



# Dakota County License Application Assemblage of Large Numbers of People

## Applicant Information

Applicant's legal name

Applicant's Date of Birth

Business Trade Name (doing business as)

Daytime Phone Number

Applicant's Complete Address

Email Address

Complete Address of Assemblage Property/Location

Name of Township

## Event Information

Name of Event

Maximum Number of Attendees or Tickets Sold

Nature or Purpose of Event

Exact Date(s) of Event (MM/DD/YY)

Hours of Event

Hours during which music will be played (if applicable)

Hours during which alcohol will be served (if applicable)

## Statement of Understanding

Applicants are encouraged to read Ordinance 112 and Ordinance 110 Section 16 in entirety as part of preparing a permit application. There are several key provisions which require particular attention:

1. The license shall permit no more persons to assemble than the number listed.
2. No assemblage shall occur between the hours of 11:30 PM and 9:00 AM on Fridays and Saturdays, and between 9:00 PM and 9:00 AM Sundays through Thursdays.
3. The licensee agrees to allow representatives of the Dakota County Sheriff's Office to access the property from the time of submission of this application and continuing until 24 hours following the licensed activity.
4. The county may impose additional conditions to protect the health, safety, and welfare of those persons who may be in attendance or residents in the community where the event shall be held.
5. The licensee and his/her agents shall maintain the assembly premises and facilities in a clean, orderly and sanitary condition at all times.
6. No person at the assembly may engage in any conduct which violates a federal, state, county, or local law, ordinance, or regulation.
7. The license shall be posted in a conspicuous place at all times.
8. The applicant agrees to abide by all provisions of Dakota County Ordinance 112 and Ordinance 110 Section 16 in entirety.

# Approvals

## Applicant

I have included the requested information to accompany my application, including:

- Site Map
- Bond for \$10,000 payable to Dakota County
- Certificate of Liability Insurance for \$1,000,000 naming Dakota County as additional insured
- Security Agreement
- EMS Mass Assemblage Planning Guide
- Traffic Management Plan, if applicable

I attest that all the information included in the application is accurate and true to the best of my knowledge.

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

\_\_\_\_\_  
*Date*

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## Landowner of Assemblage Location

*Applicant to obtain approval and signatures from Landowner or provide copy of lease authoring use of property.*

In the event the Assembly is to occur on property belonging to other than the applicant, the application must include the signature of the landowner or copy of the lease authorizing use of the property.

\_\_\_\_\_  
*Landowner Name*

\_\_\_\_\_  
*Landowner Phone Number*

\_\_\_\_\_  
*Landowner Complete Address*

\_\_\_\_\_  
*Name of Business or Location used for Event, if applicable*

\_\_\_\_\_  
*Landowner Signature*

\_\_\_\_\_  
*Date*

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## Township

*Dakota County will obtain approval from the Township where event will be located.*

I have reviewed the application for an Assemblage of Large Numbers of People. By signing below, I attest that I have reviewed the application and approve that it be brought before the Dakota County Board of Commissioners for approval or denial.

\_\_\_\_\_  
*Township Representative Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Township Representative Name (Printed)*

\_\_\_\_\_  
*Name of Township*



## Dakota County License Applicant Information

Pursuant to Minnesota Statutes 270C.72 (Tax Clearance; Issuance of Licenses), all licensing authorities must require the applicant to provide the applicant's Social Security number and Minnesota business identification number on all license applications.

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we must advise you that:

- This information may be used to deny the issuance, transfer, or renewal of your license if you owe the Minnesota Department of Revenue delinquent taxes, penalties or interest; and
- The licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of information Act, the Department of Revenue is allowed to supply this information to the Internal Revenue Service; and
- Failure to supply this information may jeopardize or delay the issuance of your licensing or processing of your renewal application.

Please complete the following information and return this form along with your license application.

### License Information

Name of License Applied for: \_\_\_\_\_

License Period or Term: \_\_\_\_\_ to \_\_\_\_\_  
*Beginning Date* *Ending Date*

### Personal Information

Applicant's Legal Name \_\_\_\_\_

Applicant's Complete Address \_\_\_\_\_

Social Security Number \_\_\_\_\_

### Business Information

Corporation/Business Name \_\_\_\_\_

Corporation/Business Address \_\_\_\_\_

Minnesota Tax Identification Number \_\_\_\_\_

I do not conduct business as a business entity and do not have a Minnesota Tax Identification Number.

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

Date \_\_\_\_\_



## Proof of Worker's Compensation, Federal I.D. and Social Security Number

Minnesota Statute Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Section 176.181, Subd. 2. The information required is: The name of the insurance company, the policy number, and dates of coverage or the permit to self-insure. This information will be collected by the licensing agency and put in their company file. It will be furnished, upon request, to the Department of Labor and Industry to check for compliance with Minnesota Statute Sec. 176.181, Subd.2.

This information is required by law, and licenses and permits to operate a business may not be issued or renewed if it is not provided and/or falsely reported. Furthermore, if this information is not provided and/or falsely reported, it may result in a \$1,000 penalty assessed against the applicant by the Commissioner and the Department of Labor and Industry payable to the Special Compensation Fund.

Minnesota Statutes section 270.72 also requires that all licensing authorities must obtain the applicant's social security number and Minnesota Federal Identification Number on all license applications. Upon request of the commissioner, the licensing authority must provide the commissioner with a list of all applicants, including the name, address, business and name and address, social security number, and business identification number of each applicant.

Provide the information specified above in the spaces provided or certify the precise reason your business is excluded from compliance with the insurance coverage requirement for workers' compensation.

Corporation or Business Name \_\_\_\_\_

Federal Tax ID Number \_\_\_\_\_

Insurance Company (not agent) \_\_\_\_\_

Policy Number or  
Self-Insurance Permit Number \_\_\_\_\_

Dates of Coverage \_\_\_\_\_

--- OR ---

I am not required to have Worker's Compensation Liability average because:

I have no employees covered by the law.

Other (Specify) \_\_\_\_\_  
\_\_\_\_\_

I have read and understand my rights and obligations with regards to business licenses, permits and worker's compensation coverage, and I certify that the information provided is true and correct.

Signature \_\_\_\_\_ Social Security Number \_\_\_\_\_

# Event Requirements

**Applicant:** For the following sections, type N/A if a situation does not apply to this event.

## 1. Attendance

### Ordinance plan requirement

Maximum number of people to be assembled or admitted to the location and the method to be used to track the number of attendees and limit the number of attendees to those authorized in the permit.

### Guidance

- A. Applicant should make a best estimate of the expected attendance. Permits are required for any event with over 300 persons in attendance. Note that Ordinance requires that the event be limited to the number of people listed in the plan; applicants may wish to add in a cushion to their estimate if more people than estimated could be expected.
- B. Applicant should describe the method that will be used to track attendance. For example: Wrist bands will be provided for all attendees upon entering the event site. The number of assigned wrist bands will be limited to the total attendance of the permit application.

### ApplicantsResponse

## 2. Site Map

### Ordinance plan requirement

A fence or barrier completely enclosing the proposed location of sufficient height and strength to prevent people gaining access to the assembly grounds and having sufficient entrances and exits to allow easy movement into and out of the assembly grounds.

### Guidance

Marked on the site sketch.

### Applicants Response

### 3. Water

#### Ordinance plan requirement

Sanitary potable water sufficient to provide drinking water for the maximum number of people to be assembled at the rate of at least 1 gallon per person per day.

#### Applicants Response

### 4. Restrooms

#### Ordinance plan requirement

Separately enclosed toilets and hand washing or hand sanitizing stations conveniently located throughout the property sufficient to provide for the maximum number of attendees authorized by the license. Separate enclosed toilets and hand washing stations, conveniently located throughout the grounds, as recommended by the Dakota County Public Health Department.

#### Guidance

- A. Describe any permanent toilet facilities and any portable rental units that will be used during the event.
- B. Describe how portable toilets will be cleaned and serviced and provide the name of the vendor, vendor contact, vendor phone number.

#### ApplicantsResponse

### 5. Food

#### Ordinance plan requirement

Special event food and beverage stands operated in compliance with the Minnesota Food Code, as evidenced by a current license issued by the Minnesota Department of Health. By January 1, 2024, large event venues with organics must separate and collect a designated list of organics in back-of-house areas, in compliance with Ordinance 110 Section 16.

#### Guidance

- A. Describe the types and numbers of food and beverage stands that will be at the event.
- B. Will the event have at least 300 people in attendance and generate at least one ton (eight cubic yards) of trash per location?  Yes  No
  - If yes:
    - i. Identify food and beverage stands with back-of-house organics to be collected.
    - ii. Describe the plan to separate and collect a designated list of organics in back-of-house areas, in compliance with Ordinance 110 Section 16.

- C. Provide a statement that all food and beverage stands will be licensed by the Minnesota Department of Health (if required) and that each vendor will display the license prominently.

## Applicants Response

## 6. Trash, Recycling and Organics

### Ordinance plan requirement

A sanitary method of managing solid waste in compliance with state and local laws and regulations, sufficient to manage the solid waste production of the maximum number of people to be assembled at the rate of at least 2.5 lbs. of solid waste per person per day, together with a plan for collecting and holding all such waste at least once each day of the assembly's continuance, and sufficient trash, recycling, and organics containers and personnel to perform such tasks. Trash, recycling, and organics (food scraps) are properly managed as required by County Ordinance 110 Section 16.

### Guidance

- A. All waste, including the [Designated List of Recyclables](#) (Paper & Cardboard, Cartons, Glass bottles and jars, Metal cans, & Plastics labeled #1, #2 and #5), **must be properly separated, collected, and delivered to permitted facilities.****
- i. Will each trash container be paired with a recycling container (within 10 feet)?  
Yes No
  - ii. Will each recycling, trash and organics (if collected) container be [properly labeled](#) (standardized terms & images, color-coded)? Yes No  
*Obtain [County labels](#), as needed.*
  - iii. Will containers be large enough (no overflow)? Yes No  
*City grounds have containers. Obtain additional containers or hauler collection services, as needed.*
  - iv. Will all event staff, volunteers, event vendors and housekeeping/custodial contractors be educated with [standardized messaging](#) (what to recycle, how to collect)? Yes No  
*[County education](#) messages may be used.*
  - v. Will separated materials be delivered to permitted facilities? Yes No  
*Materials managed by the city go to permitted facilities.*
- B. Effective in 2024, large events must collect organics (food scraps) if they meet the following criteria:**
- i. Will the event have at least 300 attendees? Yes No
  - ii. Will the event generate at least 1 ton (8 cubic yards) of trash per location (e.g., each sporting tournament location)? Yes No
  - iii. Will the event generate food scraps back-of-house (e.g., non-public food-prep areas)?  
Yes No

**If yes to all three criteria listed under item B, please describe the plan to separate and collect food scraps.** Include who will educate event staff and vendors using standardized messaging, identify what vendors will use for back-of-house food scraps collection, how food scraps are collected from vendors

for delivery to an organics facility.

**C. For your event, identify who is responsible for:**

- i. Placing, labeling, and emptying trash, recycling and organics (if collected) containers:  
[redacted]
- ii. Providing education using standardized messaging:
- iii. Ensuring hauler services:
- iv. Name of hauler: [redacted]

**Optional:** Include the location of waste stations on the site sketch provided under Item 2.

**Applicants Response**

**7. Lighting**

**Ordinance plan requirement**

If the assembly is to continue during hours of darkness, illumination sufficient to light the entire area of the assembly at the rate of at least five-foot candles at ground level, but not to shine unreasonably beyond the boundaries of the enclosed location of the assembly.

**Applicants Response**

**8. Security**

**Ordinance plan requirement**

Security and traffic controls which will meet the requirements of local authorities and the Minnesota Department of Public Safety. Such controls shall include, but not be limited to, Minnesota law enforcement officers having jurisdiction in Dakota County or protective agents licensed in Minnesota physically present, as follows:

Over 300 people – 1 officer per 200 attendees

The written plan shall include the number of officers to be provided, their credentials and hours of availability.

The Dakota County Sheriff may recommend that security staffing requirements be reduced based upon the applicant’s assemblage license history.

If security is provided by the Dakota County Sheriff’s Office, cost of security for on-duty personnel will be billed by the Sheriff’s Office at a rate established annually by the Board.



## **Guidance**

Security Agreement on page 17 **MUST** be completed and submitted along with this application.

## **Applicants Response**

### **9. Fire Safety**

#### **Ordinance plan requirement**

Fire protection sufficient to meet all applicable state and local laws and regulations which shall include, but not be limited to, extinguishing devices, fire lanes and escapes, and sufficient emergency personnel to efficiently operate the required equipment.

#### **Guidance**

Applicant should describe fire protection provided for the event.

#### **Applicants Response**

### **10. Communications**

#### **Ordinance plan requirement**

There must be a minimum of 1 telephone, capable of two-way conversation, that is designated solely for emergency use. In the event of an emergency, 911 shall be used. Callers must be able to provide the location of the event, the address, and the nature of the emergency.

#### **Guidance**

Describe the number of phone lines and any other methods of communications (radios, cells phones, pagers, walkie talkies) that will be used by applicants to coordinate the event or respond to emergencies.

#### **Applicants Response**

## 11. Medical Emergencies

### Ordinance plan requirement

The applicant shall ensure compliance with emergency medical services (EMS) requirements as determined by Dakota County Public Health based, in part, on the Dakota County EMS Mass Assemblage Planning Guide on page 15.

### Guidance

- A. Provide a statement that the applicant will comply with the Dakota County Public Health Department's EMS requirements for the event.
- B. Contact the Public Health Department to determine EMS requirements for the event.
- C. Emergency Medical Technicians (EMT's), Paramedics and the designated ambulance service providing coverage for the event, must be registered or certified by the MN Emergency Medical Services Regulatory Board per guidance of Minn. Stat. Chapter 144E.
- D. Describe where an AED can be accessed for immediate use at the assemblage site.

### ApplicantsResponse

## 12. Parking

### Ordinance plan requirement

A parking area inside the assembly grounds sufficient to provide parking space for the maximum number of people to be assembled, at the rate of at least one parking space for every four persons per day. Adequate handicapped designated parking spaces shall be provided in accordance with applicable Minnesota Rules governing the provision of such.

### Guidance

Describe and mark these areas on the site sketch provided under item 2.

### ApplicantsResponse

## 13. Noise Levels

### Ordinance plan requirement

All reasonably necessary precautions to ensure that the sound of the assembly will not carry unreasonably beyond the enclosed boundaries of the location of the assembly. In no case shall sound levels exceed Minnesota Rules establishing noise standards, Minnesota Rules, Chapter 7030 or successor rules. The permit will include the

applicable portion of The Dakota County Sheriff has the authority to order a reduction in sound levels, if necessary, based on complaints.

**Guidance**

The Sheriff’s Office utilizes Minnesota Rules, Chapter 7030 to evaluate the maximum sound level permissible during a permitted event. At the point at which a residential area begins, sound level readings may not exceed 65 dBA for more than 10 percent of the time, more than 60 dBA for greater than 50 percent of the time during the daylight hours of 7:00 am to 10:00 pm. Between the nighttime hours of 10:00 pm and 7:00 am, sound levels may not be greater than 55 dBA 10 percent of the time or 50 dBA 50 percent of the time. On the Fairgrounds, sound levels may not be greater than 80 dBA for more than 10 percent of the time or greater than 75 dBA for more than 50 Percent of the time.

Minnesota Rules, Chapter 7030.0040 Noise Standards

Noise Area Classification	Daytime		Nighttime	
	L10	L50	L10	L50
1-Residential Areas	65 dBA	60 dBA	55 dBA	50 dBA
3- Fairgrounds	80 dBA	75 dBA	80 dBA	75 dBA

L10: the sound level - expressed in dB(A) - is exceeded ten percent (10%) of the time for a one-hour period.

L50: the sound level - expressed in dB(A) - is exceeded fifty percent (50%) of the time for a one-hour period.

**Other Ordinance Requirements**

Applicants are encouraged to read Ordinance 112 in its entirety as part of preparing a permit application. There are two additional conditions of particular note for event planning. The following items are not part of the plan requirements but rather general ordinance requirements.

**14. Lawful Assembly Permit Bond**

**Additional ordinance requirements**

Evidence of a \$10,000 bond payable to Dakota County either in cash or underwritten by a performance surety company licensed to do business in Minnesota assuring that there will be no damage to any County highway, street or other public property arising out of or as a result of the licensed assembly and that the licensee will promptly and fully repay or repair any damages so done, and that all provisions of this ordinance and conditions imposed by the County Board in the issuance of such license are fully complied with by the licensee.

**Guidance**

Bond must be provided to the Public Services and Revenue Division to obtain the license. An example insurance certificate can be found on page 16.

## **15. General Liability Insurance**

### **Additional ordinance requirement**

Evidence of commercial general liability insurance covering all injuries or damage caused by or as a result of the conduct of the assembly in the sum of \$1,000,000 per occurrence for bodily injury or death or property damage naming Dakota County as an additional insured. Proof of such coverage must be submitted to the Public Services and Revenue Division to obtain the license.

### **Guidance**

Applicant must provide documentation in conformance with the requirements prior to staff approval of the permit application. An example insurance certificate can be found on page 17.

## **16. Animals/Pets**

### **Additional ordinance requirement**

No animals or household pets, not directly involved in the show or exhibition or the policing thereof, shall be permitted on any of the grounds or facilities, and no animals or pets shall be permitted to run loose. This requirement does not apply to service animals.

### **Guidance**

Applicant should instruct event security staff to screen for any pets that attendees might try to bring into the event.

## **17. Fires**

### **Additional ordinance requirement**

No fire of any kind shall be permitted on the premises or facilities except in grills or at locations designated for that purpose.

### **Guidance**

Applicant should assure that security staff is aware of this requirement.

## 18. Transportation

Please fill out the below section if your event involves a County Road or Highway with:

- A. The closure of a traffic lane, turn lane or shoulder.
- B. The placement of any directional signs. (Advertising signs are not allowed)
- C. The Dakota County Sheriff's Office or someone else would need to direct traffic on a County Road or Highway.

The applicant is requesting to temporarily occupy a portion of the right-of-way for the following reason:

Start Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Start Time: \_\_\_\_\_ Ending Time: \_\_\_\_\_

Location (Road Name): \_\_\_\_\_

### Traffic Management Plan Description

If the event will require closure of the traveled portion of the roadway or shoulder, the permittee must submit a traffic management plan along with this permit form. The plan shall specify what signs and/or flagmen will be used. A minimum of seven days prior public notification may be required if a road is closed and a detour is needed. The permittee must also notify the local police and fire departments of any road closures. Only local police or Dakota County Deputies can stop traffic.

No lane closures are permitted during rush hour times, from: 6:00 a.m. to 8:30 a.m. and from 3:30 p.m. to 6:00 p.m. without prior approval from the City and/or County.

If you have any questions about Special Events Permits from our Transportation Department, please visit:

<https://www.co.dakota.mn.us/Permits/HighwayPermits/SpecialEvent/Pages/default.aspx>

## Contacts

If you have any questions regarding this application, please contact the following staff:

Application Section	Contact	Department
Application Submission / Status / Approval	Sarah Kidwell	Public Services & Revenue Division Phone: 651-438-4372 Fax: 651-438-8260 Email: sarah.kidwell@co.dakota.mn.us
Sections 1, 2, 7, 8, 9, 10, 12, 13, 16, 17	Richard Schroeder	Sheriff's Office 651-438-4706
Sections 3, 4, 5, 6, 11	Coral Ripplinger	Public Health 952-891-7166
Sections 14 & 15	Jenny Groskopf	Risk Management 651-438-4532
Section 18	Todd Bentley	Transportation 952-891-7115

Any documents submitted by the applicant after the initial permit application is submitted will be included in the application packet and become part of the permit.

# Dakota County EMS Mass Assemblage Planning Guide

Add up scores (0-2) for each of the 6 categories.

Variable	Points		
	2	1	0
<b>Weather: Outdoor Events</b>	>90 degrees F (heat index)  <0 degrees F (wind chill)  No climate-controlled shelter	80-90 degrees F (heat index)  1-40 degrees F (wind chill)  Minimal climate- controlled shelter	Climate-controlled environment
<b>Peak Attendance</b>	>15,000	1,000-15,000	<1,000
<b>Alcohol Consumption</b>	Significant, offered during the entire event	Limited to a few hours of the event	None
<b>Crowd Age</b>	Older	Mixed	Younger
<b>Behavior of Crowd</b>	Animated/rowdy	Intermediate	Calm
<b>Prior Experience with Applicant</b>	Major problems/issues	Minor problems/issues	No problems/issues
<b>Transport Time to Hospital</b>	>30 minutes	20-29 minutes	<20 minutes

**Total Score:** \_\_\_\_\_

**Higher Risk: Total score > or = 5, or scores of 2 in two different categories.**

- Advanced Life Support (ALS) on-site medical aid station required.
- ALS on-site ambulance and roaming teams are recommended.
- AED required.
- An on-site physician should be considered.

**Intermediate Event: Total score 3 or 4, or a score of 2 in any category.**

- Basic Life Support (BLS) on-site medical aid station and on-site ALS ambulance recommended.
- AED required.
- Staffing levels, number of aid stations, and consideration of mobile teams should be based on event characteristics. \*

**Lower Risk Event: Total score <3 and no single category with a score of 2.**

- Basic Life Support (BLS) on-site care with consideration of on-site BLS ambulance based on event characteristics. \*
- AED required.

\* Staff working the event and any ambulance services must be registered or certified by the MN Emergency Medical Services Regulatory Board per guidance of MN Statute 144 E.

- The applicant must attach a roster indicating the staff certification and the licensed/certified ambulance service being used.
- For special events and mass gatherings, the local EMS primary service area holder (MN Statutes 144 D.06) and the local hospital should be notified of the event in advance and ideally involved in the development of the medical plan.

### **Unique Characteristics for Consideration in Planning for Mass Gatherings**

- **Venue location:** indoors vs. outdoors, availability of shelter/shade or other climate-control methods
- **Nature of event:** spectator event, athletic competition, concert, parade (or other linear distribution of spectators/participants)
- **Weather:** extremes of temperature and humidity correlate with volume/severity of patient encounters
- **Alcohol availability, potential for recreational drug use**
- **Anticipated age of spectators and participants**
- **Crowd dynamics:** varies with type of event, from calm to rowdy/aggressive
- **Reasonable availability of free and unlimited drinking water**
- **Ingress/egress for emergency vehicles and access to the medical tent**
- **All-terrain vehicles or other intra-venue patient transport methods**
- **Liability insurance, medical supplies, and security considerations**
- **Transport time to the hospital:** distance, traffic conditions, air ambulance (helicopter) assets

Grange, Baumann, Vaezazizi. "On-site Physicians Reduce Ambulance Transports at Mass Gatherings." *Prehosp Emerg Care*, 7 (3), 2003. pp 322-326.

Hartman et al. "Predicting Resource Use at Mass Gatherings Using a Simplified Stratification Scoring Model." *Am J Emerg Med*, 27 (3), 2009. pp 337-343.



# Dakota County Security Agreement

Ordinance Number 112 (Public Assemblage) requires security staffing at all events. Staffing shall be determined using the following criteria:

Minnesota law enforcement officers having jurisdiction in Dakota County or protective agents licensed in Minnesota physically present, as follows:

Up to 300 people      One officer per 150 attendees

Over 300 people      One officer per 200 attendees

The written plan shall include the number of officers to be provided, their credentials, and hours of availability.

Final staffing numbers will be determined by a representative of the Dakota county Sheriff's Office based on, but not limited to:

**Type of Event:** \_\_\_\_\_

**Anticipated Number of Attendees:** \_\_\_\_\_

**Previous Track Record of Event:** \_\_\_\_\_

**Sale of Alcoholic Beverages:** \_\_\_\_\_

**Recommended Number of Security Staffing:** \_\_\_\_\_

**Actual Number of Security Staffing:** \_\_\_\_\_

Cancellation *after* the event has started will result in security deputies being paid either the minimum of \_\_\_\_\_ hours (to be determined by Sheriff's Office), or their actual hours worked, if greater than the minimum.

Sheriff's Office Contact: Commander Richard Schroeder

Office Phone: 651-438-4706

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sheriff's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# RECYCLE RIGHT



Put these empty and dry items in the recycling.  
Keep caps on containers and flatten boxes.

## Paper

- Newspaper and inserts
- Magazines and catalogs
- Mail and office papers



## Cardboard

- Corrugated cardboard
- Paperboard (e.g. cracker boxes)



## Cartons

- Milk and juice cartons
- Soup, broth and wine cartons
- Juice boxes



## Plastic bottles, containers & jugs

- Containers numbered



- Soda, juice and water bottles
- Milk and juice jugs
- Margarine, cottage cheese, cream cheese and other tubs and lids
- Laundry detergent bottles and jugs
- Clear berry and produce containers



## Metal cans

- Aluminum, tin and steel cans



## Glass bottles & jars



No Bagged Recyclables  
No Plastic Bags



No Batteries



No Tanglers, Cords  
Hoses or Chains



No Food  
or Liquids



No Shredded  
Paper



No Styrofoam



No Paper Cups,  
Plates or Napkins



No Trash

# Sample of Bond

## LICENSE OR PERMIT BOND

Bond Number: \_\_\_\_\_

KNOW ALL PERSONS BY THESE PRESENTS, That we Name of entity hosting the Large Assembly \_\_\_\_\_ of \_\_\_\_\_, hereinafter referred to as the Principal, and Surety company \_\_\_\_\_, as Surety, are held and firmly bound unto Dakota County \_\_\_\_\_ of 1590 Highway 55, Hastings MN 55033 \_\_\_\_\_, hereinafter referred to as the Obligee, in the sum of Ten Thousand and 00/100's \_\_\_\_\_ Dollars (\$ 10,000.00 \_\_\_\_\_), for the payment of which we bind ourselves, our legal representatives, successors and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH, That whereas, the Principal has made application for a license or permit to the Obligee for the purpose of, or to exercise the vocation of \_\_\_\_\_  
dates and location of the large assembly  
event. "THIS BOND IS REQUIRED IN ACCORDANCE WITH DAKOTA COUNTY AMENDED ORDINANCE NO. 112, SEC.7, SUBDIV. 1"

NOW, THEREFORE, if Principal shall faithfully comply with all ordinances, rules and regulations which have been or may hereafter be in force concerning said License or Permit, and shall save and keep harmless the Obligee from all loss or damage which it may sustain or for which it may become liable on account of the issuance of said license or permit to the Principal, then this obligation shall be void; otherwise, to remain in full force and effect.

THIS BOND WILL EXPIRE the \_\_\_\_\_ next \_\_\_\_\_ day of \_\_\_\_\_ after the event is done \_\_\_\_\_, \_\_\_\_\_, but may be continued by continuation certificate signed by the Principal and Surety. The Surety may at any time terminate its liability by giving thirty (30) days written notice to the Obligee, and the Surety shall not be liable for any default after such thirty day notice period, except for defaults occurring prior thereto.

SIGNED, SEALED AND DATED this \_\_\_\_\_ day of \_\_\_\_\_ event \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
(Principal)

By \_\_\_\_\_ (Seal)

Surety company \_\_\_\_\_  
(Surety)

By \_\_\_\_\_ (Seal)  
Attorney-in-Fact

# Sample Certificate of Liability Insurance

<b>ACORD™ CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) 05/01/2010
<b>PRODUCER</b> Insurance Agent Name Address City, State, Zip		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
<b>INSURED</b> Contractor Name Address City, State, Zip		
		<b>INSURERS AFFORDING COVERAGE</b>
		<b>NAIC #</b>
		INSURER A: Insurance Company X
		INSURER B:
		INSURER C:
		INSURER D:
		INSURER E:

### COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		<b>GENERAL LIABILITY</b> <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	Policy No. xxx-yyy	05/14/10	05/15/10	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 50,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE _____ DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		<b>OTHER</b>				

SAMPLE

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**

Dakota County, its officers, employees and agents are named as additional insured's respects general liability for the event on 5/14/2010 at the Dakota County Fairgrounds.

<b>CERTIFICATE HOLDER</b> Dakota County Public Service and Revenue Division Attn: <span style="background-color: black; color: black;">XXXXXXXXXX</span> 1590 Highway 55 Hastings, MN 55033	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Representative's Signature
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