



Plymouth City Commission

Regular Meeting Agenda

Monday, August 5, 2024 7:00 p.m.
Markham Park (Caster & N. Holbrook)

City of Plymouth
201 S. Main St.
Plymouth, Michigan 48170-1637

www.plymouthmi.gov
Phone 734-453-1234
Fax 734-455-1892

1. CALL TO ORDER

- a. Pledge of Allegiance
- b. Roll Call

2. APPROVAL OF MINUTES

- a. July 15, 2024 City Commission Special Meeting Minutes
- b. July 15, 2024 City Commission Regular Meeting Minutes

3. APPROVAL OF THE AGENDA

4. ENACTMENT OF THE CONSENT AGENDA

- a. Special Event: Plymouth Community Fall Festival, Friday-Sunday 9/6/2024-9/8/2024
- b. Special Event: Downtown Day (sidewalk sales & entertainment) Saturday 9/28/2024
- c. Special Event: Plymouth Ghosts Cemetery Walk, Saturday 10/12/2024
- d. Special Event: Main St. Boulevard Tree Lighting & Salvation Army Red Kettle Kickoff, Friday 11/15/2024
- e. Special Event: Santa's City of Plymouth Parade, Friday 11/29/2024

5. CITIZEN COMMENTS

6. COMMISSION COMMENTS

7. OLD BUSINESS

8. NEW BUSINESS

- a. Non-Profit Recognition – Plymouth Canton Steelers Jr. Football
- b. Equipment Fund Accounting – Unrestricted Fund Balance 06-30-23
- c. Amendment to Fire Truck Guaranteed Buy-Back Agreement

9. REPORTS AND CORRESPONDENCE

- a. Liaison Reports
- b. Appointments

10. ADJOURNMENT

Consent Agenda - The items on the Consent Agenda will be approved by one motion as Agenda Item #4. There will be no separate discussion of these items unless a Commissioner or citizen so requests, in which case that item will then be placed on the regular agenda.

Citizen Comments - This section of the agenda allows up to 3 minutes to present information or raise issues for items not on the agenda. Upon arising to address the Commission, speakers should first identify themselves by clearly stating their name and address. Comments must be limited to the subject of the item.

Meetings of the City of Plymouth are open to all without regard to race, sex, color, age, national origin, religion, height, weight, marital status, disability, or any other trait protected under applicable law. Any individual planning to attend the meeting who has need of special assistance under the Americans with Disabilities Act (ADA) should submit a request to the ADA Coordinator at 734-453-1234 ext. 234 at least two working days in advance of the meeting so an attempt can be made to make reasonable accommodations. The request may also be submitted via mail at 201 S. Main St. Plymouth, MI 48170, or email to clerk@plymouthmi.gov.

City of Plymouth Strategic Plan 2022-2026

GOAL AREA ONE - SUSTAINABLE INFRASTRUCTURE

OBJECTIVES

1. Identify and establish sustainable financial model(s) for major capital projects, Old Village business district, 35th District Court, recreation department, and public safety
2. Incorporate eco-friendly, sustainable practices into city assets, services, and policies; including more environmentally friendly surfaces, reduced impervious surfaces, expanded recycling and composting services, prioritizing native and pollinator-friendly plants, encouraging rain gardens, and growing a mature tree canopy
3. Partner with or become members of additional environmentally aware organizations
4. Increase technology infrastructure into city assets, services, and policies
5. Continue sustainable infrastructure improvement for utilities, facilities, and fleet
6. Address changing vehicular habits, including paid parking system /parking deck replacement plan, electric vehicle (EV) charging stations, and one-way street options

GOAL AREA TWO – STAFF DEVELOPMENT, TRAINING, AND SUCCESSION

OBJECTIVES

1. Create a 5-year staffing projection
2. Review current recruitment strategies and identify additional resources
3. Identify/establish flex scheduling positions and procedures
4. Develop a plan for an internship program
5. Review potential department collaborations
6. Hire an additional recreation professional
7. Review current diversity, equity, and inclusion training opportunities
8. Seek out training opportunities for serving diverse communities

GOAL AREA THREE - COMMUNITY CONNECTIVITY

OBJECTIVES

1. Engage in partnerships with public, private and non-profit entities
2. Increase residential/business education programs for active citizen engagement
3. Robust diversity, equity, and inclusion programs
4. Actively participate with multi-governmental lobbies (Michigan Municipal League, Conference of Western Wayne, etc.)

GOAL AREA FOUR - ATTRACTIVE, LIVABLE COMMUNITY

OBJECTIVES

1. Create vibrant commercial districts by seeking appropriate mixed-use development, marketing transitional properties, and implementing Redevelopment Ready Communities (RRC) practices
2. Improve existing and pursue additional recreational and public green space opportunities and facilities for all ages
3. Develop multi-modal transportation plan which prioritizes pedestrian and biker safety
4. Improve link between Hines Park, Old Village, Downtown Plymouth, Plymouth Township, and other regional destinations
5. Maintain safe, well-lit neighborhoods with diverse housing stock that maximizes resident livability and satisfaction
6. Modernize and update zoning ordinance to reflect community vision
7. Implement Kellogg Park master plan

“The government in this community is small and accessible to all concerned.”

-Plymouth Mayor Joe Bida
November 1977



City of Plymouth - Meeting Minutes
City Commission Special Meeting
Monday, July 15, 2024

City of Plymouth
201 S. Main
Plymouth, Michigan 48170-1637

www.plymouthmi.gov
Phone 734-453-1234
Fax 734-455-1892

1. CALL TO ORDER

TIME: 5:00 p.m. in the Plymouth City Commission Conference Room -201 S. Main, Plymouth, MI 48170

PRESENT FROM CITY COMMISSION: Mayor Suzi Deal, Mayor Pro-Tem Kelly O'Donnell, Commissioners Linda Filipczak, Jennifer Kehoe, Brock Minton, Nick Moroz.

EXCUSED: Commissioner Alanna Maguire

Also present was City Manager Paul Sincock, City Attorney Jeff Schroder, Police Chief Al Cox, Assistant City Manager Chris Porman, City Clerk Maureen Brodie, Finance Director John Scanlon, and Economic Development Director John Buzuvis.

2. MOTION TO GO INTO CLOSED SESSION

Closed Session – To discuss Attorney- Client Privileged and Confidential Communication

A motion was made by Commissioner Minton and seconded by Mayor ProTem O'Donnell to go into closed session at 5:03 p.m.

Mayor Deal asked for a roll call vote: Yes: Moroz, Filipczak, O'Donnell, Minton, Kehoe, Deal

MOTION PASSED 6-0

3. CLOSED SESSION

4. OPEN SESSION

The City Commission returned to open session at 5:56 p.m.

5. ADJOURNMENT

Hearing no further discussion, Mayor Deal asked for a motion to adjourn. A motion was made by Mayor ProTem O'Donnell, seconded by Commissioner Kehoe to adjourn at 5:57 p.m.

MOTION PASSED 6-0

SUZI DEAL
MAYOR

MAUREEN A. BRODIE, CMC, MiPMC
CITY CLERK



City of Plymouth City Commission Regular Meeting Minutes Monday, July 15, 2024, 7:00 p.m. Rotary Park (Herald and Wing)

City of Plymouth
201 S. Main St.
Plymouth, Michigan 48170-1637

www.plymouthmi.gov
Phone 734-453-1234
Fax 734-455-1892

1. CALL TO ORDER

- a. Mayor Suzi Deal called the meeting to order at 7:00 p.m. and led the Pledge of Allegiance.
- b. Roll Call
Present: Mayor Suzi Deal, Mayor Pro Tem Kelly O'Donnell, Commissioners Linda Filipczak, Jennifer Kehoe, Brock Minton, and Nick Moroz
Excused: Commissioner Alanna Maguire
Also present: City Manager Paul Sincok, City Attorney Jeff Schroder, and various members of the city administration
- c. Proclamation – Parks & Recreation Month
Mayor Deal read the proclamation
- d. Presentation – Ruth Huston Whipple Award
Mayor Deal presented Carl Battishill with the Ruth Huston Whipple Award

2. APPROVAL OF MINUTES

Filipczak offered a motion, seconded by Minton to approve the July 1, 2024 regular meeting minutes.

There was a voice vote.

MOTION PASSED UNANIMOUSLY

3. APPROVAL OF THE AGENDA

Minton offered a motion, seconded by Filipczak to approve the agenda for the July 15, 2024 meeting.

There was a voice vote.

MOTION PASSED UNANIMOUSLY

4. ENACTMENT OF THE CONSENT AGENDA

- a. Approval of June 2024 Bills

Kehoe offered a motion, seconded by Moroz, to approve the consent agenda for July 15, 2024.

There was a voice vote.

MOTION PASSED UNANIMOUSLY

5. CITIZEN COMMENTS

Heather Zielinski, 26239 Wexford Dr. , Warren, MI -Spoke on behalf of the Autism Society of Greater Detroit.

Ron Picard, 1373 Sheridan Spoke about Art in the Park

6. COMMISSION COMMENTS

Commissioners spoke about Art in the Park and complemented city departments and event organizers for a great event. Deal also commented that the July 4th Parade was also done very well. She also noted that Bumpers, Bikes and Bands is in Old Village on Sunday.

7. OLD BUSINESS

There was no old business.

8. NEW BUSINESS

- a. MML Annual Meeting

The following motion was offered by Filipczak and seconded by Moroz:

RESOLUTION 2024-68

WHEREAS Each year the Michigan Municipal League hosts an annual business meeting to discuss matters and to form policy related to local government; and

WHEREAS The City of Plymouth has an opportunity to designate a voting delegate and alternate for the annual business meeting.

NOW THEREFORE BE IT RESOLVED THAT the City Commission of the City of Plymouth does hereby designate Mayor Deal as the voting delegate to the Michigan Municipal League Annual Convention Meeting.

BE IT FURTHER RESOLVED THAT the City Commission of the City of Plymouth does hereby designate City Manager Sincock as the voting alternate to the Michigan Municipal league Annual Convention Meeting.

There was a voice vote.

MOTION PASSED UNANIMOUSLY

9. REPORTS AND CORRESPONDENCE

- a. Liaison Reports

Minton reported provided an update on the Planning Commission.

- b. Appointments

10. ADJOURNMENT

*The next regular City Commission meeting is 7:00 pm on Aug 5 at Markham Park (Caster & N. Holbrook).

Filipczak offered a motion, seconded by Kehoe to adjourn the meeting at 7:18 p.m.

There was a voice vote.

MOTION PASSED UNANIMOUSLY

SUZI DEAL
MAYOR

MAUREEN A. BRODIE, CMC, MiPMC
CITY CLERK



Special Event Application

City of Plymouth
 201 S. Main
 Plymouth, Michigan 48170-1637

www.plymouthmi.gov
 Phone 734-453-1234
 Fax 734-455-1892

Complete this application in accordance with the City of Plymouth Special Events Policy, and return it to the City Manager's Office at least 21 calendar days prior to the starting date of the event.

FEES WILL BE CHARGED FOR ALL SPECIAL EVENTS. SEE ATTACHMENT B.

Plymouth Community Fall Festival

| | | | |
|---|--------------|----------------------------------|------------------------------|
| Sponsoring Organization's Legal Name | | Plymouth Community Fall Festival | |
| Ph# | 734-355-0199 | Email | Info@plymouthfallfestiva.com |
| Fax# | | Website | Plymouthfallfestival.com |
| Address | PO Box 6177 | City | Plymouth |
| | | State | MI |
| | | Zip | 48170 |
| Sponsoring Organization's Agent's Name | | James Gietzen | |
| Ph# | 248-817-8836 | Email | James@myagententainmnet.com |
| Fax# | | Title | Manager |
| Address | 127 N. Wixom | Cell# | 248-863-7043 |
| | | State | MI |
| | | Zip | 48393 |

Event Name Plymouth Community Fall Festival

Event Purpose Fundraising oppertunity for local non-profits groups

Event Date(s) September 6th-8th

Event Times Sep 6th 3pm - 10pm, Sep 7th 7am -10pm, Sunday September 8th 11am to 6pm

Event Location Kellogg park and all surrounding streets

What Kind Of Activities? Carnival with rides, food vendors, Craft fair, car show, Live music, Pet show.

What is the Highest Number of People You Expect in Attendance at Any One Time? 20,000

Coordinating With Another Event? YES NO If Yes, Event Name: _____

Event Details: (Provide a detailed description of all activities that will take place. Attach additional sheets if necessary.)
 Since 1956 the Plymouth Fall Festival has been the flagship festival in the Pymouth Community. Food booths operated by local non-profit community groups. A carnival with rides, car and craft shows, family entertainment for all.

RECEIVED

JUL 8 2024

City of Plymouth

1. **TYPE OF EVENT:** Based on Policy 12.2, this event is: *(Weddings Ceremonies – Please Review Section 12.2 f.)*

City Operated Co-sponsored Event Other Non-Profit Other For-Profit Political or Ballot Issue

2. **ANNUAL EVENT:** Is this event expected to occur next year? YES NO

If Yes, you can reserve a date for next year with this application (see Policy 12.15). To reserve dates for next year, please provide the following information:

Normal Event Schedule (e.g., third weekend in July):

Weekend after Labor day

Next year's specific dates:

September 5th - 7th

See section 12.13 for license & insurance requirements for vendors

3. **FOOD VENDORS/ CONCESSIONS?** YES NO **OTHER VENDORS?** YES NO

4. **DO YOU PLAN TO HAVE ALCOHOL SERVED AT THIS EVENT?** YES NO

5. **WILL ALCOHOL BE SERVED ON PRIVATE PROPERTY AS PART OF THIS EVENT?** YES NO

6. **WILL YOU NEED ELECTRICITY AND/OR WATER?** YES NO

CITY SERVICES REQUIRED? If needed, please attach a letter indicating all requests for City Services.
(see Attachment B)

DMS, Police, Fire, HVA

7. **AN EVENT MAP** IS IS NOT attached. If your event will use streets and/or sidewalks (for a parade, run, etc.), or will use multiple locations, please attach a complete map showing the assembly and dispersal locations and the route plan. Also show any streets or parking lots that you are requesting to be blocked off.

8. **EVENT SIGNS:** Will this event include the use of signs? YES NO

If Yes, refer to Policy 12.8 for requirements, and describe the size and location of your proposed signs: **Please complete a sign illustration / description sheet and include with the application.**

Signs or banners approved by the City of Plymouth for Special Events shall be designed and made in an artistic and workman like manner. THE CITY MANAGER MUST APPROVE ALL SIGNS. SIGNS CANNOT BE ERECTED UNTIL APPROVAL IS GIVEN.

Signs and/or Banners may be used during the event only. Please refer to Special Event Policy for information related to the installation of banners on Downtown Street Light Poles in advance of event. NO SIGNS ARE ALLOWED IN THE PARK IN ADVANCE OF THE EVENT.

9. **UNLIMITED PARKING:** Are you requesting the removal of time limits on parking (see Policy 12.5)?

YES NO

If Yes, list the lots or locations where/why this is requested:

10. **CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that
- a. a Certificate of Insurance must be provided which names the City of Plymouth as an additional named insured party on the policy. (See Policy 12.10 for insurance requirements)
 - b. Event sponsors and participants will be required to sign Indemnification Agreement forms (refer to Policy 12.12).
 - c. All food vendors must be approved by the Wayne County Health Department, and each food and/or other vendor must provide the City with a Certificate of Insurance which names the City of Plymouth as an additional named insured party on the policy. (See Policy 12.13)
 - d. The approval of this Special Event may include additional requirements and/or limitations, based on the City's review of this application, in accordance with the City's Special Event Policy. The event will be operated in conformance with the Written Confirmation of Approval. (see Policy 12.11 and 12.16)
 - e. The sponsoring organization will provide a security deposit for the estimated fees as may be required by the City, and will promptly pay any billing for City services which may be rendered, pursuant to Policy 12.3 and 12.4.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with City's Special Event Policy, the terms of the Written Confirmation of Approval, and all other City requirements, ordinance and other laws which apply to this Special Event.

July 8 2024
Date


Signature of Sponsoring Organization's Agent

RETURN THIS APPLICATION at least twenty (21) days prior to the first day of the event to: City

**Manager's Office
City Hall
201 S. Main Street
Plymouth MI 48170**

Phone: (734) 453-1234 ext. 203

11. INDEMNIFICATION AGREEMENT

INDEMNIFICATION AGREEMENT

Plymouth Community fall Festival

The _____ (*organization name*) agree(s) to defend, indemnify, and hold harmless the City of Plymouth, Michigan, from any claim, demand, suit, loss, cost of expense, or any damage which may be asserted, claimed or recovered against or from the Plymouth Fall Festival (*event name*) by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury or death arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss, cost of expense is caused in whole or in part by the negligence of the City of Plymouth or by third parties, or by the agents, servants, employees or factors of any of them.

Signature  _____

Date July 8, 2024

Witness _____

Date _____

EVENT REVIEW FORM

EVENT NAME: Fall Fest TOTAL ESTIMATED FEE: _____

(Note: All fees are only initial estimates and can increase upon assessment of services after the close of the event).

| | | | | |
|---|------------------|--------------------|--|----------------------------------|
| MUNICIPAL SERVICES: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>CP</u> |
| | | | | |
| | | | PORT-A-TOILETS | RADIOS |
| | | | LIGHT TOWERS | SINK RENTAL |
| | | | BIKE FENCE | PEST CONTROL |
| \$250 Bathroom Cleaning Fee Per Day of Event? <u>YES</u> X 3 DAYS NO | | | | |
| Labor Costs: | \$ <u>19,000</u> | Equipment Costs: | \$ <u>6,500</u> | Materials Costs \$ <u>13,000</u> |
| POLICE: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>JCC</u> |
| | | | 2 - PATROL OFFICERS - 53648- | |
| | | | 1 - COMMAND " - 82064- | |
| | | | WACO RESERVE UNIT - \$500- | |
| Labor Costs \$ | | Equipment Costs \$ | <u>6212-</u> | Materials Costs \$ |
| FIRE: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>RS</u> |
| | | | 4 FIREFIGHTERS / DAY | |
| Labor Costs \$ | <u>3,120</u> | Equipment Costs \$ | | Materials Costs \$ |
| HVA: | Approved | Denied | (list reason for denial) | Initial <u>JK</u> |
| | | | ON HVA Provides SERVICES TO EVENT | |
| DDA: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>SBP</u> |
| | | | DOWNTOWN POWER WAS A AFTER EVENT | |
| Labor Costs \$ | <u>\$2,500</u> | Equipment Costs \$ | | Materials Costs \$ |
| RISK MANAGEMENT: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>MB</u> |
| Class I - Low Hazard | | | Event Sponsors must provide current Certificate of Insurance naming City | |
| <u>Class II - Moderate Hazard</u> | | | of Plymouth as 'Additional Insured' including in the Description Box/Area. | |
| Class III - High Hazard | | | Food vendor/service requirements per Special Event Policy, must also be | |
| Class IV - Severe Hazard | | | met for any food. | |
| SITE FEE APPLIED TO ALL EVENTS IS \$100 PER DAY. TOTAL EVENT SITE FEE \$ _____ | | | | |
| APPROVED _____ NOT APPROVED _____ DATE _____ | | | | |



Special Event Application

City of Plymouth
201 S. Main
Plymouth, Michigan 48170-1637

www.plymouthmi.gov
Phone 734-453-1234
Fax 734-455-1892

Complete this application in accordance with the City of Plymouth Special Events Policy, and return it to the City Manager's Office at least 21 calendar days prior to the starting date of the event.

FEES WILL BE CHARGED FOR ALL SPECIAL EVENTS. SEE ATTACHMENT B.

Sponsoring Organization's Legal Name Plymouth Downtown Development Authority

Ph# 7344551453 Fax# _____ Email dda@plymouthmi.gov Website downtownplymouth.org

Address 831 Penniman City Plymouth State MI Zip 48170

Sponsoring Organization's Agent's Name Sam Plymale Title Director

Ph# 7344551453 Fax# _____ Email splymale@plymouthmi.gov Cell# 7345365268

Address 831 Penniman City Plymouth State MI Zip 48170

Event Name Downtown Day

Event Purpose Provide on-street entertainment (music, arts, etc.) and allow sidewalk sales from DDA merchants to activate pedestrian walkways and storefronts in the Downtown district.

Event Date(s) Saturday, September 28, 2024

Event Times 12pm - 8pm

Event Location DDA district (entertainment in Kellogg Park, near: Sun & Snow, Westborn Market, Boule Bakery, Harris Conservatory of Music)

What Kind Of Activities? Street entertainment, sidewalk sales from DDA merchants

What is the Highest Number of People You Expect in Attendance at Any One Time? N/A

Coordinating With Another Event? YES NO If Yes, Event Name: _____

Event Details: (Provide a detailed description of all activities that will take place. Attach additional sheets if necessary.)

An event to provide on-street entertainment and sidewalk sales from DDA merchants to activate pedestrian walkways in the DDA district, Kellogg Park, and celebrate everything Downtown Plymouth has to offer.

RECEIVED

JUL 16 2024

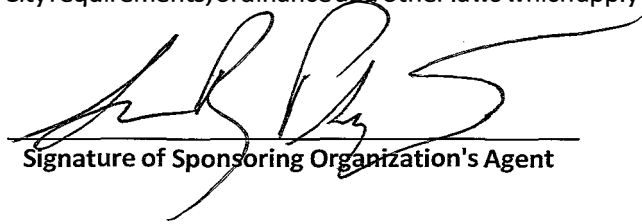
City of Plymouth

10. **CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that
- a. a Certificate of Insurance must be provided which names the City of Plymouth as an additional named insured party on the policy. (See Policy 12.10 for insurance requirements)
 - b. Event sponsors and participants will be required to sign Indemnification Agreement forms (refer to Policy 12.12).
 - c. All food vendors must be approved by the Wayne County Health Department, and each food and/or other vendor must provide the City with a Certificate of Insurance which names the City of Plymouth as an additional named insured party on the policy. (See Policy 12.13)
 - d. The approval of this Special Event may include additional requirements and/or limitations, based on the City's review of this application, in accordance with the City's Special Event Policy. The event will be operated in conformance with the Written Confirmation of Approval. (see Policy 12.11 and 12.16)
 - e. The sponsoring organization will provide a security deposit for the estimated fees as may be required by the City, and will promptly pay any billing for City services which may be rendered, pursuant to Policy 12.3 and 12.4.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with City's Special Event Policy, the terms of the Written Confirmation of Approval, and all other City requirements, ordinance and other laws which apply to this Special Event.

07/10/2024

Date



Signature of Sponsoring Organization's Agent

RETURN THIS APPLICATION at least twenty (21) days prior to the first day of the event to: City

**Manager's Office
City Hall
201 S. Main Street
Plymouth MI 48170**

Phone: (734) 453-1234 ext. 203

EVENT REVIEW FORM

EVENT NAME: Downtown Day TOTAL ESTIMATED FEE: _____
 (Note: All fees are only initial estimates and can increase upon assessment of services after the close of the event).

| | | | | |
|---|--|-------------------------------------|----------------------------------|---|
| MUNICIPAL SERVICES: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>CP</u> |
| <u>NO SERVICES NEEDED</u> | | | | |
| \$250 Bathroom Cleaning Fee Per Day of Event? YES <input checked="" type="radio"/> NO <input type="radio"/> | | | | |
| Labor Costs: \$ | <input checked="" type="radio"/> | Equipment Costs: \$ | <input checked="" type="radio"/> | Materials Costs \$ <input checked="" type="radio"/> |
| POLICE: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>gpc</u> |
| <u>NO SERVICES NEEDED</u> | | | | |
| Labor Costs \$ | <input checked="" type="radio"/> | Equipment Costs \$ | <input checked="" type="radio"/> | Materials Costs \$ <input checked="" type="radio"/> |
| FIRE: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>RS</u> |
| <u>NO SERVICES NEEDED</u> | | | | |
| Labor Costs \$ | <input checked="" type="radio"/> | Equipment Costs \$ | <input checked="" type="radio"/> | Materials Costs \$ <input checked="" type="radio"/> |
| HVA: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>MB</u> |
| <u>NO SERVICES</u> | | | | |
| DDA: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>SBP</u> |
| Labor Costs \$ | <input checked="" type="radio"/> | Equipment Costs \$ | <input checked="" type="radio"/> | Materials Costs \$ <input checked="" type="radio"/> |
| RISK MANAGEMENT: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>MB</u> |
| Class I – Low Hazard | Event Sponsors must provide current Certificate of Insurance naming City | | | |
| Class II – Moderate Hazard | of Plymouth as 'Additional Insured' including in the Description Box/Area. | | | |
| Class III – High Hazard | Food vendor/service requirements per Special Event Policy, must also be | | | |
| Class IV – Severe Hazard | met for any food. | | | |
| SITE FEE APPLIED TO ALL EVENTS IS \$100 PER DAY. TOTAL EVENT SITE FEE \$ _____ | | | | |
| APPROVED _____ NOT APPROVED _____ DATE _____ | | | | |



Special Event Application

City of Plymouth
 201 S. Main
 Plymouth, Michigan 48170-1637

www.plymouthmi.gov
 Phone 734-453-1234
 Fax 734-455-1892

Complete this application in accordance with the City of Plymouth Special Events Policy, and return it to the City Manager's Office at least 21 calendar days prior to the starting date of the event.

FEES WILL BE CHARGED FOR ALL SPECIAL EVENTS. SEE ATTACHMENT B.

| | | | | | | | |
|---|--------------------|-----------------------------|--------------|--------------|----------------|------------------|------------------|
| Sponsoring Organization's Legal Name | | Plymouth Historical Society | | | | | |
| Ph# | 734-455-89 | Fax# | 734-455-7797 | Email | director@plymo | Website | plymouthhistory. |
| Address | 155 S. Main Street | | City | Plymouth | State | MI | Zip 48170 |
| Sponsoring Organization's Agent's Name | | Elizabeth Kerstens | | Title | | Executive Direct | |
| Ph# | 734-455-89 | Fax# | 734-455-7797 | Email | director@plymo | Cell# | 734-502-0760 |
| Address | 155 S. Main Street | | City | Plymouth | State | MI | Zip 48170 |

Event Name Plymouth Ghosts Cemetery Walk

Event Purpose Fundraiser

Event Date(s) Saturday, October 12, 2024

Event Times 4-9 pm

Event Location Riverside Cemetery

What Kind Of Activities? Groups escorted to 8 gravesites where there are reenactors

What is the Highest Number of People You Expect in Attendance at Any One Time? 120

Coordinating With Another Event? YES NO If Yes, Event Name: _____

Event Details: (Provide a detailed description of all activities that will take place. Attach additional sheets if necessary.)

8 actors are positioned at selected gravesites. We put up a large tent near the mausoleum. Groups of 25 people are escorted to gravesites every 15 minutes. We try to leave the cemetery better than we found it.

RECEIVED

JUL 22 2024

City of Plymouth

1. **TYPE OF EVENT:** Based on Policy 12.2, this event is: *(Weddings Ceremonies – Please Review Section 12.2 f.)*
City Operated Co-sponsored Event Other Non-Profit Other For-Profit Political or Ballot Issue

2. **ANNUAL EVENT:** Is this event expected to occur next year? YES NO

If Yes, you can reserve a date for next year with this application (see Policy 12.15). To reserve dates for next year, please provide the following information:

Normal Event Schedule (e.g., third weekend in July):

Next year's specific dates: October 11, 2025

See section 12.13 for license & insurance requirements for vendors

- 3. **FOOD VENDORS/ CONCESSIONS?** YES NO **OTHER VENDORS?** YES NO
- 4. **DO YOU PLAN TO HAVE ALCOHOL SERVED AT THIS EVENT?** YES NO
- 5. **WILL ALCOHOL BE SERVED ON PRIVATE PROPERTY AS PART OF THIS EVENT?** YES NO
- 6. **WILL YOU NEED ELECTRICITY AND/OR WATER?** YES NO

CITY SERVICES REQUIRED? If needed, please attach a letter indicating all requests for City Services. (see Attachment B)

We need 12 traffic cones to block certain streets

7. **AN EVENT MAP IS** **IS NOT** attached. If your event will use streets and/or sidewalks (for a parade, run, etc.), or will use multiple locations, please attach a complete map showing the assembly and dispersal locations and the route plan. Also show any streets or parking lots that you are requesting to be blocked off.

8. **EVENT SIGNS:** Will this event include the use of signs? YES NO
If Yes, refer to Policy 12.8 for requirements, and describe the size and location of your proposed signs: **Please complete a sign illustration / description sheet and include with the application.**

Signs or banners approved by the City of Plymouth for Special Events shall be designed and made in an artistic and workman like manner. THE CITY MANAGER MUST APPROVE ALL SIGNS. SIGNS CANNOT BE ERECTED UNTIL APPROVAL IS GIVEN.

Signs and/or Banners may be used during the event only. Please refer to Special Event Policy for information related to the installation of banners on Downtown Street Light Poles in advance of event. NO SIGNS ARE ALLOWED IN THE PARK IN ADVANCE OF THE EVENT.

9. **UNLIMITED PARKING:** Are you requesting the removal of time limits on parking (see Policy 12.5)?

YES NO

If Yes, list the lots or locations where/why this is requested:

11. **INDEMNIFICATION AGREEMENT**

INDEMNIFICATION AGREEMENT

The Plymouth Histor (*organization name*) agree(s) to defend, indemnify, and hold harmless the City of Plymouth, Michigan, from any claim, demand, suit, loss, cost of expense, or any damage which may be asserted, claimed or recovered against or from the Plymouth Ghosts Cemetery V (*event name*) by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury or death arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss, cost of expense is caused in whole or in part by the negligence of the City of Plymouth or by third parties, or by the agents, servants, employees or factors of any of them.

Signature Elizabeth N. Newton Date July 22, 2024

Witness Michael N. [Signature] Date 7/22/2024

EVENT REVIEW FORM

EVENT NAME: Plymouth Ghosts Cemetery Walk TOTAL ESTIMATED FEE: _____

(Note: All fees are only initial estimates and can increase upon assessment of services after the close of the event).

| | | | |
|---|--|--|----------------------------------|
| MUNICIPAL SERVICES: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied (list reason for denial) | Initial CP |
| NO SERVICES | | | |
| \$250 Bathroom Cleaning Fee Per Day of Event? YES <input type="radio"/> NO <input checked="" type="radio"/> | | | |
| Labor Costs: \$ | <input checked="" type="radio"/> | Equipment Costs: \$ | <input checked="" type="radio"/> |
| | | Materials Costs \$ | <input checked="" type="radio"/> |
| POLICE: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied (list reason for denial) | Initial gmc |
| NO SERVICES NEEDED | | | |
| Labor Costs \$ | | Equipment Costs \$ | <input checked="" type="radio"/> |
| | | Materials Costs \$ | |
| FIRE: | <input type="radio"/> Approved | <input type="radio"/> Denied (list reason for denial) | Initial |
| Labor Costs \$ | | Equipment Costs \$ | |
| | | Materials Costs \$ | |
| HVA: | <input type="radio"/> Approved | <input type="radio"/> Denied (list reason for denial) | Initial |
| DDA: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied (list reason for denial) | Initial SBP |
| Labor Costs \$ | <input checked="" type="radio"/> | Equipment Costs \$ | |
| | | Materials Costs \$ | |
| RISK MANAGEMENT: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied (list reason for denial) | Initial MB |
| Class I – Low Hazard | Event Sponsors must provide current Certificate of Insurance naming City | | |
| Class II – Moderate Hazard | of Plymouth as 'Additional Insured' including in the Description Box/Area. | | |
| Class III – High Hazard | Food vendor/service requirements per Special Event Policy, must also be | | |
| Class IV – Severe Hazard | met for any food. {see section 12.13 of Event Policy} | | |
| SITE FEE APPLIED TO ALL EVENTS IS \$100 PER DAY. TOTAL EVENT SITE FEE \$ _____ | | | |
| APPROVED _____ NOT APPROVED _____ DATE _____ | | | |



Special Event Application

ITEM #4.d

City of Plymouth
201 S. Main
Plymouth, Michigan 48170-1637

www.plymouthmi.gov
Phone 734-453-1234
Fax 734-455-1892

Complete this application in accordance with the City of Plymouth Special Events Policy, and return it to the City Manager's Office at least 21 calendar days prior to the starting date of the event.

FEES WILL BE CHARGED FOR ALL SPECIAL EVENTS. SEE ATTACHMENT B.

Sponsoring Organization's Legal Name Plymouth Downtown Development Authority

Ph# 7344551453 Fax# _____ Email dda@plymouthmi.gov Website downtownplymouth.org

Address 831 Penniman City _____ State _____ Zip _____

Sponsoring Organization's Agent's Name Sam Plymale Title Director

Ph# 831 Penniman Fax# _____ Email splymale@plymouthmi.gov Cell# 7345365268

Address 831 Penniman City Plymouth State MI Zip 48170

Event Name Main Street Boulevard Tree Lighting & Salvation Army Red Kettle Kick Off

Event Purpose To raise awareness for the Salvation Army's local Red Kettle Campaign and kick off the holiday season in Downtown Plymouth

Event Date(s) Friday, November 15, 2024

Event Times 5:30pm - 7:30pm (tree lighting at 7:00pm)

Event Location Kellogg Park (Main Street side)

What Kind Of Activities? Caroling, music, free hot chocolate, gift card exchange

What is the Highest Number of People You Expect in Attendance at Any One Time? 300

Coordinating With Another Event? YES NO If Yes, Event Name: _____

Event Details: (Provide a detailed description of all activities that will take place. Attach additional sheets if necessary.)
Visitors will have a chance to win a gift card from a Downtown Plymouth merchant by donating a non perishable item to the Salvation Army. PCEP Choir will sing songs and the Salvation Army Brass Band will play holiday music.
Boulevard lights will be lit at 7:00pm.

RECEIVED
JUL 16 2024

City of Plymouth

1. **TYPE OF EVENT:** Based on Policy 12.2, this event is: *(Weddings Ceremonies – Please Review Section 12.2 f.)*
City Operated Co-sponsored Event Other Non-Profit Other For-Profit Political or Ballot Issue

2. **ANNUAL EVENT:** Is this event expected to occur next year? YES NO

If Yes, you can reserve a date for next year with this application (see Policy 12.15). To reserve dates for next year, please provide the following information:

Normal Event Schedule (e.g., third weekend in July): the Friday two weeks before Thanksgiving

Next year's specific dates: November 14, 2025

See section 12.13 for license & insurance requirements for vendors

3. **FOOD VENDORS/ CONCESSIONS?** YES NO **OTHER VENDORS?** YES NO

4. **DO YOU PLAN TO HAVE ALCOHOL SERVED AT THIS EVENT?** YES NO

5. **WILL ALCOHOL BE SERVED ON PRIVATE PROPERTY AS PART OF THIS EVENT?** YES NO

6. **WILL YOU NEED ELECTRICITY AND/OR WATER?** YES NO

CITY SERVICES REQUIRED? If needed, please attach a letter indicating all requests for City Services.
(see Attachment B)

Switch for tree lighting/coordination from DMS

7. **AN EVENT MAP** IS IS NOT attached. If your event will use streets and/or sidewalks (for a parade, run, etc.), or will use multiple locations, please attach a complete map showing the assembly and dispersal locations and the route plan. Also show any streets or parking lots that you are requesting to be blocked off.

8. **EVENT SIGNS:** Will this event include the use of signs? YES NO
If Yes, refer to Policy 12.8 for requirements, and describe the size and location of your proposed signs: **Please complete a sign illustration / description sheet and include with the application.**

Signs or banners approved by the City of Plymouth for Special Events shall be designed and made in an artistic and workman like manner. THE CITY MANAGER MUST APPROVE ALL SIGNS. SIGNS CANNOT BE ERECTED UNTIL APPROVAL IS GIVEN.

Signs and/or Banners may be used during the event only. Please refer to Special Event Policy for information related to the installation of banners on Downtown Street Light Poles in advance of event. NO SIGNS ARE ALLOWED IN THE PARK IN ADVANCE OF THE EVENT.

9. **UNLIMITED PARKING:** Are you requesting the removal of time limits on parking (see Policy 12.5)?

YES NO

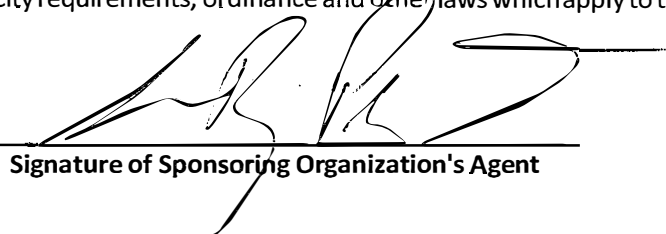
If Yes, list the lots or locations where/why this is requested:

10. **CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that
- a. a Certificate of Insurance must be provided which names the City of Plymouth as an additional named insured party on the policy. (See Policy 12.10 for insurance requirements)
 - b. Event sponsors and participants will be required to sign Indemnification Agreement forms (refer to Policy 12.12).
 - c. All food vendors must be approved by the Wayne County Health Department, and each food and/or other vendor must provide the City with a Certificate of Insurance which names the City of Plymouth as an additional named insured party on the policy. (See Policy 12.13)
 - d. The approval of this Special Event may include additional requirements and/or limitations, based on the City's review of this application, in accordance with the City's Special Event Policy. The event will be operated in conformance with the Written Confirmation of Approval. (see Policy 12.11 and 12.16)
 - e. The sponsoring organization will provide a security deposit for the estimated fees as may be required by the City, and will promptly pay any billing for City services which may be rendered, pursuant to Policy 12.3 and 12.4.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with City's Special Event Policy, the terms of the Written Confirmation of Approval, and all other City requirements, ordinance and other laws which apply to this Special Event.

07/10/2024

Date


Signature of Sponsoring Organization's Agent

RETURN THIS APPLICATION at least twenty (21) days prior to the first day of the event to: City

**Manager's Office
City Hall
201 S. Main Street
Plymouth MI 48170**

Phone: (734) 453-1234 ext. 203

EVENT REVIEW FORM

EVENT NAME: Tree Lighting + Red Kettle TOTAL ESTIMATED FEE: _____

(Note: All fees are only initial estimates and can increase upon assessment of services after the close of the event).

| | | | | |
|---|--|---------------------|--------------------------|-------------------------------|
| MUNICIPAL SERVICES: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>CP</u> |
| <u>2 FTE PA SYSTEM</u> | | | | |
| \$250 Bathroom Cleaning Fee Per Day of Event? <u>YES</u> NO | | | | |
| Labor Costs: \$ | <u>650</u> | Equipment Costs: \$ | <u>100</u> | Materials Costs \$ <u>100</u> |
| POLICE: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>gpc</u> |
| <u>No Services Needed</u> | | | | |
| Labor Costs \$ | | Equipment Costs \$ | <u>0</u> | Materials Costs \$ |
| FIRE: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>RS</u> |
| <u>No Services Needed</u> | | | | |
| Labor Costs \$ | <u>0</u> | Equipment Costs \$ | | Materials Costs \$ |
| HVA: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>[Signature]</u> |
| <u>No Services</u> | | | | |
| DDA: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>SBP</u> |
| Labor Costs \$ | <u>0</u> | Equipment Costs \$ | | Materials Costs \$ |
| RISK MANAGEMENT: | <u>Approved</u> | Denied | (list reason for denial) | Initial <u>MB</u> |
| Class I – Low Hazard | Event Sponsors must provide current Certificate of Insurance naming City | | | |
| <u>Class II – Moderate Hazard</u> | of Plymouth as 'Additional Insured' including in the Description Box/Area. | | | |
| Class III – High Hazard | Food vendor/service requirements per Special Event Policy, must also be | | | |
| Class IV – Severe Hazard | met for any food. | | | |
| SITE FEE APPLIED TO ALL EVENTS IS \$100 PER DAY. TOTAL EVENT SITE FEE \$ _____ | | | | |
| APPROVED _____ NOT APPROVED _____ DATE _____ | | | | |



Special Event Application

City of Plymouth
 201 S. Main
 Plymouth, Michigan 48170-1637

www.plymouthmi.gov
 Phone 734-453-1234
 Fax 734-455-1892

Complete this application in accordance with the City of Plymouth Special Events Policy, and return it to the City Manager's Office at least 21 calendar days prior to the starting date of the event.

FEES WILL BE CHARGED FOR ALL SPECIAL EVENTS. SEE ATTACHMENT B.

Sponsoring Organization's Legal Name Plymouth Downtown Development Authority & City of Plymouth Recreation Department

Ph# 7344551453 Fax# _____ Email dda@plymouthmi.gov Website downtownplymouth.org

Address 831 Penniman City _____ State _____ Zip _____

Sponsoring Organization's Agent's Name Sam Plymale/Steve Anderson Title _____

Ph# 831 Penniman Fax# _____ Email splymale@plymouthmi.gov Cell# 7345365268

Address 831 Penniman City Plymouth State MI Zip 48170

Event Name Santa's City of Plymouth Parade

Event Purpose Santa visiting children of the City of Plymouth

Event Date(s) Friday, November 24, 2024

Event Times 5:30pm - 7:30pm ~~22~~ (29) SBP

Event Location City of Plymouth parks, including holiday show at Kellogg Park

What Kind Of Activities? Entertainment with Santa

What is the Highest Number of People You Expect in Attendance at Any One Time? 500

Coordinating With Another Event? YES NO If Yes, Event Name: _____

Event Details: (Provide a detailed description of all activities that will take place. Attach additional sheets if necessary.)
Santa will parade through Plymouth on a fire truck and visit 1- City parks (see attached map). Entertainment in Kellogg Park leading up to Santa's arrival there, for the Kellogg Park Tree Lighting. City vehicles will join the parade and will hold a short tree-lighting ceremony at each park.

RECEIVED
 JUL 16 2024

1. **TYPE OF EVENT:** Based on Policy 12.2, this event is: *(Weddings Ceremonies – Please Review Section 12.2 f.)*
City Operated Co-sponsored Event Other Non-Profit Other For-Profit Political or Ballot Issue

2. **ANNUAL EVENT:** Is this event expected to occur next year? YES NO

If Yes, you can reserve a date for next year with this application (see Policy 12.15). To reserve dates for next year, please provide the following information:

Normal Event Schedule (e.g., third weekend in July): the Friday after Thanksgiving
Next year's specific dates: November 28, 2025

See section 12.13 for license & insurance requirements for vendors

3. **FOOD VENDORS/ CONCESSIONS?** YES NO **OTHER VENDORS?** YES NO
4. **DO YOU PLAN TO HAVE ALCOHOL SERVED AT THIS EVENT?** YES NO
5. **WILL ALCOHOL BE SERVED ON PRIVATE PROPERTY AS PART OF THIS EVENT?** YES NO
6. **WILL YOU NEED ELECTRICITY AND/OR WATER?** YES NO

CITY SERVICES REQUIRED? If needed, please attach a letter indicating all requests for City Services.
(see Attachment B)

N/A

7. **AN EVENT MAP IS** **IS NOT** attached. If your event will use streets and/or sidewalks (for a parade, run, etc.), or will use multiple locations, please attach a complete map showing the assembly and dispersal locations and the route plan. Also show any streets or parking lots that you are requesting to be blocked off.

8. **EVENT SIGNS:** Will this event include the use of signs? YES NO
If Yes, refer to Policy 12.8 for requirements, and describe the size and location of your proposed signs: **Please complete a sign illustration / description sheet and include with the application.**

Signs or banners approved by the City of Plymouth for Special Events shall be designed and made in an artistic and workman like manner. THE CITY MANAGER MUST APPROVE ALL SIGNS. SIGNS CANNOT BE ERECTED UNTIL APPROVAL IS GIVEN.

Signs and/or Banners may be used during the event only. Please refer to Special Event Policy for information related to the installation of banners on Downtown Street Light Poles in advance of event. NO SIGNS ARE ALLOWED IN THE PARK IN ADVANCE OF THE EVENT.

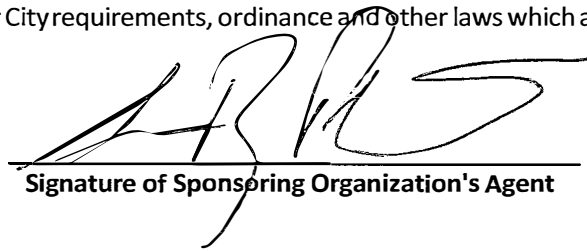
9. **UNLIMITED PARKING:** Are you requesting the removal of time limits on parking (see Policy 12.5)?
YES NO
If Yes, list the lots or locations where/why this is requested:

10. **CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that
- a. a Certificate of Insurance must be provided which names the City of Plymouth as an additional named insured party on the policy. (See Policy 12.10 for insurance requirements)
 - b. Event sponsors and participants will be required to sign Indemnification Agreement forms (refer to Policy 12.12).
 - c. All food vendors must be approved by the Wayne County Health Department, and each food and/or other vendor must provide the City with a Certificate of Insurance which names the City of Plymouth as an additional named insured party on the policy. (See Policy 12.13)
 - d. The approval of this Special Event may include additional requirements and/or limitations, based on the City's review of this application, in accordance with the City's Special Event Policy. The event will be operated in conformance with the Written Confirmation of Approval. (see Policy 12.11 and 12.16)
 - e. The sponsoring organization will provide a security deposit for the estimated fees as may be required by the City, and will promptly pay any billing for City services which may be rendered, pursuant to Policy 12.3 and 12.4.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with City's Special Event Policy, the terms of the Written Confirmation of Approval, and all other City requirements, ordinance and other laws which apply to this Special Event.

07/10/2024

Date



Signature of Sponsoring Organization's Agent

RETURN THIS APPLICATION at least twenty (21) days prior to the first day of the event to: City

**Manager's Office
City Hall
201 S. Main Street
Plymouth MI 48170**

Phone: (734) 453-1234 ext. 203

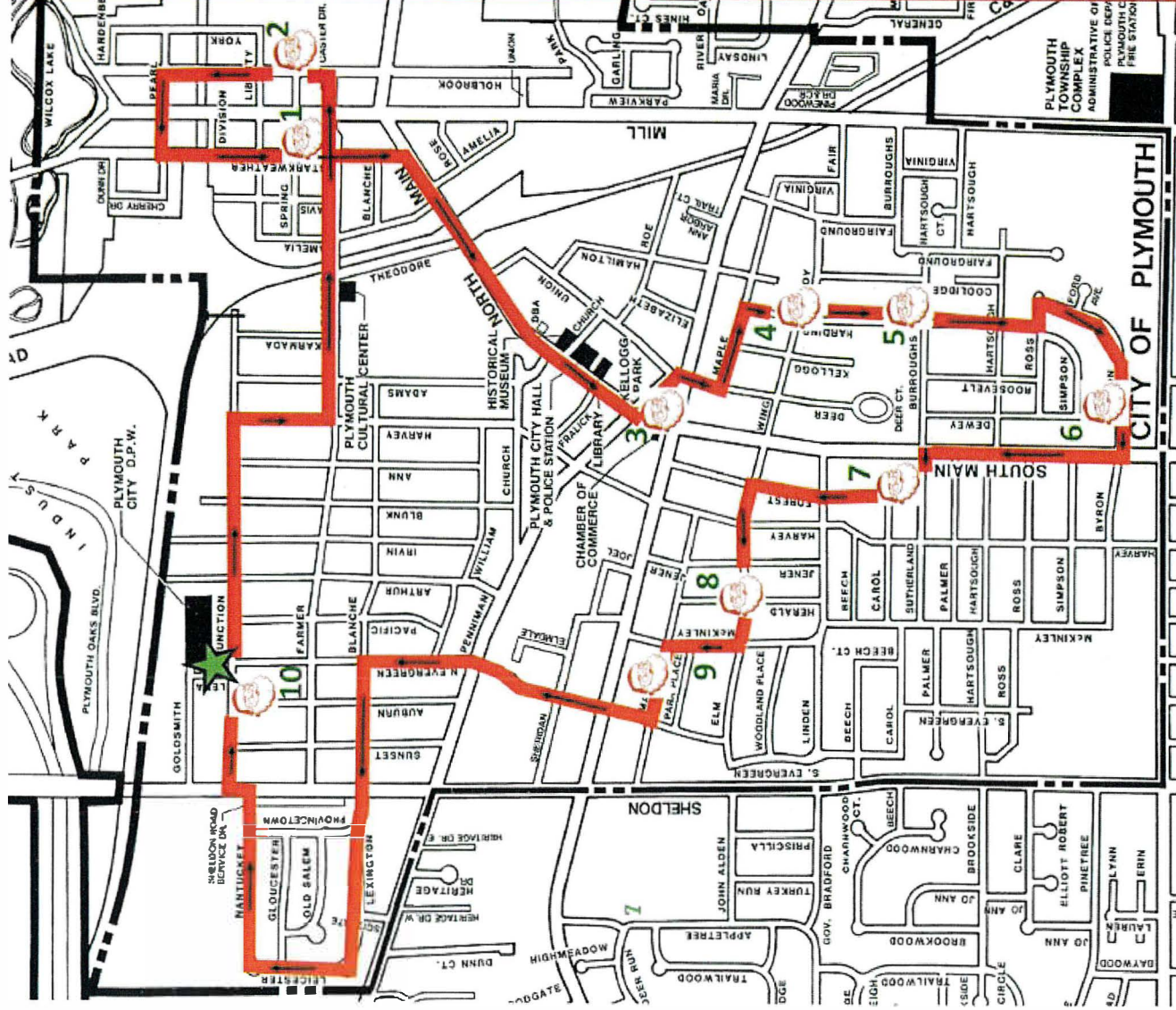
2023 Parade Route

Parade starts and ends at the Municipal Services Yard and departs at 5:45 p.m.



Santa's Park Stops

1. Starkweather Park
2. K of C Park
3. Kellogg Park
4. Fairground Park
5. Lions Club Park
6. Wilcox Park
7. Garden Club Park
8. Rotary Park
9. Hough Park
10. Kiwanis Park



EVENT REVIEW FORM

EVENT NAME: Santa's City of Plymouth Parade TOTAL ESTIMATED FEE: _____

(Note: All fees are only initial estimates and can increase upon assessment of services after the close of the event).

| | | | | |
|---|--|-------------------------------------|--------------------------|-------------------------------|
| MUNICIPAL SERVICES: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>CP</u> |
| <u>NP AT PARK LOCATIONS THROUGHOUT ROUTE</u> | | | | |
| \$250 Bathroom Cleaning Fee Per Day of Event? YES NO | | | | |
| Labor Costs: | \$ <u>500</u> | Equipment Costs: | \$ <u>100</u> | Materials Costs \$ <u>100</u> |
| POLICE: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>guc</u> |
| <u>2 - OFFICERS @ 2 HRS</u> | | | | |
| Labor Costs \$ | | Equipment Costs \$ | <u>304</u> | Materials Costs \$ |
| FIRE: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>RS</u> |
| <u>NO SERVICES NEEDED</u> | | | | |
| Labor Costs \$ | <u>0</u> | Equipment Costs \$ | | Materials Costs \$ |
| HVA: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>[Signature]</u> |
| <u>No Services</u> | | | | |
| DDA: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>SP</u> |
| Labor Costs \$ | <u>0</u> | Equipment Costs \$ | | Materials Costs \$ |
| RISK MANAGEMENT: | <input checked="" type="radio"/> Approved | <input type="radio"/> Denied | (list reason for denial) | Initial <u>MB</u> |
| Class I – Low Hazard | Event Sponsors must provide current Certificate of Insurance naming City | | | |
| <u>Class II – Moderate Hazard</u> | of Plymouth as 'Additional Insured' including in the Description Box/Area. | | | |
| Class III – High Hazard | Food vendor/service requirements per Special Event Policy, must also be | | | |
| Class IV – Severe Hazard | met for any food. | | | |
| SITE FEE APPLIED TO ALL EVENTS IS \$100 PER DAY. TOTAL EVENT SITE FEE \$ _____ | | | | |
| APPROVED _____ NOT APPROVED _____ DATE _____ | | | | |



Administrative Recommendation

City of Plymouth
201 S. Main
Plymouth, Michigan 48170-1637

www.plymouthmi.gov
Phone 734-453-1234
Fax 734-455-1892

To: Mayor & City Commission
From: Paul J. Sincock, City Manager
CC: S:\Manager\Sincock Files\Memorandum - Non-Profit Recognition - Plymouth Canton Steelers Jr Football - 08-05-24.docx
Date: July 29, 2024
RE: Non-Profit Recognition – Plymouth Canton Steelers Jr. Football

Background

From time to time the city receives requests from locally based non-profit organizations to have a Resolution passed that indicates that the group is recognized as a local non-profit organization. We have received a request from Plymouth Canton Steelers Jr. Football, this organization has been operating in our community as a non-profit since 1977 and they have provided information as to why they need to obtain a license from the Bureau of the State Lottery.

The purpose of the official recognition is to allow the group to proceed with their application to the State of Michigan. They are applying to the State of Michigan Bureau of the State Lottery for a permit to hold a raffle or engage in charity gaming activities as authorized by the State of Michigan.

The City Commission has provided a similar recognition to several community groups, including, but not limited to, Plymouth Historical Society, United Way, Smith School FPO, Keep Plymouth Leafy, Plymouth Kiwanis, Plymouth Lions, Plymouth Rotary, Plymouth Lacrosse, and the Plymouth Hockey Association. The City Administration is familiar with the Plymouth Canton Steelers and their efforts to raise funds to pay for their programs.

RECOMMENDATION:

The City Administration recommends that the City Commission recognize the Plymouth Canton Steelers Jr. Football Organization as a local non-profit organization in the community. The request merely recognizes the group as a local non-profit organization. The Resolution makes no endorsement of their proposed activity or federal tax status, just that they are located here in the city.

The State of Michigan has prepared a proposed Resolution for the City Commission to consider regarding this matter. Should you have any questions in advance of the meeting please feel free to contact me.

FOOTBALL



CHEERLEADING

July 29, 2024

Michigan Gaming Control Board
Millionaire Party Licensing
3062 W. Grand Blvd
Suite L-700
Detroit, MI 48202-6062

To Whom it May Concern:

I am writing as on behalf of the Plymouth Canton Junior Football program. We are interested in obtaining a Millionaire Party License.

The main source of the funds would be from our planned poker fundraiser at the Krazy Kopz Poker room in Westland, MI.

We plan on using these funds for team expenditures including but not limited to:

- Field rental and maintenance
- Equipment maintenance and refurbishing (helmets)
- Purchase of updated uniforms
- New training equipment
- Facilities maintenance
- Miscellaneous expenses (banquet, homecoming décor, athlete awards)

To give you some background, the Plymouth Canton Junior Football program was established in 1977 and continues to offer a competitive arena to young football players and cheerleaders from the Plymouth-Canton area and surrounding cities. Their mission is to inspire and promote character, discipline, leadership, and teamwork in all our athletes so that they become outstanding citizens of the community.

We are part of the Michigan Youth Football and Cheer Conference (MYFCC). Our program is designed to prepare young athletes for the high school level by providing age-appropriate training that will aid in the development of their football and cheerleading skills.

Our well-qualified coaching staff includes veterans and parents of the program with years of football or cheerleading experience at the high school and/or collegiate levels. Every year, our athletes compete for a championship title. Our football teams compete in the MYFCC Super Bowl Championship, and our cheerleaders compete in the MYFCC Super Cheer Competition. The Plymouth-Canton Steelers have consecutively brought home trophies and medals from both events, instilling great pride in our Steelers community.

Thank you for consideration and we look forward to process.

Sincerely,

Wade Quillin
Vice President



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
MICHIGAN GAMING CONTROL BOARD
DETROIT

HENRY L. WILLIAMS, JR.
EXECUTIVE DIRECTOR

1ST REQUEST

July 25, 2024

Wade Quillin
C/O Ryan Cooley
Plymouth-Canton Steelers Jr Football, ID#
6144
Plymouth, MI, 48170

Re: Qualification Process – Required Documentation Request (DUE DATE: August 8, 2024)

Dear Wade Quillin:

We received your Millionaire Party Qualification Form on July 18, 2024. However, we are unable to continue processing until you submit the following required documentation:

1. The application that was submitted is incorrect. Please fill out the following application type: Local Civic. Please list the legal name of the organization in #1.
2. Please revise the purpose letter reflect the organization's legal name in the body of the letter.
3. A provision in the bylaws, constitution, or articles of incorporation that indicates should the organization dissolve all assets, real property, and personal property will revert: a. If not exempt under 501(c)(3), to the local government b. If exempt under 501(c)(3), to another nonprofit organization
4. Annual financial statements summarizing totals of revenue, expenses, profit and loss, and balance sheet for the previous 3 years (2021, 2022, and 2023)
5. Complete bank statements for May and June of 2024.
6. Check register for the May and June of 2024.
7. The Millionaire Party Officer/Contact Information form was not submitted. The form can be located on the MGCB Website:
<https://www.michigan.gov/mgcb/-/media/Project/Websites/mgcb/Millionaire-Party/ChangeForms>. Please include physical addresses for each. The 1st officer



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
MICHIGAN GAMING CONTROL BOARD
DETROIT

HENRY L. WILLIAMS, JR.
EXECUTIVE DIRECTOR

listed should be the President, 2nd the Vice President and 3rd will be any other officer of the organization per your bylaws. Lastly the contact should be listed (even if they are listed as one of the officers - e.g. Wade). The title supplied should be the person's title in the organization.

If your organization is unable to provide any of the documentation listed above, please list what you are unable to provide along with a brief explanation detailing why you cannot provide the requested documentation. Please print the letter on your organization's letterhead and have your Principal Officer sign and date the letter. Please submit the requested documentation along with your organization ID number and a copy of this letter to one of the following:

Email: Millionaireparty@michigan.gov

Mail: Michigan Gaming Control Board
Millionaire Party Licensing
3062 W. Grand Blvd. Suite L-700
Detroit, MI 48202

Fax: (313) 456-3405

If you have any questions or need further assistance, please contact the Millionaire Party Helpline at (313) 456-4940 between the hours of 8:00 am and 5:00 pm Monday through Friday.

Sincerely,

Roberta Prifti
Licensing Coordinator
Enterprise Licensing Section
Michigan Gaming Control Board



State of Michigan
Michigan Gaming Control Board
Millionaire Party Licensing
3062 W. Grand Blvd, Suite L-700
Detroit, MI 48202-6062
Phone: (313) 456-4940
Fax: (313) 456-3405
Email: Millionaireparty@michigan.gov
www.michigan.gov/mgcb

MILLIONAIRE PARTY QUALIFICATION FORM (Local Civic Organization)

For Internal Use Only

The organization must complete this form and submit along with the required qualification documents as noted on the following page(s). Please allow at least 8 weeks for the qualification process.

| | | | |
|--|--------------------|---|------------------------|
| 1. Name of Organization Plymouth Canton Steelers Junior Football | | | |
| 2. Doing Business As (DBA) (if applicable) | | | |
| 4. Organization Physical Address 650 Church Street | | | |
| City Plymouth | State MI | ZIP Code 48170 | County Wayne |
| 5. Organization Mailing Address <input type="checkbox"/> Same as Physical Address PO Box 6144 | | | |
| City Plymouth | State MI | ZIP Code 48170 | County Wayne |
| 7. Fax Number | | 8. Date Organization Established 1977 | |
| 9. Is your organization a candidate committee, political party committee, ballot question committee, independent committee, or any other committee as defined by, and organized pursuant to, the Michigan Campaign Finance Act 388 of the Public Acts of the Public Acts of 1976, as amended, being sections 169.201 to 169.282 of the Michigan Compiled Laws? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| 10. Briefly describe the purpose of the organization The Plymouth Canton Steelers Junior Football program was established in 1977 and continues to offer a competitive arena to young football players and cheerleaders from the Plymouth-Canton area and surrounding cities. Their mission is to inspire and promote character, discipline, leadership, and teamwork in all our athletes so that they become outstanding citizens of the community. | | | |
| 11. Name of Organization's Principal Officer Ryan Cooley | | 12. Principal Officer's Title President | |
| 13. Principal Officer Mailing Address PO Box 6144 | | | |
| City Plymouth | State MI | ZIP Code 48170 | County Wayne |
| 14. Email Address president@plymouthcantonsteelers.com | | 16. Fax Number | |
| 17. Name of Authorized Contact Person <input type="checkbox"/> Same as Principal Officer Wade Quillin | | 18. Authorized contact person's position or role with organization Vice President | |
| 19. Contact Person Mailing Address PO Box 6144 | | | |
| City Plymouth | State MI | ZIP Code 48170 | County |
| 20. Email Address vicepresident@plymouthcantonsteelers.com | | phone Number | 22. Fax |
| The undersigned hereby certifies that the representations, information, and data presented are true, accurate, and complete to the best of the undersigned's knowledge. <i>The undersigned understands that failure to answer truthfully, completely, and accurately could preclude the organization from receiving an approval to obtain a gaming license.</i> | | | |
| Principal Officer Signature | | | Date |
| Authorized Contact Signature | | | Date |

PLEASE READ CAREFULLY

Please mail this completed form and the required qualification documentation to Michigan Gaming Control Board, Millionaire Party Licensing, 3062 W. Grand Blvd, Suite L-700, Detroit, MI 48202-6062 – or email to: Millionaireparty@michigan.gov

If you would like to qualify for a raffle, bingo, or charity game ticket license, please visit the Charitable Gaming Division website at www.michigan.gov/cg for more information.

LOCAL CIVIC ORGANIZATION QUALIFICATION REQUIREMENTS

The following documentation shall be submitted as part of the qualification process:

Local Civic Organizations can qualify for licensing and shall submit the following information in the name of the organization prior to being approved to conduct a millionaire party event.

1. A detailed purpose letter on organization letterhead, signed and dated by the Principal Officer, indicating the main source(s) of funds received, the main use(s) of funds expended, and the specific purpose of the organization
2. A signed and dated copy of the organization's current bylaws or constitution, including membership criteria
3. A complete copy of the organization's articles of incorporation that have been filed with the Corporations and Securities Bureau, if the organization is incorporated
4. A provision in the bylaws, constitution, charter, or articles of incorporation that states should the organization dissolve, all assets, real property, and personal property will revert:
 - A. If exempt under 501(c)3, to another 501(c)3 organization or
 - B. To the local body of government that granted the resolution
5. A copy of the letter from the IRS stating the organization is exempt from federal tax under IRS code 501(c). (If the organization is not exempt under 501(c), submit a copy of one bank statement per year for the previous five years)
6. A copy of a resolution passed by the local body of government in which the organization conducts its principal activities stating the organization is a recognized nonprofit organization in the community (form attached)
7. A copy of the organization's annual financial statements including income statement and balance sheet information for the previous three years
8. A copy of the organization's annual tax returns for the previous three years (e.g. 990, 990-EZ, or 990-N e-Postcard)
9. A copy of the organization's bank statements for the previous twelve months
10. A copy of the organization's check register for the previous twelve months
11. A copy of the organization's credit card and procurement card statements for the previous twelve months

The organization may be required to provide additional information after the initial documents have been reviewed. If you have any questions or need further assistance, please call (313) 456-4940.

Act 382 of the Public Acts of 1972, as amended, defines a local civic organization as an organization "that is organized not for pecuniary profit; that is not affiliated with a state or national organization; that is recognized by resolution adopted by the local governmental subdivision in which the organization conducts its principal activities; whose constitution, charter, articles of incorporation, or bylaws contain a provision for the perpetuation of the organization as a nonprofit organization; whose entire assets are used for charitable purposes; and whose constitution, charter, articles of incorporation, or bylaws contain a provision that all assets, real property, and personal property shall revert to the benefit of the local governmental subdivision that granted the resolution upon dissolution of the organization.

Short Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2022

Open to Public Inspection

- Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990EZ for instructions and the latest information.

For the 2022 calendar year, or tax year beginning 01-01-2022, and ending 12-31-2022

Form fields for organization name, address, phone number, and identification numbers.

Accounting Method: [X] Cash [] Accrual [] Other (specify)

H Check [X] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

Website: www.plymouthcantonsteelers.com
Tax-exempt status (check only one) - [X] 501(c)(3) [] 501(c) () (insert no.) [] 4947(a)(1) or [] 527

Form of organization: [] Corporation [] Trust [X] Association [] Other

Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 92,862

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I [X]

Table with 9 rows for revenue and expenses. Line 1: 6,849; Line 2: 8,412; Line 3: 58,436; Line 4: 0; Line 5a: 0; Line 5b: 0; Line 5c: 0; Line 6a: 19,165; Line 6b: 0; Line 6c: 0; Line 6d: 19,165; Line 7a: 0; Line 7b: 0; Line 7c: 0; Line 8: 0; Line 9: 92,862

Table with 11 rows for expenses and net assets. Line 10: 0; Line 11: 0; Line 12: 0; Line 13: 0; Line 14: 21,865; Line 15: 0; Line 16: 75,380; Line 17: 97,245; Line 18: -4,383; Line 19: 47,939; Line 20: 0; Line 21: 43,556

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

| | (A) Beginning of year | (B) End of year |
|---|-----------------------|-----------------|
| 2 Cash, savings, and investments | 47,939 | 22 43,556 |
| 3 Land and buildings | 0 | 23 0 |
| 4 Other assets (describe in Schedule O) | 0 | 24 0 |
| 5 Total assets | 47,939 | 25 43,556 |
| 6 Total liabilities (describe in Schedule O) | 0 | 26 0 |
| 7 Net assets or fund balances (line 27 of column (B) must agree with line 21) | 47,939 | 27 43,556 |

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?
 The organization provided practice and game experience in football and cheerleading to over 150 youths ranging in age from 7 to 13 years of age.

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Part IV Additional Data Table

| | | |
|---|---|-------------|
| Grants \$) | If this amount includes foreign grants, check here <input type="checkbox"/> | 28a |
| Grants \$) | If this amount includes foreign grants, check here <input type="checkbox"/> | 29a |
| Grants \$) | If this amount includes foreign grants, check here <input type="checkbox"/> | 30a |
| Other program services (describe in Schedule O) | | |
| Grants \$) | If this amount includes foreign grants, check here <input type="checkbox"/> | 31a |
| Total program service expenses (add lines 28a through 31a) | | 32 0 |

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated; see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

| (a) Name and title | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|------------------------|--|--|---|--|
| Jan Jansen | 10 | 0 | 0 | 0 |
| President | | | | |
| My Banko | 10 | 0 | 0 | 0 |
| President | | | | |
| Drea Spangler | 10 | 0 | 0 | 0 |
| Secretary | | | | |
| Trinifer Ryce | 10 | 0 | 0 | 0 |
| Assurer | | | | |
| Ke Brannan | 20 | 0 | 0 | 0 |
| Football Unit Director | | | | |
| Missie Broyles | 15 | 0 | 0 | 0 |
| Peer Unit Director | | | | |
| | | | | |
| | | | | |
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State of Michigan
 Michigan Gaming Control Board
 Millionaire Party Licensing
 3062 W. Grand Blvd, Suite L-700
 Detroit, MI 48202-6062
 Phone: (313) 456-4940
 Fax: (313) 456-3405
 Email: Millionaireparty@michigan.gov
 www.michigan.gov/mgcb

LOCAL GOVERNING BODY RESOLUTION FOR CHARITABLE GAMING LICENSES

(Required by MCL 432.103a(i)(ii))

At a _____ meeting of the _____
REGULAR OR SPECIAL TOWNSHIP, CITY, OR VILLAGE COUNCIL/BOARD

called to order by _____ on _____
DATE

at _____ a.m./p.m. the following resolution was offered:
TIME

Moved by _____ and supported by _____

that the request from _____ of _____,
NAME OF ORGANIZATION CITY

county of _____, asking that they be recognized as a nonprofit
COUNTY

organization operating in the community, for the purpose of obtaining charitable gaming licenses, be

considered for _____
APPROVAL/DISAPPROVAL

| | | | |
|------------------|---------------|---------------------|---------------|
| <u>APPROVAL:</u> | Yeas: _____ | <u>DISAPPROVAL:</u> | Yeas: _____ |
| | Nays: _____ | | Nays: _____ |
| | Absent: _____ | | Absent: _____ |

I hereby certify that the foregoing is a true and complete copy of a resolution offered and adopted

by the _____ at a _____
TOWNSHIP, CITY, OR VILLAGE COUNCIL/BOARD REGULAR OR SPECIAL

meeting held on _____
DATE

SIGNED: _____
TOWNSHIP, CITY, OR VILLAGE CLERK

PRINTED NAME AND TITLE

ADDRESS

Organization Information: _____
ORGANIZATION'S MAILING ADDRESS, STREET, CITY, ZIP

ORGANIZATION'S PRINCIPAL OFFICER NAME AND TITLE

PHONE NUMBER



Administrative Recommendation

City of Plymouth
201 S. Main
Plymouth, Michigan 48170-1637

www.plymouthmi.gov
Phone 734-453-1234
Fax 734-455-1892

To: Mayor & City Commission
From: Paul J. Sincock, City Manager
CC: *S:\Manager\Sincock Files\Memorandum - Equipment Fund Balance - 08-05-24.docx*
Date: August 1, 2024
RE: Equipment Fund Accounting – Unrestricted Fund Balance 06-30-23

Background

The State of Michigan has requested that we update our records for the Fiscal Year that ended on June 30, 2023. While the Equipment Fund had a net position of nearly 2.4 million dollars on June 30, 2023, the available cash portion was a negative \$76,855. Due to the nature of the Equipment Fund (Internal account) it requires that the cash be deposited into the account by June 30th. It should be noted that we deposited \$208,423 on July 3, 2023, into the account as a result of the finalization of the sale of the 2016 pumper truck.

This action is a housekeeping matter that is required by the state, and it will not impact the strong financial position of the city or the Equipment Fund. The Commission will recall that we purchased a number of vehicles in the 22 – 23 Fiscal Year and we were anticipating closing the sale of the used high value vehicle earlier in June, but the finalization wire transfer occurred on July 3, 2023.

We have attached a memorandum from Finance Director John Scanlon which will further outline this proposed action. We note that the Equipment Fund had a growth in net position of over \$584,006 between June 30, 2022, and June 30, 2023.

Recommendation

The City Administration recommends that the City Commission adopt the proposed Resolution that will allow the city to comply with the technical requirements of the Glenn Steil State Revenue Sharing Act of 1971 and the updated guidance for internal service funds. This action will not impact the overall strength of the City's financial position or outlook.

If you have any questions in advance of the meeting, please feel free to contact either John Scanlon or myself.



CITY OF PLYMOUTH

www.plymouthmi.gov

201 S. Main
Plymouth, Michigan 48170-1637

Phone 734-453-1234
Fax 734-455-1892

MEMORANDUM

Date: July 31, 2024
To: Paul J. Sincock, City Manager
From: John Scanlon, Finance Director
Subject: Unrestricted Equipment Fund Balance

Issue: Unrestricted Equipment Fund Balance as of 6/30/2023

Analysis: On June 30, 2023, the Equipment Fund had a net position of \$2,471,755. However, the unrestricted portion of the net position closed with a negative balance of \$76,855. This was due to current assets (e.g., cash) being less than current liabilities (e.g., accounts payable). This issue is closely monitored as part of our ongoing cash management process and was discussed in further detail in the budget amendment write-ups.

On July 3, 2023, the City and Brindlee Mountain Fire Apparatus completed the sale of the City's 2016 fire pumper. This transaction increased the cash balance by \$208,423 and eliminated the negative unrestricted fund balance.

In accordance with the Glenn Steil State Revenue Sharing Act of 1971 and the updated guidance regarding internal service funds from letter 2016-1, which repealed 2014-1, the City needs to adopt a deficit elimination plan by resolution. The attached resolution reflects the 2024 amended budget as well as the balance sheet actuals as of June 30, 2024, and meets the guidelines outlined in letter 2016-1. These figures are not a reflection of final audited numbers.

Requested Action: Approve the resolution

Attachment(s): None

THE CITY OF HOMES

twitter.com/PlymouthMIgov

facebook.com/CityofPlymouthMI

RESOLUTION

The following resolution was offered by Commissioner _____ and seconded by Commissioner _____.

WHEREAS The City of Plymouth's Equipment Fund has a \$76,855 deficit unrestricted fund balance on June 30, 2023; and

WHEREAS, 1971 PA 140 requires that a Deficit Elimination Plan be formulated by the local unit of government and filed with the Michigan Department of Treasury

NOW THEREFORE, IT IS RESOLVED that the City Commission of the City of Plymouth adopts the following as the City of Plymouth Equipment Fund Deficit Elimination Plan:

| | 2023 | 2024 |
|---|---------------------|---------------------|
| Unrestricted Net Position (Deficit) | \$ 430,772 | \$ (76,855) |
| Revenue: | | |
| Rental Income | \$ 1,191,275 | \$ 1,102,315 |
| Miscellaneous | \$ 56,095 | \$ 47,645 |
| Total Operating Revenues | \$ 1,247,370 | \$ 1,149,960 |
| Operating Expenses: | | |
| Personal Services, Other Admin | \$ 470,773 | \$ 492,750 |
| Depreciation and Amortization | \$ 160,615 | \$ 290,000 |
| Total Operating Expenses | \$ 631,388 | \$ 782,750 |
| Non-Operating Revenues (Exp): | | |
| Interest Income | \$ 7,845 | \$ 21,775 |
| Interest Expense | \$ (39,675) | \$ (35,868) |
| Total Non-Operating Revenues (Exp) | \$ (31,830) | \$ (14,093) |
| Net Income (Loss) | \$ 584,152 | \$ 353,117 |
| Net Position, Beginning | \$ 1,887,603 | \$ 2,471,755 |
| Net Position, Ending | \$ 2,471,755 | \$ 2,824,872 |
| Current Assets: | \$ 14,419 | \$ 38,192 |
| Current Liabilities: | \$ 91,274 | \$ 12,459 |
| Unrestricted | \$ (76,855) | \$ 25,733 |
| Net Investment in Capital Assets | \$ 2,548,610 | \$ 2,799,139 |
| Total Net Position | \$ 2,471,755 | \$ 2,824,872 |

*Based on 6/30/2024 unaudited budgeted and actuals as of 7/30/2024

BE IT FURTHER RESOLVED that the City Finance Director is authorized to submit the Deficit Elimination Plan to the Michigan Department of Treasury for certification



Administrative Recommendation

City of Plymouth
201 S. Main
Plymouth, Michigan 48170-1637

www.plymouthmi.gov
Phone 734-453-1234
Fax 734-455-1892

To: Mayor & City Commission
From: Paul J. Sincock, City Manager
CC: S:\Manager\Sincock Files\Memorandum - Fire Truck Buy Back Agreement Amendment - 08-05-24.docx
Date: August 1, 2024
RE: Amendment to Fire Truck Guaranteed Buy-Back Agreement

Background

The City Commission may be aware that the city entered into a guaranteed buy back agreement with Brindlee Mountain Fire Apparatus, LLC in November of 2019. This agreement provided that they would buy our Rosenbauer fire truck (1721) in the amount of \$253,808 at the end of five years. We are coming up on the term of that agreement. The Commission will also recall that last year we chose not to order a replacement truck due to the significant escalation in costs and order time. The new truck pricing was about one-million dollars, with a two-year build time. We felt that if we could depreciate the current truck another couple of years, then order a new truck we would be in a better position.

We have been working with Brindlee Mountain Fire Apparatus, on the buy-back agreement. Obviously, they are highly interested in obtaining our vehicle, due to the lack of available fire trucks and build backlog. We have come to an understanding related to our agreement with them. They have agreed to not enforce a \$25,000 failure to deliver clause, provided that we notify them when we are ready to consider our vehicle surplus and are ready to sell it. This is basically a "first right of refusal" to purchase the truck from us. They will guarantee to purchase the Rosenbauer Truck from us at that time at a fair and equitable price. We anticipate that the truck will continue to depreciate approximately \$25,000 - \$50,000 a year depending on a number of factors. More recently, we have indicated that our recommended replacement would be in the seven-year range, when the truck still had significant value and before major maintenance would be required.

Recommendation

The City Administration recommends that the City Commission authorize an amendment to the Deferred Purchase Value Agreement with Brindlee Mountain Fire Apparatus. This amendment is to extend our sale agreement to a time to be determined by the City and that Brindlee Mountain agrees not to enforce the \$25,000 failure to deliver clause in the agreement, and for them to purchase the vehicle from the City at a fair and equitable price in the future.

Should you have any questions in advance of the meeting, please feel free to contact me.

RESOLUTION

The following Resolution was offered by _____ and seconded by _____

WHEREAS The City of Plymouth owns a number of public safety fire services vehicles to protect the Public health, safety, and welfare, and

WHEREAS The City has previously entered into a guaranteed buy back agreement with Brindlee Mountain Fire Apparatus to purchase our (1721) Rosenbauer Pumper at the end of Five years, and

WHEREAS The City and Brindlee Mountain have completed previous transactions related to them Purchasing city surplus fire equipment, and

WHEREAS The City and Brindlee Mountain have agreed to extend the guaranteed buy back to a time When the city determines that the truck is considered surplus.

NOW THEREFORE BE IT RESOLVED THAT the City Commission of the City of Plymouth does hereby authorize an amendment to the deferred purchase value agreement with Brindlee Mountain Fire Apparatus. Both parties agree that the city shall notify Brindlee Mountain when a decision is made by the city to consider this vehicle as surplus. Brindlee then agrees that they will purchase the vehicle at a fair and equitable price at that time. Both parties will use good faith in determining the value, noting that the current agreement sets the deferred purchase value at \$253,808.00 as of November 2024. Further, Brindlee agrees to not enforce a fail to deliver penalty, since the city is maintaining the ownership of the vehicle for an extended period of time.