



**OUTDOOR
COMMUNITY EVENT
APPLICATION**

1001 EAST 9TH STREET, BUILDING A

P.O. BOX 11130

RENO, NEVADA 89520-0027

(775) 328-3733

www.washoecounty.us

OUTDOOR COMMUNITY EVENT GENERAL PROCEDURES

Definition: "Outdoor community event" means an assembly of more than 100 and less than 1,000 persons on any one day of the event gathered together for any purpose, at any location, other than a permanent building or permanent installation that has been constructed for and will accommodate the number of persons gathered therein.

1. **APPLICATION.** Complete the form in ink. This application is for events with attendance over 100 and less than 1,000 persons on any one day the event. There is a \$50.00 nonrefundable application fee. Applications will be returned if the application fee is not included. Five (5) copies of the application and one electronic pdf and other required forms must be turned in at least **90 days** before the event.
2. **APPLICATION DEADLINE.** All applications must be submitted at least **90 days** in advance of the event.
3. **LICENSING/PERMIT REQUIREMENTS.** This application shall suffice for the outdoor community event license application and the administrative permit application. No additional fees are required for filing the administrative permit application, if required. An outdoor community event license is required on any public or private lands in the unincorporated area of Washoe County except for lands managed by the Washoe County Parks Department and state, trust, tribal, and federal lands. There are special application processes, depending on the size of the event:
 - a. *Events with between 100 and 299 people on any one day.* These events require an outdoor community event license. The Director of Community Services Department or the Board of Adjustment shall approve, approve with conditions, or deny the license.
 - b. *Events with between 300 and 999 people on any one day.* These events shall obtain both an outdoor community event license and an administrative permit from Washoe County Community Services Department. The Director of Community Services or the Board of Adjustment shall approve, approve with conditions, or deny the license and permit.
4. **FEES.** The license fee for an outdoor community event is \$350.00 per day plus any booth fees if applicable. If the event is a carnival, circus or tent show the daily license fee is \$300, to a maximum amount of \$4200, plus booth fees if applicable.

BOOTH FEES			
1-4 booths	\$ 25	50-59 booths	\$ 30
5-9 booths	\$ 50	60-69 booths	\$ 350
10-19 booths	\$ 100	70-79 booths	\$ 400
20-29 booths	\$ 150	80-89 booths	\$ 45
30-39 booths	\$ 200	90-100 booths	\$ 500
40-49 booths	\$ 250	More than 100 booths	\$ 500 plus \$5 for each booth in excess of 100

5. **INVESTIGATION.** The sheriff's office shall conduct a criminal history background check of the applicants (to include partners and corporate officers). Fingerprint impressions may be taken and submitted to the Nevada central repository for criminal history records and the Federal Bureau of Investigation. Fingerprint impressions will be taken after the application is turned in and deemed complete.
6. **CONDITIONS.** All conditions imposed by the Director or the Board of Adjustment for the outdoor community event license and/or the administrative permit must be met before the license will be issued.
7. **APPROVALS.** The application will be reviewed by the appropriate agencies. The application will be approved by the Director of Community Services or the Board of Adjustment.
8. **ISSUANCE OF LICENSE.** The outdoor community event license will be issued after all fees have been paid and all necessary approvals have been received. The event license must be displayed prominently at the event and must be available for inspection. This license is valid only for the event authorized and not for any other event.

OUTDOOR COMMUNITY EVENT APPLICATION

(Requires a non-refundable \$50 application fee)

Application date: February 3, 2020

Applicant Information

Applicant's name: League to Save Lake Tahoe

Mailing address: 2608 Lake Tahoe Boulevard, South Lake Tahoe, CA 96150

Phone: 530.541.5388 (Business) _____ (Home) _____ (Cell)

All applicants, to include corporate officers or partners must complete a personal history form

Is the applicant a(n): Corporation Partnership Individual Registered 501c3

If a corporation or a partnership, list corporate officers or partners:

Name	Address	Title

Event Information

Name of Event: League to Save Lake Tahoe Annual Fashion Show and Luncheon

Date(s) of Event: Saturday, August 7, 2021 Hours of operation: 11 am - 2 pm

Location of Event: 1047 Lakeshore Boulevard, Incline Village, NV

Assessor Parcel Number(s): _____

Description of Event: Benefit fashion show and luncheon in support of the League to Save Lake Tahoe

Name of the designated event representative who will be on-site during the event and who has authority to bind the applicant: Kristin Keane and/or Meghan McGowan

Will an admission fee be charged for your event? Yes No

If yes, amount and type of fee(s): Charitable donations for seating \$600 - \$2000 each depending on seating

When will fee be collected? Pre-sales At entrance

Approximate number of participants and other persons: 400 guests, 150 support persons

Approximate number of customers and spectators: 400

Approximate maximum number of persons on any one day of the event: 550

Will food and/or beverages be served? Yes No

(all food and beverage vendors must have the appropriate Washoe County Health District permits)

Will alcoholic beverages be served? Yes No

(all intoxicating liquor vendors must be individually licensed with Washoe County Business License)

Will there be live music? Yes No

Insurer Information

(see Insurance, Hold Harmless & Indemnification Requirements)

Name of Insurer: Nonprofit Insurance Alliance of California Policy number: [REDACTED]

Attach copy of insurance policy specific to event (must be furnished prior to the issuance of the license)

Address of Insurer: c/o Vantreo Insurance Brokerage, 100 Stoney Point Road, Santa Rosa, CA 95401
Street City State Zip code

Limits of liability: See attached declaration pages

History of Similar Events

(attach additional sheets if needed)

Describe the history of all similar events conducted, operated or promoted by the applicant. Include, at a minimum, event names, types, dates, locations, permits or licenses issued.

The fashion show and luncheon has been occurring since 1969 at various private properties within the Tahoe Basin, primarily in California; always on the first Saturday in August. We obtained a community event permit from Washoe County for the calendar year 2018 and 2019 for the same event held at 1047 Lakeshore Boulevard, Incline Village, NV.

Vendor List

(attach additional sheets if needed)

Name of Vendor

Type of product

n/a

Multiple horizontal lines for data entry.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/24/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


PRODUCER Vantreo Insurance Brokerage 100 Stony Point Rd, Suite 160 Santa Rosa CA 95401	CONTACT NAME: Rebecca Burns PHONE (A/C, No, Ext): 707-546-2300 E-MAIL ADDRESS: certs@vantreo.com	FAX (A/C, No): 707-546-2915
	INSURER(S) AFFORDING COVERAGE	
INSURED League to Save Lake Tahoe 2608 Lake Tahoe Blvd. So. Lake Tahoe CA 96158	INSURER A: QBE Insurance Corporation	
	INSURER B: State Compensation Insurance Fund - SCIF	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 1845954552 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		2020-14398	10/1/2020	10/1/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 20,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Liquor Liability \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED <input checked="" type="checkbox"/> AUTOS ONLY HIRED <input type="checkbox"/> AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED <input type="checkbox"/> AUTOS ONLY	N	N	2020-14398	10/1/2020	10/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			2020-14398-UMB	10/1/2020	10/1/2021	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	9072866-2021	10/1/2020	10/1/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Annual Fashion Show and Luncheon
 Washoe County, NV, its officers, agents, employees and volunteers are additional insured per endorsement attached.

CERTIFICATE HOLDER Washoe County, Nevada 1001 East Ninth Street Incline Village NV	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

See attachments
(2)

**OUTDOOR COMMUNITY EVENT
AFFIDAVIT OF PROPERTY OWNERSHIP
and/or PERMISSION TO CONDUCT EVENT**

STATE OF NEVADA)
) SS:
COUNTY OF WASHOE)

Kern Schumacher, on behalf of KWS NV Residential, LLC being duly sworn, depose, and say that I am an owner* of property involved in this outdoor community event and I do hereby:

(check appropriate box)


Affirm that I am an applicant for the below named proposed outdoor community event and also own the property or properties on which the event will be conducted

OR

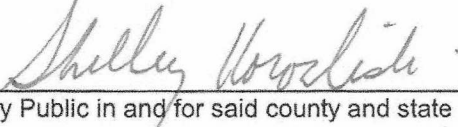
Affirm that I give permission to the applicants for the below named proposed outdoor community event to conduct the event on the following property or properties which I own:

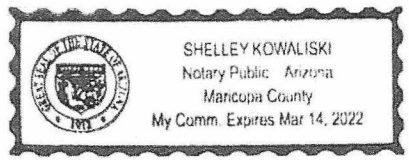
Assessor Parcel Number(s): 130 - 230 - 16; 130 - 230 - 17; 130 - 230 - 18

Proposed Outdoor Community Event: League to Save Lake Tahoe Annual Fashion Show and Luncheon

Signed 

Subscribed and sworn to before me this 19th day of February, 2021


Notary Public in and for said county and state



My commission expires: 3/14/2022

*Owner refers to the following. Please mark the appropriate box.

- OWNER/JOINT OWNER
- CORPORATE OFFICER/PARTNER
- POWER OF ATTORNEY (Provide copy of Power of Attorney)
- AGENT (Notarized letter from property owner giving legal authority to agent)
- LETTER FROM GOVERNMENT AGENCY WITH STEWARDSHIP

OUTDOOR COMMUNITY EVENT STATEMENT OF ASSETS

As of December 31, 2019

(Describe fully and indicate assets pledged)
(If additional space is required, attached supporting pages or documents)

Current Assets

Cash on hand	_____	\$ 550
Cash in safe deposit box	_____	\$ _____
Cash in <u>El Dorado Savings Bank, Tahoe Valley "Y", South Lake Tahoe, CA</u>	_____	\$ 1,141,221
	Location of Box	
Cash in _____	Name, Bank and Branch	\$ _____
	Name, Bank and Branch	
Accounts and notes receivable (describe nature of receivable and when due)		
Registration refund	_____	\$ 25
	_____	\$ _____
Other current assets		
Inventory	_____	\$ 84,726
Prepaid Expenses	_____	\$ 39,381

Investments

Stocks, Bonds, etc (Market value) (If close held corporation, furnish current balance sheet)	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
Investments, other than stocks and bonds		
Short-term investments	_____	\$ 1,382,937
Endowment and long-term investments	_____	\$ 1,584,064
	_____	\$ _____

Fixed assets

Real estate (Give location, description and fair value of each parcel)		
Property and Equipment	_____	\$ 586,880
	_____	\$ _____
	_____	\$ _____

Other assets

Automobiles and other personal property	_____	\$ _____
	_____	\$ _____
	_____	\$ _____

Total Assets \$ 4,819,784

Meghan McGowan
Print Name

Meghan McGowan
Signature

2/24/2021
Date

**OUTDOOR COMMUNITY EVENT
STATEMENT OF LIABILITIES**

As of December 31, 2019

(Describe fully, indicate secured liabilities)
(If additional space is required, attached supporting pages or documents)

Current liabilities

Notes payable _____ \$ _____
Name, Bank and Branch _____
Due _____ How secured _____

Notes payable _____ \$ _____
Name, Bank and Branch _____
Due _____ How secured _____

Notes payable _____ \$ _____
Name, Bank and Branch _____
Due _____ How secured _____

Notes payable _____ \$ _____
Name, Bank and Branch _____
Due _____ How secured _____

Other notes payable (indicate name, address and how secured)

_____ \$ _____

Accounts payable \$ 52,715
Liability for Federal Income Tax (delinquent) \$ _____
Provision for current year's Federal Income Tax \$ _____
Provisions for other current taxes \$ _____
Liability for other delinquent taxes \$ _____

Mortgages payable (List each mortgage separately, how secured, and monthly payments due thereon)

_____ \$ _____

Other liabilities
Accrued vacation payable \$ 31,833
Gift certs sold and unused \$ 1,182

_____ \$ _____
Total Liabilities \$ 85,730

Contingent liabilities (describe)

Meghan McGowan
Print Name

Meghan McGowan
Signature

2/24/2021
Date

**OUTDOOR COMMUNITY EVENT
PERSONAL HISTORY**

(complete a separate form for each applicant, to include corporate officers and partners)

Name in full: Darcie Goodman Collins
First Middle Last

List ALL other names you have been known by: Darcie Goodman

Residence address: 1307 Mount Diablo Circle South Lake Tahoe CA 96150
Street City State Zip Code

Residence phone: 805-637-6995 Business phone: 530-541-5388

Name of your present business or employer: League to Save Lake Tahoe

Business address: 2608 Lake Tahoe Boulevard South Lake Tahoe CA 96150
Street City State Zip Code

Type of business: Non-profit Position: Chief Executive Officer

How long engaged in this business: 9 years

Date of birth: [redacted] Age: [redacted] Place of birth: [redacted]

Social Security Number: [redacted]

Driver's license number: [redacted] State: [redacted]

List cities in which you have lived during the last ten years:

Dates From and To	City	State
2009 - 2012	Sausalito	CA
2008	San Francisco	CA

I, the undersigned, have answered all questions in this application and to the best of my knowledge all answers are true and correct. I further understand that disclosure of any false, misleading or incorrect answers could result in the denial of the license. The filing of the application does not authorize the conducting of any event for which a license is required, and any carrying on of such event before a license is issued may also be grounds for denial of a license.

Darcie Goodman Collins
Printed name of applicant
3.16.2021
Date

[Signature]
Signature of applicant

OUTDOOR COMMUNITY EVENT
CONTRIBUTORS OR INVESTORS LIST

(List the names and addresses of any person contributing, investing or
having an expected financial interest greater than \$500 in producing the event)
(attach additional sheets if needed)

Name	Address
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ANCILLARY SERVICES OR ACTIVITIES LIST

(List the names and addresses of any person expected to provide, for consideration,
services or activities ancillary to or in conjunction with the event)
(attach additional sheets if needed)

Name	Address
------	---------

Roundabout Catering	631 Dunn Circle, Sparks, NV 89431
Ideas event Styling	71 Stevenson Street, #400, San Francisco, CA. 94105
Alert Security Asset Protection	4600 Keitzke Lane, Building M. Suite 246. Reno, NV 89502
CartBarn	305 Edison Way, Reno, NV. 89502
North Tahoe Executive Shuttle	PO Box 320. Tahoe City, CA. 96145
North Tahoe Fire Protection District	866 Oriole Way, Incline Village, NV. 89451
Tom Delaney Orchestra	4787 Reno View Court, Reno NV. 89503
Sani-Hut	PO Box 7455. Reno. NV. 89510
Incline Village Waste Management	1076 Tahoe Boulevard, Incline Village, NV. 89451
High Sierra Gardens	866 Tahoe Boulevard, Incline Village, NV 89451
Celebrations Party Rentals	5350 Capital Ct #1111, Reno, NV 89502

**OUTDOOR COMMUNITY EVENT
RELEASE OF CLAIMS**

(complete a separate form for each applicant, to include corporate officers and partners)

The undersigned has filed with Washoe County Business License an application for outdoor community event license. In consideration of the assurance by the Board of County Commissioners that no vote on said application will be taken except after a deliberate, intensive and thorough investigation of the undersigned, including but not limited to criminal history background, associates and finances, the undersigned does for himself, his heirs, executors, administrators, successors and assigns, hereby release, remise and forever discharge the County of Washoe, Washoe County Sheriff's Office, Washoe County Commission, and Washoe County Business License from any and all manner of actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which the undersigned ever had, now has or may have, or claim to have against any or all of said entities or individuals arising out of or by reason of the processing or investigation of or other action relating to the undersigned application.

AUTHORIZATION TO RELEASE INFORMATION

As an applicant for an outdoor community event license with Washoe County Business License, I am required to furnish information for use in determining my qualifications. In this connection, I authorize release of any and all information of a confidential or privileged nature.

I hereby release you, your organization and others from liability or damage, which may result from furnishing the information requested. This release will expire 180 days after the date signed.

I, the undersigned, have read this release and understand all its terms; I execute it voluntarily and with full knowledge of its significance.

IN WITNESS WHEREOF, I have executed this release at South Lake Tahoe, CA on the 24th day of Feb., 2021.

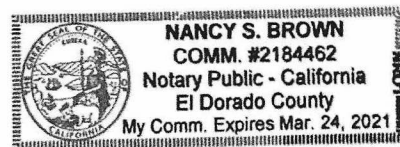
Darcie Collins
Printed name of applicant

Darcie Collins
Signature of applicant

Subscribed and sworn to before me this 24TH day of FEBRUARY, 2021

Nancy S. Brown
Notary Public in and for said county and state

My commission expires: 3/24/21



**OUTDOOR COMMUNITY EVENT
INSURANCE, HOLD HARMLESS AND INDEMNIFICATION REQUIREMENTS**

Pursuant to Washoe County Code §25.303, any applicant for a Washoe County outdoor community business license must ensure the following requirements are met to the satisfaction of the Washoe County Risk Management Division before the outdoor festival business license may be issued.

INDEMNIFICATION & HOLD HARMLESS

As respects acts, errors or omissions relating to the event, APPLICANT agrees to indemnify and hold harmless COUNTY, its officers, agents, employees, and volunteers from and against any and all claims, demands, defense costs, liability or consequential damages of any kind or nature arising directly or indirectly out of the event or any activity leading up to, during, or following the event, excepting those which arise out of the sole negligence of the COUNTY.

APPLICANT further agrees to defend COUNTY and assume all costs, expenses and liabilities of any nature to which COUNTY may be subjected as a result of any claim, demand, action or cause of action arising out of the negligent acts, errors or omissions of APPLICANT or its agents concerning the event.

INSURANCE REQUIREMENTS

COUNTY requires that APPLICANT purchase General Liability Insurance as described below against claims for injuries to persons or damages to property which may arise from or in connection with the event by APPLICANT, its agents, representatives, or employees. The cost of all such insurance shall be borne by APPLICANT.

APPLICANT shall maintain coverage and limits no less than \$1,000,000 combined single limit per occurrence for bodily injury, personal injury and property damage. If Commercial General Liability Insurance or other form with a general aggregate limit is used, the general aggregate limit shall be increased to equal twice the required occurrence limit, to apply separately to this event.

Any deductibles or self-insured retentions must be declared to and approved by the COUNTY Risk Management Division prior to the event. COUNTY reserves the right to request additional documentation, financial or otherwise prior to giving its approval of the deductibles and self-insured retention and prior to issuing the license. The COUNTY Risk Manager prior to the change taking effect must approve any changes to the deductibles or self-insured retentions.

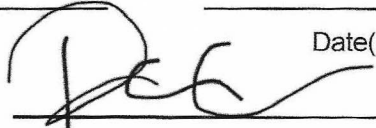
APPLICANT shall provide COUNTY with a certificate of insurance that identifies COUNTY, its officers, agents, employees and volunteers as additional insured's.

NOTE: A certificate of insurance complying with the provisions stated above is not required with the outdoor community business license application, but must be furnished prior to the issuance of the license.

I hereby agree to the all of the provisions stated above:

League to Save Lake Tahoe Annual Fashion SHow and Luncheon

Saturday, August 7, 2021

Name of Event	Date(s) of Event
Darcie Collins	

Applicant's name (printed)

Applicant's signature

Date:

3.16.21



AllPaid
7820 Innovation Boulevard Suite 250
Indianapolis, IN 46278
24hr. Customer Service #: 888-604-7888

Records Fees Payment Confirmation (Ref #: 31021443)

PLC: Washoe County Sheriffs Office
8777 911 Parr Blvd
Reno, Nevada 89506
For: Records Fees

Date: 03/15/2021 12:20 EDT

TRANSACTION INFORMATION

Name: Darcie Collins
Permit Number: 337692
Payment Type: Business License
Clerk Initials: Jr4761

Transaction Reference #: 31021443
Transaction Date/Time: 03/15/2021 12:20 EDT

Notes:

BILLING INFORMATION

Name: D Goodman Collins
Address: Msr
Msr
City, State Zip: Msr, AI 96150
Phone #: (000)000-0000
Card #: xxxx-xxxx-xxxx-6843

PAYMENT INFORMATION

Approval #: 00500G
Payment Amount: \$75.25
Service Fee: \$3.75
Total Amount: \$79.00

The service fee is not refundable.

ATTENTION CARDHOLDER

If you have questions about the processing of your payment, please call AllPaid at 888-604-7888.

Thank you for using AllPaid

BUSINESS LICENSE FINGERPRINT WORKSHEET

Liquor
 Locksmith
 Massage
 Pawnshop
 Other BL

Name of Business: League to Save Lake Tahoe
 Business Address: 2608 ~~1000-10000~~ Lake Tahoe Blvd Lake Tahoe CA 96150
Street Address
City
Zip Code

NOTE TO APPLICANT:

Signatures of each owner, officer, or director on this worksheet constitutes that person's written permission authorizing the Washoe County Sheriff's Office to forward their fingerprint impressions to the appropriate law enforcement agency for a criminal history background investigation.

**Records Division:
Sheriff's Office:**

Please retain a copy as proof of compliance with Washoe County Code Section 25.023(2).

The following people need to have fingerprints taken:

Owner, officer and/or director	Title	Date fingerprints taken	Employee's initials
<u>Dorcie Collins</u>	<u>CEO</u>	<u>3/15/21</u>	<u>[Signature]</u>
Print Name			
<u>[Signature]</u>			
Signature			
Print Name			
Signature			
Print Name			
Signature			
Print Name			
Signature			

APPLICANT:

Please return this form back to Washoe County Business License once all the fingerprints have been taken.

You will need to contact the Washoe County Sheriff's Office, Records Division, to determine appropriate fees for fingerprinting and any charges levied by the State of Nevada or the Federal Bureau of Investigation to complete the criminal history check [WCC 25.023(3)].

Reno Office
 911 Parr Blvd.
 (775) 328-3017

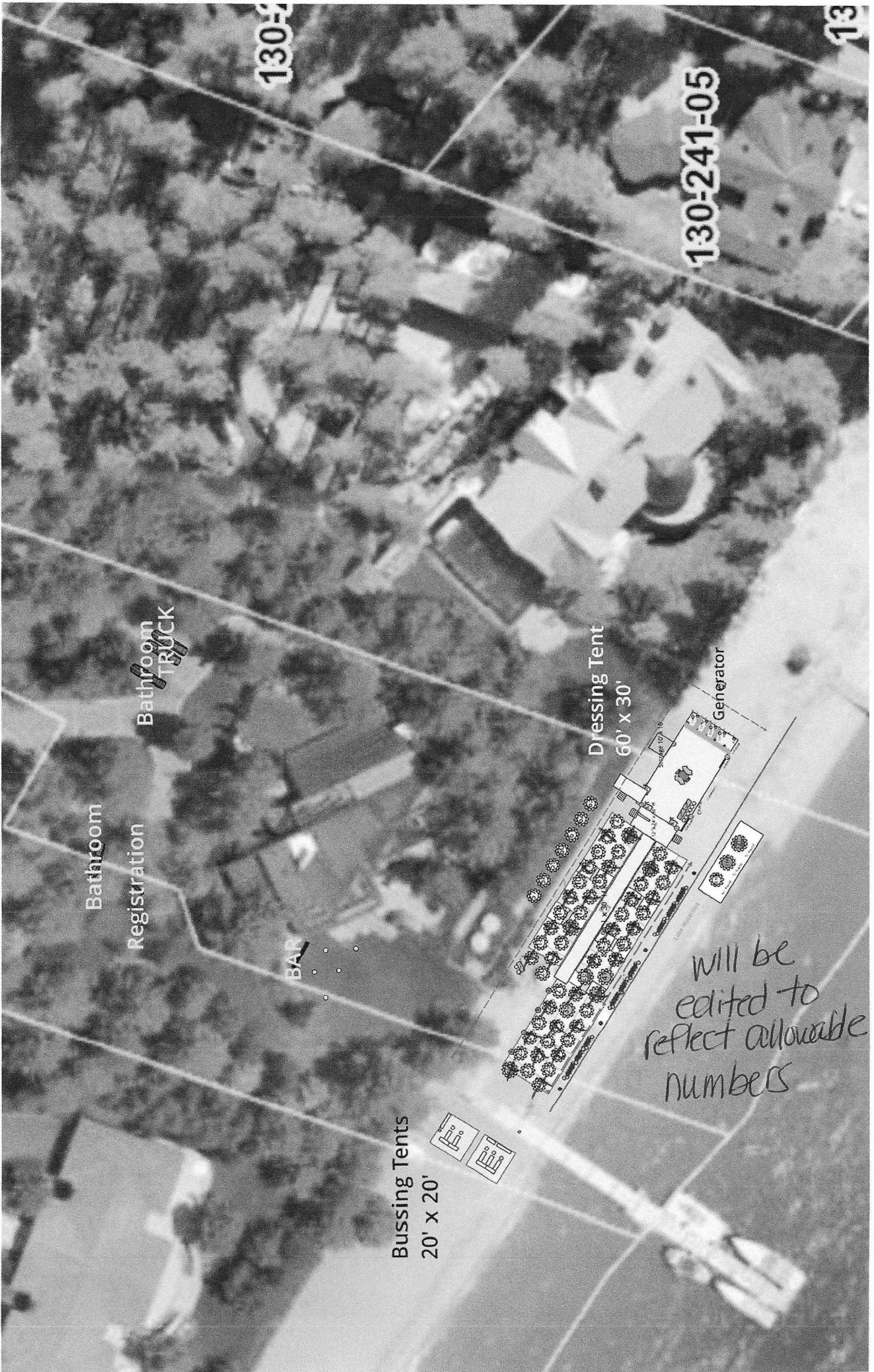
Incline Office
 625 Mount Rose Hwy.
 (775) 832-4107

**League to Save Lake Tahoe Permit Application
Index of Documents:**

- A. 1-3 Site Map
- A. 4 - 5 Detailed Plan for Security, Fire Protection, Medical, Water
& Sanitation, Communication and Clean-up
- A. 6 – 7 Security Contract
- A. 8 Restroom Facilities Order, Sani-Hut
- A. 9 COI, Roundabout Catering Co.
- A. 10 City of Reno Business License, Roundabout Catering
- A. 11 WCHD, Health Permit to Operate, Roundabout Catering
- A. 12 Transportation Plan
- A. 13 Parking Map at Sierra Nevada College
- A. 14 Shuttle Order with passenger capacity
- A. 15 Shuttle Route Map



Will be edited to reflect allowable numbers



130-9

13

130-241-05

Bathroom

Registration

Bathroom TRUCK

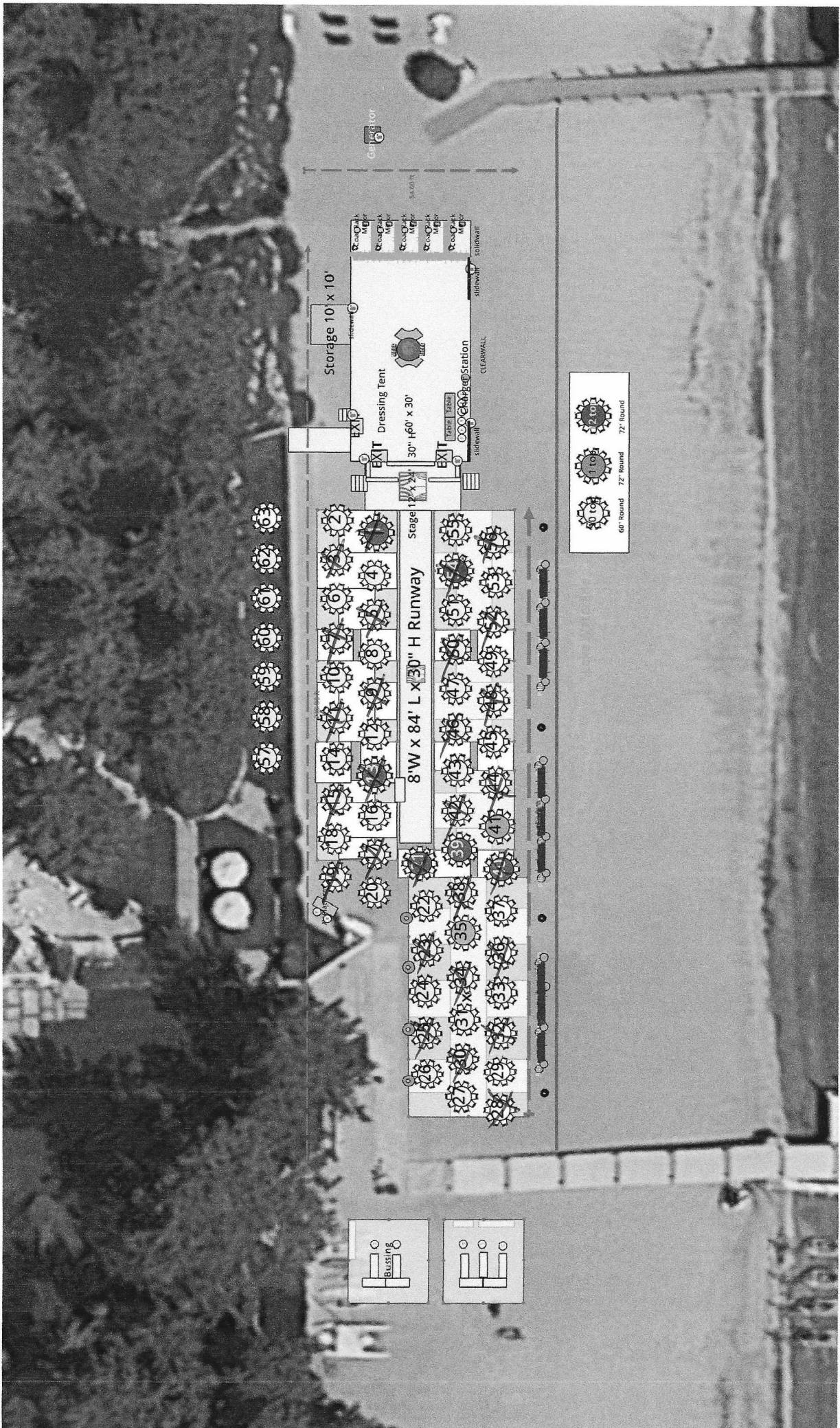
BAR

Dressing Tent
60' x 30'

Generator

Bussing Tents
20' x 20'

Will be edited to reflect allowable numbers



League to Save Lake Tahoe Annual Fashion Show and Luncheon
1047 Lakeshore Boulevard, Incline Village, NV
Saturday, August 7, 2021
Prepared by: Kristin Keane

Security, Fire Protection and Medical Services Plan

The League to Save Lake Tahoe retains Alert Security Asset Protection to assist with security on-site. There are 4 security personnel on site from 10:00 am until 3:00 pm. Security personnel will be assigned to site-specific areas including front gate, tent, beach and lawn.

North Tahoe Fire Protection District Personnel are on-call with on-site ambulance stand-by arranged from 10:30 am until 2:30 pm., although not required for this event per Brittany Dayton.

Tents and structures are in compliance with current fire code and contain required fire extinguishers and clearly marked exits.

Attachments: Alert Security Agreement, NTFPD Invoice for Ambulance Stand-by, Site Plan

Water Supply and Sanitation Facilities

The League has rented 2 handicap restroom facilities, 1 Executive 33' bathroom trailer with direct line to sewer and water, 1 Executive 19' bathroom trailer with stand-by pump truck and 4 bathroom attendants.

Roundabout Catering has hand-washing facilities in the catering tents, which are indicated on the site-map.

Per Nick Flores, no permit required for food and sanitation because it is a closed event, by invitation only.

Attachments: Sani-hut Invoice, site map

Communication System

The event will have an audio system with 2 microphones that are used throughout the program on August 1.

Clean-up and Rubbish Removal

Two 6-foot dumpsters with lids and locks will be located on site for rubbish. Dumpsters are delivered on July 31 and collected August 3.

The League to Save Lake Tahoe is dedicated to protecting and restoring the environment within the Tahoe Basin. Our organization's charter demands we leave the environment better than how we found it. In addition, our host is exceedingly generous to allow us to use his property year after year and if we wish to be invited back, we need to make certain we are cleaning the venue and returning it to the state to which we arrived.

Attachment: email confirmation of dumpster rental from Waste Management, Incline Village



**SECURITY SERVICES
AGREEMENT ("Agreement")**

Client's Name: League to Save Lake Tahoe
Telephone: 775-348-8472
Address: 2608 Lake Tahoe Blvd.
City: South Lake Tahoe ST: CA ZIP: 96150

ASAP Office: Reno (License #1492)
Telephone: 775-337-1616
Address: 4600 Kietzke Lane, Suite M 246
City: Reno ST: NV ZIP: 89502

Agreement dated as of February 25th 2021, between – League to Save Lake Tahoe –having an office at 2608 Lake Tahoe Blvd., South Lake Tahoe CA 96150 (hereinafter called "Client") and Cero's, LLC dba ALERT SECURITY ASSET PROTECTION dba ALERT GUARD SERVICES, (hereby known as ALERT SECURITY), The parties agree as follows:

1. SERVICES: Alert Security will furnish client with security personnel (hereinafter "Personnel") and render services at locations and during hours set forth herein and hereafter agreed in a writing executed by Alert Security and Client.

Location Hours To Commence On (Date and Time)

1047 Lakeshore Blvd, Incline 10am to 3pm 8/4/2021

4 Security Officer to assist with Oscar de la Renta fashion show

2. RATES: Client shall pay Alert Security the following hourly rates, plus all applicable sales, use and/or similar taxes. These rates do not apply to coverage of labor disputes or similar emergency situations, which Alert Security will endeavor to provide at mutually agreed upon rates.

Personnel/Equipment	Standard Base Rate/Overtime Rate
Security Officer	\$30.00 per hour

Holiday rates shall apply on each legally declared national, state, or local holiday. Holiday rates will be as follows:

Holiday	Rates
<u>New Year's Day</u>	<u>N/A</u>
<u>MLK Day</u>	<u>N/A</u>
<u>Memorial Day</u>	<u>N/A</u>
<u>Independence Day</u>	<u>N/A</u>
<u>Thanksgiving Day</u>	<u>N/A</u>
<u>Christmas Day</u>	<u>N/A</u>
<u>Labor Day</u>	<u>N/A</u>

The above rates are effective until December 31st, 2021, and are subject to adjustment by Alert Security on thirty days prior notice to comply with any change in any law, regulation, ruling or collective bargaining agreement causing a change in work hours, wage rates, working conditions or other costs to Alert Security.

3. INVOICES: Invoices will be submitted weekly and are payable on receipt at the address on the invoice. A late charge of 10% per month will be added to balances not paid within thirty days following receipt of invoice. Client must notify Alert Security in writing of any dispute regarding the amount of an invoice within seven days from the invoice date, otherwise all disputes and defenses will be deemed waived. Client agrees to pay Alert Security's reasonable attorney's fees and other collection costs.

4. PERSONNEL: (a) Personnel supplied by Alert Security are its employees and not Client's. Alert Security is responsible for social security, unemployment and similar taxes applicable to its employees.

(b) Alert Security complies with Executive Order 11246, as amended; Section 503 of the Rehabilitation act of 1973, as amended; Section 402 of the Vietnam Era Veterans' Readjustment

Assistance Act of 1974 and related regulations. Alert Security's employees will be assigned without regard to race, age, color, creed, sex, national origin, disabilities that do not impair job performance, veteran status, or on any bases prohibited by law.

(c) Client may reasonably disapprove any Personnel assigned, provided such exercise is not in violation of law. If any Personnel is removed at Client's request, Client agrees to indemnify and hold Alert Security harmless from all claims, demands, liabilities, judgments, losses, suits, damages, fines, penalties and expenses including reasonable attorney's fees and defense costs (hereinafter collectively "Claims") that may arise therefrom.

(d) If Client requests Personnel to operate any vehicle other than one supplied by Alert Security, or are assigned or assume duties other than those agreed upon in writing by Alert Security, Client agrees to defend, indemnify and hold Alert Security harmless from any Claims, which may arise, or result therefrom, including but not limited to Claims arising from the negligence of Alert Security, its agents or employees.

5. LIABILITY LIMITATION AND INDEMNITIES: (a) Client agrees that Alert Security is not an insurer and that the amounts payable hereunder are based upon the value of services offered and not the value of client's interests being protected or the property of client or of others located on Client's premises. Accordingly, Alert Security undertakes no liability to client and makes no representation, express or implied, that its services will prevent occurrences or their consequences that result in loss or damage.

(b) In no event shall Alert Security be liable to Client for any Claim other than one which arises during the performance of services under this Agreement and is caused by the negligence of Alert Security, its employees or agents while acting within the scope of their duties and authority. In no event shall Alert Security be liable for any Claim caused in whole or in part by acts or omissions of Client or third parties or their respective employees or agents, or for consequential or incidental damages or loss of profits.

(c) In the event of any Claim caused by the negligence of Alert Security, Client agrees that Alert Security's liability shall be limited to a maximum amount not to exceed the lesser of (I) the amount invoiced to and paid by Client (but not less than one thousand dollars provided Client's damages exceed such amount) for services rendered within the 12-month period immediately preceding the date of the occurrence giving rise to the Claim or (II) \$100,000.

(d) The services provided under this Agreement are solely for the benefit of Client and neither this Agreement nor any services rendered hereunder confer any rights on any other party as a third-party beneficiary, or otherwise.

(e) Client agrees to indemnify and hold Alert Security harmless from and against any Claims made by a third party(s), including, but not limited to, injury, death or damage or loss of

A-6

property, arising from Alert Security's negligent acts or omissions, including those relating to the hiring, training, supervision or retention of Personnel by Alert Security, its agents or employees.

(f) Client agrees that Alert Security shall not be liable for failure to perform this Agreement due to any "Act of God" or cause beyond Alert Security's reasonable economic control, nor in any case for any consequential, incidental, or special damages or loss of profits.

(g) Client hereby waives any and all rights of subrogation that any insurer of Client may have against Alert Security.

(h) Where Alert Security is entitled to indemnification, Alert Security shall have the right to tender defense of the Claim to Client.

6. INSURANCE: In consideration of the risk apportionment provided in this Agreement, to the extent a Claim exceeds the amount specified in the paragraph entitled "Liability Limitation and Indemnities" (such excess being hereinafter referred to as "Excess Loss or Damage to its premises, business and property and others' property on Client's premises occurring as a result of fire, theft or other casualty) and Client agrees that it will maintain Insurance to fully protect Client against such Excess Loss or Damage. Accordingly, Client waives its right of recovery against Alert Security for such Excess Loss or Damage, however caused.

7. HIRING: Client shall not, nor shall any contractor of client, for a period of one year after termination of this Agreement, employ as security personnel any Personnel used by Alert Security in the performance of this Agreement.

Recognizing the costs incurred and expertise dedicated by Alert Security in selecting, recruiting and training its personnel, Client agrees to pay Alert Security twenty five hundred dollars as liquidated damages for each Personnel employed by Client or its contractor within one year after termination of this Agreement.

8. TERM: This Agreement shall continue in effect until either party gives the other party 30 days prior written notice, specifying the date of termination.

9. DEFAULT: Alert Security may terminate this Agreement upon 48 hours prior written notice and exercise such other rights and remedies as permitted by law if Client fails to pay any amount when due or if any proceeding is commenced or threatened by or against Client under the Bankruptcy Code or any other Debtor's Law or if the Client makes or threatens to make an assignment for the benefit of creditors, or Client breaches any of the other terms or obligations contained in this Agreement.

HAZARDOUS OR INEFFECTIVE CONDITIONS/MATERIALS:

(a) Client agrees that it will comply with OSHA Hazard Communication Standards and will indemnify and hold Alert Security harmless from all Claims, including injuries to Alert Security's employees arising out of a condition existing at Client's premises, or Client's violation of any safety or health-related law.

(b) Client further agrees to: (I) make available to Alert Security the Material Safety Data Sheet for each hazardous chemical to which Alert Security's Personnel may be exposed at Client's premises; (II) inform Alert Security of (A) precautionary measures that need to be taken to protect Alert Security's Personnel and (B) Client's hazardous material labeling system.

11. LIMITATION ON CLAIMS AND ACTIONS: Client shall give notice to Alert Security of any Claim of Client or potential Claim of Client arising out of or relating to this Agreement within 30 days following the date of the occurrence giving rise to such Claim or potential Claim.

No action to recover any Claim of Client shall be instituted or maintained against Alert Security by Client unless notice of such Claim shall have been given by Client to Alert Security in the manner and form set forth herein.

Unless specifically prohibited by law, no action to recover for any Claim of Client shall be instituted or maintained by Client against Alert Security unless said action shall have been instituted not later than 12 months following the date of the occurrence giving rise to such Claim.

12. NON-WAIVER: Failure of Alert Security to enforce any provision of this Agreement, or any of its rights, or to exercise any election herein provided, shall not be considered a waiver of such provision or election or in any way affect the validity of this Agreement. The exercise by Alert Security of any of its rights or any of its elections shall not preclude Alert Security from exercising the same or any other right it may have under this Agreement.

13. SCOPE OF SERVICES: This Agreement and written schedule of Personnel assignments, patrol inspections and post orders which collectively set forth the Security Services to be performed, may be changed only with the written approval of Alert Security. Unless so changed, Alert Security shall not be obligated to perform any services not specifically set forth therein. Amendments to this Agreement must be in writing and signed by authorized representatives of the parties hereto. If there is any conflict between the terms of any other documents and this Agreement, this Agreement shall control.

14. NOTICES: All notices shall be in writing and shall be sufficiently given if made by invoice, telegram, teletype, overnight courier or by mailing by certified mail, postage prepaid, addressed to the other party at its address set forth herein or at such other address as the other party may have designated by notice given hereunder. A copy of Client's notices to Alert Security shall also be sent to Alert Security's executive office.

15. ENTIRE AGREEMENT AND INTERPRETATION: This Agreement constitutes the entire agreement and understanding between the parties, and no representations, inducements, promises or agreements not embodied herein shall be of any force or effect. This Agreement shall be governed under the law of the state of its performance and, if any provision shall conflict therewith, such provision shall be interpreted to remove such conflict so that this Agreement and all its other provisions shall remain in full force and effect.

16. AUTHORITY: Alert Security sales personnel are not authorized to sign, change or amend this Agreement. This Agreement shall not become binding upon Alert Security until executed by an authorized manager or corporate officer of Alert Security.

17. ADDITIONAL CLIENT LOCATIONS: Except for location, hours of service and their commencement date as shown in paragraph 1 "Services", and Personnel/Equipment, Standard Base and Overtime Rates, Holidays and period during which rates are applicable as set forth in paragraph 2 "Rates," as well as such other terms as may be mutually agreed to in writing between the parties, each of the terms and conditions contained in this Agreement shall be applicable to any additional locations of Client serviced by Alert Security after the date of this Agreement.

Client _____

By _____

By _____
(Title)

Alert Christopher Wright

By _____

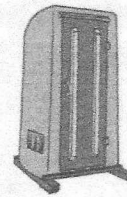
By President
(Title)

AN EQUAL OPPORTUNITY EMPLOYER



SANI-HUT COMPANY INC.

P.O. Box 7455
Reno, Nevada 89510-7455
(775) 358-6720
Fax: (775) 359-7922



LEA1005

SE08013

RENTED TO:

DELIVERED TO:

LEAGUE TO SAVE LAKE TAHOE-SLT
2608 LAKE TAHOE BLVD
SOUTH LAKE TAHOE, CA 96150

OSCAR DE LA RENTA FASHION SHOW
1047LAKESHORE DR
INCLINE VILLAGE, NV

DATE ORDERED 2/21/2020	DATE WANTED 08/01/2020	ORDERED BY	PHONE (775) 348-8472	TERMS NET 10
P.O. NUMBER	JOB NUMBER	CANCELLED BY	DATE CANCELLED	

SPECIAL INSTRUCTIONS

KRISTIN

DAY	ROUTE	ENTERED BY	TAKEN BY LDM
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UNIT QUANTITY	UNIT DESCRIPTION	UNIT VALUE	RENTAL RATE
1	EXECUTIVE DELUXE 33	0.00	0.00
1	EXECUTIVE DELUXE 19	0.00	0.00
2	HANDICAP RESTROOM	0.00	0.00
1	TOTAL FOR EVENT	3,930.00	3,930.00

Pending

DELIVER THURSDAY 07-30-20
ATTENDANTS ON SITE SAT 08-01-20
PICKUP MONDAY 08-03-20

Sales Tax: 0.00
Order Total: **3,930.00**

UNIT NUMBERS:

Lessee acknowledges that the above equipment has been inspected and received in good condition.

Thank you for ordering with Sani-Hut Co. You will find that in addition to providing the most modern and sanitary temporary facilities available, Sani-Hut Co. also provides the most efficient service using specialized equipment and scientific techniques.

DATE	TIME IN	TIME OUT	WORK PERFORMED	DRIVER/HELPER	CHARGES

BILLING: Monthly billing is based on 28 day billing cycle.

CONTRACT ACCEPTANCE: I agree to the contract, including terms and conditions on the back of this agreement. I acknowledge receipt of a copy of this contract.

CUSTOMERS SIGNATURE

SERVICE DRIVER

DATE

CUSTOMER

4.8



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/2/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AFFECT, INCREASE OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER L/P Insurance Services LLC 300 East 2nd Street Suite 1300 Reno NV 89501		CONTACT NAME: Tina Reseck PHONE (A/C No. Ext): (775) 996-6000 FAX (A/C No.): (775) 473-9288 E-MAIL ADDRESS: tina.reseck@lpins.net	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Financial Pacific Insurance Company	NAIC # 31453
		INSURER B: Employers Assurance Company	25402
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL212136294 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE NAMED INSURED(S) ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH REFERENCE TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	X	Y	60461127	5/1/2020	5/1/2021	EACH OCCURRENCE	\$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person)	\$ 5,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY	\$ 1,000,000
	OTHER:						GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COM/OP AGG	\$ 2,000,000
							Liquor Liability	\$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY			60461127	5/1/2020	5/1/2021	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS						BODILY INJURY (Per person)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/>						BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
							Medical payments	\$ 5,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB			60461127	5/1/2020	5/1/2021	EACH OCCURRENCE	\$ 1,000,000
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$ 1,000,000
	DED <input type="checkbox"/> RETENTION \$ 0							\$
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			EIG144148709	1/31/2021	1/31/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input checked="" type="checkbox"/> N	N/A	Y				E.L. EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

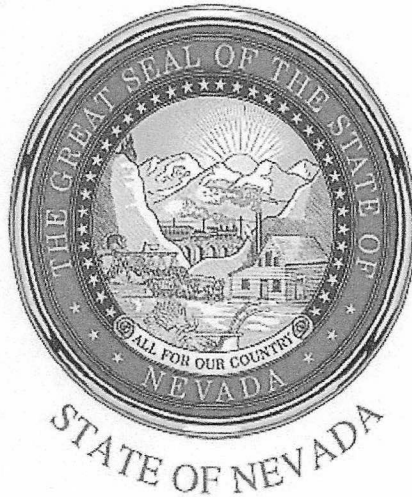
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Project: Catering/Party Rentals for Fashion Show and Luncheon on August 7, 2021 at 1055 Lakeshore Blvd., Incline Village, NV. When Named Insureds operations are performed for Certificate Holder, pursuant to a valid written contract or agreement executed by Named Insured prior to loss. In accordance with the policy(ies) listed above: Additional Insured Status is determined by attached GL Form CG2026M 11/85, Waiver of Subrogation Status is determined by GL Form CG2404 05/09, Workers Compensation Form WC000313 4/84.

CERTIFICATE HOLDER

CANCELLATION

Tina Reseck/TINA

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

MBP ENTERPRISES

Nevada Business Identification # NV20061717313

Expiration Date: 11/30/2021

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which, by law, cannot be waived.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 11/03/2020.



Barbara K. Cegavske

Certificate Number: B202011031190676

You may verify this certificate
online at <http://www.nvsos.gov>

BARBARA K. CEGAVSKE
Secretary of State

**WASHOE COUNTY
HEALTH DISTRICT**

ENHANCING QUALITY OF LIFE

WASHOE COUNTY HEALTH DISTRICT
ENVIRONMENTAL HEALTH SERVICES
1001 East Ninth Street • Bldg B • Reno, Nevada 89512
(775) 328-2434

HEALTH PERMIT TO OPERATE

BILLING ADDRESS: ROUNABOUT CATERING ATTN ACCOUNTS PAYABLE 631 DUNN CIR SPARKS, NV 89431	Date Issued: 06/01/2020
	Expiration Date: 06/01/2021

Permit No.: H19-1915FOOD

Type of Facility:

Business Name: ROUNABOUT CATERING

Mobile Unit/Service Area

POST IN A CONSPICUOUS PLACE

OWNED and OPERATED BY: MBP ENTERPRISES FACILITY LOCATION: 631 DUNN CIR, SPARKS, NV 89431	Permits are not transferable from person to person or place to place.
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This permit certifies that the indicated facility has been found to be operating in conformity with the health laws and regulations promulgated by the Nevada State Board of Health and the Washoe County District Board of Health. This Permit is revocable at any time by the Washoe County District Health Officer for the failure on the part of the owner/operator to meet State and Health District laws and regulations.

Charlene Albee

DIVISION DIRECTOR, ENVIRONMENTAL HEALTH SERVICES

Transportation Plan
League Annual Fashion Show and Luncheon
Saturday, August , 2021
Prepared by: Kristin Keane

Parking and Shuttles: On-site parking at 1047 Lakeshore Drive is **not available** on Aug. 5. Guest parking is available at Sierra Nevada College, 999 Tahoe Boulevard, Incline Village, NV where ample parking and continuous shuttle service await. *Distance to venue is approximately 1/2 mile.*

Directions for Parking:

From Tahoe City

- Proceed EAST on CA-28 / N LAKE BLVD. Continue to follow CA-28 (crossing into NEVADA).
- Continue EAST on SR 28 (Tahoe Boulevard) through Incline Village until you reach Country Club Drive (the third traffic light in Incline Village, located past the golf course).
- Turn RIGHT onto COUNTRY CLUB DR.

Turn RIGHT at the THIRD DRIVEWAY onto the Sierra Nevada College campus (entrance located directly across from Mill Creek residential street). There is a parking lot located to your right and a loop driveway directly in front of the Tahoe Center for Environmental Sciences building where shuttles will stage.

From South Lake Tahoe

- Proceed EAST on LAKE TAHOE BLVD / US-50. Continue to follow US-50 E (Crossing into NEVADA).
- Turn LEFT onto NV-28.
- Turn LEFT onto COUNTRY CLUB DR.

Turn RIGHT at the THIRD DRIVEWAY onto the Sierra Nevada College campus (entrance located directly across from Mill Creek residential street). There is a parking lot located to your right and a loop driveway directly in front of the Tahoe Center for Environmental Sciences building where shuttles will stage.

Staff and Volunteer Parking: In an effort to leave ample parking for guests, Cornerstone Community Church, 300 Country Club Drive, Incline Village has granted the League the use of their parking lot on Saturday, August 4. Staff and volunteers will shuttle to 1047 lakeshore from SNC.

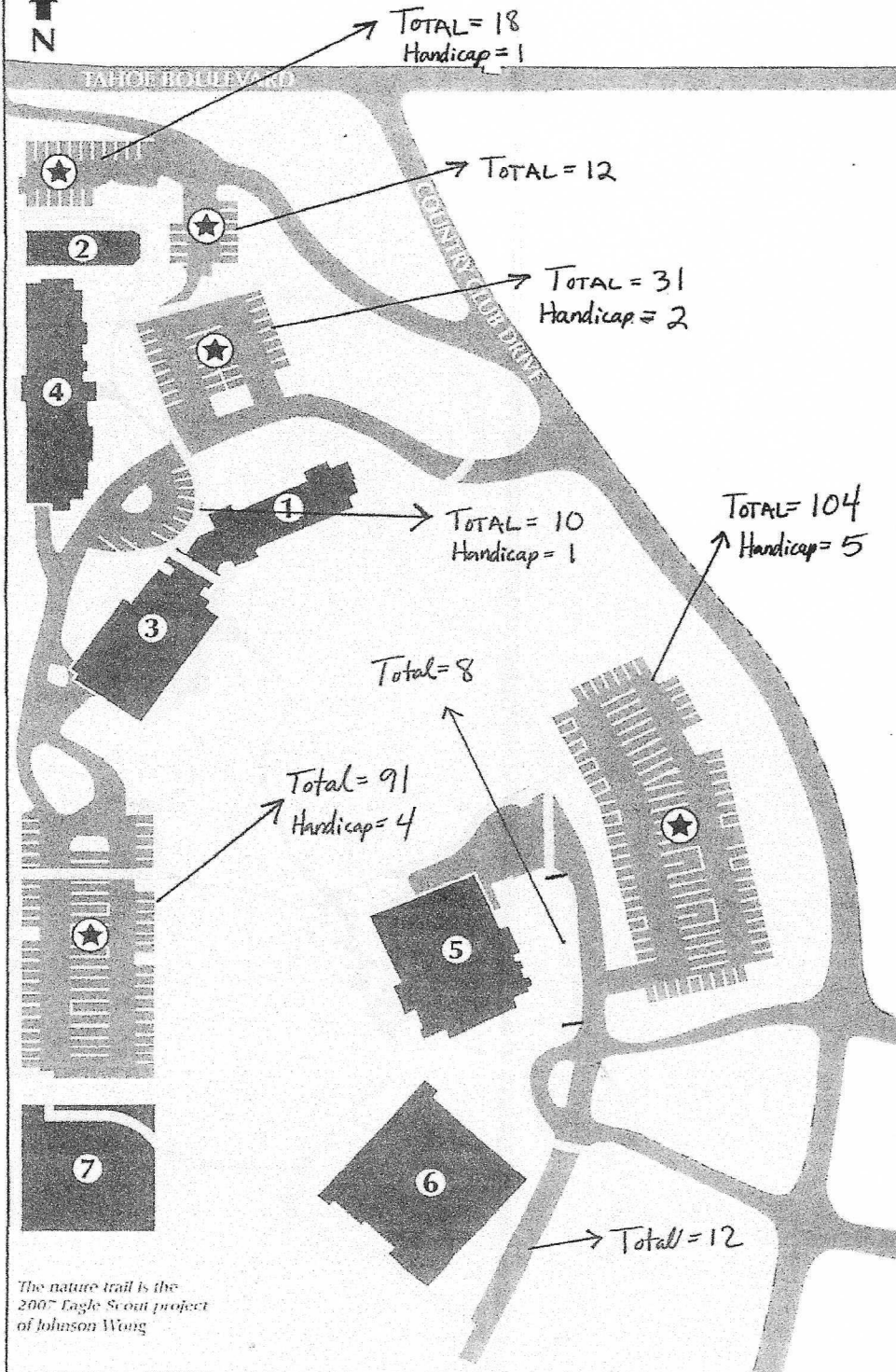
Traffic Control and Parking Attendants: The League has 4 volunteers stationed at Sierra Nevada College directing traffic into the parking lots and onto shuttles as guests arrive and depart. 1 paid security officer and 1 volunteer are stationed at the head of the driveway to 1047 Lakeshore Boulevard to ensure no cars enter driveway. Shuttles buses utilize the pullout on the west side of the driveway to off-load passengers so the shuttle is not obstructing traffic.



SIERRA NEVADA COLLEGE

TOTAL SPACES = 299
RESERVED SPACES = 35
HANDICAP SPACES = 13

CAMPUS MAP



- ① CAMPBELL-FRIEDMAN HALL
 - Residence Hall
- ② DAVID HALL
 - Admission Office
 - Financial Aid
 - Registrar
 - Student Accounts
- ③ PATTERSON HALL
 - Cafeteria
 - Luria Dining Hall
- ④ PRIM-SCHULTZ HALL
 - Residence Hall
- ⑤ PRIM LIBRARY
 - Office of the President
 - Rodney and Evelyn Smallwood Campus Store
 - Scarsella-Boleky Tutoring Center
 - Tahoe Gallery
- ⑥ TAHOE CENTER FOR ENVIRONMENTAL SCIENCES
 - Computer Science Classroom
- ⑦ NORTH LAKE TAHOE DEMONSTRATION GARDEN
- ★ PARKING
- CAMPUS NATURE TRAIL
 - .75 Mile Loop
 - Woodchip and Paved Paths

The nature trail is the 2007 Eagle Scout project of Johnson Wong

999 Tahoe Boulevard
Incline Village, Nevada 89451
(775) 831-1314
www.SierraNevada.edu



Service Contract

DATE 12/1/2020

Transportation Department

P.O. Box 129
Truckee, Ca. 96160
530-562-3555

Date of Transfer: 8/7/2021

Prepared by: Marie Easton
Transportation Manager
Northstar California Resort
530-562-3825
hvazquez@vailresorts.com
Fax: 530-562-1407

Bill To: League to Save Lake Tahoe
Kristin Keane Oscar de La Renta Fashion Show
League to Save Lake Tahoe
2608 Lake Tahoe Blvd.
South Lake Tahoe, CA 96150

Contact: Tae Kim (530) 541-5388
tae@northtahoexecutiveshuttle.com

Credit Card Number or Account to Bill:

CID# 11682331

Description	AMOUNT
1-25 passenger bus for 8 hours (7am-3pm) Early Bus Staff (Bus 1)	\$1,048.00
5-25 passenger buses for 5 hours (10am-3pm)	\$3,260.00
2-30 passenger buses for 5 hours (10am-3pm)	\$1,440.00
Sierra Nevada College Parking Lot to 1047 Lakeshore Drive. Incline Village	
Up to 25 passenger bus first 4 hours \$520, \$132 each additional hour.	
More than 30 passenger bus, first 4 hours \$575, \$145 each additional hour.	
TOTAL	\$ 5,748.00

***Cancellation: 50% charge per bus cancelled within 14 days of charter, 100% charge within 7 days of charter.**

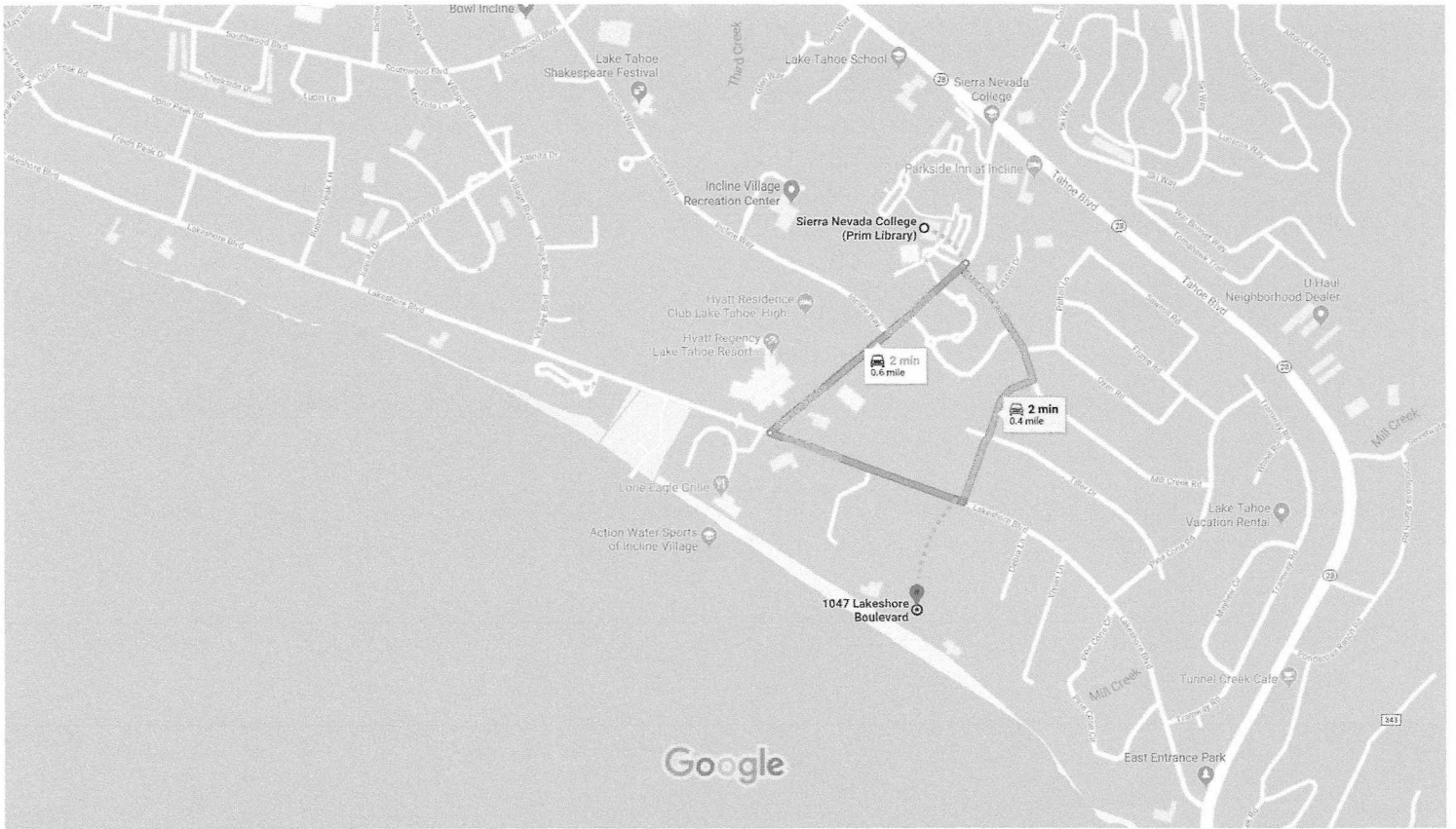
*** All Charters are billed for scheduled time. If service is used beyond scheduled time, charter is billed at rate specified in contract, rounded to nearest half hour.**

*** \$200 minimum befouling fee applies for excessive clean up that is needed.**

*** 18% Gratuity included in all rate quotes.**

Travel time booked at \$114/hr

Client Signature: KK **Date:** 3/18/21



Map data ©2018 Google 500 ft



via Country Club Dr and Lakeshore Blvd
Best route, despite the usual traffic

2 min

0.6 mile



via Mill Creek Rd and Selby Dr

2 min

0.4 mile