jeep the Mac, Motorcycles on the Mac, and Trek the Mighty Mac.

CERTIFICATE HOLDER	CANCELLATION
Darrow Bros. Excavaing Kathleen Darrow Trust 580 S. Nicolet St. Mackinaw City, MI 49701	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 Sonja J Reinhart



DARROW BROS. EXCAVATING, INC.

TOP SOIL * SAND * GRAVEL * STONE
580 N Nicolett P. O. BOX 3
MACKINAW CITY, MI 49701
(231) 436-5475 - (231) 436-8225 Fax

March 7, 2016

Village of Mackinaw City
P.O. Box 580
Mackinaw City, MI 49701

RE: Jeeps on the Mac

Darrow Bros. Excavating, Inc. (Katie & Darby) give permission to the St. Ignace Visitors Bureau & the St. Ignace Chamber of Commerce to use our property on West Central Ave. as a staging area for the Jeeps On The Mac event on Friday April 22, 2016.

Any questions please contact Darby @ 213.758.0146.

Thank You,

A handwritten signature in black ink, appearing to read 'Sarah Grant', written over the 'Thank You,' text.

Sarah Grant, Office Manager
Darrow Bros. Excavating, Inc,

cc: Janet Petersen, St. Ignace Chamber of Commerce



DARROW BROS. EXCAVATING, INC.

TOP SOIL * SAND * GRAVEL * STONE
580 N Nicolett P. O. BOX 3
MACKINAW CITY, MI 49701
(231) 436-5475 - (231) 436-8225 Fax

December 15, 2015

To: Mindy and Janet @ St. Ignace Visitors Bureau

From: Katie @ Darrow Bros. Excavating, Inc.

Subject: 2016 Events

Our requests are as follows:

1. Put "No Trespassing" signs and fencing around piles and open holes
2. Participants of event are to pull in, park ATV, Jeep, Motorcycles and leave machine in designated area
3. Security overnight and throughout time on property
4. Gated Entrance
5. Kathleen Darrow Trust names as Additional Insured. Excluding the property from any limitation
6. Leave property as found i.e. repair and damage, clean any garbage
7. Permission to use a non profit vendor example would be the Lions Club of Mackinaw City

Katie Darrow

Katie Darrow
Darrow Bros. Excavating, Inc.
(231) 436-5475 Sarah
(231) 758-0148 Katie cell
(231) 758-0146 Darby



STATE OF MICHIGAN
RICK SNYDER, Governor



MACKINAC BRIDGE AUTHORITY

N415 I-75 ST. IGNACE, MICHIGAN 49781 906-643-7600 FAX: 906-643-7668

WILLIAM H. GNODTKE, CHAIRMAN
BARBARA J. BROWN, VICE CHAIR
BARBARA J. ARENS
PATRICK F. GLEASON
KIRK T. STEUDLE, P.E.,
DIRECTOR

R. DAN MUSSER, III
MATTHEW E. MCLOGAN
KEVIN CLINTON, TREASURER
ROBERT J. SWEENEY, P.E.
EXECUTIVE SECRETARY

March 4, 2016

St. Ignace Area Events Committee
6 Spring St.
St. Ignace, Michigan 49781

Dear Janet Peterson:

This letter is to confirm the special event sponsored by your organization that involves crossing the Mackinac Bridge. The following event is approved for the year 2016.

Jeep The Mac - Friday, April 22, 2016

You agreed to notify the Mackinaw City Police Department and St. Ignace Police Department if needed to assist with traffic control.

We look forward to working with you during this event. If you have any questions, please contact me at 906-643-7600.

Sincerely,

A handwritten signature in cursive script that reads "Dean Steiner".

Dean Steiner
Bridge Services Manager
Event Coordinator



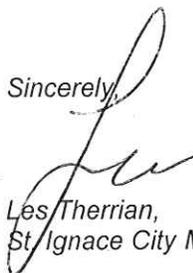
396 N. State Street
(906) 643-9671

Village of Mackinaw City
102 S. Huron Street
Mackinaw City, MI 49701

March 4, 2016

The City of St. Ignace is happy to support the Jeeps on the Mac event on April 22, 2016, scheduled to cross the Mackinac Bridge at 3p.m.

Sincerely,



Les Therrian,
St. Ignace City Manager

LT/ht

RESOLUTION

The following Resolution was offered for adoption by Mayor Litzner, supported by Councilmember Paquin:

WHEREAS, the St. Ignace Events Committee request permission to conduct the Jeeps on the Mac, and

WHEREAS, this event requires the usage of I-75NB and I-75BL and the St. Ignace Little Bear East Arena parking lot, and

WHEREAS, Ordinance No. 413 of the City of St. Ignace, "The Peddler's Ordinance", requires certain criteria be met in order for the event to be held.

NOW THEREFORE BE IT RESOLVED, that the St. Ignace City Council has determined that the St. Ignace Events Committee does meet the criteria established in the various sections of the Ordinance No. 413, and

FURTHER BE IT RESOLVED, that the City Council does approve the usage of I-75NB, I-75BL and the St. Ignace Little Bear East Arena parking lot for this event on:

April 22, 2016 Thru April 23, 2016

Roll Call Vote:

Yes: Councilmember Fullerton, Mayor Pro-Tem Paquin, Councilmembers Paquin, St. Louis, Tremble, Mayor Litzner, Councilmembers Clapperton

No: None.

Absent: None.

Resolution declared Adopted.

I hereby certify that the above Resolution is a true copy of a Resolution presented to the St. Ignace City Council for adoption at a regular meeting held Monday, March 7, 2016 at 7:00 p.m.


Renee Vonderwerth, City Clerk

hmt

Jeep the MAC Mackinaw City Tour Route

As proposed by: St. Ignace Events Committee 3/08/2016



All Arrive
Westerly via Central

All Jeeps leave
via Central

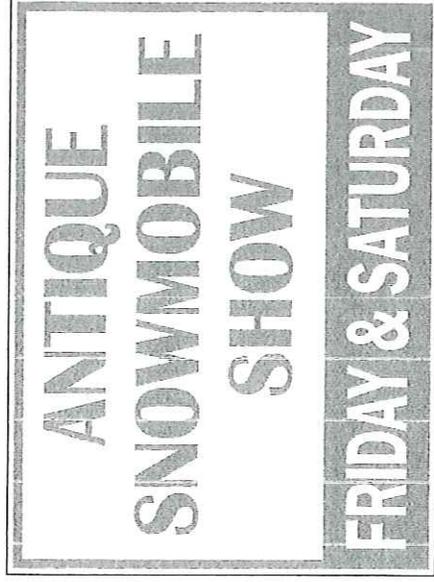
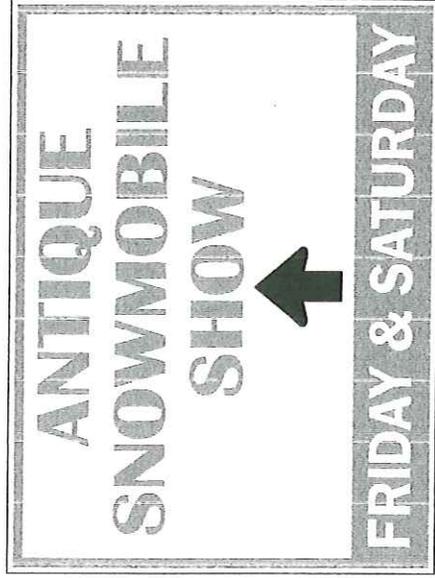
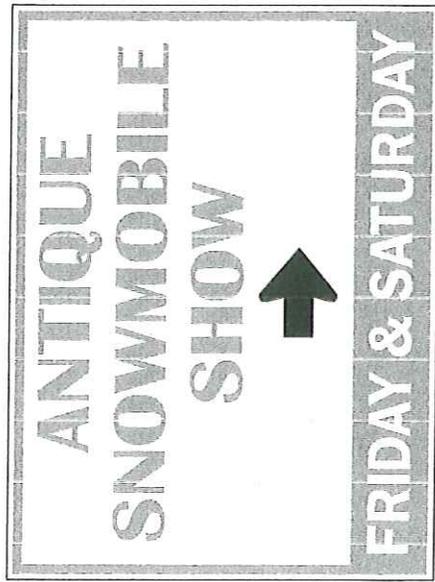
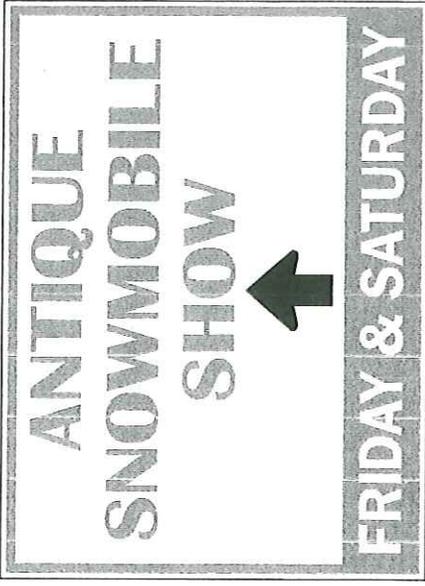
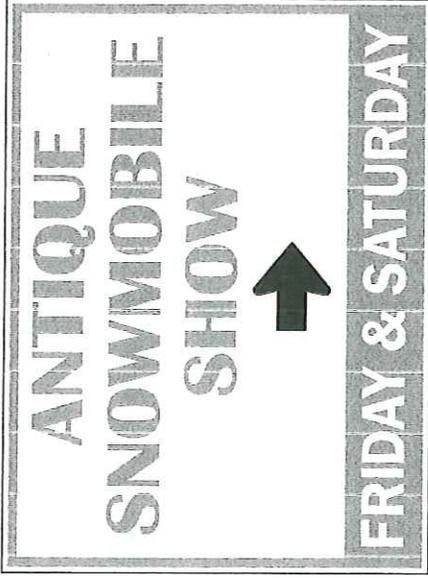
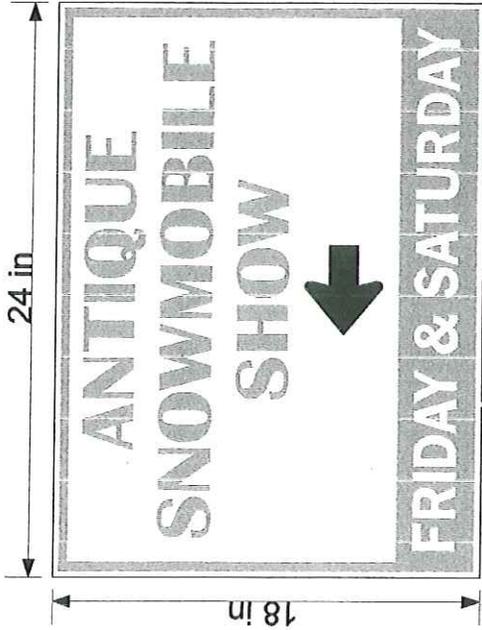
All Jeeps turn
left at stoplight

Staging
Area

Turn Left Enter
Bridge @ Ramp

Google

Earth



- (6) White coroplast (3) w/ wire step stake
\$20 ea. single sided (5)
\$30 double sided (1)

Shepler's Mackinac Island Ferry
Mackinaw City & St. Ignace



P.O. Box 250 | Mackinaw City, Michigan 49701
Phone: 231-436-5023 | 800-828-6157 | Fax: 231-436-7521

Mr. David White
Village Manager
201 South Huron
Mackinaw City, MI
49701

Dear Dave,

Thank you for taking my call today. Glad everything went well during the DDA meeting and my apologies for not being there. Delta decided to cancel my flight from Detroit to Pellston due to the storm that transpired Tuesday evening. Oh the joys of travel.

I am writing to see what the possibilities are for Shepler's Mackinac Island Ferry to purchase or lease the small part of Etherington Street which is located West of North Huron. If these two opportunities are not options, we would like to see if abandoning this roadway is a possibility. Obviously, parking has become an issue for Shepler's and for us to maximize the parking issue on the newly acquired "O'Brien" home property, we feel this would allow us to use this area to its fullest. If one of the above options are granted, we would also like the requirements for berms and setbacks be released as the property now becomes contiguous and not separated. Only the property line that is along the R.O.W. on Etherington. All other berms and setbacks would remain on the O'Brien parcel.

I thank you and the council in advance for your time and effort toward this ask.

Cheers,

Chris Shepler

Defined Benefit Plan Adoption Agreement



1134 Municipal Way Lansing, MI 48917 | 800.767.MERS (6377) | Fax 517.703.9711 www.mersofmich.com

The Employer, a participating municipality or participating court within the state of Michigan, hereby agrees to adopt and administer the MERS Defined Benefit Plan provided by the Municipal Employees' Retirement System of Michigan, as authorized by 1996 PA 220, in accordance with the MERS Plan Document, as both may be amended, subject to the terms and conditions herein.

I. Employer Name Village of Mackinaw **Municipality #:** 1606

If new to MERS, please provide your municipality's fiscal year: _____ through _____.
Month Month

II. Effective Date

Check one:

A. If this is the **initial** Adoption Agreement for this group, the effective date shall be the first day of _____, 20__.

This municipality or division is new to MERS, so vesting credit prior to the **initial** MERS effective date by each eligible participant shall be credited as follows (choose one):

- All prior service from date of hire
- Prior service proportional to assets transferred; all service used for vesting
- Prior service and vesting service proportional to assets transferred
- No prior service but grant vesting credit
- No prior service or vesting credit

Link this new division to division number _____ for purposes of determining contributions (Unless otherwise specified, the standard transfer/rehire rules apply)

B. If this is an **amendment** of an existing Adoption Agreement (Defined Benefit division number 02), the effective date shall be the first day of March, 2016. *Please note:* You only need to mark **changes** to your plan throughout the remainder of this Agreement.

C. If this is a **temporary benefit** that lasts 2-6 months, the effective dates of this temporary benefit are from ___/01/___ through ___/___/___ for Defined Benefit division number _____.
Last day of month
Please note: You only need to mark **changes** to your plan throughout the remainder of this Agreement.

D. If this is to **separate employees from an existing Defined Benefit division** (existing division number(s) _____) into a new division, the effective date shall be the first day of _____, 20__.

E. If this is to merge division(s) _____ into division(s) _____, the effective date shall be the first of _____, 20__.

Defined Benefit Plan Adoption Agreement

III. Eligible Employees

Only those Employees eligible for MERS membership may participate in the MERS Defined Benefit Plan. A copy of ALL employee enrollment forms must be submitted to MERS. The following groups of employees are eligible to participate:

Police

(Name of Defined Benefit division – e.g. All Full Time Employees, or General after 7/01/13)

Only retirees will be in this division.

These employees are (check one or both):

In a collective bargaining unit (attach cover page, retirement section, signature page)

Subject to the same personnel policy

To receive one month of service credit (check one):

An employee shall work 10 _____ hour days.

An employee shall work _____ hours in a month.

All employees as classified under eligible employees, whether full or part time, who meet this criteria must be reported to MERS. If you change your current day of work definition to be more restrictive, the new definition only applies to employees hired after the effective date.

To further define eligibility, check all that apply:

Probationary Periods are allowed in one-month increments, no longer than 12 months. During this introductory period, the Employer will not report or provide service time for this period, including retroactively. Service will begin after the probationary period has been satisfied.

The probationary period will be _____ month(s).

Temporary employees in a position normally requiring less than a total of 12 whole months of work in the position may be *excluded* from membership. These employees must be notified in writing by the participating municipality that they are excluded from membership within 10 business days of date of hire or execution of this Agreement.

The temporary exclusion period will be _____ month(s).

IV. Provisions

Valuation Date: _____, 20____

1. Review the valuation results

It is recommended that your MERS representative presents and explains the valuation results to your municipality before adopting. Please choose one:

Our MERS representative presented and explained the valuation results to the

_____ on _____.
(Board, Finance Cmte, etc.) (mm/dd/yyyy)

As an authorized representative of this municipality, I _____
(Name)

_____ waive the right for a presentation of the results.
(Title)

Defined Benefit Plan Adoption Agreement

2. This Adoption Agreement will be implemented in conjunction with a current actuarial valuation certified by a MERS actuary that sets contribution rates.
3. Annually, the MERS actuary will conduct an actuarial valuation to determine the employers' contribution rates. Employers are responsible for payment of said contributions at the rate, in the form and at the time that MERS determines.
4. Benefit Multiplier (1%-2.5%, increments of 0.05%) _____ % (max 80% for multipliers over 2.25%)

Check here if multiplier will be effective for existing active members' future service only (Bridged Benefit as of effective date on page 1)

If checked, select one below:

Termination Final Average Compensation (calculated over the members entire wage history)

Frozen Final Average Compensation (FAC is calculated twice, once for the timeframe that matches the original multiplier, and once for the new multiplier)

5. Final Average Compensation (Min 3 yr, increments of 1 yr) _____ years
6. Vesting (5 -10 yrs, increments of 1 yr) _____ years Based on 10% Employer cap
7. Required employee contribution (Max 10%, increments of 0.01%) ^{7.23} _____ %
8. Compensation, for retirement purposes, is defined as base wages and all of the following. Check applicable boxes to *exclude* these types from your MERS reported wages:

- Longevity pay
- Overtime pay
- Shift differentials
- Pay for periods of absence from work by reason of vacation, holiday, and sickness
- Workers' compensation weekly benefits (if reported and are higher than regular earnings)
- A member's pre-tax contributions to a plan established under Section 125 of the IRC
- Transcript fees paid to a court reporter
- A taxable car allowance
- Short term or long term disability payments
- Payments for achievement of established annual (or similar period) performance goals
- Payment for attainment of educational degrees from accredited colleges, universities, or for acquisition of job-related certifications
- Lump sum payments attributable to the member's personal service rendered during the FAC period
- Other: _____
- Other 2: _____

Defined Benefit Plan Adoption Agreement

9. Early Normal Retirement with unreduced benefits

- Age 50 with 25 years of service Age 50 with 30 years of service
 Age 55 with 15 years of service Age 55 with 20 years of service
 Age 55 with 25 years of service Age 55 with 30 years of service
 Any age with (20-30 yrs, in 1 yr increments) _____ years of service

10. Other

- Surviving Spouse will receive _____% of Straight Life benefit without a reduction to the participant's benefit
 Duty death or disability enhancement (add up to additional 10 years of service credit not to exceed 30 years of service)
 Deferred Retirement Option Program (DROP)
 Annuity Withdrawal Program (AWP)
 Calculation of the actuarial equivalent of the lump sum distribution made under AWP will be done using:
 Interest rate for employee contributions as determined by the Retirement Board, or
 MERS' assumed rate of return as of the date of the distribution.

11. Cost-of-Living Adjustment

<input type="checkbox"/> All current retirees as of effective date <input type="checkbox"/> Retirees who retire between ____/01/____ and ____/01/____ <i>(one time increase only)</i>	<input type="checkbox"/> Future retirees who retire after effective date
Increase of ____% or \$____ per month	Increase of ____% or \$____ per month
Select one: <input type="checkbox"/> Annual automatic increase <input type="checkbox"/> One-time increase	<input type="checkbox"/> Annual automatic increase
Select one: <input type="checkbox"/> Compounding <input type="checkbox"/> Non-compounding	Select one: <input type="checkbox"/> Compounding <input type="checkbox"/> Non-compounding
Employees must be retired ____ months (6-12 months, increments of 1 month)	Employees must be retired ____ months (6-12 months, increments of 1 month)

V. Appointing MERS as the Plan Administrator

The Employer hereby agrees to the provisions of this *MERS Defined Benefit Plan Adoption Agreement* and appoints MERS as the Plan Administrator pursuant to the terms and conditions of the Plan. The Employer also agrees that in the event any conflict between MERS Plan Document and the MERS Defined Benefit Plan, the provisions of the Plan Document control.

Defined Benefit Plan Adoption Agreement

VI. Modification Of The Terms Of The Adoption Agreement

If the Employer desires to amend any of its elections contained in this Adoption Agreement, including attachments, the Governing Body or Chief Judge, by resolution or official action accepted by MERS, must adopt a new Adoption Agreement. The amendment of the new Agreement is not effective until approved by MERS.

VII. Enforcement

1. The Employer acknowledges that the Michigan Constitution of 1963, Article 9, Section 24, provides that accrued financial benefits arising under a public Employer's retirement plan are a contractual obligation of the Employer that may not be diminished or impaired, and prohibits the use of the Employer's required current service funding to finance unfunded accrued liabilities.
2. The Employer agrees that, pursuant to the Michigan Constitution, its obligations to pay required contributions are contractual obligations to its employees and to MERS and may be enforced in a court of competent jurisdiction;
3. In accordance with the Constitution and this Agreement, if at any time the balance standing to the Employer's credit in the reserve for employer contributions and benefit payments is insufficient to pay all service benefits due and payable to the entity's retirees and beneficiaries, the Employer agrees and covenants to promptly remit to MERS the amount of such deficiency as determined by the Retirement Board within thirty (30) days notice of such deficiency.
4. The Employer acknowledges that wage and service reports are due monthly, and the employee contributions (if any) and Employer contributions are due and payable monthly, and must be submitted in accordance with the MERS Enforcement Procedure for Prompt Reporting and Payment, the terms of which are incorporated herein by reference.
5. Should the Employer fail to make its required contribution(s) when due, the retirement benefits due and payable by MERS on behalf of the entity to its retirees and beneficiaries may be suspended until the delinquent payment is received by MERS. MERS may implement any applicable interest charges and penalties pursuant to the MERS Enforcement Procedure for Prompt Reporting and Payment and Plan Document Section 79, and take any appropriate legal action, including but not limited to filing a lawsuit and reporting the entity to the Treasurer of the State of Michigan in accordance with MCL 141.1544(d), Section 44 of PA 436 of 2012, as may be amended.
6. The Employer acknowledges that changes to the Employer's MERS Defined Benefit Plan must be made in accordance with the MERS Plan Document and applicable law, and agrees that MERS will not administer any such changes unless the MERS Plan Document and applicable law permit same, and MERS is capable of administering same.

Defined Benefit Plan Adoption Agreement

VIII. Execution

Authorized Designee of Governing Body of Municipality or Chief Judge of Court

The foregoing Adoption Agreement is hereby approved by Mackinaw Village Council on
the 17th day of March, 2016.
(Name of Approving Employer)

Authorized signature: _____

Title: Village Manager

Witness signature: _____

Received and Approved by the Municipal Employees' Retirement System of Michigan

Dated: _____, 20____ Signature: _____
(Authorized MERS Signatory)

VILLAGE COUNCIL
VILLAGE OF MACKINAW CITY
Cheboygan and Emmet Counties, Michigan

Trustee _____ supported by Trustee _____, moved the adoption of the following Ordinance:

ORDINANCE NO. 116

AN ORDINANCE TO AMEND SECTION 20.762 OF THE COMPILED CODE OF THE VILLAGE OF MACKINAW CITY TO REGULATE CUSTOMIZED PRODUCT SALES IN THE VILLAGE

The Village of Mackinaw City ordains:

Sec. 1. Amendment of Compiled Code. Section 20.762 of the Compiled Code of the Village of Mackinaw City (Part 20, Article II, Ord. No. 116, August 1, 1992) is amended to read as follows:

Article II. Customized Product Sales

Sec. 20-762 Written cost estimates required.

(A) A Customized Product Provider shall give to its customer a copy of a written estimate or quote, itemizing as closely as possible the total price, inclusive of all necessary labor, processing, assembly and other costs, for any each Customized Product requested by such customer, prior to the commencement of any labor, processing or assembly. Such written estimate or quote shall be provided on a template form obtained from the Village Clerk. Such form shall be in English and contain the following information in substantially the following form (text shall be at least 14 point font):

Form with fields for: Name of business, Address of business, Customer name, Date/Time, Customer Signature, Customized Product to be purchased, Material cost of Customized Product, Cost of custom work, Cost Labor and additional materials, Tax, TOTAL COST TO CUSTOMER, Customer consent for increased cost, Date/Time, TOTAL COST TO CUSTOMER AFTER INCREASE.

(B) A Customized Product Provider shall not charge to a customer any costs or fees prior to its completion of a Customized Product.

(C) A Customized Product Provider shall not charge any costs or fees for services done or supplied in excess of the estimate or quote required under subsection (A) above without the

knowing written consent of the customer which shall be obtained immediately after it is determined that the estimate or quote is insufficient and before any such additional service is performed.

(D) All Customized Product Providers shall ~~conspicuously~~ post at eye-level, being measured from the floor with the bottom of the sign being at 3 feet and the top of the sign being at 6 feet, on a wall adjacent to at all any entrances to its business premises, the edge of said sign shall be no more than 2 feet from each entrance, and on a wall directly above or beside the area where wherever custom work is performed, with the edge of said sign being no more than 2 feet from the work area and posted at eye-level as defined above, on a sign provided by the Village. Said sign shall measure not less than 18 inches in height and 24 inches in width (text shall be in English and at least 2 inches in height) 72 point font) and state , as approved by the Village Manager, the following notice:

VILLAGE ORDINANCE REQUIRES A COPY OF A WRITTEN STATEMENT OF TOTAL COST PRIOR TO COMMENCEMENT OF CUSTOM WORK.

(E) This section shall not be construed to require a Customized Product Provider to give a written estimate or quote if actual services will not be provided.

Sec. 2. Effective Date. This ordinance shall take effect 20 days after its adoption or upon publication, whichever occurs later.

Yeas: Trustees _____

Nays: Trustees _____

Abstain: Trustees _____

Absent: Trustees _____

Ordinance declared adopted.

Robert Heilman, Village President

Lana Jaggi, Clerk

CERTIFICATION

As the Clerk of the Village of Mackinaw City, Michigan, I certify this is a true and complete copy of an ordinance adopted at a meeting of the Village Council held on _____, 2016, with notice provided as required by law.

_____, 2016

Lana Jaggi, Clerk