



# CASTLE ROCK CITY COUNCIL AGENDA

Regular Meeting: Monday, June 22, 2026  
7:30 PM

**Location**  
Castle Rock Senior Center  
222 Second Ave SW  
Castle Rock, WA 98611

## AGENDA

To join this meeting from your computer, tablet or smartphone: <https://global.gotomeeting.com/join/201632365>

To join this meeting using your phone: [+1 \(646\) 749-3112](tel:+16467493112) Access Code: 201-632-365 (Press \*6 to speak)

New to GoToMeeting? Get the app now and be ready: <https://global.gotomeeting.com/install/201632365>

### 1. CALL TO ORDER

---

- a. Pledge of Allegiance
- b. Roll Call
- c. Changes to Agenda

### 2. PROCLAMATIONS & PRESENTATIONS

---

- a. Mike Berndt

### 3. CITIZEN COMMENTS - maximum 3 minutes

---

### 4. DEPARTMENT REPORTS

---

- Police Chief Charlie Worley
- Public Works Director Tyler Stone
- City Engineer Tom Gower
- Clerk-Treasurer Carie Cuttonaro

### 5. COUNCIL AND AD HOC COMMITTEE REPORTS

---

- Mayor / Mayor Pro-Tempore / Councilmembers
- CRCDA Representative

### 6. PUBLIC HEARINGS

---

- a. To take public testimony on the City's Six-Year Transportation Plan for fiscal years 2027-2032. (page 3-11)

### 7. CONSENT AGENDA

---

- a. June 8, 2026 Regular Council Meeting Minutes (page 12-14)
- b. Supplemental Agreement Number 2 for easements related to the Huntington Avenue - River Front Trail Pedestrian Lighting - SRRTS Phase 2 Project in the amount of \$5,000, increasing the total amount to \$66,400. Agreement signed by Public Works Director on June 8, 2026 within the Procurement Policy authorization limits. (page 15-19)

### 8. OLD BUSINESS

---

### 9. NEW BUSINESS

---

- a. Resolution No. 2026-05, a resolution relating to the Six-Year Transportation Improvement Plan. (page 20)
- b. Gibbs & Olson, Inc. Authorization No. 2026-001 for Dougherty Sewer Force Main Extension, in the amount of \$45,000. (page 21-25)

c. Castle Rock Boy Scout Troop #313 has advised the City of their intent to sell fireworks in 2026, per CRMC 5.32(c). Completed permit application including insurance, fee and landowner permission has been received. (page 26-31)

d. Special Event Permit #2025-0005; Castle Rock Fair Parade; July 16, 2025 at 6:30 PM. Insurance will be provided. Street closure request includes: (page 32-44)

- Huntington Ave S
- Cowlitz St W
- 2nd Ave SW
- C St SW
- Front Ave S

e. Special Event Permit #2026-0002; TT Motorcycle Events - Mt St Helens Motorcycle Club; July 11, August 8, September 6 and October 3 from 3:00 PM to 10:00 PM. Requesting a one-hour grace period ending at 11:00 PM to allow for unforeseen delays. Insurance has been received. (page 45-51)

f. Special Event Permit #2026-0003; ST Motorcycle Events - Mt St Helens Motorcycle Club; July 10, July 25, August 22, September 5 and September 19 from 3:00 PM to 10:00 PM. Requesting a one-hour grace period ending at 11:00 PM to allow for unforeseen delays. Insurance has been received. (page 52-58)

## 10. OTHER BUSINESS

---

## 11. ADJOURNMENT

---

### NEXT REGULAR COUNCIL MEETINGS:

<u>3Q26</u>	<u>4Q26</u>	<u>1Q27</u>	<u>2Q27</u>
July 13	October 12	January 11	April 12
July 27	October 26	January 25	April 26
August 10	November 09	February 08	May 10
August 24	November 23	February 22	May 24
September 14	December 14	March 08	June 14
September 28	December 28	March 22	June 28

Non-Discrimination Statement: This institution is an equal opportunity provider and employer. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [https://www.ascr.usda.gov/sites/default/files/Complain\\_combined\\_6\\_8\\_12\\_508\\_0.pdf](https://www.ascr.usda.gov/sites/default/files/Complain_combined_6_8_12_508_0.pdf) or at any USDA office, or call 866.632.9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to USDA, Office of the Assistant Secretary for Civil Rights, 1400 Independence Ave, SW, Stop 9410, Washington, DC 20250-9410 or email to [program.intake@usda.gov](mailto:program.intake@usda.gov) or by fax (202) 690-7442.

Title VI: The City of Castle Rock ensures compliance with Title VI of the Civil Rights Act of 1964 and American Disabilities Act of 1990 by prohibiting discrimination against any person on the basis of race, color, national origin, sex or disabilities in the provision of benefits and services from its federal assisted programs and activities. If you need special accommodations to participate in this meeting, please contact Carie Cuttonaro at 360.274.8181 by 9:00 a.m. three days prior to the meeting.

City Council may add and take action on other items not listed on this Agenda.

**CITY OF CASTLE ROCK**  
**Notice of Public Hearing**  
**Six-Year Transportation Plan**

The Castle Rock City Council will hold a public hearing during the regular meeting of the Castle Rock City Council on Monday, June 22, 2026 starting at 7:30 PM, located at the Castle Rock Senior Center, 222 Second Ave SW, Castle Rock, Washington. Virtual connection information will be included on the agenda and posted online. Public comment can be submitted in advance to [ccuttonaro@ci.castle-rock.wa.us](mailto:ccuttonaro@ci.castle-rock.wa.us).

The purpose of this meeting is to take testimony on the proposed Six-Year Transportation Plan for 2027 - 2032. Please contact the Clerk-Treasurer's Office to request a copy of the proposed transportation plan.

Anyone interested may appear and be heard in regard to this public hearing at the above-mentioned time and place. Any testimony will be taken into consideration when the City Council discusses the issue during regular session. City Council action may be taken at this meeting.

For more information, please contact Clerk-Treasurer Carie Cuttonaro at City Hall, 360.274.8181, email [ccuttonaro@ci.castle-rock.wa.us](mailto:ccuttonaro@ci.castle-rock.wa.us), or Public Works Director Tyler Stone 360.274.7478, email [tstone@ci.castle-rock.wa.us](mailto:tstone@ci.castle-rock.wa.us).

Published in The Daily News on June 4, 2026



## Six Year Transportation Improvement Program From 2027 to 2032

Agency: Castle Rock

County: Cowlitz

MPO/RTPO: CWCG

Y Inside

N Outside

Functional Class	Priority Number	A. PIN/Project No. C. Project Title D. Road Name or Number E. Begin & End Termini F. Project Description	B. STIP ID  G. Structure ID	Hearing	Adopted	Amendment	Resolution No.	Improvement Type	Utility Codes	Total Length	Environmental Type	RW Required
04	1	/ 08C1(002) Huntington Avenue - River Front Trail Pedestrian Lighting - SRRTS Phase 2 Huntington Avenue - SR 411 Larsen Lane to Lions Pride Park This project will install pedestrian friendly lights along Castle Rock's Riverfront trail, which is an identified section of the SRRTS, install an HMA path from Lion's Pride Park to connect to Huntington Avenue, and provide a pedestrian crossing near the intersection of Huntington Avenue with Larsen Lane.	WA-14408					28		0.300	CE	Yes

Funding								
Status	Phase	Phase Start Year (YYYY)	Federal Fund Code	Federal Funds	State Fund Code	State Funds	Local Funds	Total Funds
S	RW	2027		0		0	5,000	5,000
S	CN	2027	TA(UM)	330,688		0	51,611	382,299
<b>Totals</b>				<b>330,688</b>		<b>0</b>	<b>56,611</b>	<b>387,299</b>

Expenditure Schedule					
Phase	1st	2nd	3rd	4th	5th & 6th
RW	5,000	0	0	0	0
CN	382,299	0	0	0	0
<b>Totals</b>	<b>387,299</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## Six Year Transportation Improvement Program From 2027 to 2032

Agency: Castle Rock

County: Cowlitz

MPO/RTPO: CWCG

Y Inside

N Outside

Functional Class	Priority Number	A. PIN/Project No. C. Project Title D. Road Name or Number E. Begin & End Termini F. Project Description	B. STIP ID  G. Structure ID	Hearing	Adopted	Amendment	Resolution No.	Improvement Type	Utility Codes	Total Length	Environmental Type	RW Required
06	2	/ Z908(004) City Wide Pedestrian Improvements  City Wide to City Wide  The first part of this project includes flush mount barrier lights, wiring, conduit and wiring from an existing power source and capacity for future pedestrian lights on SR 411 (PH-10) Bridge over the Cowlitz River to the west. The second part includes updating school zone lights, adding speed read out displays and the construction of bulb-outs at key intersections where pedestrian activity is high and visibility of pedestrians is needed. The third part of this project includes installing a pedestrian activated crosswalk signal at the intersection of SR 411 (A Street SW) and Huntington Ave. South and the continuation of a sidewalk section from this same location, along SR 411 (Huntington Ave.) to Cowlitz Street to fill in a missing gap of sidewalk along this arterial street that connects to the downtown business and service area.  *** Project is fully funded with federal funds using Toll Credits as local match.***	WA-14434					28			CE	Yes

Funding								
Status	Phase	Phase Start Year (YYYY)	Federal Fund Code	Federal Funds	State Fund Code	State Funds	Local Funds	Total Funds
S	RW	2027		0		0	25,000	25,000
S	CN	2027	CRP(UM)	560,636		0	0	560,636
S	CN	2027	STBG(UM)	328,214		0	0	328,214
<b>Totals</b>				<b>888,850</b>		<b>0</b>	<b>25,000</b>	<b>913,850</b>

Expenditure Schedule						
Phase	1st	2nd	3rd	4th	5th & 6th	
RW	25,000	0	0	0	0	
CN	888,850	0	0	0	0	
<b>Totals</b>	<b>913,850</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	



# Six Year Transportation Improvement Program From 2027 to 2032

Agency: Castle Rock

County: Cowlitz

MPO/RTPO: CWCG

Y Inside

N Outside

Functional Class	Priority Number	A. PIN/Project No. C. Project Title D. Road Name or Number E. Begin & End Termini F. Project Description	B. STIP ID  G. Structure ID	Hearing	Adopted	Amendment	Resolution No.	Improvement Type	Utility Codes	Total Length	Environmental Type	RW Required
04	3	/ 6848(001)  Huntington Avenue S. Roundabout Huntington Avenue S. 500' N of 1955 Huntington Ave S to 500' S of 1955 Huntington Ave S  An intersection improvement along Huntington Avenue S. at the future entrance into the Landing on the Cowlitz development. The conceptual roundabout will require additional right-of-way from neighboring properties for construction. The proposed improvements include a single-lane roundabout with center landscape island and a concrete truck apron to accommodate maneuvering of large truck traffic through the intersection from the Landing on the Cowlitz development. Widening of Huntington Avenue S. including asphalt, curb and gutter, concrete sidewalk, signing, striping, stormwater management, and landscaping improvements are proposed with this project.  Project is fully funded with federal funds using Toll Credits as local match.	WA-15119					04	C G P S T W	0.200	CE	Yes

Funding								
Status	Phase	Phase Start Year (YYYY)	Federal Fund Code	Federal Funds	State Fund Code	State Funds	Local Funds	Total Funds
S	PE	2027	STBG(UM)	284,000		0	0	284,000
S	RW	2028	STBG(UM)	80,000		0	0	80,000
P	CN	2029	STBG(R)	5,000,000	TIB	750,000	2,850,000	8,600,000
<b>Totals</b>				<b>5,364,000</b>		<b>750,000</b>	<b>2,850,000</b>	<b>8,964,000</b>

Expenditure Schedule					
Phase	1st	2nd	3rd	4th	5th & 6th
PE	284,000	0	0	0	0
RW	80,000	0	0	0	0
CN	0	0	8,600,000	0	0
<b>Totals</b>	<b>364,000</b>	<b>0</b>	<b>8,600,000</b>	<b>0</b>	<b>0</b>



## Six Year Transportation Improvement Program From 2027 to 2032

Agency: Castle Rock

County: Cowlitz

MPO/RTPO: CWCG

Y Inside

N Outside

Functional Class	Priority Number	A. PIN/Project No. C. Project Title D. Road Name or Number E. Begin & End Termini F. Project Description	B. STIP ID  G. Structure ID	Hearing	Adopted	Amendment	Resolution No.	Improvement Type	Utility Codes	Total Length	Environmental Type	RW Required
07	4	Bond Road Overlay Bond Road South City Limits to North City Limits Spot repair and grinding of existing roadway surface, followed by 0.20' asphalt overlay.	WA-12039					05		0.700	CE	No

Funding								
Status	Phase	Phase Start Year (YYYY)	Federal Fund Code	Federal Funds	State Fund Code	State Funds	Local Funds	Total Funds
P	PE	2030		0	TIB	58,650	3,100	61,750
P	CN	2030		0	TIB	447,950	23,550	471,500
<b>Totals</b>				<b>0</b>		<b>506,600</b>	<b>26,650</b>	<b>533,250</b>

Expenditure Schedule					
Phase	1st	2nd	3rd	4th	5th & 6th
PE	0	0	0	61,750	0
CN	0	0	0	471,500	0
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>533,250</b>	<b>0</b>



## Six Year Transportation Improvement Program From 2027 to 2032

Agency: Castle Rock

County: Cowlitz

MPO/RTPO: CWCG

Y Inside

N Outside

Functional Class	Priority Number	A. PIN/Project No. C. Project Title D. Road Name or Number E. Begin & End Termini F. Project Description	B. STIP ID  G. Structure ID	Hearing	Adopted	Amendment	Resolution No.	Improvement Type	Utility Codes	Total Length	Environmental Type	RW Required
06	5	PH 10 Hwy Improvements PH 10 Highway Cowlitz River Bridge to West Side Highway Reconstruction of PH 10 Highway from the west side of the bridge over the Cowlitz River to the intersection with West Side Highway. Raise the road elevation to provide access during high water conditions. Provide new sidewalk and illumination on one side.	WA-11257					04		0.360	EA	No

Funding								
Status	Phase	Phase Start Year (YYYY)	Federal Fund Code	Federal Funds	State Fund Code	State Funds	Local Funds	Total Funds
P	ALL	2031	STBG(R)	6,907,150		0	0	6,907,150
<b>Totals</b>				<b>6,907,150</b>		<b>0</b>	<b>0</b>	<b>6,907,150</b>

Expenditure Schedule					
Phase	1st	2nd	3rd	4th	5th & 6th
ALL	0	0	0	0	6,907,150
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6,907,150</b>



## Six Year Transportation Improvement Program From 2027 to 2032

Agency: Castle Rock

County: Cowlitz

MPO/RTPO: CWCG

Y Inside

N Outside

Functional Class	Priority Number	A. PIN/Project No. C. Project Title D. Road Name or Number E. Begin & End Termini F. Project Description	B. STIP ID  G. Structure ID	Hearing	Adopted	Amendment	Resolution No.	Improvement Type	Utility Codes	Total Length	Environmental Type	RW Required
08	6	3rd Avenue Overlay  Cowlitz Street West to Dike Road SW Spot repairs and grinding of existing pavement, followed by 0.2' asphalt overlay.	WA-12028					05		0.500	CE	No

Funding								
Status	Phase	Phase Start Year (YYYY)	Federal Fund Code	Federal Funds	State Fund Code	State Funds	Local Funds	Total Funds
P	PE	2031		0	TIB	31,150	1,650	32,800
P	CN	2031		0	TIB	238,750	12,550	251,300
<b>Totals</b>				<b>0</b>		<b>269,900</b>	<b>14,200</b>	<b>284,100</b>

Expenditure Schedule					
Phase	1st	2nd	3rd	4th	5th & 6th
PE	0	0	0	0	32,800
CN	0	0	0	0	251,300
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>284,100</b>



## Six Year Transportation Improvement Program From 2027 to 2032

Agency: Castle Rock

County: Cowlitz

MPO/RTPO: CWCG

Y Inside

N Outside

Functional Class	Priority Number	A. PIN/Project No. C. Project Title D. Road Name or Number E. Begin & End Termini F. Project Description	B. STIP ID  G. Structure ID	Hearing	Adopted	Amendment	Resolution No.	Improvement Type	Utility Codes	Total Length	Environmental Type	RW Required
04	7	Huntington Avenue Chip Seal Huntington Avenue S. Front Ave to Kalmbach Road Chip seal road and restripe.	WA-16611					05		1.200	CE	No

Funding								
Status	Phase	Phase Start Year (YYYY)	Federal Fund Code	Federal Funds	State Fund Code	State Funds	Local Funds	Total Funds
P	ALL	2031		0	TIB	393,950	20,750	414,700
<b>Totals</b>				<b>0</b>		<b>393,950</b>	<b>20,750</b>	<b>414,700</b>

Expenditure Schedule					
Phase	1st	2nd	3rd	4th	5th & 6th
ALL	0	0	0	0	414,700
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>414,700</b>



## Six Year Transportation Improvement Program From 2027 to 2032

Agency: Castle Rock

County: Cowlitz

MPO/RTPO: CWCG

Y Inside

N Outside

Functional Class	Priority Number	A. PIN/Project No. C. Project Title D. Road Name or Number E. Begin & End Termini F. Project Description	B. STIP ID  G. Structure ID	Hearing	Adopted	Amendment	Resolution No.	Improvement Type	Utility Codes	Total Length	Environmental Type	RW Required
05	8	Dougherty Drive Chip Seal Dougherty Drive SR 504 to City Limits Chip seal road and replace striping.	WA-16480					05		0.470	CE	No

Funding								
Status	Phase	Phase Start Year (YYYY)	Federal Fund Code	Federal Funds	State Fund Code	State Funds	Local Funds	Total Funds
P	ALL	2032		0	TIB	131,600	6,950	138,550
<b>Totals</b>				<b>0</b>		<b>131,600</b>	<b>6,950</b>	<b>138,550</b>

Expenditure Schedule					
Phase	1st	2nd	3rd	4th	5th & 6th
ALL	0	0	0	0	138,550
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>138,550</b>

	Federal Funds	State Funds	Local Funds	Total Funds
<b>Grand Totals for Castle Rock</b>	<b>13,490,688</b>	<b>2,052,050</b>	<b>3,000,161</b>	<b>18,542,899</b>

**1. CALL TO ORDER**

---

Mayor Paul Helenberg called the regular meeting of the Castle Rock City Council to order at 7:30 PM.

a. Pledge of Allegiance

Mayor Helenberg led the Pledge of Allegiance.

b. Roll Call

Councilmembers present: Earl Queen, Lee Kessler, Roz de Greeve, Dennis Ehrhorn, and Ellen Rose.

Staff present: Police Chief Charlie Worley, Public Works Director Tyler Stone, and Clerk-Treasurer Carie Cuttonaro.

c. Changes to Agenda

Mayor Helenberg led a moment of silence in honor of the 11 lives lost in the Nippon Dynawave tragedy.

**2. PROCLAMATIONS & PRESENTATIONS**

---

**3. CITIZEN COMMENTS - maximum 3 minutes**

---

**4. DEPARTMENT REPORTS**

---

- Police Chief Charlie Worley
- Public Works Director Tyler Stone
- Clerk-Treasurer Carie Cuttonaro

**5. COUNCIL AND AD HOC COMMITTEE REPORTS**

---

- Mayor / Mayor Pro-Tempore / Councilmembers  
Mayor Helenberg gave a verbal report.
- CRCDA Representative

**6. PUBLIC HEARINGS**

---

**7. CONSENT AGENDA**

---

Councilmember Queen made a motion, seconded by Rose, to approve the Consent Agenda as presented. Motion carried by roll call vote. Councilmembers Queen, Kessler, de Greeve, Ehrhorn, and Rose voted 'Aye'.

- a. May 11, 2026 Regular Council Meeting Minutes
- b. May 26, 2026 Regular Council Meeting Minutes

c. May 2026 invoices as described in the Fund Transaction Summary Report in the amount of \$617,198.07.

## **8. OLD BUSINESS**

---

### a. Continue Library Discussion

Mayor Helenberg informed Council that the Friends of the Library has requested to wait for the Primary Election in 2027. This discussion will return in preparation for the resolution required to be included in the Primary Election in 2027.

## **9. NEW BUSINESS**

---

a. Ordinance No. 2026-06, an ordinance of the City of Castle Rock, Washington, repealing and replacing Ordinance No. 2026-02 related to Cat Neuter Programs to correct a numbering error in drafting.

Clerk-Treasurer Carie Cuttonaro presented.

Councilmember Rose made a motion, seconded by de Greeve, to approve Ordinance No. 2026-06. Motion carried by roll call vote. Councilmembers Queen, Kessler, de Greeve, Ehrhorn, and Rose voted 'Aye'.

b. Request to approve an Interlocal Agreement with Cowlitz County to receive funding in the amount of \$365,500 from the Distressed County Public Facilities Fund for the Dougherty Sewer Force Main Extension Project.

Public Works Director Tyler Stone presented.

Councilmember Rose made a motion, seconded by de Greeve, to approve the Interlocal Grant Agreement with Cowlitz County. Motion carried by roll call vote. Councilmembers Queen, Kessler, de Greeve, Ehrhorn, and Rose voted 'Aye'.

c. Special Event Permit #2026-0004; Northwest Bike Week LLC, Andrew Kiggins - Northwest Bike Week; July 9 - July 12, 2026. Insurance has not been received.

Councilmember Rose made a motion, seconded by de Greeve, to approve Special Event Permit #2026-0004, contingent on receipt of insurance. Motion carried by roll call vote. Councilmembers Queen, Kessler, de Greeve, Ehrhorn, and Rose voted 'Aye'.

d. Special Event Permit #2026-0006; AMP Live Events - Monster X Tour; June 27, 2026. Insurance has not been received.

Councilmember Rose made a motion, seconded by de Greeve, to approve Special Event Permit #2026-0006, contingent on receipt of insurance. Motion carried by roll call vote. Councilmembers Queen, Kessler, de Greeve, Ehrhorn, and Rose voted 'Aye'.

## **10. OTHER BUSINESS**

---

Mayor Helenberg reminded Council that our code specifically calls for quiet hours to begin at 10:00 PM.

## **11. ADJOURNMENT**

---

There being no further business, Mayor Helenberg adjourned the meeting at 7:41 PM.

---

Mayor Paul Helenberg

---

Clerk-Treasurer Carie Cuttonaro

<b>Supplemental Agreement Number <u>2</u></b>		Organization and Address	
Original Agreement Number LA 10829		Gibbs & Olson, Inc. PO Box 400 Longview, WA 98632 Phone: 360.425.0991	
Project Number TAPR-08C1(002)	Execution Date	Completion Date December 31, 2027	
Project Title Huntington Avenue - River Front Trail Pedestrian Lighting - SRRTS Phase 2	New Maximum Amount Payable \$66,400		
Description of Work Prepare exhibit legal descriptions and map exhibits for a variable width permanent easement for access and utilities along Huntington Avenue South, Cowlitz County Parcel Numbers 30790 and 30792, owned by the Agency.			

The Local Agency of Castle Rock  
desires to supplement the agreement entered in to with Gibbs & Olson, Inc.  
and executed on January 13, 2025 and identified as Agreement No. \_\_\_\_\_  
All provisions in the basic agreement remain in effect except as expressly modified by this supplement.  
The changes to the agreement are described as follows:

**I**

Section 1, SCOPE OF WORK, is hereby changed to read:  
See attached Exhibit B, Scope of Work.

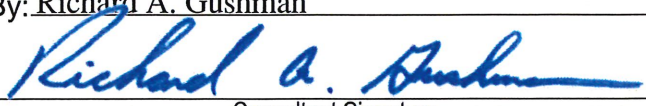
**II**


Section IV, TIME FOR BEGINNING AND COMPLETION, is amended to change the number of calendar days for completion of the work to read: December 31, 2031

**III**

Section V, PAYMENT, shall be amended as follows:  
The budget shall be increased by \$5,000.00 for preparation and recording of permanent easement as described above and in Exhibit B.

as set forth in the attached Exhibit A, and by this reference made a part of this supplement.  
If you concur with this supplement and agree to the changes as stated above, please sign in the Appropriate spaces below and return to this office for final action.

By: Richard A. Gushman  
  
Consultant Signature

By: Tyler Stone  
  
Approving Authority Signature

6/8/26  
Date

**Exhibit "A"**  
**Summary of Payments**

	Basic Agreement	Supplement #2	Total
Direct Salary Cost	\$21,695.51	\$1,770.50	\$23,466.01
Overhead (Including Payroll Additives)	\$32,620.63	\$2,413.67	\$35,034.30
Direct Non-Salary Costs	\$1,622.23	\$381.19	\$2,003.42
Fixed Fee	\$5,461.63	\$434.64	\$5,896.27
Total	\$61,400.00	\$5,000.00	\$66,400.00

## **EXHIBIT B SCOPE OF WORK**

### **PROJECT DESCRIPTION**

The Consultant will prepare legal description and map exhibits for a variable width permanent easement for access and utilities along Huntington Avenue South, Cowlitz County Parcel Numbers 30790 and 30792, owned by the Agency.

### **ASSUMPTIONS**

The Consultant has utilized the following assumptions in developing the identified Scope of Work and associated budget. If any of the assumptions are found to be incorrect, the Consultant reserves the right to negotiate a Supplement to the agreement for any modifications to the Scope of Work and budget required to address the conditions encountered.

1. Easement legal description and map exhibits will be provided to Agency for review before being finalized by the Consultant and recorded with Cowlitz County.
2. Cowlitz County recording fees for the easement documents are included in the Consultant's budget increase.
3. No corners will be set and a Record of Survey will not be prepared or recorded with Cowlitz County.

### **SCOPE OF WORK**

The Consultant will complete the following tasks:

#### **Task 1 - Project Management & Administration**

Under this task the Consultant will perform the following:

- a) General project administration.
- b) Prepare monthly narrative progress reports during the project as requested.
- c) Correspond with the Agency as appropriate.

#### **Task 7 - Easement Coordination and Preparation**

The Consultant will coordinate with the Agency and WSDOT Local Programs to prepare the requested documents for a variable width permanent easement for access and utilities along Huntington Avenue South.

### **SCHEDULE**

Work will be coordinated with the Agency and the deliverables for the project will be provided to the Agency in a mutually agreed time frame.



**GIBBS & OLSON**  
CIVIL ENGINEERS • LAND SURVEYORS

**EXHIBIT C - DBE Participation Plan**

June 5, 2026

Tyler Stone  
Public Works Director  
City of Castle Rock  
PO Box 370  
Castle Rock, WA 98611

RE: Six Rivers Regional Trail System, Phase 2, Revised DBE Participation Plan

Dear Tyler,

This project is currently funded by the Federal Highway Administration but does not have a DBE goal; however, Gibbs & Olson is committed to meeting the 10% Small Business Enterprise (SBE)/Disadvantage Business Enterprise goal. Gibbs & Olson is a self-certified Small Business and is teaming with Global Transportation Engineering, a DBE firm. The table below provides details of our SBE/DBE project partners, and the amount dedicated to each firm.

Firm Name	DBE Certification Number	Role on Project Team	Anticipated DBE/SBE Commitment	Budget Total w/ Supplement No 2
Gibbs & Olson, Inc. (Self-Certified Small Business)		Project prime consultant	55.6% (SBE)	\$36,914.76
Global Transportation Engineering	D5F0024325	Illumination Design	9.0% (DBE)	\$5,962.30
Archeological Investigations NW		Cultural Resource Services	0%	\$23,522.94
			<b>64.6%</b>	<b>\$66,400.00</b>

Please let me know if you have any questions about our DBE teaming partners.

Sincerely,

Carol L Ruiz, PE  
Principal

File: 0130.5031

Supplemental Agreement No. 2 - Exhibit D - Budget Estimate  
 Six Rivers Regional Trail System, Phase 2 Design Budget  
 June 5, 2026



		Principal	Engr VI	Engr III	Engr I	Design Tech	WP	Sr. LS	Cost
Task	Task Description								
1	Project management	1	2	2	0	0	0	0	\$913
7	Easement Coordination and Preparation	1	4	8	0	2	1	8	\$3,706
<b>Subtotal</b>		<b>2</b>	<b>6</b>	<b>10</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>8</b>	<b>\$4,618.81</b>
Negotiated Hourly Rates		\$240.01	\$193.05	\$143.48	\$95.22	\$101.09	\$80.87	\$157.83	
Recording fee (4 sheets): \$303.50+\$1 per additional									\$306.50
Miscellaneous Expenses									\$74.69
<b>Total Expenses</b>									<b>\$381.19</b>
<b>Total Budget Supplemental Agreement No. 2</b>									<b>\$5,000.00</b>
Original Agreement + Supplement No. 1									\$61,400.00
<b>Total Budget w/ Supplemental Agreement No. 2</b>									<b>\$66,400.00</b>

**CITY OF CASTLE ROCK  
RESOLUTION NO. 2026-05**

**A RESOLUTION RELATING TO THE SIX-YEAR TRANSPORTATION  
IMPROVEMENT PLAN.**

**WHEREAS**, pursuant to the requirements of RCW 35.77.010, Laws of the State of Washington, the City of Castle Rock has prepared the annual update to its Six-Year Transportation Improvement Program for the ensuing calendar year 2027 – 2032; and

**WHEREAS**, pursuant to said law, the City Council of the City of Castle Rock, being the legislative body of said City did hold a public hearing on said plan at 7:30 PM in the Senior Center of said City Hall on the 22<sup>nd</sup> day of June 2026.

**NOW, THEREFORE BE IT RESOLVED**, that a copy of said revised Six-Year Transportation Improvement Program for the ensuing six calendar years 2027 through 2032, together with a copy of this resolution, be filed with the Director of Highways of the State of Washington.

ADOPTED unanimously on this 22<sup>nd</sup> day of June, 2026.

CITY OF CASTLE ROCK

APPROVED:

\_\_\_\_\_  
Paul Helenberg, Mayor

APPROVED AS TO FORM:

ATTEST:

\_\_\_\_\_  
Nikki Thompson, City Attorney

\_\_\_\_\_  
Carie Cuttonaro, City Clerk

**AUTHORIZATION 2026-001  
CITY OF CASTLE ROCK, WASHINGTON  
DESIGN ENGINEERING SERVICES FOR THE  
DOUGHERTY SEWER FORCE MAIN EXTENSION**

Gibbs & Olson, Inc. (Engineer) is hereby authorized to perform Engineering Services for the City of Castle Rock, Washington (Client) as provided for in our General Agreement for Professional Engineering Services dated January 9, 2023, and as more fully described herein.

**PROJECT DESCRIPTION**

The Engineer will provide design engineering services to the Client for sanitary sewer system improvements within the Client's sewer system as summarized below:

Design of approximately 800 linear feet of 6-inch sewer force main. The new force main will extend the Client's sewer force main from the existing sanitary sewer pump station at the intersection of Dougherty Drive and Eaton Court. The existing 4-inch force main's alignment currently extends from the existing pump station, along Ramsey Street, under Interstate 5 and discharges into an existing manhole at the east end of Balcer Street. The force main extension will connect to the existing force main and will be constructed from the end of Balcer Street, north along the west side of the Exit 49 on ramp to the City's park and ride property where it will be located within the grass strip between the paved parking area and the fence to the south. The force main extension will connect to the existing 8-inch gravity sewer main along Huntington Avenue.

Construction of the force main extension will include appropriate fittings, valves, air release valving and surface restoration.

**INFORMATION TO BE PROVIDED TO ENGINEER BY CLIENT**

To assist in a timely and thorough preparation of the drawings and contract documents, the Client shall provide the following items and services to the Engineer as available:

1. As-constructed drawings and specifications of existing pipelines.
2. Timely response to questions and review of drawings and contract documents.
3. Pothole of utilities as needed.

**ASSUMPTIONS**

The identified Scope of Work is based on the following assumptions. If any ultimate facts or events differ from these assumptions, the Engineer's scope of work, schedule and compensation shall be adjusted accordingly.

1. The Client will provide traffic control during field survey work, if needed.
2. The project is funded by Cowlitz County rural development funds.
3. The Client will locate the existing waterline.
4. The Client will pothole existing utilities to determine location, size and depth where needed.
5. No new easements are required for construction of the new force main.
6. The Client will coordinate with private residences regarding encroachments into the right of way.
7. The Engineer will submit a Utility Accommodation Application to WSDOT for the new force main construction.

8. A SEPA checklist and other permits (other than a WSDOT Utility Accommodation Application permit indicated above) are not required for this project.
9. No cultural, historical, wetland, biological or habitat investigation or reports are required for the project.
10. Washington State Department of Ecology approval of the plans and specifications is not required.
11. Client standard details will be utilized as applicable.
12. The Client will pay all fees associated with obtaining permits to construct the new force main.
13. No additional hydraulic calculations or evaluation will be provided. It is anticipated the existing Dougherty pump station will pump at a reduced rate due to the force main extension increasing the total dynamic head (TDH) the pumps will operate at.

## **DESIGN PHASE ENGINEERING SERVICES**

### **Task 1 - Meetings and Project Management**

The Engineer shall provide project administration and project management consisting of the following:

- a) General project administration.
- b) Monthly narrative progress reports during project as requested.

### **Task 2 - Gather and review background data:**

If available, the Engineer will gather and review as constructed drawings of the existing sewer pipelines to be connected and any geotechnical investigation work that may be available. The Client will provide copies of these documents.

### **Task 3 - Topographic Survey**

The Engineer will mark out and call for utility locates and will perform a field topographic survey and prepare a base map for use by Engineer in preparing the design drawings. The Client will locate waterline and provide traffic control as needed during field survey work. Monuments will not be surveyed to determine right of way and the existing fences will be held as right of way.

### **Task 4 - Prepare 50% Drawings:**

Under this task the Engineer will perform the following:

- a) Prepare existing conditions drawings using the topographic survey data.
- b) Prepare 50% Design Drawings: The Engineer will prepare drawings for the project in AutoCAD Civil3D 2026 format, an opinion of probable construction cost with contingency and will incorporate WSDOT, Engineer and Client engineering standards as appropriate.

It is anticipated that the design drawings will consist of approximately 7 sheets including a cover sheet, an index, notes and legend sheet, 3 plan and profile sheets and 2 detail sheets.

- c) Quality Control (QC) project review meetings with the Client and the Engineer review team are scheduled for one time during preparation of the 50% drawings.

- d) The Engineer will perform an in-house QC review of the 50% design documents to ensure the documents are consistent in presentation of the design information.
- e) One set of the 50% drawings in electronic pdf format will be submitted to the Client for review and comment. Client comments will be incorporated into the 90% documents as appropriate.

**Task 5 – Prepare 90% Drawings and Contract Documents:**

Under this task the Engineer will perform the following:

- a) Prepare 90% Design Drawings, contract documents and opinion of construction cost: The Engineer will continue to prepare drawings for the project, building on the 50% documents. The Engineer will update the opinion of construction cost. The Engineer will begin preparation of contract documents and technical specifications for the project.

It is anticipated the construction contract documents will consist of EJCDC up front documents consisting of Invitation to Bid, Instructions to Bidders, Bid Package, General and Supplementary Conditions, and Washington State Prevailing Wage Rates. The technical specifications will consist of applicable CSI technical specifications.

- b) Quality Control (QC) project review meetings with the Client and Engineer review team are scheduled for one time during preparation of the 90% drawings and specifications.
- c) The Engineer will perform an in-house QC review of the 90% design drawings to ensure the documents are consistent in presentation of the design information.
- d) One set of the 90% drawings, contract documents and technical specifications in electronic pdf format will be submitted to the Client for review and comment. Client comments will be incorporated into the 100% documents as appropriate.

**Task 6 – Prepare 100% Drawings and Contract Documents:**

Under this task the Engineer will perform the following:

- a) Prepare 100% Design Drawings and contract documents: Engineer will build on the 90% documents to complete the 100% drawings, contract documents and technical specifications. The Engineer's opinion of construction cost will be reviewed, updated as appropriate and finalized.
- b) Engineer will perform an in-house QC review of the design drawings near the 100% completion stage to ensure the drawings are consistent in presentation of the design information.
- c) The 100% design drawings and construction contract documents, ready for bid advertisement, will be provided in pdf format to the Client for review and comment. The documents will be suitable both for electronic distribution to prospective bidders and for reproduction.

**Task 7 – Prepare Permit Applications**

The Engineer will prepare permit applications and associated exhibits for submission to the WSDOT to receive a Utility Accommodation permit for the work within WSDOT right of way along the Exit 49 on ramp.

**BID PHASE AND CONSTRUCTION PHASE ENGINEERING SERVICES** are not included as part of this contract. If the Client desires the Engineer to provide construction administration and observation services, such services shall be authorized under either an amendment to this authorization or with a separate authorization.

**SCHEDULE**

The work will be coordinated with the Client and the deliverables for the project will be provided to the Client in a mutually agreed upon time frame.

**BUDGET**

The budget for the Dougherty Sewer Force Main Extension design project Scope of Work shall be set at \$45,000 and is presented in detail in Attachment No. 1. The Engineer agrees not to exceed this amount to complete the above Scope of Work without the Client's prior authorization.

Authorized by:  
City of Castle Rock, Washington

\_\_\_\_\_  
Date

\_\_\_\_\_  
By:

Accepted: Gibbs & Olson, Inc.

June 17, 2026

Date



\_\_\_\_\_  
By: Richard A. Gushman, President

Attachments:  
No. 1 - Budget Estimate

Authorization 2026-001  
 City of Castle Rock  
 Eaton Pump Station Force Main Extension - Design Engineering  
 June 17, 2026



Preliminary Budget		Principal	Project Manager	Engineer III	Engineer I	Design Tech II	Sr Land Surveyor	2 Man Survey Crew	Word Processor	Locate Subcon.	Total Budget
<b>Engineering Services</b>											
<b>Task 1</b>	Meetings and Project Management	2	4	4	0	0	0	0	2	\$0	\$2,550
<b>Task 2</b>	Gather and review background data	0	2	2	2	0	0	0	0	\$0	\$1,190
<b>Task 3</b>	Topographic Survey	0	2	2	0	0	20	16	0	\$2,000	\$10,610
<b>Task 4</b>	Prepare 50% Drawings	0	6	12	16	8	0	0	0	\$0	\$7,300
<b>Task 5</b>	Prepare 90% Design Drawings and Contract Documents	1	8	20	16	8	0	0	2	\$0	\$9,785
<b>Task 6</b>	Prepare 100% Design Drawings and Contract Documents	1	8	16	16	4	0	0	4	\$0	\$8,685
<b>Task 7</b>	Prepare Permit Applications	0	2	8	8	4	0	0	0	\$0	\$3,760
<b>Subtotal</b>		<b>4</b>	<b>32</b>	<b>64</b>	<b>58</b>	<b>24</b>	<b>20</b>	<b>16</b>	<b>8</b>	<b>\$0</b>	<b>\$43,880</b>
Mileage											\$75
GPS Survey Equipment											\$560
Miscellaneous Expenses											\$485
<b>TOTAL DESIGN PHASE ENGINEERING BUDGET</b>											<b>\$45,000</b>

2026 RATES      \$285      \$260      \$185      \$150      \$140      \$190      \$230      \$100





**CONSUMER FIREWORKS RETAIL SALES (CFRS) FACILITY LICENSE**

Stand Number: SN-16904

Licensee Data

American Promotional Events, Inc. - West  
2120 Milwaukee Way  
Tacoma, WA 98421  
License Number: WSPFL-02766  
Phone Number: (253) 922-0800

Operational Data

Wholesaler: American Promotional Events, Inc. - We  
County of Operation: Cowlitz  
Operates For: **PARENTS OF SCOUTS 313**  
Stand Operated By: **SCOTT NEVES**

Date of Issue: March 9, 2026

Date of Expiration: January 31, 2027

Consumer Fireworks Retailer Licenses issued after May are **ONLY** valid for New Years Sales

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.

SURRENDER THIS PORTION OF THE LICENSE TO THE FIREWORKS WHOLESALER **WAS4012**

3000-420-041 (10/18)



**CONSUMER FIREWORKS RETAIL SALES (CFRS) FACILITY LICENSE**

Stand Number: SN-16904

Licensee Data

American Promotional Events, Inc. - West  
2120 Milwaukee Way  
Tacoma, WA 98421  
License Number: WSPFL-02766  
Phone Number: (253) 922-0800

Operational Data

Wholesaler: American Promotional Events, Inc. - We  
County of Operation: Cowlitz  
Operates For: **PARENTS OF SCOUTS 313**  
Stand Operated By: **SCOTT NEVES**

Date of Issue: March 9, 2026

Date of Expiration: January 31, 2027

Consumer Fireworks Retailer Licenses issued after May are **ONLY** valid for New Years Sales

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.

THIS LICENSE PORTION ACCOMPANIES YOUR LOCAL PERMIT APPLICATION

3000-420-041 (10/18)

**WAS4012**



**CONSUMER FIREWORKS RETAIL SALES (CFRS) FACILITY LICENSE**

Stand Number: SN-16904

Licensee Data

American Promotional Events, Inc. - West  
2120 Milwaukee Way  
Tacoma, WA 98421  
License Number: WSPFL-02766  
Phone Number: (253) 922-0800

Operational Data

Wholesaler: American Promotional Events, Inc. - We  
County of Operation: Cowlitz  
Operates For: **PARENTS OF SCOUTS 313**  
Stand Operated By: **SCOTT NEVES**

Date of Issue: March 9, 2026

Date of Expiration: January 31, 2027

Consumer Fireworks Retailer Licenses issued after May are **ONLY** valid for New Years Sales

This license is NOT valid without a permit from a local fire code official/authority having jurisdiction. This license allows for operation of a single location/stand for retail sales to the public of state legal consumer fireworks purchased only from a licensed fireworks wholesaler.

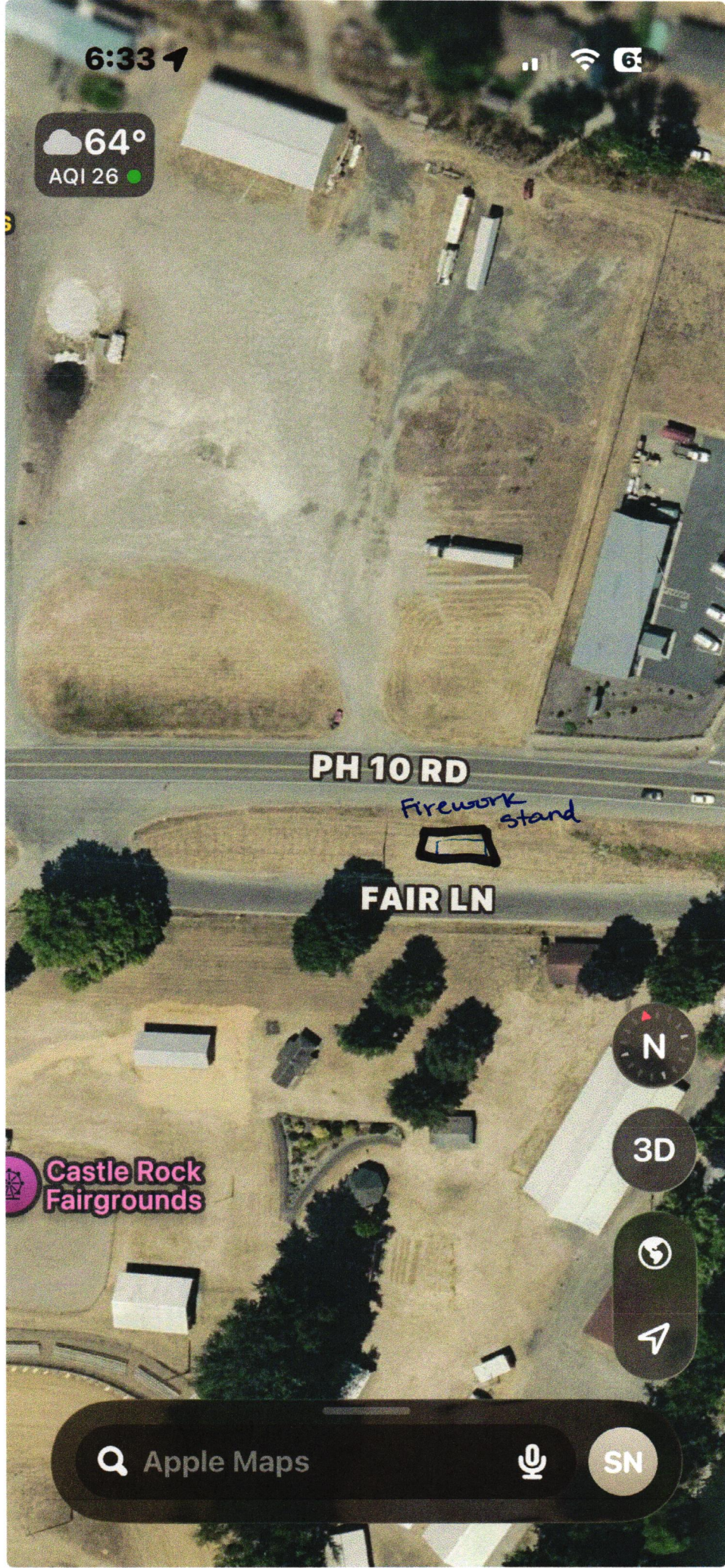
THIS PORTION OF THE LICENSE MUST BE POSTED AT THE STAND AT ALL TIMES

3000-420-041 (10/18)

6:33



64°  
AQI 26



PH 10 RD

Firework stand

FAIR LN

Castle Rock Fairgrounds

N

3D



Apple Maps



SN



# CERTIFICATE OF LIABILITY INSURANCE

11/1/2026

DATE (MM/DD/YYYY)

12/8/2025

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).

<b>PRODUCER</b> Lockton Companies, LLC DBA Lockton Insurance Brokers, LLC in CA CA license #0F15767 3280 Peachtree Rd. NE, Ste. 1000 Atlanta GA 30305 (404) 460-3600	<b>CONTACT NAME:</b> <b>PHONE (A/C, No. Ext):</b> <b>E-MAIL ADDRESS:</b>	<b>FAX (A/C, No):</b>	
	<b>INSURER(S) AFFORDING COVERAGE</b>		
<b>INSURED</b> 1359629 American Promotional Events, Inc. DBA TNT Fireworks, Inc. P.O. Box 1318 4511 Helton Drive Florence AL 35630	<b>INSURER A:</b> Century Surety Company		<b>NAIC #</b> 36951
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
	<b>INSURER F:</b>		

**COVERAGES**

CERTIFICATE NUMBER: 12220780

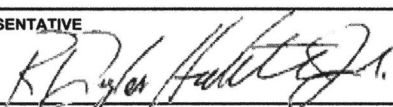
REVISION NUMBER: XXXXXXXX

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	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y	N	CCP1254837	11/1/2025	11/1/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	NOT APPLICABLE			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 THIS CERTIFICATE SUPERSEDES ALL PREVIOUSLY ISSUED CERTIFICATES FOR THIS HOLDER, APPLICABLE TO THE CARRIERS LISTED AND THE POLICY TERM(S) REFERENCED.  
 Property located at Vacant Lot 120 Fair Lane Castle Rock, WA (WAS4012) Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.

**CERTIFICATE HOLDER****CANCELLATION**

<b>12220780</b> City of Castle Rock Parents of Scouts 313 PO BOX 370 Castle Rock WA 98611	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  <b>AUTHORIZED REPRESENTATIVE</b> 
---	--

© 1988-2015 ACORD CORPORATION. All rights reserved.



**City of Castle Rock**  
PO Box 370  
Castle Rock, WA 98611-0370  
(360) 274-8181  
www.ci.castle-rock.wa.us

Receipt Number:

20228

*Ten and 0/100's Dollars*

Received From:	Date	Receipt Number:	Amount
Parents of Scouts 313 Scott Neves	6/11/2026	20228	\$10.00

Printed By:	Cash	Scott Neves (Parents of Scou	\$20.00
kakesson	Cash	CHANGE	(\$10.00)

2026 Fireworks Permit - Parents of Scouts 313

**FILE COPY**

To Whom It May Concern 6-16-26

The Castle Rock Fair Board has  
given Boy Scout Troop 315 permission  
to sell their wares for the 4<sup>th</sup> of  
July

Thank you  
Gene Prince  
Vice President

## Review / Authorization

Primary Responsible Department: Finance

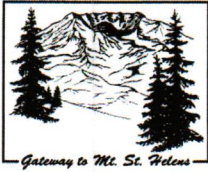
Permit No. 2026-0005

Castle Rock Fair Parade

Kristina Higginbotham; info@castlerockfair.com; 360.274.4116

**Reviewed by:** (mark "X" & date upon review)      **Comments and Conditions**

<input checked="" type="checkbox"/> Finance CeLina Hart, Lead Deputy Clerk Date: 6/10/2026	No issues
<input checked="" type="checkbox"/> Fire (Cowlitz County Fire District 6) Bill LeMonds, Fire Chief Date: 6/11/2026	no issues
<input checked="" type="checkbox"/> Police Charlie Worley, Chief Date: 6/15/2026	No issues
<input checked="" type="checkbox"/> Public Works / Engineering Tyler Stone, PW Director Date: 6/11/2026	No issues
<input type="checkbox"/> Parks	
<input type="checkbox"/> Streets	
<input type="checkbox"/> Traffic	
<input type="checkbox"/> Other	
<input type="checkbox"/> Building/Planning, if needed	n/a
Additional Comments:	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Primary responsible department signature _____ Date _____



# Special Event Permit

Permit No. 2026-0005

City of Castle Rock | Phone: 360.274.8181 | www.ci.castle-rock.wa.us

Application must be made a minimum of **60 days** prior to event (30 if a prior annual event)

## Contact Information

Organization/Sponsor <b>Castle Rock Fair Parade</b>	Address/City/State/Zip <b>120 Fair Lane P.O. Box 655 Castle Rock, WA 98611</b>	
Contact Person <b>Kristina Higginbotham</b>	Phone <b>360-274-4116</b>	Email <b>info@castlerockfair.com</b>
As contact person, are you authorized by the Organization/Sponsor to act on its behalf?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Address/City/State/Zip (if different from above) <b>(Kristina) 169 Dakota Dr, Castle Rock, WA 98611</b>	
	Phone <b>360-846-8280</b>	Email <b>Kristinahigginbotham@yahoo.com</b>
Are there other individuals authorized to act on behalf of the Organization/Sponsor? <b>Brian Platt Parade Coordinator Gary Boshart Castle Rock Fair Board Members</b>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please provide their name and contact information: <b>503-572-0809 gmboshart@gmail.com</b>

## Event Information

Event Name <b>Castle Rock Fair Parade</b>		Date(s) of event <b>07/16/26</b>	Estimated # of participants for event
Start Time <b>6:30 AM (PM)</b>	End Time <b>7:30 AM (PM)</b>	Setup Time <b>5:30 AM (PM)</b>	Takedown Time <b>7:30 est. AM (PM)</b>
Is this an annual event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO*		Applicant may be required to collect approval signatures from neighboring or affected residents and/or business owners.	
Have you previously requested a permit for such activity? <b>Yes</b>		If yes, approximate date?	
Are participants required to pay a fee? <b>No</b>		Are participants to make a donation? <b>No</b>	
Will this event impede traffic? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Follow traffic, pedestrian and bike laws? <input type="checkbox"/> YES <input type="checkbox"/> NO	Utilize sidewalks only? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Details of event (Please include a detailed map showing location of event and copies of any proposed brochures, posters, flyers, or mailings you desire to use to advertise this event. Additionally, please identify on the map where volunteers will be placed to assist with this event. Include additional pages if needed to fully explain details. <b>Map attached. stage at CR Elementary, onto Huntington, to Cowitz St. W., to 2nd Ave, to C St, to Front Ave to disband at CR Middle School.</b>			

## Type of Use

Type of use requested <input checked="" type="checkbox"/> Parade <input checked="" type="checkbox"/> Street Closure <input type="checkbox"/> Street Sale <input type="checkbox"/> Athletic Run/Walk <input type="checkbox"/> Block Party <input type="checkbox"/> Other
Where is use requested? <input type="checkbox"/> Park area*/where? _____ <input type="checkbox"/> Private property/where? _____ <input type="checkbox"/> Park building*/which one? _____ <input checked="" type="checkbox"/> Other <b>Street use for parade, sidewalk use for spectators. Map beginning @ CR Elementary. Disband at CR Middle School.</b>
*Note: If planning to use a park area or building, please contact the Public Works Department at 360.274.7478 for any additional forms required for the use of a park area or building.
Please check all that apply to this event: <input checked="" type="checkbox"/> Requesting closure/impediment of a street or public right-of-way. (Please attach a map and mark location.) <input type="checkbox"/> Requesting to erect structure(s)/tent(s). Number and location _____ <input type="checkbox"/> Planning to serve food/drink. If yes, including alcohol beverages? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> This event involves political or religious activity intended primarily for the communication or expression of ideas. <input type="checkbox"/> Participants will be required to pay a fee. <input type="checkbox"/> Participants will be asked to make a donation.

Permit holders are responsible for cleanup of debris in connection with their activities.

RECEIVED MAY 20 2026

SCANNED & EMAILED  
JUN 10 2026

Initial: CTA

### City Assistance Requested

Public Works Division (example: street closure, signage, signal adjustment, facility availability, additional sanitation/garbage, restrooms) - Explain <i>Street closure on parade route + detour signage. No parking signage ahead of route closure.</i>	Police Department (example: traffic, patrol, security) - Explain <i>Traffic control near parade route.</i>
Other - Explain	

### Insurance Information

The City does not maintain insurance that will respond to claims against the applicant arising out of the use of facilities by the applicant, its members, or those attending the event. Depending on the type of event you are planning, and the activity and risk level of your group, you may be required to obtain bodily injury and property damages liability insurance in accordance with City policy, name the City as an additional insured on the policy, and be responsible for obtaining said insurance. After reviewing this application, the City will determine whether you must obtain liability insurance.

### Agreement

Depending on the type of event planned, you may be required to defend, indemnify and hold harmless the City, its agents, employees and officials, while acting within the scope of their duties, from all causes of action, demands and claims, including the cost of their defense, arising in favor of the organization, the organization's employees or third parties on account of personal injuries, bodily injuries, death, or damage to property arising out of the acts or omissions of the organization, its employees or representatives, concessionaires of the event or any other person or entity, except for liability caused due to the sole negligence of the City. After reviewing this application, the City will determine whether you must indemnify the City and its agents.

By my signature I state that I am authorized to obligate the above-titled Organization/Sponsor, including financially, for any statements or requests made herein.

Applicant Name (please print) <i>Kristina Higginbotham</i>	Applicant Signature <i>Kristina Higginbotham</i>
Organization/Title <i>CR Fair Board / Volunteer</i>	Date <i>5/19/26</i>

**Add additional information on separate sheets as needed.**

### City Use Only

Other permits required in conjunction with this permit:

- Electrical   
  Fire, Life & Safety   
  Parks   
  Other: \_\_\_\_\_

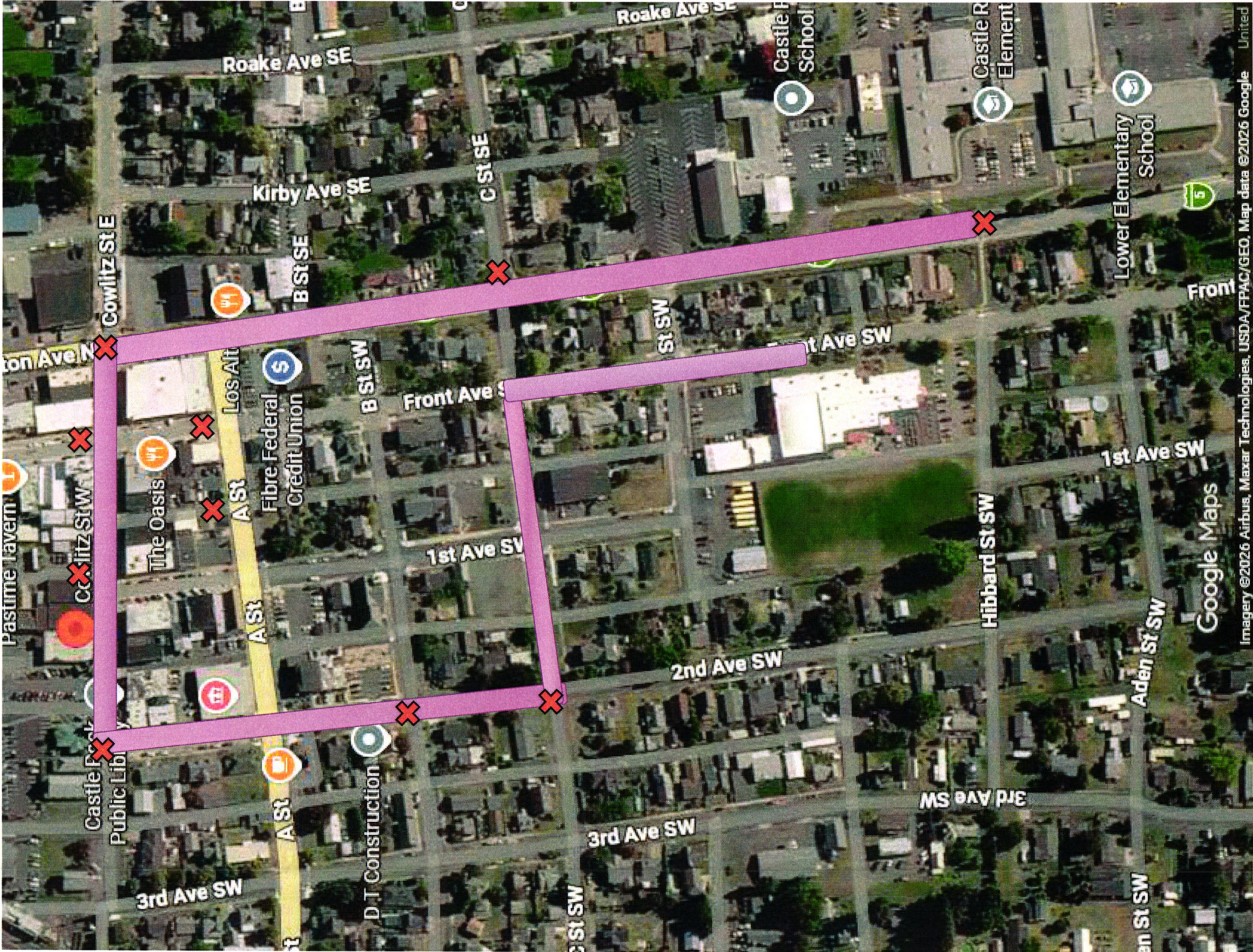
#### Fees/Payments/Refunds

	Fee(s)	Initial(s)	Date(s)
Deposit(s)			
Permit(s)			
Facility Use/Rental(s)			
Admission Tax(es)			
Additional Costs			
<b>TOTAL PAID</b>			
<b>TOTAL REFUND / DUE</b>			

Proof of insurance required?     Yes     No

Bond Required?     Yes     No

**RECEIVED MAY 20 2026**



Imagery ©2026 Airbus, Maxar Technologies, USDA/FPAC/GEO, Map data ©2026 Google

*Normal route & closures.*

RECEIVED MAY 20 2026

### Special Event Signature Collection Sheet

Event: Castle Rock Fair Parade Date: 7/16/26 (Thur) Time: 5:30 to 7:30  
 . 6:30 start time

By signing this paper, I am stating that I am either in favor or against the above listed event. Please write clearly.

Name	Signature	Business	Address	In Favor	Not in Favor
Kevin Sparks		On Target Outdoors ✓	101 Huntington Ave	✓	
Tyler Perkins-Clark		Castle Rock Post Office ✓	126 Cowlitz St W	✓	
Hong TO		shayla nail ✓	413 Cowlitz St W	✓	
Nathan Eiche		Bredfields Hardware ✓	102 Cowlitz St W	✓	
Ervin Loraio		Los Altos ✓	216 Huntington	✓	
Amy Arypne		CRAL ✓	2 Cowlitz St W.	✓	
Matt McPherson		INDIGO ✓	28 Cowlitz St W	✓	

RECEIVED MAY 20 2026

### Special Event Signature Collection Sheet

Event: Castle Rock Fair Parade Date: 7/16/26 (Thur) Time: 5:30 to 7:30  
 6:30 start time

By signing this paper, I am stating that I am either in favor or against the above listed event. Please write clearly.

Name	Signature	Business	Address	In Favor	Not in Favor
Matt McPherson		Blue Ferning Boutique ✓	109 front Ave SW	✓	
Darryl Kent		PT NW	51 Cowlitz St	✓	
	Brenda Bauer	Legally Blonde ✓	132-130	✓	?
Patrick LaBann		NAPA ✓	105 Huntington Ave S	✓	
Kari Murfitt		GFE Bethel Light ✓	6 Cowlitz	✓	
Kim Lake		Kim's Unique Boutique ✓	23 Cowlitz	✓	
Jennifer Engkrat		Vault Books + Brew ✓	20 Cowlitz	✓	

### Special Event Signature Collection Sheet

Event: CR Fair Parade Date: 7/16/26 Time: 6:30 to 7:30

By signing this paper, I am stating that I am either in favor or against the above listed event. Please write clearly.

Name	Signature	Business	Address	In Favor	Not in Favor
Matisyn Chapman	<i>MC</i>	Wild Heifers Boutique <i>+ Barnett</i>	32 Cowlitz St W	✓	
Jill Roddebeck	<i>J Roddebeck</i>	CR Pharmacy	117 - SW 1st	✓	
Colleen Y.	<i>Colleen Y.</i>	Portia Restaurant	103 Hyster	✓	
Kristin Cheateley	360-430-9400 text approval	River Ridge Real Estate	101 Front Ave SW	✓	
Robin Frazier	<i>Chanelle White</i>	OASIS	123 Front Street	✓	
Robin Frazier	<i>Chanelle White</i>	WWB	Cowlitz	✓	
Ginni Durdwal	<i>Ginni</i>	Cascade Select	204 W. Cowlitz	✓	

RECEIVED JUN 09 2026

### Special Event Signature Collection Sheet

Event: CR Fair Parade Date: 7/11/26 Time: 6:30 to 7:30

By signing this paper, I am stating that I am either in favor or against the above listed event. Please write clearly.

Name	Signature	Business	Address	In Favor	Not in Favor
Jakki Millo	emailed jakki@firemountain travel.com	Fire Mountain Travel		✓	
Stefi Sudar	Verbal over phone 360-274-2353	Cowlitz Family Health Center		✓	
		Jupiter Lighting			
		New You Salon			
		Turquoise Salon + spa			

Spoke w/  
Andrew &  
sent details  
in email.

Left 2  
messages

Not open,  
no contact  
info.

RECEIVED JUN 09 2026

# Castle Rock Fair Parade July 16, 2026

"Red White & Blue...This Fair's For You"

Castle Rock Fair Parade will start at **6:30pm**, July 16, 2026

Line up begins at 5:30pm.

Judging starts at 6:10pm

## Parade Line Up Information

- Meet at the CR Elementary School Parking Lot
- Line up begins at 5:30 pm
- Please arrive no later than 5:50 so Parade Team can make sure everyone is registered and you get a number so each entry lined up accordingly. Pre judging will begin at 6:10pm and will be judged as parade starts.
- **Parade starts at 6:30 pm**
- Parade route will be from the Elementary School onto Huntington (towards exit 49), Turn left onto Cowlitz turns left on 2<sup>nd</sup> Ave, Turn left onto C street, Turns Right onto Front Ave and disbands at the middle school.
- First and foremost is ensuring safety of the children watching the parade. No throwing of candy from floats/vehicles. Please assign volunteers to walk alongside your float entry and hand out the candy to the children in the crowd. This ensures that the children are not running towards the parade into the street to get candy.
- All animal entries must provide a clean up crew.
- All parade entry participants will receive passes to the fair for Thursday night only.

RECEIVED MAY 2 D 2026

## Castle Rock Fair Parade July 16, 2026

Red White & Blue...This Fair's For You

You are invited to participate in the 2025 Castle Rock Fair Parade. This year the parade will be held **Thursday, July 16, 2026 at 6:30 pm**. Line up begins at 5:30pm. Once you indicate that you or your group will be participating, a map of the route including the line-up time & location will be sent to you before the parade. Parade information will be posted on the Castle Rock Fair FB page and on the website: [www.castlerockfair.com](http://www.castlerockfair.com)

Awards will be given for Best Overall Entry, Best Overall Youth, Best Overall Adult, plus Each category will be first, second and third.

There is no entry fee for the parade. Submit entries by July 15, 2026. Same day entries will be accepted, but early entry helps in planning the line up.

Castle Rock Fair

Attn: Parade Coordinator

PO Box 655

Castle Rock, WA 98611

Email: [briflatt@gmail.com](mailto:briflatt@gmail.com) or phone Brian 503-572-0809

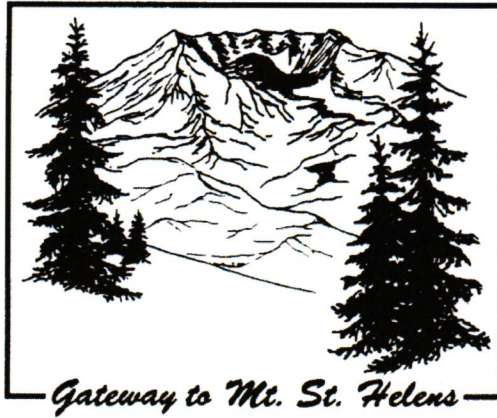
Please select an individual in your group to be a representative who will check in with parade officials upon arriving for line up. Each entry will be given tickets to the fair for the parade evening (please know how many your entry will need).

Animal entries must provide a Clean-up service.

Handouts (candy etc.) are permitted by individuals walking with your entry. Please do not throw candy from your float. Nothing can be thrown from the entries to onlookers. Thank you!

All current covid/health guidelines will need to be followed.

RECEIVED MAY 2 2026



### WAIVER of LIABILITY

HOLD HARMLESS - Applicant shall defend, indemnify and hold harmless the City of Castle Rock, its officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of the acts or omissions of the applicant, its employees, volunteers, representatives or vendors, or from any activity, work or thing done, permitted, or suffered by applicant, participant, or member of the public, related to the permitted activity, except only such injury or damage as shall have been occasioned by the sole negligence of the City of Castle Rock.

Organization: Castle Rock Fair

Title of Event: Castle Rock Fair Parade

Date of Event: July 16, 2026

Phone Number: 360-274-4136

Authorized Representative (please print): Barbara Rider

Signature of Authorized Representative: Barbara Rider

Date Signed: 6-16-26



Outlook

---

**RE: Special Event Permit Dept. Approval - CR Fair Parade**

---

**From** Bill LeMonds <chief@cowlitz6fire.org>**Date** Thu 6/11/2026 8:35 AM**To** City Hall Finance <finance@ci.castle-rock.wa.us>

No issues.

Bill

---

**From:** City Hall Finance <finance@ci.castle-rock.wa.us>**Sent:** Wednesday, June 10, 2026 5:19 PM**To:** Tyler Stone <tstone@ci.castle-rock.wa.us>; Bill LeMonds <chief@cowlitz6fire.org>; Charlie Worley <cworley@crpolice.org>; Mike Berndt <mberndt@crpolice.org>; Yeager, David <dyeager@crpolice.org>**Subject:** Special Event Permit Dept. Approval - CR Fair Parade

Hi everyone,

Attached you will find the information for the special event permit application for the CR Fair Parade. If you could please review and approve/deny/add your comments **no later than 6/16/2026**, because I need it to be included on the 6/22/2026 Council Meeting Agenda. You won't see a Waiver of Liability attached to this email because I have emailed Kristina requesting an updated form. In the past, it wasn't required to be signed by authorized representatives of the Organizations but, per Nikki, going forward they do. We don't need the updated one to move forward though, council can approve this contingent that updated form.

Please let me know if you have any questions.

To find the Special Event Authorization Form go to:  
Network->Citywide folder->Special Event folder->AWAITING DEPARTMENT APPROVALS – IN PROCESS folder – 2026-0005 – Castle Rock Fair Parade – 2026-0006 - Special Event Authorization Form

**\*\*Bill**– you may respond back to me on this email, letting me know if you are good with this or if you have any questions or concerns.

Thank you,

*CeLina Hart*

Lead Deputy Clerk

City of Castle Rock

PO Box 370

141 A St SW

Castle Rock, WA 98611

Monday - Thursday 7:30am - 5:00pm

Direct: 360.967.6016

Office: 360.274.8181 ext. 301

[chart@ci.castle-rock.wa.us](mailto:chart@ci.castle-rock.wa.us)



## Review / Authorization

Primary Responsible Department: Finance

Permit No. 2026-0002

TT Motorcycle Events (Mt St Helens Motorcycle Club)

Eldon Hunter, Joe Rasmussen

**Reviewed by:** (mark "X" & date upon review)      **Comments and Conditions**

<input type="checkbox"/> Finance CeLina Hart, Lead Deputy Clerk Date: <span style="background-color: #e0f0ff; padding: 2px;"> </span>	n/a
<input type="checkbox"/> Fire (Cowlitz County Fire District 6) Bill LeMonds, Fire Chief Date: <span style="background-color: #e0f0ff; padding: 2px;"> </span>	n/a
<input type="checkbox"/> Police Charlie Worley, Chief Date: <span style="background-color: #e0f0ff; padding: 2px;"> </span>	n/a
<input type="checkbox"/> Public Works / Engineering Tyler Stone, PW Director Date: <span style="background-color: #e0f0ff; padding: 2px;"> </span>	n/a
<input type="checkbox"/> Parks	
<input type="checkbox"/> Streets	
<input type="checkbox"/> Traffic	
<input type="checkbox"/> Other	
<input type="checkbox"/> Building/Planning, if needed	n/a

Additional Comments:  
 These are their normal races they have every year, it is being brought to council for approval to extend past the 10:00pm noise control cutoff. It is being requested that they are allowed an hour grace period with a cutoff time of 11:00pm for possible unforeseen delays.

<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Primary responsible department signature	Date
---	--	------



# Special Event Permit

Permit No. 2026-0002

City of Castle Rock | Phone: 360.274.8181 | www.ci.castle-rock.wa.us  
 Application must be made a minimum of **60 days** prior to event (30 if a prior annual event)

## Contact Information

Organization/Sponsor <u>Mt. St. Helens m/c club</u>	Address/City/State/Zip <u>75 PH 10 CASTLEROCK, WA. 98611</u>	
Contact Person <u>ELDON HUNTER</u>	Phone <u>360-431-2632</u>	Email
As contact person, are you authorized by the Organization/Sponsor to act on its behalf?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Address/City/State/Zip (if different from above) <u>275 JOHN ST. KEBE, WA. 98626</u>	
	Phone <u>360-431-2632</u>	Email
Are there other individuals authorized to act on behalf of the Organization/Sponsor? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO    If yes, please provide their name and contact information: <u>JOE RASMUSSEN    360-274-3136</u>		

## Event Information

Event Name <u>TT MOTORCYCLE EVENT</u>		Date(s) of event	Estimated # of participants for event <u>300</u>
Start Time <u>7:00</u> AM/PM	End Time <u>10:00</u> AM/PM	Setup Time <u>7:00</u> AM/PM	Takedown Time <u>10:00</u> AM/PM
Is this an annual event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO*    Applicant may be required to collect approval signatures from neighboring or affected residents and/or business owners.		Estimated # of volunteers for event <u>20</u>	
Have you previously requested a permit for such activity? <u>YES</u>		If yes, approximate date? <u>3-1-25</u>	
Are participants required to pay a fee? <u>YES</u>		Are participants to make a donation? <u>NO</u>	
Will this event impede traffic? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Follow traffic, pedestrian and bike laws? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Utilize sidewalks only? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Details of event (Please include a detailed map showing location of event and copies of any proposed brochures, posters, flyers, or mailings you desire to use to advertise this event. Additionally, please identify on the map where volunteers will be placed to assist with this event. Include additional pages if needed to fully explain details.)			

## Type of Use

Type of use requested	<input type="checkbox"/> Parade	<input type="checkbox"/> Street Closure	<input type="checkbox"/> Street Sale	<input type="checkbox"/> Athletic Run/Walk	<input type="checkbox"/> Block Party
	<input checked="" type="checkbox"/> Other <u>MOTORCYCLE EVENT</u>				
Where is use requested?	<input type="checkbox"/> Park area*/where? _____		<input type="checkbox"/> Park building*/which one? _____		
	<input checked="" type="checkbox"/> Private property/where? <u>120 FAIR LANE</u>		<input type="checkbox"/> Other _____		
*Note: If planning to use a park area or building, please contact the Public Works Department at 360.274.7478 for any additional forms required for the use of a park area or building.					
Please check all that apply to this event:					
<input type="checkbox"/> Requesting closure/impediment of a street or public right-of-way. (Please attach a map and mark location.)					
<input checked="" type="checkbox"/> Requesting to erect structure(s)/tent(s). Number and location <u>50 120 FAIR LANE</u>					
<input checked="" type="checkbox"/> Planning to serve food/drink. If yes, including alcohol beverages? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
<input type="checkbox"/> This event involves political or religious activity intended primarily for the communication or expression of ideas.					
<input checked="" type="checkbox"/> Participants will be required to pay a fee.					
<input type="checkbox"/> Participants will be asked to make a donation.					

Permit holders are responsible for cleanup of debris in connection with their activities.

RECEIVED MAR 05 2026

-1-

SCANNED  
 + emailed  
 MAR 19 2026

Initial: CS

### City Assistance Requested

Public Works Division (example: street closure, signage, signal adjustment, facility availability, additional sanitation/garbage, restrooms) - Explain	Police Department (example: traffic, patrol, security) - Explain
	Other - Explain

### Insurance Information

The City does not maintain insurance that will respond to claims against the applicant arising out of the use of facilities by the applicant, its members, or those attending the event. Depending on the type of event you are planning, and the activity and risk level of your group, you may be required to obtain bodily injury and property damages liability insurance in accordance with City policy, name the City as an additional insured on the policy, and be responsible for obtaining said insurance. After reviewing this application, the City will determine whether you must obtain liability insurance.

### Agreement

Depending on the type of event planned, you may be required to defend, indemnify and hold harmless the City, its agents, employees and officials, while acting within the scope of their duties, from all causes of action, demands and claims, including the cost of their defense, arising in favor of the organization, the organization's employees or third parties on account of personal injuries, bodily injuries, death, or damage to property arising out of the acts or omissions of the organization, its employees or representatives, concessionaires of the event or any other person or entity, except for liability caused due to the sole negligence of the City. After reviewing this application, the City will determine whether you must indemnify the City and its agents.

By my signature I state that I am authorized to obligate the above-titled Organization/Sponsor, including financially, for any statements or requests made herein.

Applicant Name (please print) <b>ELDON HUNTER</b>	Applicant Signature 
Organization/Title <b>TRACK MASTER</b>	Date <b>3-5-2026</b>

**Add additional information on separate sheets as needed.**

### City Use Only

Other permits required in conjunction with this permit:  
 Electrical   
  Fire, Life & Safety   
  Parks   
  Other: \_\_\_\_\_

#### Fees/Payments/Refunds

	Fee(s)	Initial(s)	Date(s)
Deposit(s)			
Permit(s)			
Facility Use/Rental(s)			
Admission Tax(es)			
Additional Costs			
<b>TOTAL PAID</b>			
<b>TOTAL REFUND / DUE</b>			
Proof of insurance required? <input type="checkbox"/> Yes <input type="checkbox"/> No		Bond Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	

# Special Event Signature Collection Sheet

Event: TT m/c Racing Date: \_\_\_\_\_ Time: 7:00 Am to 10:00 pm  
3:00 pm - 10: pm

By signing this paper, I am stating that I am either in favor or against the above listed event. Please write clearly.

SCANNED  
 MAR 19 2026  
 Initial: \_\_\_\_\_

Name	Signature	Business	Address	In Favor	Not Favor
Terrie Ripley	<i>Terrie Ripley</i>	Four Corners General	4858 Westside Hwy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Angelina McLean	<i>Am</i>	neighbor	71 PH 10 CASTLE ROCK WA	<input checked="" type="checkbox"/> YES	<input type="checkbox"/>
Megan Perry	<i>Megan Perry</i>	Dollar General	78 PH 10	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Joe Godinho	<i>Joseph M Godinho</i>	4-Corners Farm 3/6 acre	70 PH 10	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Melissa HARRISON	<i>Melissa Harrison</i>	Denali Heating	125 Masier Rd	<input checked="" type="checkbox"/>	<input type="checkbox"/>



## 2026 RACE SCHEDULE

May 23 ST • May 24 TT • June 20 ST

## JULY 9-12 NW BIKE WEEK

July 10 ST • July 11 TT • July 25 ST

August 8 TT • August 22 ST

September 5 ST • September 6 TT

September 19 ST • October 3 TT

\$15 pp Gates Open 10am

Signups 12-3pm • Practice 3pm • Racing 5pm

Dry Camp \$25 Weekend except for

Bike Week \$25 per day



**SCANNED**

MAR 19 2026

Initial: \_\_\_\_\_



## WAIVER of LIABILITY

HOLD HARMLESS - Applicant shall defend, indemnify and hold harmless the City of Castle Rock, its officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of the acts or omissions of the applicant, its employees, volunteers, representatives or vendors, or from any activity, work or thing done, permitted, or suffered by applicant, participant, or member of the public, related to the permitted activity, except only such injury or damage as shall have been occasioned by the sole negligence of the City of Castle Rock.

Organization: Mt St Helens Motorcycle Club

Title of Event: TT Motorcycle Racing

Date of Event: 5/24, 7/11, 8/8, 9/6, 10/3

Phone Number: 360.274.3136

Authorized Representative (please print): Joe Rasmussen

Signature of Authorized Representative: Joseph M. Rasmussen

Date Signed: 6/12/26

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)  
**05/26/2026**

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  <b>Duncan &amp; Associates Insurance Brokers</b> P.O. Box 1458 - 2111 Harrison Ave NW Olympia, WA 98502	CONTACT NAME: <b>Susan Goetting</b>
	PHONE (A/C, No, Ext): <b>360-352-7588</b> FAX (A/C, No): <b>360-943-6304</b> E-MAIL ADDRESS: <b>Sue@Duncanins.com</b>
INSURER(S) AFFORDING COVERAGE	
INSURER A :	<b>K&amp;K Insurance Group Inc</b>
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

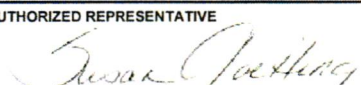
INSURED  
  
**Mt St Helens' Motorcycle Club**  
 P.O Box 555  
 Castle Rock, WA 98611-0555

COVERAGES      CERTIFICATE NUMBER: 00119297-260521095716      REVISION NUMBER: 3

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. LIMITS SHOWN ARE INCLUSIVE OF AMOUNTS REQUESTED BY THE CERTIFICATE HOLDER AND MAY NOT REFLECT POLICY LIMIT AMOUNTS IN EXCESS OF THOSE REQUESTED. \*Not Applicable in WY

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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>E &amp; O 100,000</b> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		M1-MKM-00005003026-03	05/18/2026	05/18/2027	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>300,000</b> MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>5,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>5,000,000</b> \$ AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$	Y		M2-MKX-00005504256-02	05/18/2026	05/18/2027	EACH OCCURRENCE \$ <b>1,000,000</b> AGGREGATE \$ <b>1,000,000</b> \$ PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**City of Castle Rock shall be named as additional insured as per written contract or agreement and per policy provisions.**

CERTIFICATE HOLDER  <b>City of Castle Rock</b> PO Box 370 Castle Rock, WA 98611	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  (SLG)
---	--

## Review / Authorization

Primary Responsible Department: Finance

Permit No. 2026-0003

ST Motorcycle Events (Mt St Helens Motorcycle Club)

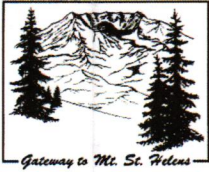
Eldon Hunter, Joe Rasmussen

**Reviewed by:** (mark "X" & date upon review)      **Comments and Conditions**

<input type="checkbox"/> Finance CeLina Hart, Lead Deputy Clerk Date: <span style="background-color: #e0f0ff; padding: 2px;"> </span>	n/a
<input type="checkbox"/> Fire (Cowlitz County Fire District 6) Bill LeMonds, Fire Chief Date: <span style="background-color: #e0f0ff; padding: 2px;"> </span>	n/a
<input type="checkbox"/> Police Charlie Worley, Chief Date: <span style="background-color: #e0f0ff; padding: 2px;"> </span>	n/a
<input type="checkbox"/> Public Works / Engineering Tyler Stone, PW Director Date: <span style="background-color: #e0f0ff; padding: 2px;"> </span>	n/a
<input type="checkbox"/> Parks	
<input type="checkbox"/> Streets	
<input type="checkbox"/> Traffic	
<input type="checkbox"/> Other	
<input type="checkbox"/> Building/Planning, if needed	n/a

Additional Comments:  
 These are their normal races they have every year, it is being brought to council for approval to extend past the 10:00pm noise control cutoff. It is being requested that they are allowed an hour grace period with a cutoff time of 11:00pm for possible unforeseen delays.

<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Primary responsible department signature	Date
---	--	------



# Special Event Permit

Permit No. 2026-0003

City of Castle Rock | Phone: 360.274.8181 | www.ci.castle-rock.wa.us  
 Application must be made a minimum of **60 days** prior to event (30 if a prior annual event)

## Contact Information

Organization/Sponsor <u>Mt. St. Helens m/c club</u>	Address/City/State/Zip <u>75 PH10 CASTLEROCK, WA. 98611</u>	
Contact Person <u>ELDON HUNTER</u>	Phone <u>360-431-2632</u>	Email
As contact person, are you authorized by the Organization/Sponsor to act on its behalf?  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Address/City/State/Zip (if different from above) <u>275 JOHNST KEISO, WA. 98626</u>	
	Phone <u>360-431-2632</u>	Email
Are there other individuals authorized to act on behalf of the Organization/Sponsor? <u>JOE RASMUSSEN</u> <u>360-274-3136</u>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please provide their name and contact information:

## Event Information

Event Name <u>SHORT TRACK MOTORCYCLE EVENT</u>		Date(s) of event	Estimated # of participants for event <u>300</u>
Start Time <u>7:00</u> AM/PM	End Time <u>10:00</u> AM/PM	Setup Time <u>7:00</u> AM/PM	Takedown Time <u>10:00</u> AM/PM
Is this an annual event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO*		Estimated # of volunteers for event <u>20</u>	
Have you previously requested a permit for such activity? <u>YES</u>		If yes, approximate date? <u>3-1-25</u>	
Are participants required to pay a fee? <u>YES</u>		Are participants to make a donation? <input checked="" type="checkbox"/>	
Will this event impede traffic? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Follow traffic, pedestrian and bike laws? <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Utilize sidewalks only? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Details of event (Please include a detailed map showing location of event and copies of any proposed brochures, posters, flyers, or mailings you desire to use to advertise this event. Additionally, please identify on the map where volunteers will be placed to assist with this event. Include additional pages if needed to fully explain details.)			

## Type of Use

Type of use requested	<input type="checkbox"/> Parade	<input type="checkbox"/> Street Closure	<input type="checkbox"/> Street Sale	<input type="checkbox"/> Athletic Run/Walk	<input type="checkbox"/> Block Party
	<input checked="" type="checkbox"/> Other <u>MOTORCYCLE EVENT</u>				
Where is use requested?	<input type="checkbox"/> Park area*/where? _____		<input type="checkbox"/> Park building*/which one? _____		
	<input checked="" type="checkbox"/> Private property/where? <u>120 FAIR LANE</u>		<input type="checkbox"/> Other _____		
*Note: If planning to use a park area or building, please contact the Public Works Department at 360.274.7478 for any additional forms required for the use of a park area or building.					
Please check all that apply to this event:					
<input type="checkbox"/> Requesting closure/impediment of a street or public right-of-way. (Please attach a map and mark location.)					
<input type="checkbox"/> Requesting to erect structure(s)/tent(s). Number and location <u>50-120 FAIR LANE</u>					
<input checked="" type="checkbox"/> Planning to serve food/drink. If yes, including alcohol beverages? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
<input type="checkbox"/> This event involves political or religious activity intended primarily for the communication or expression of ideas.					
<input checked="" type="checkbox"/> Participants will be required to pay a fee.					
<input type="checkbox"/> Participants will be asked to make a donation.					
<b>Permit holders are responsible for cleanup of debris in connection with their activities.</b>					

RECEIVED MAR 05 2026

-1-

**SCANNED**  
*& emailed*  
 MAR 19 2026  
 Initial: CHA

### City Assistance Requested

Public Works Division (example: street closure, signage, signal adjustment, facility availability, additional sanitation/garbage, restrooms) - Explain	Police Department (example: traffic, patrol, security) - Explain
	Other - Explain

### Insurance Information

The City does not maintain insurance that will respond to claims against the applicant arising out of the use of facilities by the applicant, its members, or those attending the event. Depending on the type of event you are planning, and the activity and risk level of your group, you may be required to obtain bodily injury and property damages liability insurance in accordance with City policy, name the City as an additional insured on the policy, and be responsible for obtaining said insurance. After reviewing this application, the City will determine whether you must obtain liability insurance.

### Agreement

Depending on the type of event planned, you may be required to defend, indemnify and hold harmless the City, its agents, employees and officials, while acting within the scope of their duties, from all causes of action, demands and claims, including the cost of their defense, arising in favor of the organization, the organization's employees or third parties on account of personal injuries, bodily injuries, death, or damage to property arising out of the acts or omissions of the organization, its employees or representatives, concessionaires of the event or any other person or entity, except for liability caused due to the sole negligence of the City. After reviewing this application, the City will determine whether you must indemnify the City and its agents.

By my signature I state that I am authorized to obligate the above-titled Organization/Sponsor, including financially, for any statements or requests made herein.

Applicant Name (please print) <span style="font-size: 1.2em; font-family: cursive;">ELDON HUNTER</span>	Applicant Signature 
Organization/Title <span style="font-size: 1.2em; font-family: cursive;">TRAIL MASTER</span>	Date <span style="font-size: 1.2em; font-family: cursive;">3-5-2026</span>

**Add additional information on separate sheets as needed.**

### City Use Only

Other permits required in conjunction with this permit:

Electrical    
  Fire, Life & Safety    
  Parks    
  Other: \_\_\_\_\_

#### Fees/Payments/Refunds

	Fee(s)	Initial(s)	Date(s)
Deposit(s)			
Permit(s)			
Facility Use/Rental(s)			
Admission Tax(es)			
Additional Costs			
<b>TOTAL PAID</b>			
<b>TOTAL REFUND / DUE</b>			
Proof of insurance required? <input type="checkbox"/> Yes <input type="checkbox"/> No		Bond Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## Special Event Signature Collection Sheet

Event: Short Track M/C Racing Date: \_\_\_\_\_ Time: 7:00 AM to 10:00 pm  
3:00 pm - 10:00 pm

By signing this paper, I am stating that I am either in favor or against the above listed event. Please write clearly.

Name	Signature	Business	Address	In Favor	Not in Favor
Terrie Ripley	Terrie Ripley	Four Corners General	4858 Westside Hwy	✓	
Angelina McLean	Angelina McLean	Neighbor	71 PH 10 CASTLEROCK	✓ yes	
Megan Puns	Megan Puns	Dollar General	78 PH 10	✓	
Joe Godinho	Joseph M Godinho	4-Corners farm & tractor	70 PH 10	✓	
Melissa HARRISON	Melissa Harrison	Denali Heating	125 Mosier Rd	✓	

Initial: \_\_\_\_\_

MAR 19 2026

SCANNED



## 2026 RACE SCHEDULE

May 23 ST • May 24 TT • June 20 ST

## JULY 9-12 NW BIKE WEEK

July 10 ST • July 11 TT • July 25 ST

August 8 TT • August 22 ST

September 5 ST • September 6 TT

September 19 ST • October 3 TT

\$15 pp Gates Open 10am

Signups 12-3pm • Practice 3pm • Racing 5pm

Dry Camp \$25 Weekend except for  
Bike Week \$25 per day



**SCANNED**

MAR 19 2026

Initial: \_\_\_\_\_



## WAIVER of LIABILITY

HOLD HARMLESS - Applicant shall defend, indemnify and hold harmless the City of Castle Rock, its officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of the acts or omissions of the applicant, its employees, volunteers, representatives or vendors, or from any activity, work or thing done, permitted, or suffered by applicant, participant, or member of the public, related to the permitted activity, except only such injury or damage as shall have been occasioned by the sole negligence of the City of Castle Rock.

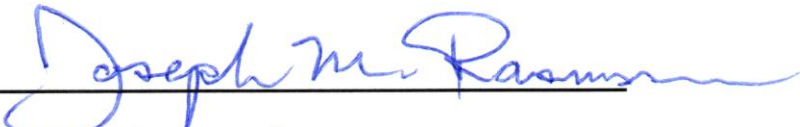
Organization: Mt St Helens Motorcycle Club

Title of Event: Short Track Motorcycle Racing

Date of Event: 5/23, 6/20, 7/10, 7/25, 8/22, 9/5, 9/19

Phone Number: 360.274.3136

Authorized Representative (please print): Joe Rasmussen

Signature of Authorized Representative: 

Date Signed: 6/12/26

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/26/2026

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).

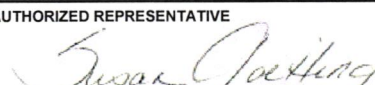
PRODUCER <b>Duncan &amp; Associates Insurance Brokers</b> P.O. Box 1458 - 2111 Harrison Ave NW Olympia, WA 98502	CONTACT NAME: <b>Susan Goetting</b>
	PHONE (A/C, No, Ext): <b>360-352-7588</b> FAX (A/C, No): <b>360-943-6304</b> E-MAIL ADDRESS: <b>Sue@Duncanins.com</b>
INSURER(S) AFFORDING COVERAGE	
INSURER A :	<b>K&amp;K Insurance Group Inc</b>
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

COVERAGES      CERTIFICATE NUMBER: 00119297-260521095716      REVISION NUMBER: 3

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. LIMITS SHOWN ARE INCLUSIVE OF AMOUNTS REQUESTED BY THE CERTIFICATE HOLDER AND MAY NOT REFLECT POLICY LIMIT AMOUNTS IN EXCESS OF THOSE REQUESTED. \*Not Applicable in WY

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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> E & O 100,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		M1-MKM-00005003026-03	05/18/2026	05/18/2027	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
							MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 5,000,000
							PRODUCTS - COMP/OP AGG \$ 5,000,000
							\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$	Y		M2-MKX-00005504256-02	05/18/2026	05/18/2027	EACH OCCURRENCE \$ 1,000,000
							AGGREGATE \$ 1,000,000
							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 City of Castle Rock shall be named as additional insured as per written contract or agreement and per policy provisions.

CERTIFICATE HOLDER City of Castle Rock PO Box 370 Castle Rock, WA 98611	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  (SLG)
--	--