

SPECIAL EVENT APPLICATION

Rapid City Police Department



Traffic Section
300 Kansas City Street
Rapid City SD 57701
Phone: 605-394-4130
Fax: 605-394-6608 605-394-6908

NAME OF EVENT: RUSHMORE ROLLERZ - ROLLER DERBY

EVENT DATE/TIME: JUNE 18th, JULY 16th, AUG 27th

SPONSOR ORGANIZATION: Main Street Square / Destination RAPID CITY

CONTACT PERSON: JOHN SEWARD
ADDRESS: 606 Main Street
HOME PHONE: 605-939-9837
WORK PHONE: 605-716-7979
EMAIL ADDRESS: johnmss@rushmore.com

PURPOSE OF EVENT: ROLLER DERBY BOUTS

ASSEMBLY AREA: Between 5th and 6th of Kansas City -> West 1/2 block

ASSEMBLY TIME: Set-up Starts 2pm - Bar Starts @ 7pm, Music 6pm ENDS 10pm

ROUTE AREA: (List all streets and areas route is expected to cover)

Map Attached? YES NO

Alternate Routes Available: YES NO

REQUESTING ANY CITY RESOURCES? No
(If so, explain need)

FIRE DEPARTMENT:
10 Main Street 394-4180

Contact: _____

STREET DEPARTMENT:
605 Steele Street 394-4152

Contact: _____

PARKS DEPARTMENT:
125 Waterloo Street 394-5225

Contact: _____

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Does event require special parking accommodations?	YES	<input checked="" type="radio"/> NO
Will businesses be affected by street closures?	<input checked="" type="radio"/> YES	NO
Have affected businesses been notified?	<input checked="" type="radio"/> YES	NO
Will event require clearing of streets? (Towing of cars)	<input checked="" type="radio"/> YES	NO - BOT. PROBABLY NOT
Does event include placement of temporary structures? <i>Copy of 11-6-19 Review Attached? YES NO</i>	<input checked="" type="radio"/> YES	NO
Does event plan on serving alcohol?	<input checked="" type="radio"/> YES	NO
Do you anticipate any security needs?	YES	<input checked="" type="radio"/> NO - we have our own.
Does your event require closing or blocking of any State Highway? <i>Any application for an event which requires the closing of any State highway, must have a corresponding state permit, prior to submittal of the event permit. Copy of State Permit Attached? YES NO</i>	YES	<input checked="" type="radio"/> NO
How many floats do you anticipate in your parade? If your parade has over 70 floats, City Ordinance requires Council Approval.		

OFFICE USE ONLY

COUNCIL APPROVAL REQUIRED:

YES NO

POLICE DEPARTMENT REVIEWED BY:

[Signature]

DATE: 5-18-2011

SENT TO LEGAL/FINANCE:

5-16-11

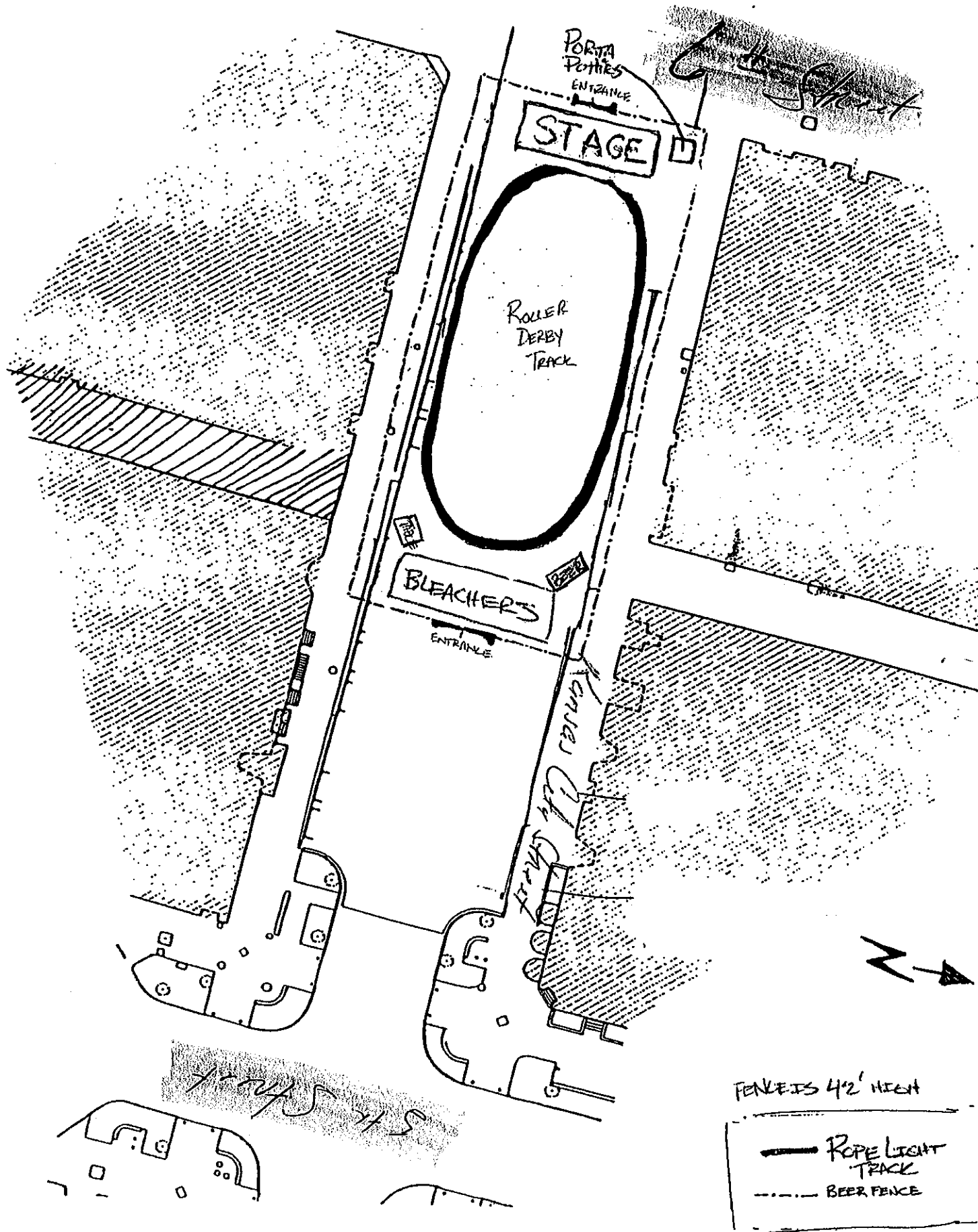
L/F MEETING DATE: _____

COUNCIL MEETING DATE: _____

COUNCIL APPROVED:

YES NO

DATE: _____



Event Schedule:

2pm: Street Closes, 5-7 volunteers arrive (Derby girls or bartenders/door people)

Set up stage, lighting, and connect fencing to buildings on west side only

3pm: Bud and Miller drop off beer to chill in super artice coolers.

MSS adds Ice and sets up signage and banners. Coolers of pop and water behind artice coolers.

Set up 2 10x10 changing tents northeast of event.

4pm: Bleachers are delivered from civic center/city

East side fencing is finished

430pm: Band arrives to set up and sound check. Electrical outlet on southwest corner

5pm: Bartenders and door volunteers get stations situated. We need 3 bartenders and 4 door people for wristbands, 2 per entrance. Need 2 cash drawers for beer garden.

6pm: Beer Garden Opens, first band plays for 1 hour

7pm: Roller Derby Bout. Beer garden continues. Narcoleptic Auto Pilot sets up.

8pm-10pm: Narcoleptic Auto Pilot sound check and performance. Beer garden continues. Main Street Square tears down tents and roller derby rope lighting.

10pm: End of event. Band gathers equipment off stage. Clear trash, bartenders box up leftover beer, remove signage and banners, remove east fencing for bleacher pick up, remove west fencing.

11pm: Civic center picks up bleachers, Bud and Miller pick up coolers, and flatbed truck is picked up . MSS places fencing, banners, signage, and tents into storage.

SPECIAL EVENT

Date Received _____
Date Issued _____

License No. _____

6pm - 10pm

Date(s) June 17; July 16; Aug 27

Uniform Alcoholic Beverage License Application

Mail this copy to Department of Revenue & Regulation, Special Tax Division 445 East Capitol Ave Pierre, SD 57501-3100.

A. Owner Name and Address John Sewarol
Destination Rapid City
604 Main St
Rapid City SD 57701
 Owner's Telephone #: 716-7979

B. Business Name and Address
Same
 Business Telephone #: 716-7979

C. Indicate the class of license being applied for (submit separate application for each class of license).
 Retail (on-sale) Liquor
 Retail (on-sale) Wine
 Package (off-sale) Liquor
 Retail (on-off sale) Malt Beverage
 Package (off-sale) Malt Beverage
 Other (please classify) FEER
 Transfer Fee \$150.00

Number of other Package Liquor Licenses held: _____
 Number of other On-sale Liquor Licenses held: _____
 Is this license in active use? Yes No
 Have you ever been convicted of a felony? Yes No

D. Legal description of licensed premise:
W 1/2 of Row Between 5th St +
6th Street on Kansas City Street
 Do you own or lease this property? (Check one)
 E. State Sales Tax Number: 1023-5666-117
 F. Remember to obtain a Federal Alcohol Stamp, for help call DATF at 1-800-937-8864.
 G. New license? Transfer? (\$150) _____ Re-insurance? _____

II. CERTIFICATE: The undersigned applicant certifies under the penalties of perjury, by law provided that all statements herein are true and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue & Regulation access to the licensed premises and records as provided in SDCL 35-2-2.1, and agrees this application shall constitute a contract between applicant and the State of South Dakota entitling the same or any peace officers to inspect the premises, books and records at any time for the purpose of enforcing the provisions of Title 35 SDCL, as amended.

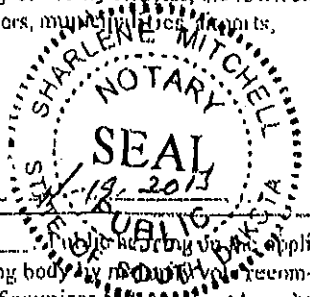
Signed this 16 day of MARCH Signature: [Signature]

I. Any Application required to be submitted to a local governing board must be signed in the presence of the city or county auditor, the town clerk or nonny public. This applies to ALL applications EXCEPT the following: distilled manufacturers, wholesalers, municipalities, counties, solicitors, dispensers, carriers, and transportation companies.

Place of business is located in a municipality? Yes No County: _____

This application was subscribed and sworn to before me this 16 day of March 2011

Approving Officer's Telephone number 894-4143 Signature: [Signature]



J. APPROVAL OF LOCAL GOVERNING BODY - Notice of hearing was published on 3-26-11 and the application was held 3-16-11 not less than SEVEN (7) days after official publication. The governing body by resolution recommends the approval and granting of this license and certifies that requirements as to location and suitability of premises and applicant have been reviewed and conform to the requirements of local and South Dakota law.

Application approved for Sunday on-sale operation? Yes No
 Are real property taxes paid to date? Yes No
 Eligible for video lottery?
 Number of video lottery terminals on licensed premise: 0

Amount of fee collected with application \$ 150
 Amount of fee retained \$ 150
 Forwarded with application \$ 0

For Local Government Use
 (Seal) [Signature]
 If disapproved, endorse reason thereon and return to applicant

Transferred (State Use)
 From: _____ Date: _____
 Sales tax approval _____
 STATE LIQUOR AUTHORITY: APPROVAL _____ REVIEW _____

Company supplement information
(For corporate/partnership/LP/LLC applicants)

If a supplement unchanged from last year check this box and sign below.

Affidavit

State of South Dakota)
County of)

We, the undersigned, being first duly sworn upon oath, supply the following information:

Name of corporation/partnership/L.P./LLC Johnson Rapid City Economic Development Cor
Address of office and principal place of business of corporation/partnership/LP/LLC 606 Main St Rapid City SD
Date of incorporation 8/15/2008
Date of last report filed with Secretary of State 8/23/2010
Date of annual meeting 3/2011
Are all managing officers of this corporation/partnership/L.P./LLC of good moral character? yes
Have any of the managing officers of this corporation/partnership/L.P./LLC ever been convicted of a felony? no

Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP or LLC:

Name	Office	Address	Occupation

Name, address and occupation of each of the directors of the corporation:

Name	Address	Occupation
<u>Dan Sandifer</u>	<u>606 Main St Rapid City SD 57701</u>	<u>business owner</u>
<u>Ray Hillenkamp</u>	<u>606 Main St Rapid City SD 57701</u>	<u>business owner</u>

Name and address of each of the stockholders and number of shares owned or held by each:

Name	Address	Occupation

Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other retail, liquor outlet

Name	Type of License of Financial Interest and Address of Retail Outlet

Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc?

Johnson Rapid City office at 606 Main St Rapid City SD 57701

With signature the applicant agrees to the following:

That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue & Regulation, relating to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of and regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by any stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof.

We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form is true and correct in every respect and there exists no financial arrangement concerning this or any other alcoholic beverage license than that expressly set forth above. If such stock is to be transferred we ask for approval of such voluntary stock transfer.

Signature of Author/Officer/Director/Partner

[Handwritten Signature]

Subscribed and sworn to before me this 16 of March 2011 Pennington County, State of South Dakota.

My commission expires 19-2013

[Notary Signature]
(NOTARY PUBLIC)

