COUNTY OF EL DORADO DEPARTMENT OF TRANSPORTATION



APPLICATION FOR PARADE PERMIT THIS APPLICATION MUST BE SUBMITTED AT LEAST 40 DAYS PRIOR



TO THE PARADE DATE APPLICATION RECEIVED BY: TITLE OF EVENT: LEOPEYS. lamborel Jean Jambourgo Leep Jambare SPONSORING ORGANIZATION: Jeppers. DATE OF PARADE: Wed July 27 - Sin, July 3/51 ESTIMATED NUMBER OF PARTICIPANTS (including animals, etc.): 1000 INTERVALS BETWEEN UNITS OF PARADE: START TIME: 6:00 IAWA COMPLETION TIME: ASSEMBLY TIME & LOCATION: ROAD(S) TO BE TRAVELED OR OCCUPIED: Publicon Trail Road from Went WIN + Trail Road from Went WW 41 Spring SUBMITTED BY: 100 CONTACT PERSON: (DOLL) PHONE/FAX: 530 -333 ADDRESS: P.O. BOX 900 George Dun C

THE FOLLOWING CONDITIONS ARE REQUIRED FOR ALL PARADES:

- 1. The organizers shall provide a <u>detailed signing and detour plan</u> for any proposed parade on a county road. This signing/detour plan should identify the type and location of all signs, barricades, cones, and flaggers. The plan must be attached to this application when it is submitted for review.
- 2. The organizers shall be responsible for <u>providing all signs</u>, <u>barricades</u>, <u>cones</u>, <u>flaggers</u>, <u>and traffic</u> controls.
- 3. The organizers shall remove all signs, all pavement markings or other materials immediately following the event. The organizers shall also remove all debris deposited by participants and spectators.
- 4. The organizers shall provide a <u>Certificate of Insurance</u>, naming El Dorado County <u>Department of Transportation additionally insured</u>, in the amount of <u>\$1,000,000.00</u> (one million dollars) as required by the El Dorado County Risk Manager.
- 5. To the fullest extent allowed by law the Organizer shall defend, indemnify, and hold the County harmless against and from any and all claims, suits, losses, damages, and liability for damages of every name, kind and description, including but not limited to workers, County employees, and the public, or damage to property, or any economic or consequential losses, which are claimed to or in any way arise out of are connected with the work by Organizer, his agents or employees including contractor's services, operation or performance hereunder, regardless of the existence or degree of fault or negligence on the part of the County, the Organizer, contractor, subcontractor(s) and employee(s) or any of these, except for part of the sole, or active negligence of the County, its officers and employees, or as expressly prescribed by statute. This duty of the Organizer to indemnify and save the County harmless includes the duties to defend set forth is California Civil Code Section 2778.

SIGNATURE: Jacey State DATE: 5/12/2011

I HAVE READ, ACKNOWLEDGE AND AGREE TO ALL OF THE ABOVE CONDITIONS WITH REGARD TO THIS PARADE PERMIT.

Jeepers Jamboree & Jeep Jamboree, Inc.

P.O. Box 900 6275 Main Street Georgetown, CA 95634 Phone Number:

530-333-4771

Fax Number: Website:

530-333-0245

ieepersiamboree.com

E-mail: mail@jeepersjamboree.com

May 10, 2011

Sheri Woodford Dept. of Transportation 2850 Fairlane Ct Placerville, CA 95667

Re: Road closure for the 59th Annual Jeepers Jamboree and 33rd Annual Jeep Jamboree.

Dear Sheri:

We are requesting a road closure (parade permit?) for our Jamborees. This year we request closure from Wentworth Springs and Loon Lake Dam over the Rubicon Trail only. We will not need a closure for Georgetown.

The dates and time requested are as follows:

For Wentworth Springs and Loon Lake Dam areas; 6:00 AM Wednesday, July 27, 2011, through Midnight Sunday July 31, 2011 6:00 AM Thursday, August 4, 2011, through Midnight Sunday August 7, 2011

For the Jeepers Jamboree trip we anticipate approximately 500 vehicles with 700 participants. For the Jeep Jamboree trip we anticipate approximately 150 vehicles with 300 participants. As stated, these numbers are only approximations at this time based on the sign-ups to-date. Should they change substantially, we will notify you closer to the above dates.

We would like Road Closure signs erected at the Loon Lake Dam and at Miller Lake. We will not need any barricades.

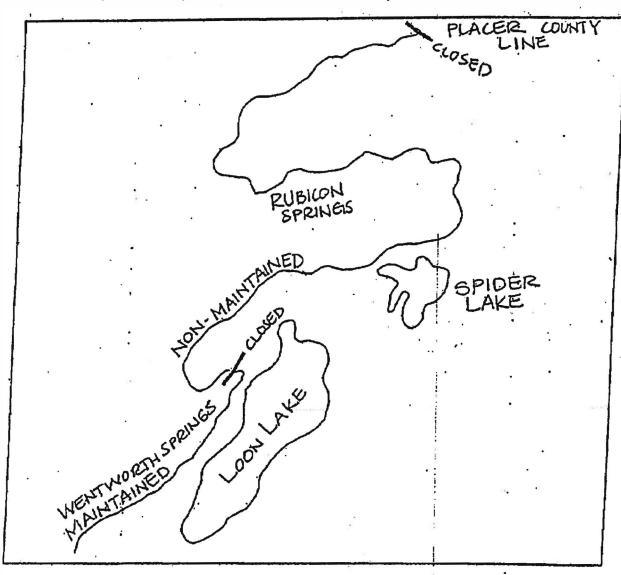
Our Insurance Company sent our Certificate of Insurance at the beginning of the year. If you did not received please let me know and I will have it re-sent.

Sincerely,

Dan DeWolf, President

Jeepers Jamboree & Jeep Jamboree, Inc.

SKETCH (To be completed if more than one County Road is to be closed)



INSTRUCTIONS:

- 1. Sketch all roads to be closed and label roads by name.
- 2. Indicate all intersecting public roads along route.
- 3. Indicate "START" and "FINISH" locations of event.
- 4. Indicate direction of travel for the participants.

NOTE:

This sketch may serve as the "SIGNING/DETOUR PLAN" if it clearly identifies the type and location of all proposed signs, barricades, cones, and flaggers.



COMMERCIAL GENERAL LIABILITY COVERAGE PART SUPPLEMENTAL DECLARATIONS

Policy No	CPS1264354		Effective Date	12/01/2010
				12:01 A.M., Standard Time
Named Insured	JEEPERS JAMBOREE &	JEEP JAMBOREE	<u>IN</u> Agent No	04071
Item 1. Limits of	f Insurance			-
	Coverage			Limit of Liability
Aggregate Limit	ts of Liability		Products/ Completed	
1			\$ 2,000,000	Operations Aggregate
				General Aggregate (other than
			\$ 2,000,000	Products/ Completed Operations)
Coverage A - Bo				any one occurrence subject
Pr	operty Damage Liability			to the Products/ Completed
				Operations and General
			\$1,000,000	Aggregate Limits of Liability
				any one premises subject to the
				Coverage A occurrence and
				the General Aggregate Limits
Damage to Pren	nises Rented to You Limit		\$ 100,000	of Liability
Coverage B - Pe	ersonal and			any one person or organization
Ad	Ivertising Injury Liability			subject to the General Aggregate
			\$ 1,000,000	Limits of Liability
Coverage C - Me	edical Payments			any one person subject to the
				Coverage A occurrence and
			\$ 5,000	the General Aggregate Limits
Item 2. Descripti				
Form of Busines	S:			
☐ Individua	al 🔲 Partnership	☐ Joint Ventur	e 🔲 Trust	☐ Limited Liability Company
Organiza	ation including a corporatio	on (other than Partr	nership, Joint Venture o	r Limited Liability Company)
Location of All P	remises You Own, Rent or (Occupy:		
PER LOCATION	_	- · · · · · · · · · · · · · · · · · · ·		
Item 3. Forms an	nd Endorsements			
Form(s) and End	dorsement(s) made a part o	of this policy at time	of issue:	
See Schedu	ile of Forms and Endorser	nents		
Item 4. Premium	ıs			
Coverage Part P	remium:			\$ 3,499
Other Premium:	ADDITIONAL	INSURED FULLY	EARNED	\$ 200
Total Premium:		2000		\$ 3,699

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

2011 JAN 10 PMIS: LI



05-20-'11 10:35 FROM-Seabury Copland Ins. +559-673-9210 T-592 P0003/0004 F-709

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY. CG 20 11 01 96

ADDITIONAL INSURED - MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following: COMMERCIAL GENERAL LIABILITY COVERAGE PART

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below

-
CPS 12 6 4 3 5 4
Countersigned by

SCHEDULE

- 1. Designation of Premises (Part Leased to You):
- 2. Name of Person or Organization (Additional Insured):

COUNTY OF EL DORADO / DEPT OF TRANSPORTATION / ATTN: SHERI WOODFORD 2850 TAIRLANE COURT - PLACERVILLE CA 95667 EVENT DATES: JULY 27th - JULY 31st & AUG 4th - AUG 7th, 2011

3. Additional Premium: 50.00

(If no entry appears above, the information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions: This insurance does not apply to:

- 1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
- 2. Situatural alterations, new construction or demolition operations performed by or on behalf of the person or organization shown in the Schedule.

CG 20 11 D1 98

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CG 20 11 01 96

ADDITIONAL INSURED - MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following: COMMERCIAL GENERAL LIABILITY COVERAGE PART

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement effective	Policy No.	
12/01/2010 12:01 A.M.	standard time CPS1264354	
Named Insured	Countersigned by	
JEEPERS JAMBOREE & JEEP JAMI	OREE INC	
OBBEEKS OAMBOKEE & BEEF OAM	OKEE INC	

(Authorized Representative)

SCHEDULE

- 1. Designation of Premises (Part Leased to You):
- 2. Name of Person or Organization (Additional Insured):

COUNTY OF EL DORADO/ DEPARTMENT OF TRANSPORTATION/ ATTN: SHERI WOODFORD 2850 FAIRLANE COURT - PLACERVILLE, CA 95667 EVENT DATES: JULY 28-31 & AUG. 5-7, 2011

3. Additional Premium: \$50.00

(If no entry appears above, the information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

- 1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
- 2. Structural alterations, new construction or demolition operations performed by or on behalf of the person or organization shown in the Schedule.

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CG 20 11 01 96

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Page 1 of 1

COMMON POLICY DECLARATIONS = Policy Number **RENEWAL OF** SCOTTSDALE INSURANCE COMPANY® CPS1264354 CPS1116729 Home Office: One Nationwide Plaza Columbus, Ohio 43215 Administrative Office: 8877 North Gainey Center Drive ■ Scottsdale, Arizona 85258 1-800-423-7675 A STOCK COMPANY ITEM 1. Named Insured and Mailing Address JEEPERS JAMBOREE & JEEP JAMBOREE INC P O BOX 900 GEORGETOWN, CA 95634 Agent Name and Address BURNS & WILCOX, LTD. 200 BURNS & WILCOX CENTER 7575 N. PALM AVE. Agent No.: 84071 Program No.: __CT/AT FRESNO, CA 93711

Business Description: SPONSOR OF TWO JEEP JAMBOREES PER YEAR

From: 12/01/2010

ITEM 2. Policy Period

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy. This policy consists of the following coverage parts for which a premium is indicated. Where no premium is shown, there is no coverage. This premium may be subject to adjustment.

12:01 A.M., Standard Time at the mailing address shown in ITEM 1.

To: 12/01/2011

Coverage Part(s)		Р	remium Summary
Commercial General Liability Coverage Part		\$	3,699
Commercial Property Coverage Part		\$	NOT COVERED
Commercial Crime And Fidelity Coverage Part		\$	NOT COVERED
Commercial Inland Marine Coverage Part		\$	NOT COVERED
Commercial Auto Coverage Part		\$	NOT COVERED
Professional Liability Coverage Part		\$	NOT COVERED
		\$	
		\$	
	Total Policy Premium:	\$	3,699.00
RECEIVED		\$	
		\$	
JAN 07 2011	SURPLUS LINES TAX	\$	110.97
w) ;;; • • • m•//	STAMPING FEE	\$	9.25
SEABURY - COPLAND		\$	
& ANDERSON		\$	
	Policy Total:	\$	3,819.22

Form(s) and Endorsement(s) made a part of this policy at time of issue: SEE SCHEDULE OF FORMS AND ENDORSEMENTS

K.WHITE 1/5/2011

THIS COMMON POLICY DECLARATION AND THE SUPPLEMENTAL DECLARATION(S), TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART(S), COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, COMPLETE THE ABOVE NUMBERED POLICY.

OPS-D-1 (8-10)

-INSTREE

opsdlj.fap

Term: 365 DAYS