



CITY OF BATESVILLE, INDIANA

Mayor John Irrgang

REVISED – July 13, 2026

Board of Works Meeting, Monday, July 13, 2026, at 6:30 p.m.
Council Meeting – Will follow Board of Works Meeting
132 South Main Street, 2nd Floor, Council Chambers

Batesville Common Council Members: Elected to a 4-Year Term: 1/1/2024 – 12/31/2027

1st District: Darrick Cox; 2nd District: Doug Stock; 3rd District: Beth Enneking; 4th District: Brad Dreyer; At-Large: Melissa Tucker

Mayoral Annual Appointment: BOW: Bill Hartman; City Attorney: Blaine Timonera

Elected Official: Clerk-Treasurer, Brad Marcy

Board of Works

Call Meeting to order.

Roll Call.

Review of minutes:

Old Business:

1. Waste Water UV System – Award to Uveon Technologies, LLC
2. Farmington Section 8 Subdivision Acceptance

New Business:

1. Road Closure Request – Bulldog Chase – August 8
2. Road Closure Request – BHS Homecoming Parade – September 25
3. Road Closure Request - Alzheimer's Walk – October 24
4. Road Closure Request – Halloween Parade – October 31
5. Roadblock Request – Phi Beta Psi – October 10
6. Trail Closure Request – Paws for a Purpose – October 3
7. Trail Closure Request – YMCA Applefest 5K – September 26
8. Trail Closure Request – YMCA Turkey Trot 5K/10K – November 26



Board of Works June 8, 2026 | 6:30 PM

Roll Call:

Members: Present: Mayor John Irrgang, Jonathon Maple, Brad Dreyer.
Absent: NONE

Clerk-Treasurer: Brad Marcy

Approval of Minutes

Brad Dreyer made a motion, seconded by Jonathon Maple to approve the minutes for the Board of Works meeting on May 11, 2026.

Vote: For: Irrgang, Maple, Dreyer.

Against: None.

Motion carried.

Old Business:

NONE

New Business:

1. Farmington Section 8 Subdivision Acceptance
This item was tabled till next month. A few outstanding items are still open.
2. The Following road closures and Trail Usage Requests were made
All required Documents and were provided with the application.
 - Batesville Main Street – Tap & Chisel Brew & Sprints Fest, AUG 15 2026
 - St. Louis – Annual Parish Festival, Sept 19th & 20th

Jonathon Maple made a motion, seconded by Brad Dreyer to approve the closure.

Vote: For: Irrgang, Maple, Dreyer.

Against: None.

Motion carried

Adjournment:

Brad Dreyer made a motion, seconded by Jonathon Maple to adjourn the meeting.

Vote: For: Irrgang, Maple, Dreyer.

Against: None.

Meeting adjourned at 6:33 PM.

The Minutes are a summary of actions taken. A full video recording of the Board of Works meeting is available for viewing at <https://www.youtube.com/@BatesvilleIndianaLive> for as long as this media is supported.

John A. Irrgang, Mayor

Attest:

Brad Marcy, Clerk-Treasurer



May 8, 2026

Quote# BatesvilleIN05072026

Page 2

City of Batesville
Mr. Paul Gates
Batesville Memorial Building
132 S. Main Street
Batesville, Indiana 47006

Item #	Qty.	Description	Each Price	Extend Price
1	2	Reliability Improvements for UV3000+ Free-standing Stainless-Steel enclosure with filtered forced-air cooling 28 new electronic ballast mounted on an easily accessible shelf - Off/On/Auto control of each UV bank and individual control of each rack - Long life LED indicator lamp status panel including power on and hour meter - UV sensor with digital display and low UV alarm indicator with output - New water level sensor to shut down UV system under low water condition - Seven (7) Lamp Module Assemblies with Diamond Plate Stainless Steel top support each including a heavy-duty rectangular power connector with wires encased in flexible conduit cord and all new lamp connectors eight (8) with mil spec gold plated brass pins for corrosion resistance	\$53,730	\$107,400
1	1	Hydraulic Wiper Control Center (HWCC) - Fully automated wiper operation with manual hand operation controls - Replaces old proprietary PLC operated wiper controls with relay logic and timers that are maintenance friendly and easy to troubleshoot - Wiper counter display to record the number of wiping cycles	\$17,300	\$17,300
2	112	16-2509 UV Lamp	\$185	\$20,720
3	112	21-2208 Quartz Sleeve	\$95	\$10,640
4		Installation and Startup: Includes on-site labor, travel, and expenses - Installation of lamp modules and UV sensors. - Interface the new HWCC to the UV lamp rack wiper distribution manifolds - Remove, rework, clean, reinstall and/or replace as necessary wiper components on each rack (14 racks) Consumable wiper parts such as hardware, seals and cylinders will be billed separately - Startup and operator training. - Removal of old equipment and parts. - Operation and Maintenance Manual (Printed and Digital Copies)	\$7000	\$7000
5		Warranty: - Uveon provides a non-prorated 3-year warranty on overhauled systems. - Lamps carry a 12,000-hour guarantee. - Excludes damage from lightning, or power feed issues. - Maximum (4) four on/off cycles per day, including alarm shutdowns, for lamp and ballast warranty.		
6		Customer responsibilities: - Disconnect and remove electrical service from the old units and reconnect to the new Power/Control Enclosures (State licensed electrician required) - Interface between UV system and SCADA system (if needed) - Provide occasional manpower for moving or heavy lifting and re-lamping		
Total Turn Key Price				\$163,060

1184 Ferris Road
Amelia, OH 45102
Tel: (513)752-2361

Trojan 3000+ Rebuilds & Customer References

City of Angola, IN Wastewater Treatment Plant

Contact: Jeff Gaff
Phone: (260)665-6806
Email: Jgaff@angolain.org
Address: 1095 Redding Road
Angola, IN 46703

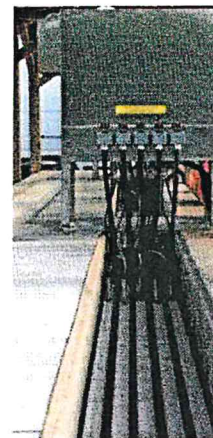
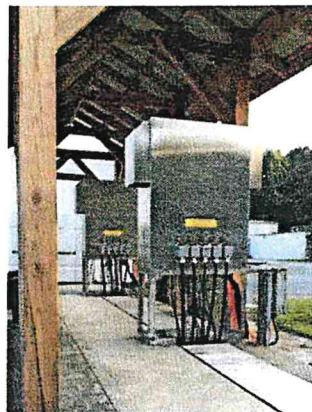
Job Details: Reliability Improvements for 30-Lamp Trojan 3000+ (Qty x2)



Perdue Foods, LLC. – Georgetown, Delaware

Contact: David Humphrey
Phone: (302)855-5681
Email: David.Humphrey@perdue.com
Address: 20621 Savannah Rd.
Georgetown, DE 19947

Job Details: Reliability Improvements for 30-Lamp Trojan 3000+ (Qty x2)



Uveon Technologies, LLC.
1184 Ferris Road, Amelia, Ohio 45102
(513) 752-2361
Sales@uveontech.com

City of Laurel, MS Wastewater Treatment Plant

Contact: Charles Newell
Phone: (601)425-1447
Email: Charles.Newell@Veolia.com
Address: 146 Don Curt Road
Laurel, MS 39440

Job Details: *Reliability Improvements for 144-Lamp Trojan 3000+ (Qty x2)*



Uveon Technologies Mission

Thank you for your interest in our company! Uveon specializes in refurbishing existing Trojan 3000 & Trojan 3000+ UV Systems, bringing them to a like new condition by performing a complete rework and update in the controls, power supplies and lamp power distribution assemblies. Uveon utilizes only properly certified electrical and electronic components specifically designed for the UV industry. The refurbishment process is the least intrusive and most cost-effective means of upgrading the UV equipment. By eliminating the price of a new system along with the engineering fees that are required, also the removal of the old system and the installation and implementation of a new system a significant cost saving plan can be realized and the savings implemented for other repairs and upgrades in the plant.

We are able to do more than just refurbish existing UV Systems; we can also provide your facility with a custom UV System that fits your facility's needs. This service we provide can not only help your facility save a significant amount of money, but we are also able to Recycle most of your existing Equipment to cutdown on disposed material.



Uveon Technologies, LLC.
1184 Ferris Road, Amelia, Ohio 45102
(513) 752-2361
Sales@uveontech.com



May 8, 2026

Quote# BatesvilleIN05072026

Page 1

City of Batesville
Mr. Paul Gates
Batesville Memorial Building
132 S. Main Street
Batesville, Indiana 47006

Uveon has designed the system to match the original Trojan system to the exact same specifications to meet:

Peak Flow	8.0 MGD
Average Flow	4.0 MGD
Suspended Solids	20 Mg/L based on 30-day average
UV Transmission	Minimum 65% at 253.7 in a 1 cm pathlength
Disinfection Standards	<125 E-Coli / 100 ML based on 30-day geometric

Uveon has been supplying the City of Batesville, Indiana with UV lamps parts and service for over 10 years with excellent results. The components utilized in this build are same Uveon OEM quality items used in all our equipment. The origin and source for the critical and main parts are the U.S.A. and Europe. The purpose of the rebuild and rework of this system is to preserve the existing capital expenditure and the installation. Extending the life of the UV system well past the normal 20-year lifespan will allow for another 20-year service life with minimal cost and interruption compared to a completely new system. Some of the best considerations of this approach are that the operators are familiar with the equipment at the plant and there is ample historical data that proves the system functions as intended when in proper working order.

The re-work of the design maintains 100% the same characteristics below the waterline, where the rubber meets the road. Everything above the waterline is re-designed for ease of maintenance and longevity. By moving the ballast power supplies and eliminating fragile control circuits out of the racks and into a protected enclosure mounted well above grade, the weight of the ballast, exposure moisture and the occasional flooding of costly components is completely eliminated. Maintenance and troubleshooting time to replace the occasional failed ballast in the new design takes about 5-minutes as compared to 2 hours or more with the current system. The new design does not utilize a proprietary PLC or computer to operate the lamps. The operation is simple and concise utilizing plain switch gear logic with switches and relays. This can allow nearly any instrument or controls technician to easily troubleshoot and repair. The city will not be locked into one company for the continued operation of the disinfection system.

Installation:	To be installed before March 31, 2017
Payment Terms:	Net 30 after installation.
Shipping Terms:	Delivery to site included.

Uveon retains old equipment and parts.

Quote is valid for 30 days and is subject to Uveon's standard terms and conditions (available upon request).

Sincerely,

A handwritten signature in black ink, appearing to read "Todd Schweitzer", is written over a horizontal line.

Todd Schweitzer
Uveon Technologies
1184 Ferris Road

1184 Ferris Road
Amelia, OH 45102
Tel: (513)752-2361

LADD ENGINEERING, INC.

May 14, 2026

John Irrgang, Mayor
City of Batesville
132 South Main Street
Batesville, IN 47006
VIA EMAIL

Re: Wastewater Treatment Plant Ultraviolet Disinfection System Project
Construction Quotes

Dear Mayor Irrgang:

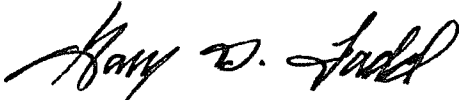
Based on a review of the one quotation received on May 11, 2026, from Uveon Technologies, LLC in the amount of \$163,000.00, they are responsive and responsible. There were three (3) companies that were solicited for quotations.

It is my understanding that Uveon Technologies has been performing satisfactory work for Batesville Wastewater for several years and it is our opinion that they are a reputable company and capable of doing the work.

The quote is valid for 30 days and subject to their terms and conditions. I would recommend that your attorney review their terms and conditions, which are attached.

Should you have any questions, feel free to contact me.

Sincerely,



Gary D. Ladd, P.E., President
Ladd Engineering, Inc.

Xc: Batesville Wastewater (VIA EMAIL)
File

1127 Brookside Drive, Lebanon, IN 46052, (765) 482-9219, Fax (765) 482-9224



TERMS AND CONDITIONS OF SALE

These terms and conditions of sale ("Agreement") are applicable to any order placed with and accepted by Uveon Technologies LLC (referred to herein as "Supplier"):

1. **SCOPE OF AGREEMENT.** Supplier, upon acceptance of an Order placed by Buyer, will supply the products and services specified in the Order (the "Work") to Buyer, pursuant to the terms and conditions of this Agreement and its exhibits. Supplier's acceptance of such order submitted by Buyer is expressly limited to the terms and conditions of this Agreement notwithstanding any contrary provision contained in Buyer's purchase orders, invoices, acknowledgements or other documents. The details of the Work (e.g. quantity, price, and product specifications) shall be set forth in the relevant Order.
2. **PRICE AND TERMS.** (a) The prices payable by Buyer for goods and services to be supplied by Supplier under this Agreement will be specified in the applicable Order. Unless otherwise expressly stated in an Order, all prices exclude shipping and taxes. (b) Payment terms are net thirty (30) calendar days from the date of the invoice unless otherwise stated on the invoice. If Buyer does not pay the invoice amount within terms, Buyer will in addition pay finance charges of two (2%) per month on the late balance and Supplier reserves the right to (1) withhold shipment of the Work until full payment is made; and/or (2) revoke any credit extended to Buyer. In the event that Buyer's account is more than sixty (60) days in arrears, Buyer shall reimburse Supplier for the reasonable costs, including attorney fees, of collecting such amounts from Buyer. In the event of any dispute regarding an invoice, no finance charges will apply in the event that Buyer provides written notice of the dispute prior to the due date for such payment. (c) Upon reasonable request by the Supplier, Buyer shall provide copies of its most recent audited financial statements or other reasonable evidence of its financial capacity and such other information as Supplier reasonably requests to determine credit status or credit limits. (d) Buyer shall provide notice within five (5) business days of the occurrence of any event which materially affects Buyer's ability to perform its obligations under this Agreement including but not limited to: (i) the material default of any supplier or sub-contractor; (ii) labor strike or dispute; or (iii) material incurred default with respect to any debt obligations of Buyer. (e) Pricing schedules (whether attached to this Agreement or an Order) are subject to change upon a change in the price of applicable raw materials (as reflected on a recognized trade or commodity pricing tracker) in excess of five percent (5%) from the date of such schedule. (f) Unless otherwise specified in the Order, Work will be delivered FOB Supplier's manufacturing facility and will be shipped to Buyer via carriers selected by Supplier. Buyer is responsible for all state and local fees and taxes incurred by the Supplier or by the Supplier's employees, representatives, or affiliates for business licenses, work permits, payroll, or other state or local regulations related to fulfillment of the order. In the event that Buyer cancels the order before completion, the Buyer is liable for any materials procured by and work completed by the Supplier in relation to the order.
3. **BUYER MATERIALS AND DATA.** (a) Buyer represents and warrants that any matter it furnishes for performance of services by Supplier (i) does not infringe any copyright or trademark or other Intellectual Property Rights of any third party; (ii) is not libelous or obscene; (iii) does not invade any person's right to privacy; and (iv) does not otherwise violate any laws or infringe the rights of any third party. (b) Buyer warrants that it has the right to use and to have Supplier use on behalf of Buyer any data provided to Supplier or its Affiliates by Buyer including specifically customer names, identifying information, addresses and other contact information and related personal information ("Data"). Buyer further warrants that it will designate on the applicable Order if Data provided pursuant to that Order is subject to HIPAA, Gramm-Leach-Bliley or other statutes providing enhanced data protection or requiring enhanced data security procedures.
4. **INTELLECTUAL PROPERTY.** Any and all inventions, discoveries, patent applications, patents, copyrights, trademarks and trade names, commercial symbols, trade secrets, work product and information embodying proprietary data existing and owned by Buyer as of the date of the Order or made or conceived by employees of Buyer during the term of the Order shall be and remain the sole and exclusive property of Buyer provided that Buyer grants to Supplier a license to use, display and distribute (and to sub-license its affiliates and sub-contractors to use, display and distribute) any intellectual property rights delivered to Supplier as reasonably necessary to perform any Order. Any and all inventions, discoveries, patent applications, patents, copyrights, trademarks and trade names, commercial symbols, trade secrets, work product and information embodying proprietary data existing and owned by Supplier as of the date of the Order or made or conceived by employees, consultants, representatives or agents of Supplier during the term of this Agreement shall be and remain the sole and exclusive property of Supplier. Without limiting the generality of the foregoing, the parties agree that Supplier will own systems (including all web source code) related to the Services provided hereunder, including all modifications, upgrades and enhancements thereto made during the term of the Order. Without limiting the generality of the foregoing, Buyer acknowledges and agrees that Supplier shall have the right to provide to third parties' services which are the same or similar to the services provided herein and to use or otherwise exploit any Supplier materials in providing such services.
5. **CONFIDENTIAL INFORMATION.** Any information that parties receive or otherwise have access to incidental to or in connection with this Agreement (collectively, the "Confidential Information"), shall be and remain the property of the disclosing party. Confidential Information shall not include information which: (i) was in the possession of the Receiving Party at the time it was first disclosed by the Disclosing Party; (ii) was in the public domain at the time it was disclosed to the Receiving Party; (iii) enters the public domain through sources independent of the Receiving Party and through no breach of this provision by the Receiving Party; (iv) is made available by the Disclosing Party to a third party on an unrestricted, non-confidential basis; (v) was lawfully obtained by the Receiving Party from a third party not known by the Receiving Party to be under an obligation of confidentiality to the Disclosing Party; or (vi) was at any time developed by the Receiving Party independently of any disclosure by the Disclosing Party. Confidential Information may be used to the extent necessary to perform this Agreement and the parties shall not disclose Confidential Information to any third party, except to its agents (who have executed confidentiality agreements containing terms substantially similar to the terms) as necessary to provide the Work hereunder. In no event shall Buyer acquire any right, title or interest in and to any product or process information, including related know how, either existing or developed during the course of the business relationship with Supplier and Buyer, and in no event shall Supplier acquire and right, title, or interest in and to any materials or information provided to it by Buyer.
6. **INDEMNIFICATION.** The indemnifying party, as Indemnitor, shall indemnify, defend and hold harmless the indemnified party, as Indemnitee, its officers, directors, employees, agents, subsidiaries, and other affiliates from and against any and all claims, damages, liabilities, and expenses (including attorney fees) arising from any third-party claim based on Indemnitor's (or its agent's) breach of any representation, warranty, covenant, agreement, or obligation under the Order or this Agreement, or Indemnitor's (or its agent's) grossly negligent and/or willful acts in carrying out its obligations under the Order or the Agreement, provided that in no event shall Supplier be responsible for any claims arising out of its compliance with instructions, requirements, or specifications provided by or required by Buyer (including the use of information, artwork, logos, and/or trademarks provided by Buyer). Neither party will be responsible for indemnifying another party hereto where the basis of the indemnity claim arises out of such other party's own negligence or willful misconduct. In order to avail itself of this indemnity provision, Indemnitee shall promptly provide notice to Indemnitor of any such claim, tender the defense of the claim to Indemnitor, and cooperate with Indemnitor in the defense of the claim. Indemnitor shall not be liable for any cost, expense, or compromise incurred or made by Indemnitor in any legal action without the Indemnitor's prior written consent.
7. **BREACH.** In addition to all other rights to which a party is entitled under this Agreement, if either party breaches any term of the Order or the Agreement, the non-breaching party shall have the right to: (a) terminate the Order immediately upon written notice to the other party; and (b) seek to obtain injunctive relief to prevent such breach or to otherwise enforce the terms of this Agreement. Failure to properly demand compliance or performance of any term of the Order or this Agreement shall not constitute a waiver of Supplier's rights hereunder and prior to any claim for damages being made for non-conformance or breach, Buyer shall provide Supplier with reasonable notice of any alleged deficiencies in the Work or performance under the Order or this Agreement and Supplier shall have a reasonable opportunity to correct any such alleged non-conformance or breach.
8. **WARRANTY.** Supplier warrants that the Work shall reasonably conform to specifications in all material respects. If applicable and at Supplier's option, Supplier may provide Buyer with a proposal for Buyer approval. Once Buyer approves a proposal, Buyer will be liable for all fees associated with the order, as specified in the Order. Supplier is not responsible for issues related to the condition or suitability of the Buyer's site for the completion of the work. Supplier will not provide refunds for any Work conforming to specifications in all material respects. Other than the warranties set forth in this section, Supplier makes no warranty of any kind, expressed or implied or otherwise whatsoever, that the services performed or any items produced will be merchantable or fit for any particular purpose or use. In the event of any breach of any warranty specified in this provision, Buyer's exclusive remedy shall be that Supplier shall, at its option, repair or replace any defective goods at no cost to Buyer or refund any purchase price paid for such Work.
9. **LIMITATION OF LIABILITY.** IN NO EVENT SHALL EITHER PARTY BE LIABLE HEREUNDER FOR INCIDENTAL, SPECIAL, INDIRECT, CONSEQUENTIAL, OR PUNITIVE DAMAGES EVEN IF ADVISED IN ADVANCE OF THE POSSIBILITY FOR SUCH DAMAGES AND VENDOR'S TOTAL LIABILITY FOR DAMAGES UNDER THIS AGREEMENT AND THE ORDER SHALL BE LIMITED TO THE TOTAL FEES DUE HEREUNDER FOR THE INVOICE UPON WHICH A CLAIM IS BASED.
10. **NOTICE.** Any notice sent pursuant to the Order or this Agreement shall be sent by certified mail, return receipt requested, or by overnight mail to the addresses on the Order or to such address as either party may in the future designate. Notices shall be effective upon receipt.
11. **ASSIGNMENT.** Except as otherwise provided, the Order and this Agreement shall be binding upon and inure to the benefit of the parties' successors and lawful assigns.
12. **STATUS.** Buyer and Supplier are separate entities. Nothing in the Order or this Agreement shall be construed as creating an employer-employee or joint venture relationship.
13. **COMPLIANCE WITH LAW.** Each party shall comply with all state, federal and local laws and regulations applicable to its performance hereunder.
14. **GOVERNING LAW.** The Order and this Agreement shall be governed by the laws of the State of Ohio, without reference to conflicts of law principles. Any legal suit, action or proceeding arising out of or relating to the Order or this Agreement shall be commenced in a state court in the County of Clermont, Ohio, and the appellate courts thereof, and each party hereto irrevocably submits to the exclusive jurisdiction and venue of any such court in any such suit, action or proceeding. With respect to any litigation arising out of the Order or this Agreement, the parties expressly waive any right they may have to a jury trial and agree that any such litigation shall be tried by a judge without a jury and the prevailing party shall be entitled to recover its expenses, including reasonable attorney's fees, from the other party.
15. **FORCE MAJEURE.** Neither party shall be liable for any failure to perform or delay in performance of this Agreement to the extent that any such failure arises from acts of God, war, civil insurrection or disruption, riots, government act or regulation, strikes, lockouts, labor disruption, cyber or hostile network attacks, inability to obtain raw or finished materials, inability to secure transport, or any cause beyond such party's commercially reasonable control. Prior to scheduled commencement of work, Buyer must notify Supplier of any safety or testing requirements, work restrictions, quarantines, etc. enacted by Buyer or by the state or local authority having jurisdiction over Buyer's site. Buyer is responsible for any additional expenses incurred by Supplier and for labor at Supplier's quoted rate for (i) additional hours worked and (ii) the duration of time Supplier's representative is detained, in order to comply with such requirements during the course of a visit to the Buyer's site.
16. **SURVIVAL.** In the event any provision of the Order or this Agreement is held by a tribunal of competent jurisdiction to be contrary to the law, the remaining provisions of the Order or this Agreement will remain in full force and effect. All sections herein relating to payment, ownership, confidentiality, indemnification and duties of defense, representations and warranties, waiver, waiver of jury trial and provisions which by their terms extend beyond the Term shall survive the termination of the Order and this Agreement.
17. **ENTIRE AGREEMENT.** The Order, this Agreement and the operative provisions of any quotation issued by Supplier and any purchase order issued by Buyer, sets forth the entire agreement and understanding among the parties as to the subject matter hereof, and merges and supersedes all prior discussions, agreements, and understandings of every and any nature among them. No proposal, purchase order, order confirmation, acceptance, or any other document provided by either Party to the other, nor any electronic click-wrap, terms of use or similar online consent or acceptance language accompanying or set forth as a prerequisite to any electronic interface or utility associated with any Work, shall be deemed to amend the terms hereof and any such contradictory or additional terms shall be ineffective. No party shall be bound by any condition, definition, warranty, or representations, other than as expressly set forth or provided for in the Order or this Agreement, or as may be, on or subsequent to the date hereof set forth in writing and signed by the party to be bound thereby. In the event of any ambiguity or conflict between any of the terms and conditions contained in this Agreement and the terms and conditions contained in an Order, the terms and conditions of this Agreement shall control, unless the Parties have expressly provided in such Order that a specific provision in this Agreement is amended, in which case this Agreement shall be so amended, but only with respect to such Order. The Order or this Agreement may not be amended, supplemented, changed, or modified, except by agreement in writing signed by the parties to be bound thereby.



City of Batesville

Subdivision Acceptance

Developer' Name

CHARLES GILLMAN

Engineer's Name

LAND CONSULTANTS

JEFF TALKERS

Surveyor's Name

FARMINGTON

Subdivision's Name

Subdivision Location

FARMINGTON PHASE 8, see streets below

Street Name's

ABBY LANE, WOODFIELD DRIVE, MAGGIE LANE

Date

5/4/26

3 Year Maintenance Bond

FIRST FINANCIAL BANK

Required signature below

City Engineer

[Signature]

Wastewater Superintendent

Randy Golt

Gas Superintendent

Scott Bauer

Water Superintendent

[Signature]

Board of Works

Date _____

Board of Works

Board of Works



Board of Works
Application for Road Closure(s) /Parking Lot(s) Usage

Request for usage must be made to the City of Batesville Board of Works **60 days prior to the event date**. Please describe the following city streets and/or parking areas to be used on the lines **below**. **By completing this form**, you acknowledge that any use of spray paint or adhesive markings on city streets and/or trails is **prohibited**:

___Only cones and chalk will be used for marking the route_____

Event:___Bulldog Chase 5K

Date/Time:___Aug. 8th, 2026

Contact:___Lisa Gausman_____

Organization:___BHS Cross Country_____

Mobile Number:___812-363-5283_____ Address:___1 Bulldog Blvd_____

Date request submitted: ___7/1/2026_____ City/State/Zip:___Batesville, IN 47006

Please include the following with this request:

- ☐ Submitted route(s) and Map of location or route
☐ A copy of your Certificate of Liability (Naming City of Batesville as additional insured)
☐ Site Safety Plan **If your event is approved, you may have to complete the Indiana Department of Homeland Security Special Endorsement Permit by visiting: <https://publicsafety.dhs.in.gov/>. Certain Circumstances apply.

Have you notified property owners of the affected street(s) closure? YES NO

Please select the following, if needed:

- ☐ Cones ☐ Barricades (You are responsible for moving barriers into place and removing from the roadway after the event) ☐ Fencing ☐ Police Traffic Assistance

Return completed form 60 DAYS Andrea Wade, Mayor's Office

PRIOR TO THE EVENT: 132 South Main Street

Batesville, IN 47006

or awade@batesvilleindiana.us

Approval of Application (Office use only)

Date Received: 7/1/2026 Date of Board of Works Approval: _____ Reviewed (Initial): Police

Chief MM Fire Chief BH Street SR Mayor AW

Site Safety Plan

Event: Bulldog Chase 5K

Complete form and present to the Fire Chief for approval

Event Coordinator Lisa Gausman

Phone Number 812-363-5283

Secondary Event Coordinator Thomas Essick

Phone Number 812-717-0624

Event Date: 8/8/2026

Parking Lot or Road Closures:

List areas and times of closures

The race begins in the back of the Batesville Middle School. We really don't close off any roads entirely. We would use one lane of Huntersville for a block, Columbus for a block, and several blocks of Mulberry. The race starts at 8:30am and we should be off the roads by 9:30am. As before, we ask that we have a little help with traffic control at the corner of Mulberry and W Pearl from 8:30 to 9:30. But if this is not possible, I can have a couple of parents patrol this.

Here is the breakdown...

Saturday, August 8th

Batesville Middle School Parking lot and facility:

6:00 am – 7:00am Cones will be placed to prepare for race...cones will be placed on the route as described below:

We would use one lane of Huntersville for a block, Columbus for a block, and several blocks of Mulberry until St. Louis Cemetery.

7:00 am – 8:30 am On-site registration and packet pick up in the Commons area of the Middle School

8:30 am Bulldog Chase Race begins (behind the Middle School in parking lot)

9:30 am All participants should have completed race and cone will be picked up

10:00am – 10:30am Awards ceremony held in the Batesville Middle School Gym

Equipment to be used:**List items used to close/block off parking lot/road**

The only equipment we use are cones and we have Stuart Road Racing as our timing system and they bring the stuff they need for that. As we have used in the past, we request the use of city cones. (about 75) Please have them dropped off in the back of the Middle School the day before, and we will have them ready for pick-up after the race.

Procedure for reporting a fire or other emergency: call 911.

Life Safety Strategy:

1. Safety Plan Map will be available to view at the Registration table.
2. Announcement made over PA System alerting participants. Volunteers will also alert.
3. Volunteers will be on hand to assist those participants needing assistance.
4. Approaching inclement weather (Event Coordinators will be monitoring the weather for the event): All participants and volunteers will be sent home.
5. Fire Emergency: All participants will be directed to a safety zone – on the Batesville Middle School Football Field (or an area determined based on location of emergency).



Board of Works
Application for Street Closure(s) /Parking Lot(s) Usage

Consideration for usage of a city street or parking lot should be submitted to the Mayor's Office, **60 days** prior to the requested event date. Once received, the request is placed on the Board of Works agenda for review during their meeting held on the 2nd Monday, monthly at the Memorial Building. **All events, from 5k's & parades to festivals, must include a copy of the event's Site Safety Plan and Certificate of Liability (naming the City of Batesville as an additional insured).** Final decisions will be forwarded to the contact's name listed on this application. **In the event you have issues with the roadway or lot the day of the event, contact the Batesville Police Department at 812-934-3131 and they will notify the appropriate party to assist you.**

Event: BHS Homecoming Parade

Date/Time: 9/25/2026 5:00 PM

Contact: Paul Satchwill

Organization: Batesville High School

Mobile Number: 8125846249

Address: 1 Bulldog Blvd, Batesville

Date request submitted: 6/22/2026

City/State/Zip: Batesville, IN 47006

Have you:

- ☒ Included a Map of location or route
- ☒ Included a copy of your Certificate of Liability (Naming City of Batesville as additional insured)
- ☒ Notified surrounding property owners of affected street(s) closure? YES NO
- ☒ Included the Site Safety Plan ****Festival?** You must complete the Indiana Department of Homeland Security Special Endorsement Permit by visiting: <https://publicsafety.dhs.in.gov/>. Certain Circumstances apply.

Your Needs:

- ☒ Cones 4 Amount ☐ Barricades (You are responsible for moving & removing from roadway after event)
- ☐ Fencing (10ft panel) _____ Amount ☐ Police Traffic Assistance

**Return completed form 60 DAYS
PRIOR TO THE EVENT:**

Andrea Wade, Mayor's Office
132 South Main Street
Batesville, IN 47006
awade@batesville.in.gov 812.933.6100

Approval of Application (Office use only)

Date Received: 6/22/2026

Date of Board of Works Approval: _____

Reviewed (Initial): Police Chief MM

Fire Chief Bl

Street SM

Mayor JA

Site Safety Plan

Event: BHS Homecoming Parade

Complete form and present to the Fire Chief for approval

Event Coordinator	<u>Paul Satchwill</u>
Phone Number	<u>8125846249</u>
Secondary Event Coordinator	<u>Brian McFee</u>
Phone Number	<u>(812) 934-4384</u>

Event Date: 9/25/2026

Parking Lot or Road Closures:

List areas and times of closures

Columbus Avenue- 4:30-5:30 PM

Mulberry St- 5:00-5:30 PM

Catherine St- 5:00-5:30 PM

Main St- 5:00-5:30 PM

W Pearl St- 5:00-5:30 PM

**see attached maps for specific sections of the roads

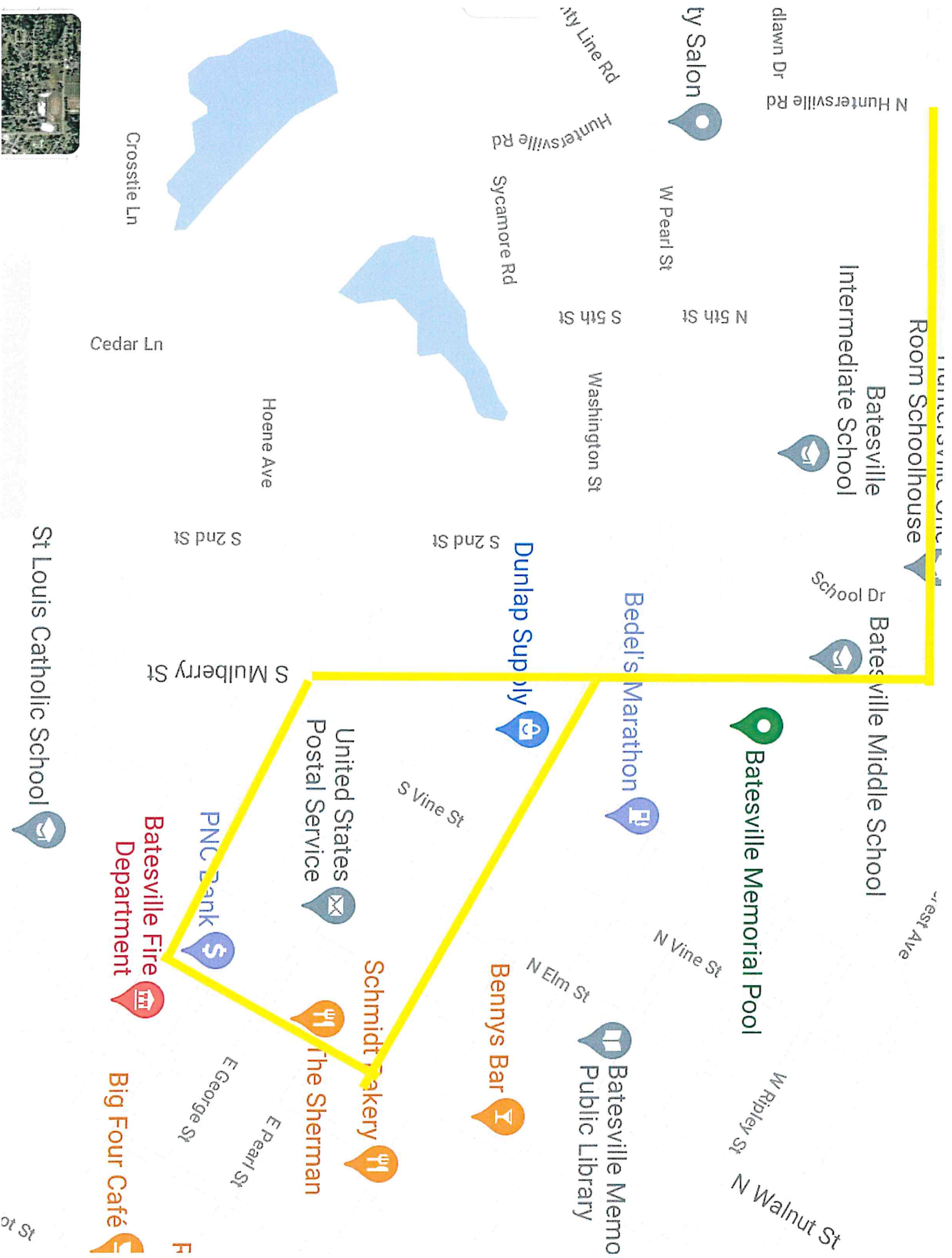
Equipment to be used:

List items used to close/block off parking lot/road

Cones or fencing to block off Columbus avenue where floats will be arranged.

Life Safety Strategy:

See Chapter 4 of the Indiana Fire Code, Section 404.3.2, #4





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/23/2026

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 Arthur J. Gallagher Risk Management Services, LLC 2850 Golf Rd Rolling Meadows IL 60008	CONTACT NAME: Katie Navin PHONE (A/C, No, Ext): E-MAIL ADDRESS: Katie_Navin@rpadmin.com	FAX (A/C, No):
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : Underwriters at Lloyd's London		15792
INSURER B : Princeton Excess & Surplus Lines Ins Co		10786
INSURER C : Safety National Casualty Corporation		15105
INSURER D :		
INSURER E :		
INSURER F :		

INSURED
Educational Service Centers Risk Funding Trust
Batesville Community School Corporation
626 N Huntersville Road
Batesville IN 47006

EDUCSER-09

COVERAGES

CERTIFICATE NUMBER: 797151638

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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☒ OTHER: Member	Y		PK1005726	1/1/2026	1/1/2027	EACH OCCURRENCE \$ 1,500,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ Included GENERAL AGGREGATE \$ 1,500,000 PRODUCTS - COMP/OP AGG \$ Included Pool SIR \$ 500,000
A	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY			PK1005726	1/1/2026	1/1/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Pool SIR \$ 500,000
B	☐ UMBRELLA LIAB ☒ EXCESS LIAB ☐ DED ☐ RETENTION \$			N3A3FF000001905	1/1/2026	1/1/2027	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	SP 4069655	1/1/2026	1/1/2027	☒ PER STATUTE ☐ OTH-ER \$400,000 SIR E.L. EACH ACCIDENT \$ 5,000,000 E.L. DISEASE - EA EMPLOYEE \$ 5,000,000 E.L. DISEASE - POLICY LIMIT \$ 5,000,000

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

RE : Homecoming parade on September 25th.

City of Batesville is shown as Additional Insured solely with respect to General Liability policy as required by written contract.

CERTIFICATE HOLDER

CANCELLATION

City of Batesville
132 S. Main Street
Batesville IN 47006

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

Arthur J. Gallagher Risk Management Services, LLC

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Board of Works
Application for Road Closure(s) /Parking Lot(s) Usage

Request for usage must be made to the City of Batesville Board of Works **60 days prior to the event date**. Please describe the following city streets and/or parking areas to be used on the lines below. **By completing this form**, you acknowledge that any use of spray paint or adhesive markings on city streets and/or trails is **prohibited**:

Turning West on Central Avenue, from S. Park Avenue, Crossing Mulberry St. from Central Avenue
Into Brum Woods. Crossing Mulberry Street exiting Brum Woods to continue south and east along
Brum Woods, crossing Pohlman Street and S. Park Avenue heading east back into Liberty Park.

Event: Walk to End Alzheimer's - Southeast Indiana Date/Time: October 24, 2026
Contact: Mariana Lopez-Owens Organization: Alzheimer's Association - Indiana Chapter
Mobile Number: 317.626.2668 Address: 50 E. 91st Street, Suite 100
Date request submitted: 7.1.2026 City/State/Zip: Indianapolis, IN 46240

Please include the following with this request:

- ☒ Submitted route(s) and Map of location or route
- ☒ A copy of your Certificate of Liability (Naming City of Batesville as additional insured)
- ☒ Site Safety Plan **If your event is approved, you may have to complete the Indiana Department of Homeland Security Special Endorsement Permit by visiting: <https://publicsafety.dhs.in.gov/>. Certain Circumstances apply.

Have you notified property owners of the affected street(s) closure? YES NO

Please select the following, if needed:

- ☐ Cones ☐ Barricades (You are responsible for moving barriers into place and removing from the roadway after the event)
- ☐ Fencing ☐ Police Traffic Assistance

**Return completed form 60 DAYS
PRIOR TO THE EVENT:**

Andrea Wade, Mayor's Office
132 South Main Street
Batesville, IN 47006
or awade@batesvilleindiana.us

Approval of Application (Office use only)

Date Received: 7/2/2026

Date of Board of Works Approval: _____

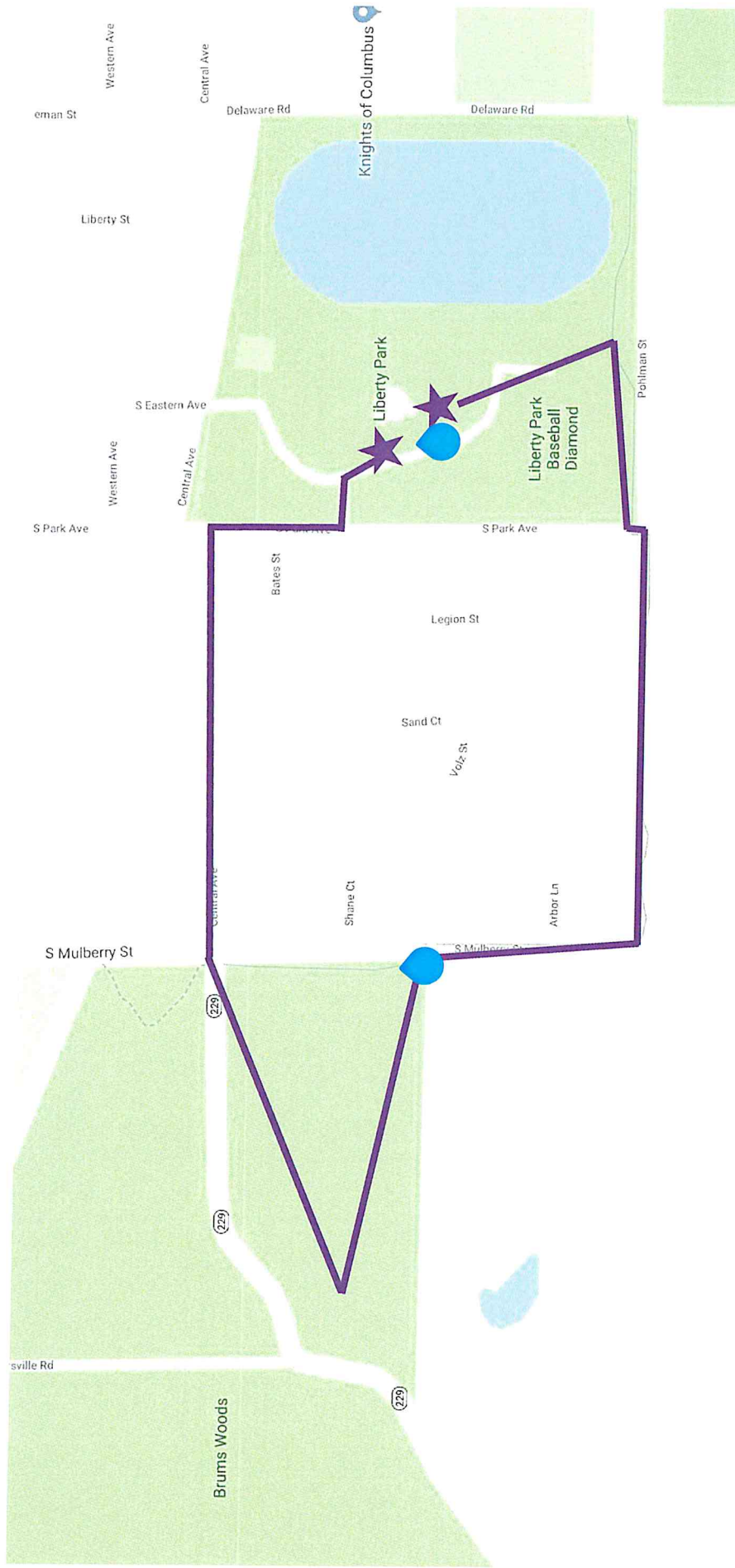
Reviewed (Initial): Police Chief MM

Fire Chief BH

Street Am

Mayor AW

132 SOUTH MAIN STREET | BATESVILLE, INDIANA 47006
812.933.6100 | FAX 812.933.0698 | www.batesvilleindiana.us



Walk to End Alzheimer's Saturday, October 24, 2026 Liberty Park | Batesville, IN

1. Start Walk at Liberty Park
2. Turn Right on S. Park Avenue
3. Turn Left on Central Avenue*
4. Cross Mulberry Street and Enter Brum Woods Trail*
5. Complete .6 Mile Trail Loop and Cross Mulberry Street*
6. Follow Brum Woods Trail Heading Back to Liberty Park
7. Cross Pohlman Street and Enter Back Into Liberty Park*
8. Turn Left Immediately Before Reservoir and Follow Sidewalk Back to Pavilion

* Indicates where route crosses a street

**WALK TO END
ALZHEIMER'S**
ALZHEIMER'S ASSOCIATION®



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/1/2026

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.

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PRODUCER Inszone Insurance Services 1101 Perimeter Drive, Suite 500 Schaumburg IL 60173	CONTACT NAME: Sandy Crespin PHONE (A/C, No, Ext): 847-719-7877 E-MAIL: screspin@inszoneins.com ADDRESS: screspin@inszoneins.com	FAX (A/C, No): 847-398-7077
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Philadelphia Indemnity Insurance Company		18058
INSURER B: Hartford Insurance Group		29424
INSURER C: Homesite Insurance Company		17221
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
Alzheimer's Disease & Related Disorders
Association, Inc.
225 N. Michigan Ave Ste 1700
Chicago IL 60601

ALZHE-2

COVERAGES

CERTIFICATE NUMBER: 545713729

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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR ☒ Abuse/Molestation GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:	Y	Y	PHPK2664736-012	3/11/2026	3/11/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
A	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY			PHPK2664736-012	3/11/2026	3/11/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ UM/UIM \$ 1,000,000
A C	☒ UMBRELLA LIAB ☐ EXCESS LIAB DED ☒ RETENTION \$ 10,000			PHUB903794-014 CXS046923-01	3/11/2026 3/11/2026	3/11/2027 3/11/2027	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	83WEBU6934	3/11/2026	3/11/2027	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A A	D&O, EPLI PROFESSIONAL LIABILITY			PHSD1863000-012 PHPK2664736-012	3/11/2026 3/11/2026	3/11/2027 3/11/2027	D&O \$50/EPLI \$50K RET CL MD 1,000,000/AGGR 10,000,000 3,000,000

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

Greater Cincinnati Chapter

RE: Walk to End Alzheimer's Event held Oct 24, 2026 at Liberty Park

City of Batesville is Additional Insured for operations conducted by the insured. Subject to policy terms and conditions.

**Bounce Houses and other rebounding devices are excluded from any liability coverage on this policy.

CERTIFICATE HOLDER

CANCELLATION

City of Batesville
123 South Main Street
Batesville IN 47006

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

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Walk Emergency Response Plan Template

Instructions:

- This document should be completed at least two weeks prior to Walk day and submitted to your Regional Leader.
 - [Emergency Response Plan Dropbox](#)
- At least 5-7 days prior to Walk day, key staff and the volunteer logistics lead should walk through the event venue space with the Walk Emergency Response Plan to ensure it is sufficient.
- This document should be printed, placed in a binder and available on Walk day.
- This document should be covered as a part of the day of Emergency Briefing led by the staff partner. The emcee, security guards, staff and key volunteers must be present.
- Please consult the [Risk Management Toolkit](#) for additional helpful information.

Table of Contents

[Walk Emergency Response Plan](#)

[Part 1: Contact Information](#)

[Part 2: If You See Something. Say Something Policy](#)

[Part 3: Medical Assistance](#)

[Part 4: Inclement Weather Plan](#)

[Part 5: Missing Person Procedure](#)

[Part 6: Unwanted Attendee Procedure](#)

[Part 7: Postponement](#)

[Appendix](#)

[Day of Event Emergency Briefing](#)

Walk Emergency Response Plan

Part 1: Contact Information

Directions: Complete all names and contact information.

Walk to End Alzheimer's Information

Territory: Lakes to Coast

Chapter: **Indiana**

Walk to End Alzheimer's Name: **Southeast Indiana- Batesville**

Event Address: **Liberty Park 716 S. Park Ave., Batesville, IN 47006**

Date of Event: **10/24/26**

Day of Contacts

Staff Partner in Charge: **Mariana Lopez-Owens**

Staff Partner's Cell #: **317.626.2668**

Back-up Staff Member: **Sandy Messner**

Back-up Staff Member's Cell #: **(317) 587-2208**

Logistics Lead: **Mariana Lopez-Owens**

Logistics Cell #: **317.626.2668**

On-site Staff Leadership:

On-site Staff Leadership Cell #:

Off Site Regional Leadership: **TBD**

Off Site Regional Leadership Cell #:

Security Personnel: **Two Batesville Police officers onsite**

Security Personnel Dial **911**

On-site Medical Professionals: **911**

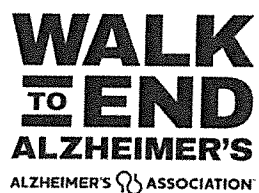
On-site Medical Cell #: **911**

Local Hospital

Margaret Mary Hospital

321 Mitchell Ave, Batesville, IN 47006

(812) 934-6624



alz.org/walk

Local Fire Station
Batesville Fire Department
115 E Catherine Street
Batesville, IN 47006
9812) 934-2230

Local Police Station
Batesville Memorial Building
Address: 132 S Main St, Batesville, IN 47006
Phone: (812) 934-3131

Part 2: If You See Something, Say Something Policy

Directions: Cover as a part of the Emergency Response Briefing and designate the main contact person on who should be alerted.

We all play a role in keeping our communities safe. Today and always, remember to stay vigilant and say something when you see signs of suspicious activity. If you see something that doesn't seem quite right, say something. Be prepared to share:

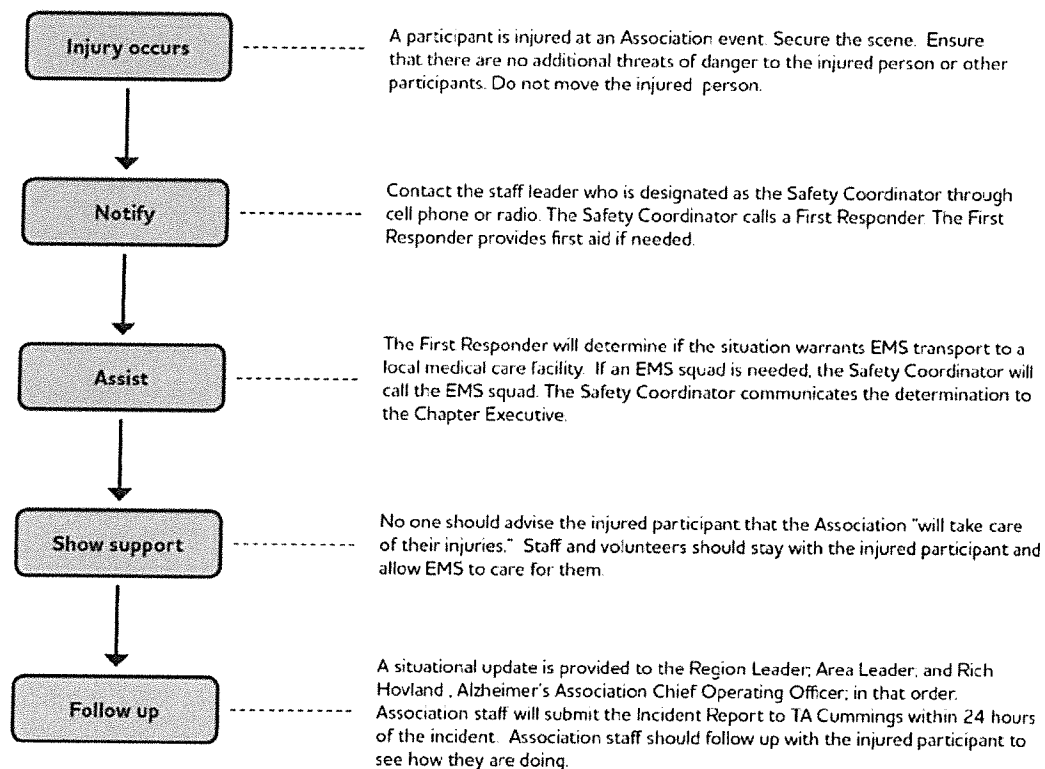
- Who or what you saw
- When you saw it
- Where it occurred
- Why it's suspicious

Who to Alert: **TELL WALK MANAGER + Security**
Mariana Lopez-Owens 317.626.2668 (Cell)
On-site Batesville Police Department

Part 3: Medical Assistance

Directions: Complete medical assistance questions and cover as a part of the Emergency Response Briefing.

INJURY SCENARIO



Medical Assistance Personnel

Is there a medical tent or medical personnel on-site?: **First Aid Kit at**

Where are they located?: **Registration**

Who do you contact?: **911 in case of emergency**

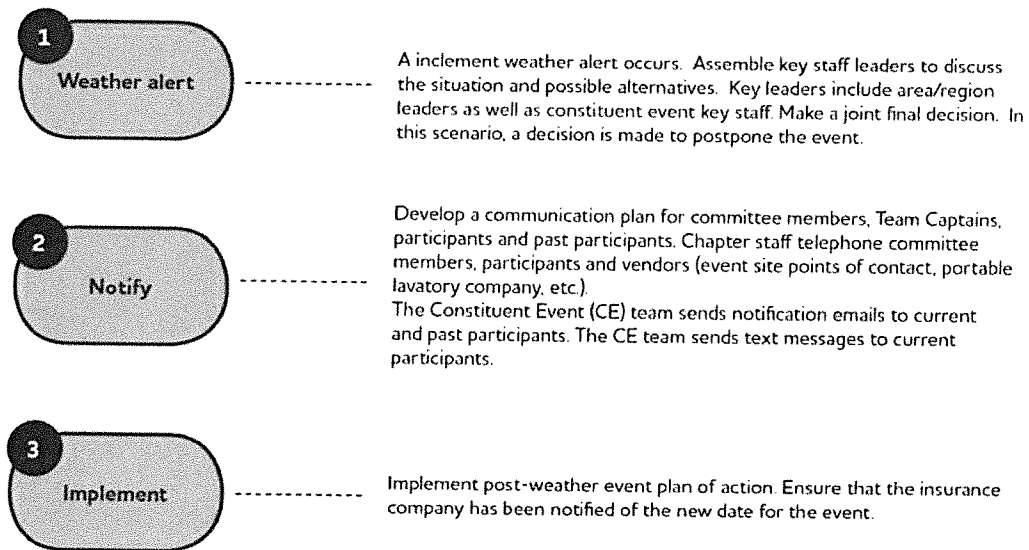
How do you contact them?: **By phone**

Medical Emergency Procedure - SAMPLE

1. If a participant has a medical concern, call 911. If the person is having a medical emergency, call 911.
2. Along the Walk route, we will use posters with the 10 Warning Signs as "mile markers" to identify a person's location if they require assistance (e.g. "We are at Warning Sign number 4 and need a golf cart to return the person back to the start line.")
3. The Executive Director - Mariana (or the most senior staff member on-site) will make an announcement regarding emergencies/missing persons. If an emergency announcement is made, we will also make an "all-clear" announcement when the person is located.

Part 4: Inclement Weather Plan

Directions: Complete the following questions and cover in your Emergency Response Briefing.



1. Gather all volunteers and communicate to them. 2. If the sound system is safe to use, make a weather announcement. 3. Provide info for shelter in place if necessary.

Weather alerts via weather app on phones. Weather Channel App // Accuweather as well

What participant cooling methods will you have available in case of severe heat?
Water bottles, air conditioning inside a vehicle, tents, covered pavilion

How will you be tracking the weather during the event? FOX19 media sponsor will alert walk staff of emergency weather alerts.

Evacuation

Please detail out your evacuation plan including how it will be communicated and by whom.

Indoors: Our event takes place outdoors.

Outdoors: Highlight parking areas and egress points where participants should be directed if needed.

Parking is in the park lot and the event is set up in the Park Pavilion. Attendees can leave the lot through the exits.

Evacuation emergency exits should be visited by staff and key volunteers 5-7 days prior to event day in conjunction with pre-event venue in-person risk plan review.

Shelter-in-Place

Detail out your shelter-in-place plan including how it will be communicated and by whom.

Indoors: Our event takes place outdoors.

Outdoors: Highlight nearby structures where participants should be directed if needed. Kitchen of the pavilion and under the covered pavilion.

1. Gather all volunteers and communicate to them.
2. If the sound system is safe to use, make an announcement.
3. Provide info for shelter in place if necessary.
4. Confirm location in advance with police

In inclement weather everyone should report to their vehicles or shelter under the covered pavilion.

Shelter-in-place locations should be visited 5-7 days prior to event day in conjunction with staff volunteer review of day of event risk plan.

Part 5: Missing Person Procedure

Directions: Complete the following contact names and cover in your Emergency Response Briefing.

1. The morning of the Walk, Mariana will send out a group text to staff on the Emergency Response Team to enable quick communication and sharing of photos if needed.
2. If a person reports a member of their party is lost, or if the person is lost, escort them to the volunteer tent and notify Mariana.
3. If the person is lost, they will remain at the Registration Tent until a member of their party arrives.
4. If the person is reporting a missing child or PWD, Cass Patterson will gather the photo, name, and description of the person and notify Mariana who will send the person with a volunteer (who will have a radio) to drive the Walk route (in reverse) and walk the event area.
5. The volunteer will radio when the person is found. If they complete their route and the person is not found, the volunteer will radio Mariana Barnett and Cass Patterson and return to the Registration tent.
6. If the person is not found after driving the Walk route and event area, Mariana Barnett will report to event police and escort/direct event police to the Registration tent to take a report from the family.
7. Mariana Barnett will then notify the Emergency Response Team by radio and cell phone to gather by the volunteer tent to get a description of the missing person and coordinate a search under the direction of event police.
8. If after the staff conduct their search the person has still not been found, notify Mariana who will call 9-1-1 and/or consult with event police regarding next steps. Mariana will make an announcement regarding the missing person.

Part 6: Unwanted Attendee Procedure

Directions: Prepare ahead of time and review in your Emergency Response Briefing.

1. Prior to Walk day, build an unwanted guest list including names and photos and select a code word that is easy to remember (**WALK26**). This code word can be used to signal to other staff and volunteers that you need assistance from the on-site security officer without escalating the situation.
2. If you find yourself in a situation with an unwanted or threatening individual or observe a person in an unwanted situation, ask yourself:
 - a. Is this a life-threatening situation?
 - i. If you feel this is a life-threatening situation, remove yourself immediately and call 911.
3. If not a life-threatening situation, advise the unwanted person that you are calling someone that is able to help.
4. Using your phone or a radio, deploy the code word **Walk 26** to another staff partner or volunteer lead - this will calmly signal that you need someone to notify the security guard for you. Or, if not urgent, you can call the security guard directly once out of the area of concern.

Part 7: Postponement

Directions: Outline the plan should a postponement be required.

Everyone should be aware that the Walk takes place rain or shine. However, in the unusual case that a Walk to End Alzheimer's needs to be postponed, a Regional Leader needs to be involved in the decision-making, and an effective way to communicate the plan to all parties is crucial. All committee members should be aware of the plan and be able to communicate it to team captains and the public. Describe the main points of that plan here.

- The regional leader is contacted to assess the potential for rescheduling
 - collaborate on the pros and cons of rescheduling
- Once the decision is made, inform the committee via text and email
- Walk Manager will update Banner on the website and send an email to current and past walkers
- Walk Manager contacts Amy Harrod to send tatango text to current and past walkers

Appendix

Directions: Prepare and include all of the following in this Emergency Response Plan.

- **Accident/Incident Insurance Reporting Form** - Include multiple blank copies of this form should you need them on Walk day.
- **Command Center Operations** - If you will have a day of event command center, include a list of all operations and contacts.
- **Emergency Briefing Checklist** - This details out the most important topics for the required day of emergency briefing.
- **Event Staff Roster** - Include a complete list of your entire on-site event staff and what responsibilities they will have that day.
- **Insurance Information** - Include a copy of your certificate of insurance and any other applicable paperwork.
- **Permits** - Include a copy of any permits secured as a part of this Walk to End Alzheimer's.
- **Vendors** - Include all contracts and contact information for all Walk day vendors.

Day of Event Emergency Briefing

Each event will hold a 15-minute emergency briefing led by the lead walk staff member who will review risk management plans with staff, key volunteers, security personnel and emcee.

- Walk staff lead conducts meeting and gathers all staff, volunteers, emcee and security personnel one hour prior to the event for the on-site emergency briefing
- Hand out the contact Lanyard and site map with exits marked, shelter in place location, medical tent, registration and any other locations you need to highlight
- Start by stating we're all looking forward to bringing the Community together to Walk [for...] and a part of that is to provide as safe and secure an event as possible. This emergency briefing is intended to provide you the basic contact and other information you need in the event of an emergency.
- Following the Emergency Response Plan handout, first introduce all the key emergency contacts
 - Have each person step forward and raise their hand so everyone can see as they are introduced and also highlight their role and where they will be during the event (e.g. registration area, etc.)
 - Also introduce the security personnel in the same manner and highlight their role and where they will be during the event (e.g. registration area, among the crowd, etc.)
 - Also highlight the emergency phone numbers and event site address
 - Briefing should include a review of venue exits, if possible review site map and or physically visit exit locations
- Stress "SEE SOMETHING, SAY SOMETHING"
- Highlight what to do in the event of any outlined Emergency Categories such as medical emergencies (e.g. location of medical tent and/or medical personnel, who to contact, etc.). Review each plan.
- Review the Evacuation Plan
- Review the Shelter-in-Place Plan
- Mention there are Missing Person Procedures should they be needed and who to contact
- Mention there are Unwanted Attendee Procedures should they be needed and who to contact
- For General Emergency Management, designate who should be notified and who will take charge.
- Establish a General Emergency Management location should the need for emergency planning arise



Board of Works
Application for Road Closure(s) /Parking Lot(s) Usage

Request for usage must be made to the City of Batesville Board of Works **60 days prior to the event date**. Please describe the following city streets and/or parking areas to be used on the lines **below**. **By completing this form**, you acknowledge that any use of spray paint or adhesive markings on city streets and/or trails is **prohibited**:

Event: Halloween Parade Date/Time: 10/31/26
Contact: John Baumer Organization: American Legion
Mobile Number: 812-560-3160 Address: 2801 E. Legion Rd.
Date request submitted: 6/25/26 City/State/Zip: Batesville, IN, 47006

Please include the following with this request:

- ☒ Submitted route(s) and Map of location or route
☒ A copy of your Certificate of Liability (Naming City of Batesville as additional insured)
☐ Site Safety Plan **If your event is approved, you may have to complete the Indiana Department of Homeland Security Special Endorsement Permit by visiting: <https://publicsafety.dhs.in.gov/>. Certain Circumstances apply.

Have you notified property owners of the affected street(s) closure? YES NO

Please select the following, if needed:

- ☐ Cones ☐ Barricades (You are responsible for moving barriers into place and removing from the roadway after the event)
☐ Fencing ☐ Police Traffic Assistance

**Return completed form 60 DAYS
PRIOR TO THE EVENT:**

Andrea Wade, Mayor's Office
132 South Main Street
Batesville, IN 47006
or awade@batesvilleindiana.us

Approval of Application (Office use only)

Date Received: 6/25/2026

Date of Board of Works Approval: _____

Reviewed (Initial): Police Chief MM

Fire Chief PH

Street SM Mayor JD



AMERLEG-02

CSIEBERT

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/23/2026

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
Voldico Insurance - Tekulve-Vankirk Agency Batesville
976 State Road 46 E, Ste B
Batesville, IN 47006

CONTACT NAME:
PHONE (A/C, No, Ext): (812) 934-4447 FAX (A/C, No): (812) 933-0508
E-MAIL ADDRESS: stekulve@voldico.com

INSURED

American Legion Post 271
2899 E Legion Rd
Batesville, IN 47006

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Western World Insurance Company	13196
INSURER B:	
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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:			NPP6267536	2/14/2026	2/14/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ Included
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER

City of Batesville
132 S Main St
Batesville, IN 47006

CANCELLATION

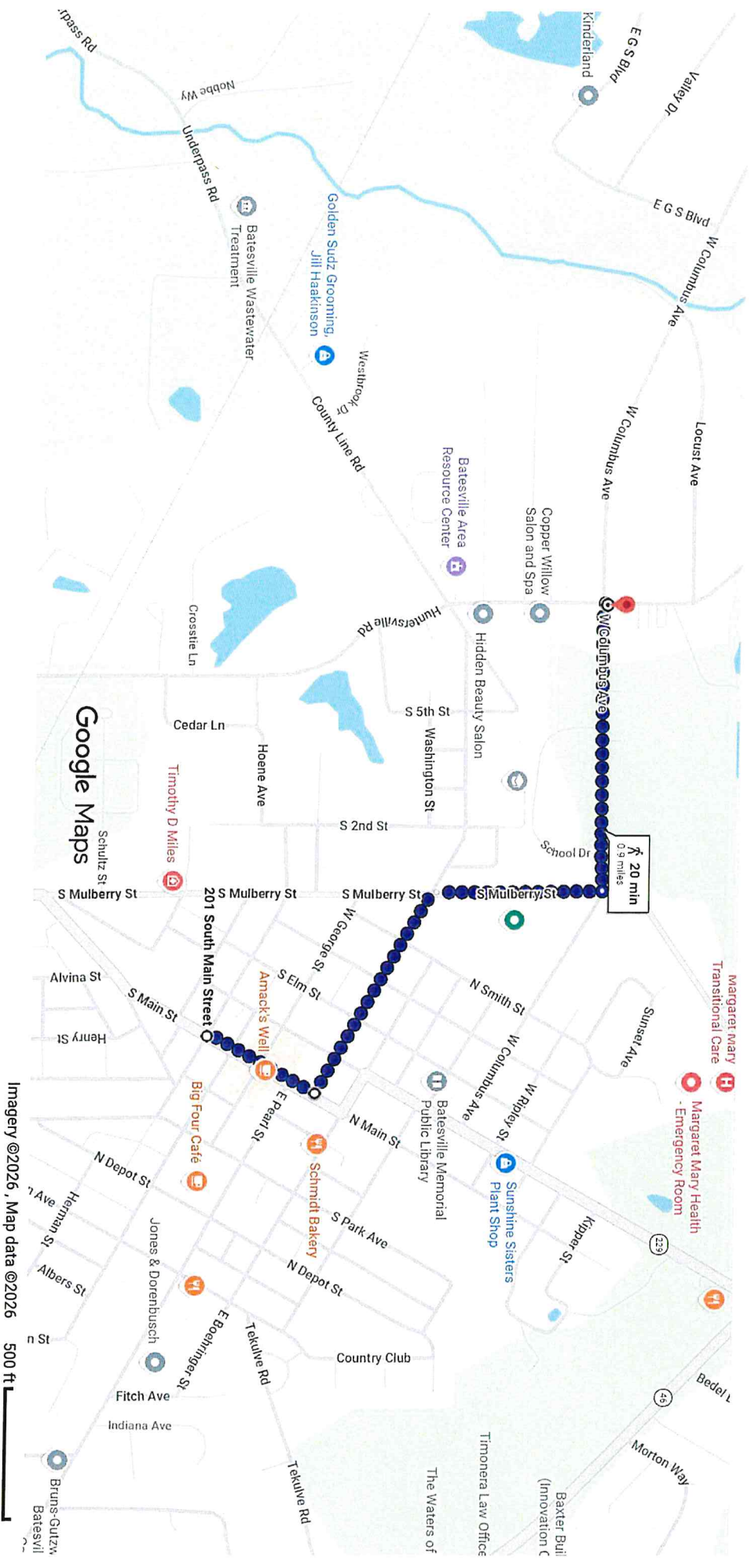
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

201 S Main St, Batesville, IN 47006 to 39.3034498, -85.2327855

Walk 0.9 mile, 20 min

LINE UP BEGINS: Huntersville Road and Columbus Avenue. RIGHT onto Mulberry. LEFT onto W. Pearl Street. RIGHT onto Main Street. Ends at the Memorial Building, 132 S. Main Street.



PD MM

FIRE BH

street SM

Mayor JD

Andrea Wade

From: Nancy Raab <do-not-reply@batesvilleindiana.us>
Sent: Monday, July 6, 2026 1:33 PM
To: Andrea Wade; bvillestdept@etczone.com
Cc: John Irrgang
Subject: Street Closure Request
Attachments: 6a4be6b5c0f1f.zip

Event Name: ROAD BLOCK for Phi Beta Psi _ XI Chapter

Date of requested closure: October 10, 2026 (Sunday)

Requested streets to be closed: Corner of East Pearl St and North Park (in front of Langen Meats). We were allowed to use this location last year and it was perfect.

Time of requested closure: 8:30am – 12:30pm

Organization: Phi Beta Psi

Contact:

Nancy Raab

phibetapsi.xi@gmail.com

317-714-8568

PO Box 353, Batesville, IN 47006

Event Coordinator:

Secondary Event Coordinator:

Requested streets to be closed: Corner of East Pearl St and North Park (in front of Langen Meats). We were allowed to use this location last year and it was perfect.

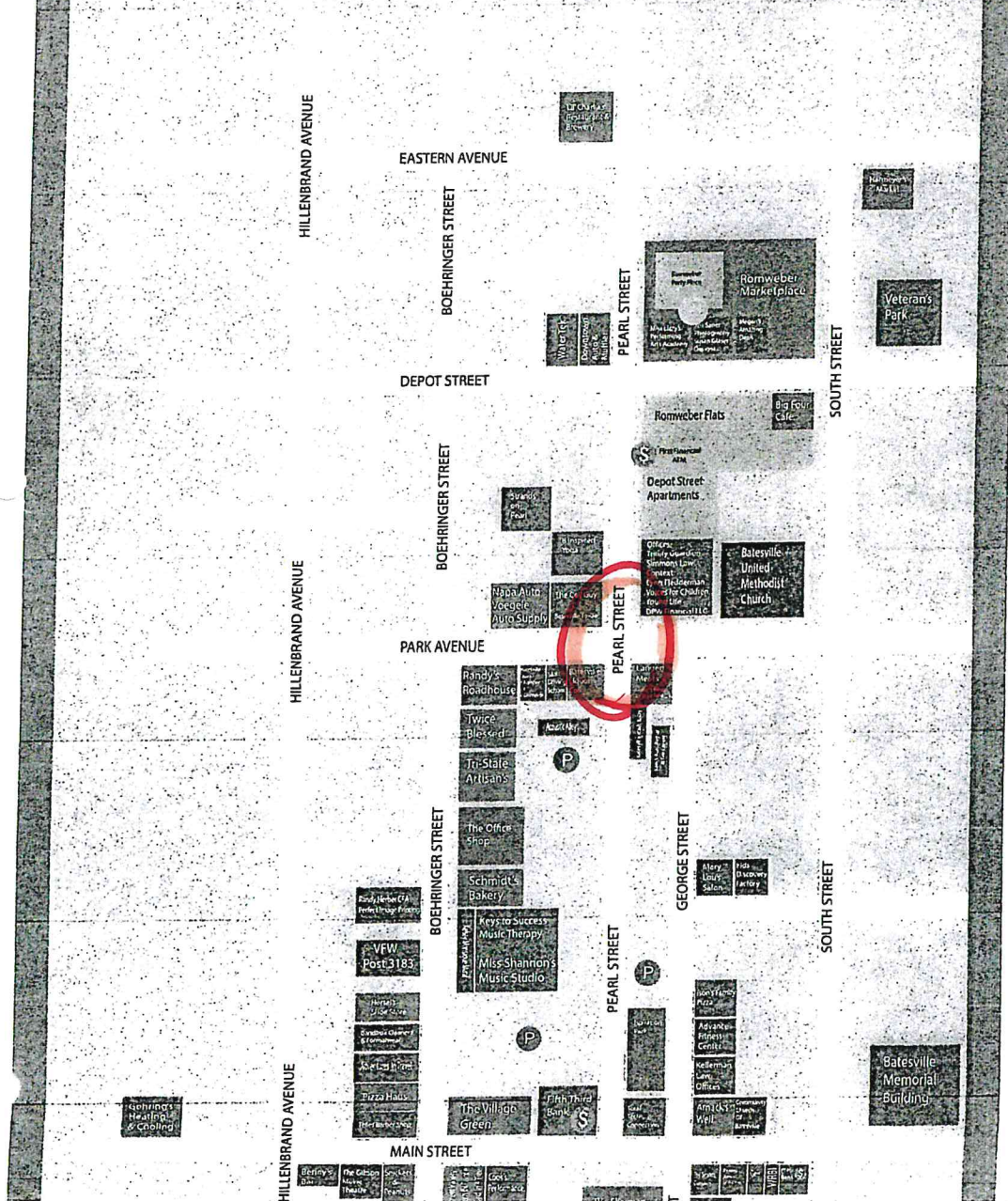
Additional information: Certificate of Liability exp in Aug 2026. I will provide new certificate once we have renewed the insurance. Please let me know if any additional information is required.

Certificate of Liability and Route Map (if applicable) are attached.

--

This e-mail was sent from the Street Closure Request form on the City of Batesville website.

Downtown Batesville



W. PEARL / PARK AVE.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/12/2025

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.

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PRODUCER
AssuredPartners of Indiana, LLC
4 West Pearl Street
Batesville IN 47006

CONTACT

NAME:

PHONE
(A/C, No, Ext): 812-934-3061FAX
(A/C, No):

E-MAIL:

ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : Auto-Owners Insurance Company

18988

INSURER B :

INSURER C :

INSURER D :

INSURER E :

INSURER F :

INSURED
Phi Beta Psi Sorority XI Chapter
101 N Walnut Street
Batesville IN 47006

PHIBETA-01

COVERAGES

CERTIFICATE NUMBER: 1788381669

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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:			09492293	12/19/2024	12/19/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						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

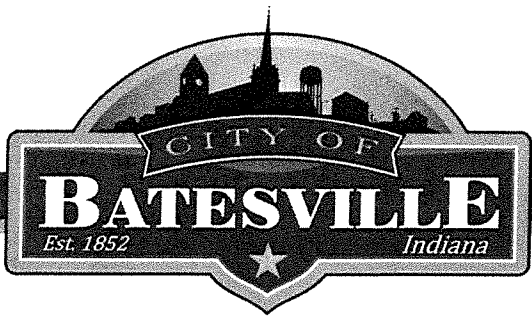
City of Batesville
132 South Main Street
Batesville IN 47006

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Board of Works
Application for Road Closure(s) /Parking Lot(s) Usage

Request for usage must be made to the City of Batesville Board of Works **60 days prior to the event date**. Please describe the following city streets and/or parking areas to be used on the lines below. **By completing this form, you acknowledge that any use of spray paint or adhesive markings on city streets and/or trails is prohibited:**

Walking Path will be used from the park to Bram
Woods + back. I do not anticipate needing road
closures.

Event: Paws for a Purpose Date/Time: 10-3-26 10am
Contact: Jill Duerstork Organization: Scholarship Week
Mobile Number: 812-614-2690 Address: 336 Columbus Ave
Date request submitted: 6-5-26 City/State/Zip: Batesville, IN 47006

Please include the following with this request:

- ☒ Submitted route(s) and Map of location or route
☐ A copy of your Certificate of Liability (Naming City of Batesville as additional insured)
☐ Site Safety Plan **If your event is approved, you may have to complete the Indiana Department of Homeland Security Special Endorsement Permit by visiting: <https://publicsafety.dhs.in.gov/>. Certain Circumstances apply.

Have you notified property owners of the affected street(s) closure? YES NO

Please select the following, if needed:

- ☐ Cones ☐ Barricades (You are responsible for moving barriers into place and removing from the roadway after the event)
☐ Fencing ☐ Police Traffic Assistance

Return completed form 60 DAYS
PRIOR TO THE EVENT:

Andrea Wade, Mayor's Office
132 South Main Street
Batesville, IN 47006
or awade@batesvilleindiana.us

Approval of Application (Office use only)

Date Received: 6/5/2026

Date of Board of Works Approval: _____

Reviewed (Initial): Police Chief mm

Fire Chief BA

Street Sm

Mayor gg

132 SOUTH MAIN STREET | BATESVILLE, INDIANA 47006
812.933.6100 | FAX 812.933.0698 | www.batesvilleindiana.us

Plans
for a
Purpose
10-3-26

2.58 mi

Batesville, IN

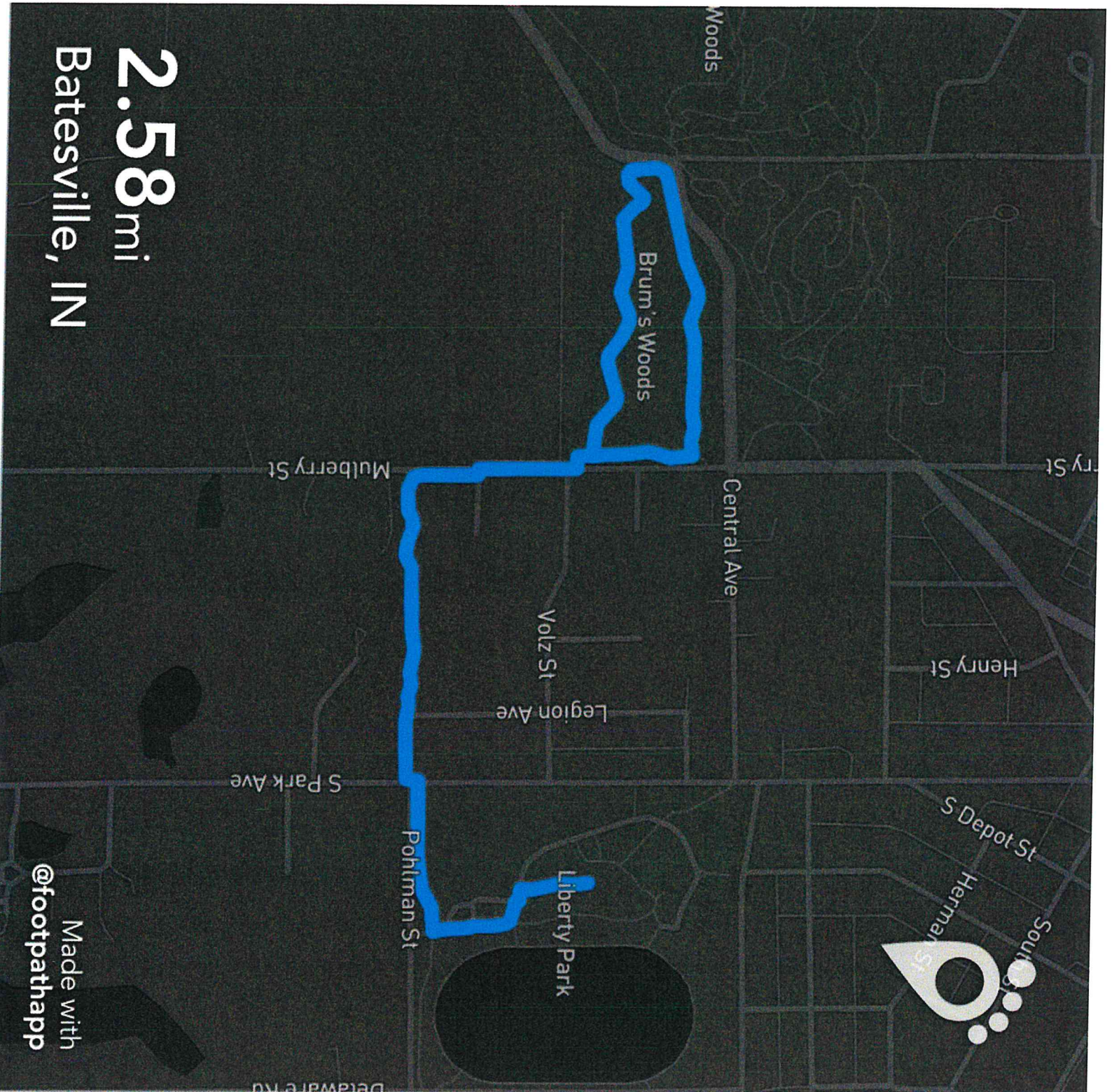
Made with
@footpathapp



Plans
for a
Purpose
10-3-26

2.58mi

Batesville, IN



Made with
@footpathapp



Board of Works
Application for Road Closure(s) /Parking Lot(s) Usage

Request for usage must be made to the City of Batesville Board of Works **60 days prior to the event date**. Please describe the following city streets and/or parking areas to be used on the lines **below**. **By completing this form**, you acknowledge that any use of spray paint or adhesive markings on city streets and/or trails is **prohibited**:

Event: AppleFest 5k Date/Time: September 26, 2026
Contact: Tameeka Sizemore Organization: Southeastern IN YMCA
Mobile Number: 812.592.8728 Address: 30 State Rd 129S
Date request submitted: 6.3.2026 City/State/Zip: Batesville, IN 47006

Please include the following with this request:

- ☒ Submitted route(s) and Map of location or route
- ☒ A copy of your Certificate of Liability (Naming City of Batesville as additional insured)
- ☒ Site Safety Plan **If your event is approved, you may have to complete the Indiana Department of Homeland Security Special Endorsement Permit by visiting: <https://publicsafety.dhs.in.gov/>. Certain Circumstances apply.

Have you notified property owners of the affected street(s) closure? **YES** NO

Please select the following, if needed:

- ☐ Cones ☐ Barricades (You are responsible for moving barriers into place and removing from the roadway after the event)
☐ Fencing ☒ Police Traffic Assistance

**Return completed form 60 DAYS
PRIOR TO THE EVENT:**

Andrea Wade, Mayor's Office
132 South Main Street
Batesville, IN 47006
or awade@batesvilleindiana.us

Approval of Application (Office use only)

Date Received: 6/5/2026

Date of Board of Works Approval: _____

Reviewed (Initial): Police Chief MM

Fire Chief SH

Street SM Mayor _____

132 SOUTH MAIN STREET | BATESVILLE, INDIANA 47006
812.933.6100 | FAX 812.933.0698 | www.batesvilleindiana.us

Site Safety Plan

Event: AppleFest

Complete form and present to the Fire Chief for approval

Event Coordinator Tameeka Sizemore

Phone Number 812-592-8728

Secondary Event Coordinator Amber Rossman

Phone Number 812-934-6006

Event Date: September 26, 2026

Parking Lot or Road Closures:

List areas and times of closures

10:00am-12:00pm

Same-day registration will be at Liberty Park. The start/finish line will be next to shelter house number 4. Participants will follow the parking lot to the new walking/running trail and turn left onto the trail at the Pohlman St. park entrance to head east towards The Plex. Participants will follow the trail and turn around at designated point before reaching Coonhunters Rd. They will then follow the trail back towards Liberty Park and continue west on the trail until they reach "Lena's Loop" in Brum Woods. Participants will follow "Lena's Loop" (entering from the north side and exiting from the south side) and then return to Liberty Park via the Brum Woods/new trail. Participants will return to the start/finish line next to shelter house number 4 in the parking lot.

Equipment to be used:

List items used to close/block off parking lot/road

Some parking spots may be blocked off with cones.

Life Safety Strategy:

See Chapter 4 of the Indiana Fire Code, Section 404.3.2, #4

- Procedure for reporting a fire or other emergency: Call 911
- YMCA staff will make an announcement alerting participants of any emergencies during pre/post-race
- YMCA staff/volunteers will be informed of any emergencies during the race via two-way radio and/or cell phone communication
- We are requesting that Batesville Police provide traffic assistance. YMCA staff/volunteers will be placed on the route to assist with street crossings and other needs. YMCA will also provide a pace leader to guide participants through the correct course.
- YMCA staff will help participants needing assistance pre/post-race
- Event Coordinator will monitor weather. All participants and YMCA staff will be sent home in the case of inclement weather.
- Fire Emergency: YMCA staff will direct participants to an area determined by location of emergency
- Medical Emergency: YMCA staff are CPR/First Aid certified and will provide care according to their training



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/3/2026

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.

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PRODUCER AssuredPartners of Indiana, LLC 4 West Pearl Street Batesville IN 47006		CONTACT NAME: Shelly Knecht PHONE (A/C, No, Ext): 812-663-3500 FAX (A/C, No): 812-663-3421 E-MAIL ADDRESS: sknecht@wig-ins.com	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: West Bend Mutual	
		INSURER B: Clearpath Insurance Company	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES**CERTIFICATE NUMBER:** 1423935193**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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC OTHER:			B81679812	6/26/2025	6/26/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 2,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☒ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			B81679812	6/26/2025	6/26/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$			B81679812	6/26/2025	6/26/2026	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WC11107385	6/26/2025	6/26/2026	☒ PER STATUTE ☐ OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Directors & Officers			B81682211	6/26/2025	6/26/2026	Aggregate 1,000,000

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

CERTIFICATE HOLDER**CANCELLATION**

City of Batesville
132 S Main St
Batesville IN 47006

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

© 1988-2015 ACORD CORPORATION. All rights reserved.



Board of Works
Application for Road Closure(s) /Parking Lot(s) Usage

Request for usage must be made to the City of Batesville Board of Works **60 days prior to the event date**. Please describe the following city streets and/or parking areas to be used on the lines below. By completing this form, you acknowledge that any use of spray paint or adhesive markings on city streets and/or trails is **prohibited**:

Event: Turkey Trot 5k/10k Date/Time: November 26, 2026
Contact: Tameeka Sizemore Organization: Southeastern IN YMCA
Mobile Number: 812.592.8728 Address: 30 State Rd 129S
Date request submitted: 6.3.2026 City/State/Zip: Batesville, IN 47006

Please include the following with this request:

- ☒ Submitted route(s) and Map of location or route
- ☒ A copy of your Certificate of Liability (Naming City of Batesville as additional insured)
- ☒ Site Safety Plan **If your event is approved, you may have to complete the Indiana Department of Homeland Security Special Endorsement Permit by visiting: <https://publicsafety.dhs.in.gov/>. Certain Circumstances apply.

Have you notified property owners of the affected street(s) closure? **YES** NO

Please select the following, if needed:

- ☐ Cones ☐ Barricades (You are responsible for moving barriers into place and removing from the roadway after the event)
☐ Fencing ☒ Police Traffic Assistance

**Return completed form 60 DAYS
PRIOR TO THE EVENT:**

Andrea Wade, Mayor's Office
132 South Main Street
Batesville, IN 47006
or awade@batesvilleindiana.us

Approval of Application (Office use only)

Date Received: 6/5/2026

Date of Board of Works Approval: _____

Reviewed (Initial): Police Chief MM

Fire Chief BH

Street AM

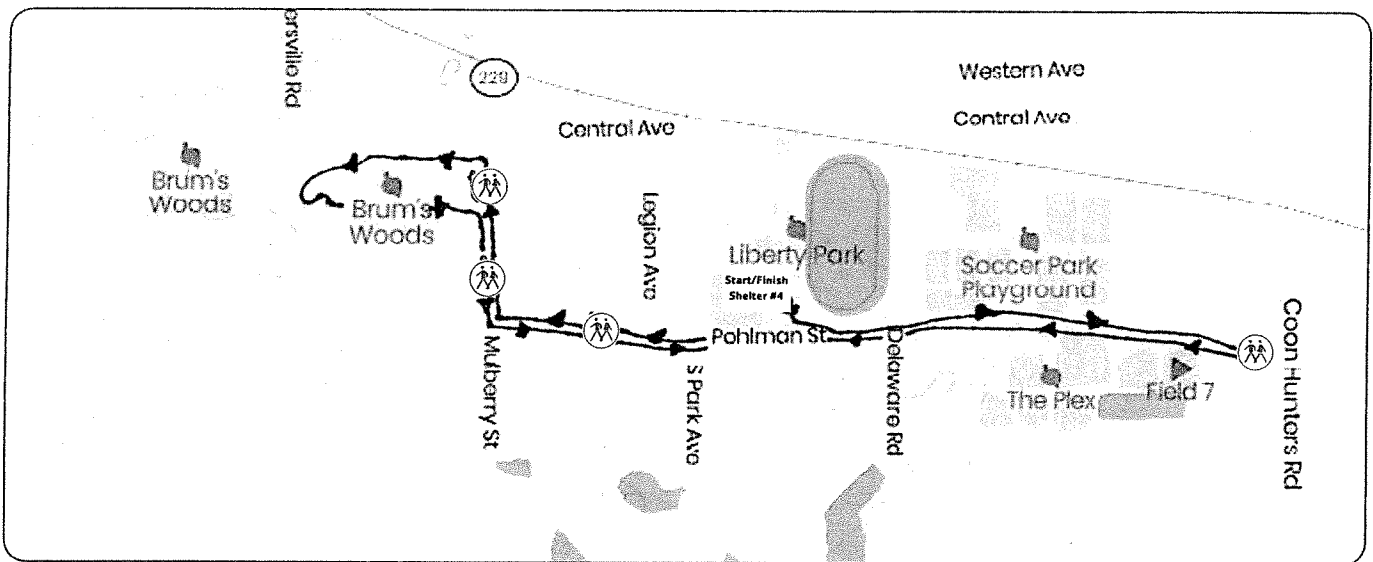
Mayor AW

132 SOUTH MAIN STREET | BATESVILLE, INDIANA 47006
812.933.6100 | FAX 812.933.0698 | www.batesvilleindiana.us



Turkey Trot 5K/10K - Route Map

Southeastern Indiana YMCA



- The start/finish line will be at the south end of Liberty Park behind the baseball stadium.
- Participants will exit the south end of the park on to the new walking/running trail and turn left onto the trail at the Pohlman St. park entrance to head east towards The Plex.
- Participants will follow the trail until they reach Coonhunters Rd. (participants will NOT cross Coonhunters Rd.), where they will turn around and follow the trail back to Liberty Park.
- Participants will then continue west on the trail until they reach "Lena's Loop" in Brum Woods.
- Participants will follow "Lena's Loop" (entering from the north side and exiting from the south side) and then return to Liberty Park via the Brum Woods/new trail.
- Participants will return to the start/finish line in front of the Pavilion via the parking lot.
- 10k participants will complete this route twice.

Site Safety Plan

Event: Turkey Trot

Complete form and present to the Fire Chief for approval

Event Coordinator Tameeka Sizemore

Phone Number 812-592-8728

Secondary Event Coordinator Amber Rossman

Phone Number 812-934-6006

Event Date: November 26, 2026

Parking Lot or Road Closures:

List areas and times of closures

8:00AM-10:00am

Same-day registration will be at Liberty Park. The start/finish line will be next to shelter house number 4. Participants will follow the parking lot to the new walking/running trail and turn left onto the trail at the Pohlman St. park entrance to head east towards The Plex. Participants will follow the trail and turn around at designated point before reaching Coonhunters Rd. They will then follow the trail back towards Liberty Park and continue west on the trail until they reach "Lena's Loop" in Brum Woods. Participants will follow "Lena's Loop" (entering from the north side and exiting from the south side) and then return to Liberty Park via the Brum Woods/new trail. Participants will return to the start/finish line next to shelter house number 4 in the parking lot.

Equipment to be used:

List items used to close/block off parking lot/road

Some parking spots may be blocked off with cones.

Life Safety Strategy:

See Chapter 4 of the Indiana Fire Code, Section 404.3.2, #4

- Procedure for reporting a fire or other emergency: Call 911
- YMCA staff will make an announcement alerting participants of any emergencies during pre/post-race
- YMCA staff/volunteers will be informed of any emergencies during the race via two-way radio and/or cell phone communication
- We are requesting that Batesville Police provide traffic assistance. YMCA staff/volunteers will be placed on the route to assist with street crossings and other needs. YMCA will also provide a pace leader to guide participants through the correct course.
- YMCA staff will help participants needing assistance pre/post-race
- Event Coordinator will monitor weather. All participants and YMCA staff will be sent home in the case of inclement weather.
- Fire Emergency: YMCA staff will direct participants to an area determined by location of emergency
- Medical Emergency: YMCA staff are CPR/First Aid certified and will provide care according to their training



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/3/2026

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 AssuredPartners of Indiana, LLC 4 West Pearl Street Batesville IN 47006	CONTACT NAME: Shelly Knecht PHONE (A/C, No, Ext): 812-663-3500 E-MAIL ADDRESS: sknecht@wig-ins.com	FAX (A/C, No): 812-663-3421
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : West Bend Mutual		15350
INSURER B : Clearpath Insurance Company		16273
INSURER C :		
INSURER D :		
INSURER E :		
INSURER F :		

COVERAGES

CERTIFICATE NUMBER: 1423935193

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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:		B81679812	6/26/2025	6/26/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 2,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	☒ AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☒ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY		B81679812	6/26/2025	6/26/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$		B81679812	6/26/2025	6/26/2026	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N ☐ N / A	WC11107385	6/26/2025	6/26/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Directors & Officers		B81682211	6/26/2025	6/26/2026	Aggregate 1,000,000

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

CERTIFICATE HOLDER

CANCELLATION

City of Batesville
132 S Main St
Batesville IN 47006

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

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