



CASTLE ROCK CITY COUNCIL AGENDA

Regular Meeting: Monday, September 12, 2022
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

3. CITIZEN COMMENTS - please limit to 3 minutes

4. DEPARTMENT REPORTS

- City Attorney Frank Randolph
- Police Chief Charlie Worley
- Public Works Director Dave Vorse
- City Engineer Tom Gower
- Clerk-Treasurer Carie Cuttonaro

5. COUNCIL AND AD HOC COMMITTEE REPORTS

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

6. PUBLIC HEARINGS

7. CONSENT AGENDA

- a. Approve the minutes of the August 22, 2022 Regular Council Meeting. (page 3-5)
- b. Approve the August 2022 invoices as described in the Fund Transaction Summary Report in the amount of \$457,780.51. (page 6-7)

8. OLD BUSINESS

9. NEW BUSINESS

- a. Request to declare 2007 Ford Expedition from Police Department fleet as surplus.
- b. Special Event Permits (Items 1-3) (page 8-28)

1. Special Event Permit #2022-0026; Parents of Class of 2023 - I topped the Rock; September 24, 2022 between 9:30 AM and 2:00 PM; Insurance received. (page 8-14)
2. Special Event Permit #2022-0027; CCFD6 - Fire Prevention Week Carnival; October 8, 2022 between 9:00 AM and 3:00 PM; Street closure on 2nd Ave SW; Insurance received. (page 15-20)
3. Special Event Permit #2022-0028; St Paul Lutheran Church - Oktoberfest; October 15, 2022 between 1:00 PM and 9:30 PM; Street closure 300 Block 1st Ave SW; Insurance received. (page 21-28)

c. Andrea & Jeff Baker, 517 Larue St NE, requests a utility adjustment for the June/July and July/August billings in the amount of \$484.36. Request meets ordinance provisions; staff recommends approval. (page 29-30)

d. Bid Tab Results and Award - Citywide Stormwater Catch Basin and Tub Settler Basin Cleaning. (page 31)

e. Requesting permission to paint exterior of library building at an estimated cost of \$800.00. Additionally, requesting for a possible mural to be approved.

f. Two identified trees located in the City's right-of-way in the Castle Rock Heights 2 subdivision to be sold to Mr. Bruce Lamon. (page 32-37)

10. OTHER BUSINESS

11. ADJOURNMENT

NEXT REGULAR COUNCIL MEETINGS:

<u>3Q22</u>	<u>4Q22</u>	<u>1Q23</u>	<u>2Q23</u>
July 11	October 10	January 09	April 10
July 25	October 24	January 23	April 24
August 08	November 14	February 13	May 08
August 22	November 28	February 27	May 22
September 12	December 12	March 13	June 12
September 26	Tuesday, December 27	March 27	June 26

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 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 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.

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: Art Lee, Lee Kessler, Earl Queen, Paul Simonsen, and Ellen Rose.

Staff present: Police Chief Charlie Worley, City Attorney Frank Randolph, Public Works Director Dave Vorse, City Engineer Tom Gower, and Clerk-Treasurer Carie Cuttonaro.

c. Changes to Agenda

New Business items added

d. Bid Tab Results and Award - Ductless Heating & Air Conditioning Unit in Building & Planning Office.

e. Request to add additional \$2,000 to budgeted \$2,000 for a total of \$4,000 for Mayor Paul Helenberg and Public Works Director Dave Vorse to attend America in Bloom Symposium in St. Louis, Missouri, at the end of September.

2. PROCLAMATIONS & PRESENTATIONS

3. CITIZEN COMMENTS - please limit to 3 minutes

4. DEPARTMENT REPORTS

- City Attorney Frank Randolph

- Police Chief Charlie Worley

Police Chief Charlie Worley gave a verbal report.

- Public Works Director Dave Vorse

Public Works Director Dave Vorse gave a verbal report.

- City Engineer Tom Gower

- Clerk-Treasurer Carie Cuttonaro

Clerk-Treasurer Carie Cuttonaro gave a verbal report.

1. Expenditure, Revenue, Cash & Investments Reports (page 3-7)

5. COUNCIL AND AD HOC COMMITTEE REPORTS

- Mayor / Mayor Pro-Tempore / Councilmembers

Mayor Helenberg gave a verbal report.

Councilmember Art Lee gave a verbal report.

Councilmember Ellen Rose gave a verbal report.

- CRCDA Representative Nancy Chennault

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 Lee, Kessler, Queen, Simonsen, and Rose voted 'Aye'.

- a. Approve the minutes of the August 8, 2022 Regular Council Meeting. (page 8-10)

8. OLD BUSINESS

9. NEW BUSINESS

- a. Resolution No. 2022-07, a resolution providing for reduced rates to be charged to low-income senior citizens for water and sanitary sewer services and limiting the annual aggregate of such reductions to approximately \$10,000 per calendar year. (page 11-13)

Councilmember Lee made a motion, seconded by Queen to approve Resolution No. 2022-07.

Motion carried by roll call vote. Councilmembers Lee, Kessler, Queen, Simonsen, and Rose voted 'Aye'.

- b. Ordinance No. 2022-07, an ordinance of the City of Castle Rock, Washington related to Title 10 Vehicles and Traffic Code adopting a new Chapter 10.09 Wheeled All-Terrain Vehicles allowing for their operation on streets and roadways within the City limits. (page 14-19)

Mayor Helenberg provided comment.

Police Chief Charlie Worley provided comment.

Citizen, no name, no city, provided comment.

Councilmember Kessler provided comment.

Councilmember Kessler made a motion, seconded by Lee to approve Ordinance No. 2022-07.

Motion carried by roll call vote. Councilmembers Lee, Kessler, Queen, Simonsen, and Rose voted 'Aye'.

- c. TIB Supplemental Agreement #8 for Complete Streets, in the amount of \$4,500 for additional electrical and structural design, and traffic control for geotechnical site investigation and agency coordination. This increases the current agreement from \$74,500 to \$79,000. (page 20)

City Engineer Tom Gower presented.

Councilmember Queen made a motion, seconded by Lee to approve TIB Supplemental Agreement #8 for Complete Streets, in the amount of \$4,500. Motion carried by roll call vote.

Councilmembers Lee, Kessler, Queen, Simonsen, and Rose voted 'Aye'.

d. *Added Item during Changes to the Agenda*

Bid Tab Results and Award - Ductless Heating & Air Conditioning in Building & Planning Office.

Public Works Director Dave Vorse presented.

Councilmember Lee made a motion, seconded by Queen to approve Rawhide Electric Services Bid Option 2 for installation of a ductless heating & air conditioning unit in the Building & Planning room. Motion carried by roll call vote. Councilmembers Lee, Kessler, Queen, Simonsen, and Rose voted 'Aye'.

e. *Added Item during Changes to the Agenda*

Request to add additional \$2,000 to budgeted \$2,000 for a total of \$4,000 for Mayor Paul Helenberg and Public Works Director Dave Vorse to attend America in Bloom Symposium in St. Louis, Missouri, at the end of September.

Councilmember Kessler provided comment. Public Works Director Dave Vorse and Mayor Helenberg provided a response.

Councilmember Rose made a motion, seconded by Kessler to approve a request to add an additional \$2,000 to the budgeted \$2,000 for Mayor Paul Helenberg and Public Works Director Dave Vorse to attend the America in Bloom Symposium in St. Louis, Missouri. Motion carried by roll call vote. Councilmembers Lee, Kessler, Queen, Simonsen, and Rose voted 'Aye'.

10. OTHER BUSINESS

11. ADJOURNMENT

There being no further business, Mayor Helenberg adjourned the meeting at 8:02 PM.

Mayor Paul Helenberg

Clerk-Treasurer Carie Cuttonaro

As of this date, 9/12/2022, the Council by a majority vote, does approve payment of the vouchers included in the Fund Transaction Summary Report, and further described as:

General Expenditures

<u>Transaction Type</u>	<u>Description</u>	<u>Amount</u>	<u>Payment Date</u>
Adjustment/EFT	EFT#939-8/2022	9,050.87	8/25/2022
Adjustment/EFT	EFT#941-8/2022	172.74	8/3/2022
Claims	Check 53557	434.75	8/12/2022
Claims	Check 53558	256.49	8/16/2022
Claims	Check 53559 - 53560	91.73	8/29/2022
Claims	Check 53561	1,639.38	8/30/2022
Claims	Check 53562	1,373.83	8/31/2022
Claims	Checks 53563 - 53639	259,096.32	8/31/2022
		<u>272,116.11</u>	

Payroll Expenditures

<u>Transaction Type</u>	<u>Description</u>	<u>Amount</u>	<u>Payment Date</u>
Mid-Month Draw	Nacha # 730923	22,400.00	8/15/2022
Mid-Month Draw	Taxes	5,600.00	8/15/2022
EOM Payroll	Nacha # 742554	65,572.55	8/31/2022
EOM Payroll	Checks 26279 - 26294	59,557.23	8/31/2022
EOM Payroll	Taxes	27,522.60	8/31/2022
Accrued - Quarterly Payroll Tax		5,012.02	
		<u>185,664.40</u>	

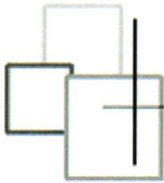
TBD Expenditures

<u>Transaction Type</u>	<u>Description</u>	<u>Amount</u>	<u>Payment Date</u>
Adjustment/EFT		-	
Claims	Check	-	
		<u>-</u>	
		<u>Amount</u>	<u>Payment Date</u>
Grand Total Expenditures		457,780.51	8/1/2022 - 8/31/2022
Fund Transaction Summary Report		<u>457,780.51</u>	
Balance Check (s/b -0-)		<u>-</u>	

Lee Kessler, Audit Committee Member

Art Lee, Audit Committee Member

Ellen Rose, Audit Committee Member



Fund Transaction Summary

Transaction Type: Invoice

Fiscal: 2022 - Aug - September - City Council

System Types: Cash Management, Financials, Payroll, Resources, UB2, Utility Billing

Fund Number	Description	Amount
010	General Fund	\$124,872.06
100	Street Fund	\$11,055.93
115	Building Code Account Fund	\$3,000.90
120	Visitor Center Fund	\$1,153.55
130	Library Fund	\$403.40
140	Criminal Justice Fund	\$405.13
145	Local Criminal Justice Fund	\$650.09
170	DOT Spoil Site Fund	\$26,315.21
180	Public Works Vehicle Replacement	\$473.67
320	Street Construction Capital Fund	\$9,394.35
400	Water/Sewer Operating Fund	\$116,020.56
410	Regional Water System Fund	\$129,795.31
420	Stormwater Management Fund	\$8,585.83
430	Regional Water Capital Improvement	\$134.75
435	Muni Water Capital Improvement	\$15,647.55
470	Muni Sewer Capital Imprv Reserve	\$7,278.72
475	Boat Launch Facility Fund	\$2,192.28
631	Utility Deposit Fund	\$91.73
634	State Custodial Pass-Thru Fund	\$309.49
	Count: 19	\$457,780.51

Review / Authorization

Primary Responsible Department: Finance

Permit No. 2022-0026

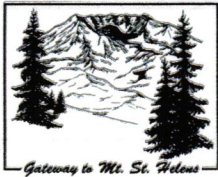
I Topped the Rock in Color (Parents of Class of 2023/CRPTO)

Addie Ashby - 360.335.6477 - crclass2023@gmail.com

Reviewed by: (mark "X" & date upon review)

Comments and Conditions

☒ Finance Carie Cuttonaro, Clerk-Treasurer Date: 7/27/2022	No Issues
☒ Fire (Cowlitz County Fire District 6) Bill LeMonds, Fire Chief Date: 7/28/2022	No Issues - per email
☒ Police Charlie Worley, Chief Date: 7/27/2022	No Issues
☒ Public Works / Engineering Dave Vorse, Public Works Director Date: 8/24/2022	
☒ Parks	Use of Lion's Pride Park & RFT. Need extra garbage cans at the park and applicant will need to pick up litter from race at water stations along the trail and on the "Rock."
☐ Streets	
☐ Traffic	
☐ Other	
☐ Building/Planning, if needed	
Additional Comments:	
☐ Approved ☐ Denied	Primary responsible department signature Date



Special Event Permit

Permit No. 2022-0026

City of Castle Rock | Phone: 360.274.8181 | Fax: 360.274.4876 | 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>Castle Rock PTO</u> <u>- Parents of Class 2023</u>	Address/City/State/Zip <u>PO Box 121</u> <u>Castle Rock, WA 98611</u>	
Contact Person <u>Addie Ashby</u>	Phone <u>360-335-6477</u>	Email <u>CRclass2023@gmail.com</u>
As contact person, are you authorized by the Organization/Sponsor to act on its behalf? ☒ YES ☐ NO	Address/City/State/Zip (if different from above) Phone Email 	
Are there other individuals authorized to act on behalf of the Organization/Sponsor? ☒ YES ☐ NO If yes, please provide their name and contact information: <u>Jessica Lakey</u> <u>Jacey Shulke</u>		

Event Information

Event Name <u>I Topped the Rock - In color</u>		Date(s) of event <u>9/24/2022</u>	Estimated # of participants for event <u>50-75</u>
Start Time <u>11:00</u> AM / PM	End Time <u>12:30</u> AM / PM	Setup Time <u>9:30</u> AM / PM	Takedown Time <u>2:00</u> AM / PM
Estimated # of volunteers for event <u>25-30</u>			
Is this an annual event? ☒ YES ☐ 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? <u>CR PTO has in the Past</u>			If yes, approximate date? <u>2019</u>
Are participants required to pay a fee? <u>Yes</u>		Are participants to make a donation?	
Will this event impede traffic? ☐ YES ☒ NO		Follow traffic, pedestrian and bike laws? ☒ YES ☐ NO	
		Utilize sidewalks only? ☒ YES ☐ 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. <u>Using River trail on the Rock trail for a 5k +</u>			

Type of Use

Type of use requested ☐ Parade ☐ Street Closure ☐ Street Sale ☒ Athletic Run/Walk ☐ Block Party ☐ Other	Where is use requested? ☒ Park area*/where? <u>Lions Park, Bilgobrunn, The Rock trail</u> ☐ Park building*/which one? ☐ Private property/where? ☐ 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: ☐ Requesting closure/impediment of a street or public right-of-way. (Please attach a map and mark location.) <u>or use trail tables</u> ☒ Requesting to erect structure(s)/tent(s). Number and location <u>Registration tent 1-2, Table on trail</u> ☒ Planning to serve food/drink. If yes, including alcohol beverages? ☐ YES ☒ NO <u>Race snacks, 4-5 locations</u> ☐ This event involves political or religious activity intended primarily for the communication or expression of ideas. <u>Water, snowcones</u> ☒ Participants will be required to pay a fee. ☐ Participants will be asked to make a donation.	
Permit holders are responsible for cleanup of debris in connection with their activities.	

City Assistance Requested

Public Works Division (example: street closure, signage, signal adjustment, facility availability, additional sanitation/garbage, restrooms) - Explain Clean up trail to top of Rock for access • Lions park Bathroom use	Police Department (example: traffic, patrol, security) - Explain
Building/Planning Division (example: electrical, temporary structures) - 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) Addie Ashby	Applicant Signature Addie Ashby
Organization/Title CR PTO	Date 7/21/22

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			
TOTAL PAID			
TOTAL REFUND / DUE			

Proof of insurance required? ☐ Yes ☐ No	Bond Required? ☐ Yes ☐ No
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Castle Rock PTO on behalf of the Parents of the Class of 2023



Everyone in the community is invited to participate in this family fun event!!!

Note: We MUST receive your registration by September 13th for you to get a t-shirt!!!

5K+ Fun Run/Walk Saturday Sept 24th at 11:00am

✓ Registration:

- **\$30 for adults** (Includes Shirt and color pack)
 - **\$15 for 18 and under** (Includes Shirt and color pack)
 - Children 11 and under must be accompanied by an adult.
 - **\$5 for kids under 18 w/out shirt or color pack**
 - Children 11 and under must be accompanied by an adult.
- ✓ Start and Finish at Lion's Pride park (5K) or Top of Rock if you do Bonus Distance at the end!
- ✓ The total distance is 5K on the river trail PLUS the distance up and down the Rock.

- ✓ Sign-in and shirt pick up starts at 10:30 am.
- ✓ There will be staggered start times.
- ✓ We're offering a PRIZE for most fun individual and group outfits
- ✓ Colored cornstarch and colored water will be everywhere! Feel free to wear sunglasses and/or a bandana if you are concerned about color on your face.
- ✓ You might consider bringing a towel to cover your vehicle's seats on the way home....
- ✓ Wear old clothes if worried about staining
- ✓ Donate your used shoes at end of race drop box

Thank you to our Sponsors:



Sponsor

Sponsor

Sponsor

- Complete the registration form on the back and return it with payment at any of the following locations:
- ✓ Drop it in the PTO drop box at any school office
- ✓ Turn it in at these local businesses: Vault Books & Brew.
- ✓ OR you can mail it to us. (Must be postmarked by Sept 10th to receive a shirt.)
- ✓ ... OR you can register online at <https://cr-senior-parents---2023.square.site/>

Please attach your cash or check payment here.

(Do not tape or staple over important info on your check.)

Make sure **checks** are payable to **Parents of the Class 2023** and have your **phone number**.

A fee will be charged for NSF checks.

The district does not sponsor this event and the district assumes no responsibility for it. In consideration of the privilege to distribute materials, Castle Rock School District shall be held harmless from any cause of action filed in any court or administrative tribunal arising out of the distribution of these materials, including costs, attorney's fees and judgements or awards.

Castle Rock Park and Recreation Map

Water Table
between I.S. &
I.6

Color Station #3
@ Trail Ramp
behind Grocery

Color Station #7
Under the
Bridge

Color Station #6
@ Table by
Dog Park

Color Station #5
at Bike Park

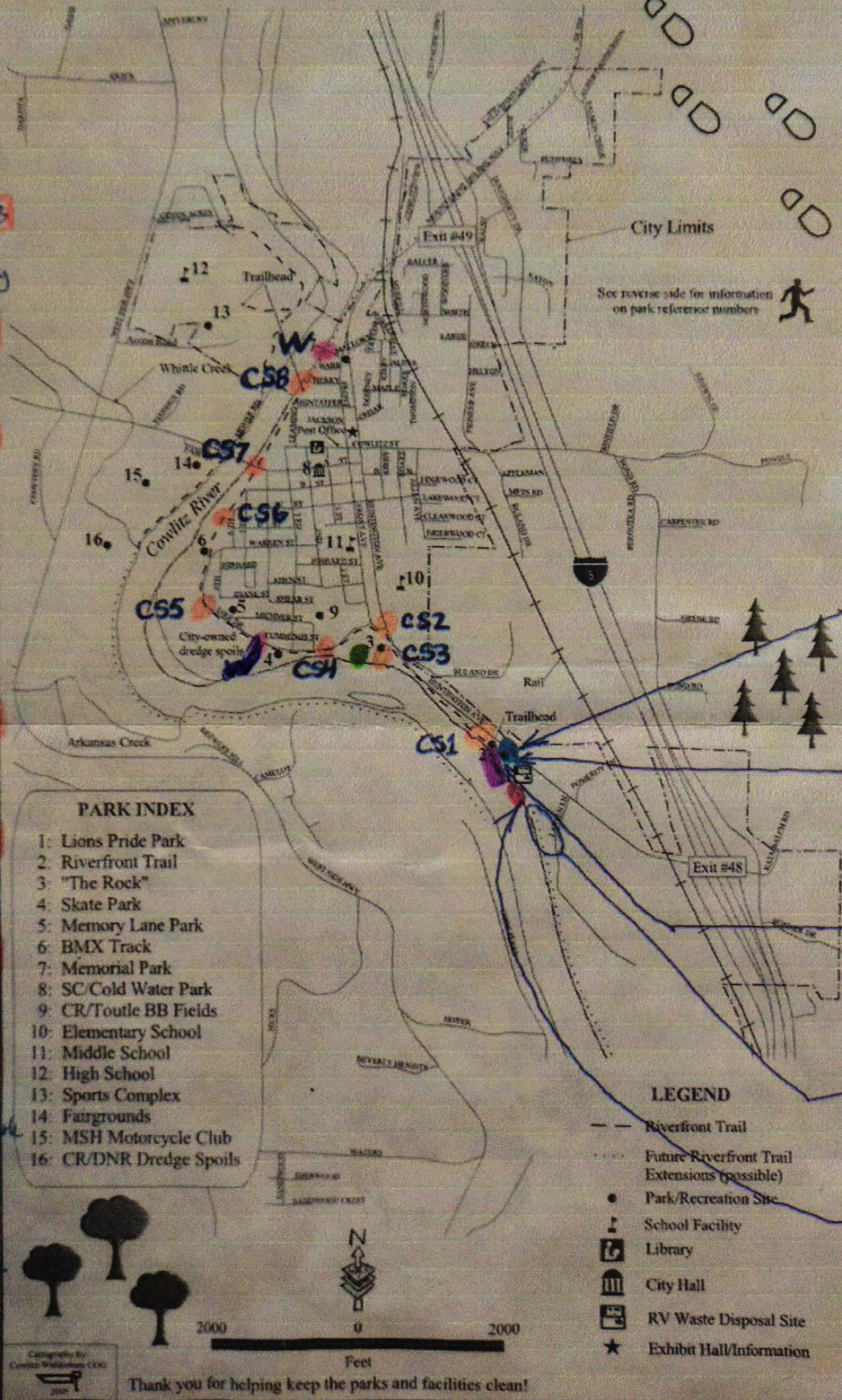
Color Station #4
@ mile marker
0.7

Color Station #3
Up on Rock
at fork in the
trail

Color Station #2
Covered Table
at bottom of
the Rock

Color Station #1
@ Crosswalk
@ Lion's Pride Park

Bracelets at
Top of the Rock



Start Line,
Registration &
check-in
@ 2nd Table

Music on
1st Table
near restroom

Shade
&
Vendors
in driveway
along river

Parking
Part Dump
Station

Only if needed
Fire truck
between
restroom &
dump station
(leave room for
RV's to drive
through &
Firetruck to
leave)



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 PTO on behalf of
The Parents of the Class of 2023

Title of Event: I Fopped the Rock - In Color

Date of Event: Sat Sept 24th

Phone Number: 360 355 6477

Name of Applicant (please print): Addie Ashby

Signature of Applicant: Addie Ashby

Date Signed: 7/21/2022



MEMBER CERTIFICATE OF INSURANCE

8/26/22

Thank you for purchasing your insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

Insured #: WA105587

NAMED INSURED MEMBER:

Castle Rock PTO
Attn: Jessica Lakey or Current Officer
700 Huntington Avenue
P.O. Box 1853
Castle Rock, WA 98611

Named Insured & Mailing Address

Education Support Purchasing Group
c/o AIM
P.O. Box 674051
Dallas TX, 75267-4051

PRODUCER NAME

AIM Association Insurance
Management, Inc.
PO Box 674051
Dallas TX, 75267-4051

Company / Coverage	Policy #	Effective Dates	Deductible	Limits of Insurance	
Gotham Insurance Company / Commercial General Liability	GL2022PTA04511	3/11/22 - 3/11/23	\$ 0	Each Occurrence	\$2,000,000
				General Aggregate	\$2,000,000
				Products - COMP/OPS	\$2,000,000
				Personal & Advertising Injury	\$2,000,000
				Fire Damage (any one fire)	\$50,000
Gotham Insurance Company / Extended Medical Payments	GL2022PTA04511	3/11/22 - 3/11/23	\$ 0	Any One Person	\$5,000
Gotham Insurance Company / Media Liability	GL2022PTA04511	3/11/22 - 3/11/23	\$ 0	Aggregate	\$25,000.00
Gotham Insurance Company / Professional Liability (Directors & Officers Liability)	DO2022PTA04348	3/11/22 - 3/11/23	\$ 0	Aggregate	\$1,000,000
	Retro-active Effective Date:	3/11/17			
Gotham Insurance Company / Fidelity Bond (Crime)	CR2022PTA04136	3/11/22 - 3/11/23	\$ 250	Each Occurrence	\$10,000

City of Castle Rock is added as an Additional Insured to the General liability policy only.
Event: "I Topped the Rock In Color" 5K Color Run
Date: 9/24/22

Certificate Holder:

City of Castle Rock
PO Box 370
Castle Rock, WA 98611

This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any, complete the above numbered policy. Copies of the Master Policies are available upon request or may be printed at www.aim-companies.com

AUTHORIZED REPRESENTATIVE

Review / Authorization

Primary Responsible Department: Finance

Permit No. 2022-0026

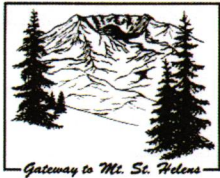
I Topped the Rock in Color (Parents of Class of 2023/CRPTO)

Addie Ashby - 360.335.6477 - crclass2023@gmail.com

Reviewed by: (mark "X" & date upon review)

Comments and Conditions

☒ Finance Carie Cuttonaro, Clerk-Treasurer Date: 7/27/2022	No Issues
☒ Fire (Cowlitz County Fire District 6) Bill LeMonds, Fire Chief Date: 7/28/2022	No Issues - per email
☒ Police Charlie Worley, Chief Date: 7/27/2022	No Issues
☒ Public Works / Engineering Dave Vorse, Public Works Director Date: 8/24/2022	
☒ Parks	Use of Lion's Pride Park & RFT. Need extra garbage cans at the park and applicant will need to pick up litter from race at water stations along the trail and on the "Rock."
☐ Streets	
☐ Traffic	
☐ Other	
☐ Building/Planning, if needed	
Additional Comments:	
☐ Approved ☐ Denied	Primary responsible department signature Date



Special Event Permit

Permit No. **2022-0027**

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 Cowlitz County Fire District 6	Address/City/State/Zip 1416 A St Castle Rock, WA 98011	
Contact Person Stacie Poff	Phone 360-957-7597	Email spoff@cowlitz6fire.org
As contact person, are you authorized by the Organization/Sponsor to act on its behalf? ☒ YES ☐ NO	Address/City/State/Zip (if different from above) Phone 360-274-4413 Email	
Are there other individuals authorized to act on behalf of the Organization/Sponsor? Bill Lemmas ☒ YES ☐ NO If yes, please provide their name and contact information: Andy Ogden 7360-274-4413		

Event Information

Event Name Fire Prevention Week Carnival		Date(s) of event 10/08/2022	Estimated # of participants for event 290
Start Time 10 AM / PM	End Time 2 AM / PM	Setup Time 9 AM / PM	Takedown Time 3 AM / PM
Is this an annual event? ☐ YES ☒ 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? Yes		If yes, approximate date? 2017?	
Are participants required to pay a fee? NO		Are participants to make a donation? NO	
Will this event impede traffic? ☒ YES ☒ NO		Follow traffic, pedestrian and bike laws? ☒ YES ☐ NO Utilize sidewalks only? ☐ YES ☒ 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. See map			

Type of Use

Type of use requested ☐ Parade ☒ Street Closure ☐ Street Sale ☐ Athletic Run/Walk ☐ Block Party ☐ Other	Where is use requested? ☐ Park area*/where? ☐ Park building*/which one? ☐ Private property/where? ☐ 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: ☒ Requesting closure/impediment of a street or public right-of-way. (Please attach a map and mark location.) ☐ Requesting to erect structure(s)/tent(s). Number and location ☐ Planning to serve food/drink. If yes, including alcohol beverages? ☐ YES ☐ NO ☐ This event involves political or religious activity intended primarily for the communication or expression of ideas. ☐ Participants will be required to pay a fee. ☐ Participants will be asked to make a donation.	
Permit holders are responsible for cleanup of debris in connection with their activities.	

Received

-1-

AUG 17 2022

Castle Rock
Finance

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) Stacie Poff	Applicant Signature
Organization/Title CCFOW - EMS Capt / Pubed Coordinator	Date 8/17/2022

Add additional information on separate sheets as needed.

City Use Only

Other permits required in conjunction with this permit:

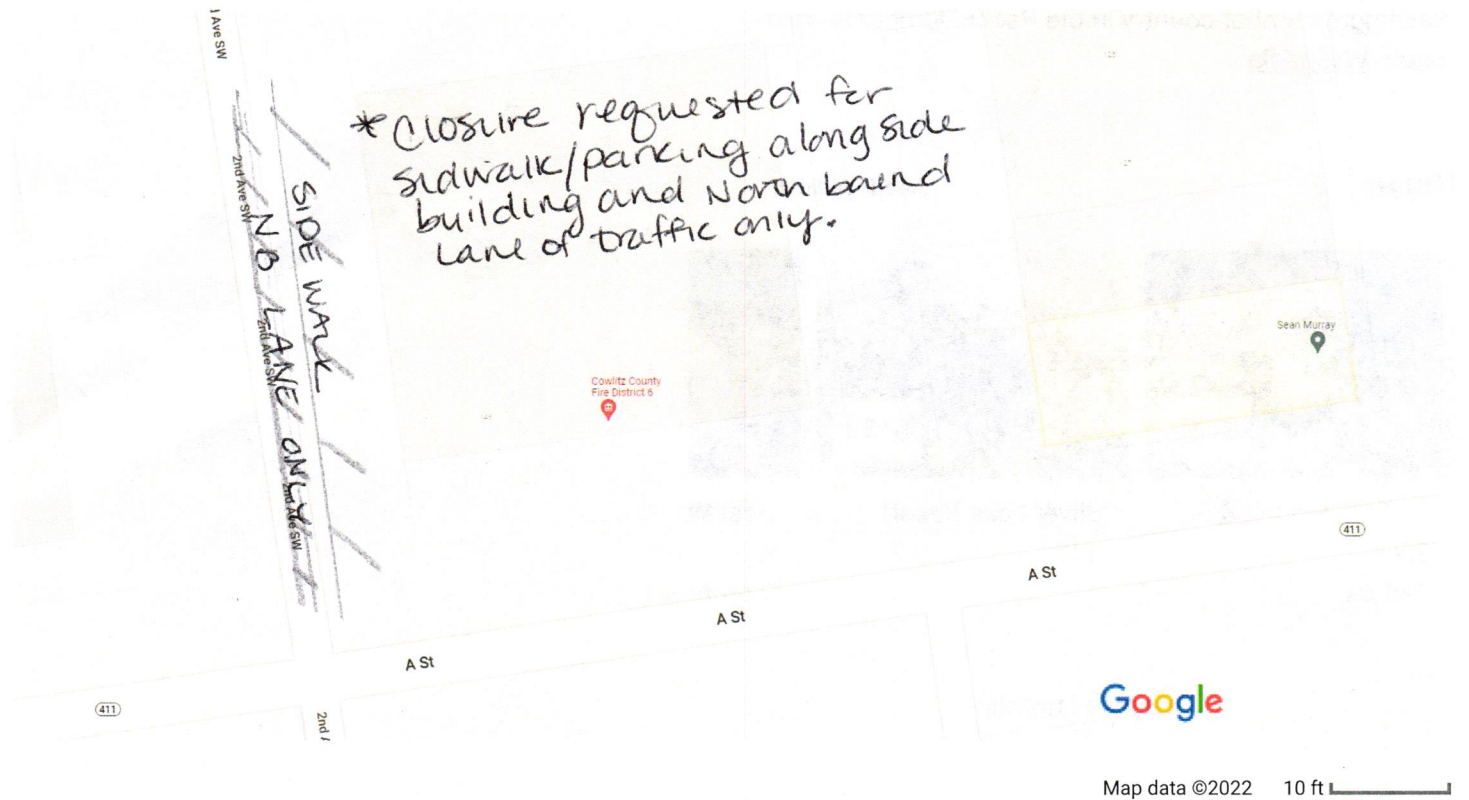
☐ Electrical
 ☐ Fire, Life & Safety
 ☐ Parks
 ☐ Other: _____

Fees/Payments/Refunds

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

Proof of insurance required? ☐ Yes ☐ No	Bond Required? ☐ Yes ☐ No
---	---

Google Maps Castle Rock



Castle Rock

Washington 98611

Sunny · 84°F
12:02 PM



Directions



Save



Nearby



Send to
phone



Share

Received

Quick facts

AUG 17 2022

Castle Rock
Finance



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: Cowlitz County Fire Dist. 6

Title of Event: Fire Prevention Week Carnival

Date of Event: 10/8/2022

Phone Number: 360-274-4413

Name of Applicant (please print): Stacie Poff

Signature of Applicant: [Handwritten Signature]

Date Signed: 8/17/2022

Received

AUG 17 2022

Castle Rock
Finance



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/06/2022

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	Nicholson & Associates Ins LLC 118 W Pine St Centralia, WA 98531		CONTACT NAME: Angelina Holmes PHONE (A/C, No, Ext): (360)736-7601 E-MAIL ADDRESS: angelina@nichinsure.com FAX (A/C, No): (360)623-1054
			INSURER(S) AFFORDING COVERAGE
			INSURER A: Philadelphia Indemnity Ins Co
			INSURER B:
			INSURER C:
			INSURER D:
			INSURER E:
			INSURER F:

COVERAGES

CERTIFICATE NUMBER: 00101733-132381

REVISION NUMBER: 1

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:	Y	N	EV99048	10/08/2022	10/09/2022	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	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				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)

Received

SEP 07 2022

CERTIFICATE HOLDER

Castle Rock
Finance

CANCELLATION

City of Castle Rock
141 "A" Street SW
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.

AUTHORIZED REPRESENTATIVE

(NAL)

© 1988-2015 ACORD CORPORATION. All rights reserved.

Review / Authorization

Primary Responsible Department: Finance

Permit No. 2022-0028

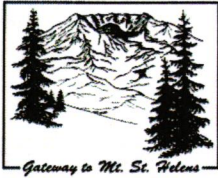
Oktoberfest (St Paul Lutheran Church)

Pastor Norm Arnold 253.740.9007 pastornormarnold@comcast.net

Reviewed by: (mark "X" & date upon review)

Comments and Conditions

☒ Finance Carie Cuttonaro, Clerk-Treasurer Date: 8/23/2022	no issues
☒ Fire (Cowlitz County Fire District 6) Bill LeMonds, Fire Chief Date: 8/26/2022	no issues
☒ Police Charlie Worley, Chief Date: 8/30/2022	no issues
☒ Public Works / Engineering Dave Vorse, Public Works Director Date: 8/29/2022	I do not see where they have the neighbors signatures - received signatures
☐ Parks	
☒ Streets	Road closed signs and barricades will be set out at the intersections of 1st & B St and 1st & C st. Applicant is responsible for setting them out and then removing them at the end of the event.
☐ Traffic	
☐ Other	
☐ Building/Planning, if needed	
Additional Comments:	
☐ Approved ☐ Denied	Primary responsible department signature Date



Special Event Permit

Permit No. **2022-0028**

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 St Paul Lutheran Church	Address/City/State/Zip 312 First Ave SW		
Contact Person Pastor Norm Arnold	Phone 360 274 6604 253 740 9007	Email PastorNormArnold@comcast.net	
As contact person, are you authorized by the Organization/Sponsor to act on its behalf? ☒ YES ☐ NO	Address/City/State/Zip (if different from above) Phone Email		
Are there other individuals authorized to act on behalf of the Organization/Sponsor? ☒ YES ☐ NO If yes, please provide their name and contact information: Kevin Rahn 360 967-2225			

Event Information

Event Name OKtoberfest		Date(s) of event Sept 17th - Oct 15th	Estimated # of participants for event 100-150
Start Time 4:30 PM	End Time 8:30 PM	Setup Time 1 AM / PM	Takedown Time 9:30 PM
Is this an annual event? ☒ YES ☒ NO* Applicant may be required to collect approval signatures from neighboring or affected residents and/or business owners.		Estimated # of volunteers for event 20	
Have you previously requested a permit for such activity? No		If yes, approximate date?	
Are participants required to pay a fee? No		Are participants to make a donation? No	
Will this event impede traffic? ☐ YES ☒ NO		Follow traffic, pedestrian and bike laws? ☒ YES ☐ NO Utilize sidewalks only? ☐ YES ☒ 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. Do an OKTOBERFEST celebration on Church property + street in front of church (300 block of 1st Ave). Beer + Brats + Music + GAMES			

Type of Use

Type of use requested ☐ Parade ☒ Street Closure ☐ Street Sale ☐ Athletic Run/Walk ☐ Block Party ☐ Other	Where is use requested? ☐ Park area*/where? ☒ Private property/where? St Paul Lutheran Church + Park & Lot ☐ Park building*/which one? ☐ 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: ☒ Requesting closure/impediment of a street or public right-of-way. (Please attach a map and mark location.) 300 BLK of 1st Ave ☒ Requesting to erect structure(s)/tent(s). Number and location Possibly ☒ Planning to serve food/drink. If yes, including alcohol beverages? ☒ YES ☐ NO ☐ This event involves political or religious activity intended primarily for the communication or expression of ideas. ☐ Participants will be required to pay a fee. ☐ Participants will be asked to make a donation.	
Permit holders are responsible for cleanup of debris in connection with their activities.	

Received**AUG 23 2022****Castle Rock
Finance**

City Assistance Requested

Public Works Division (example: street closure, signage, signal adjustment, facility availability, additional sanitation/garbage, restrooms) - Explain <i>Road CLOSED Signage + Cones</i>	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) <i>Norm Arnold</i>	Applicant Signature <i>[Signature]</i>
Organization/Title <i>St. Paul Lutheran Church CR Pastor</i>	Date <i>Aug 23, '22</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: _____

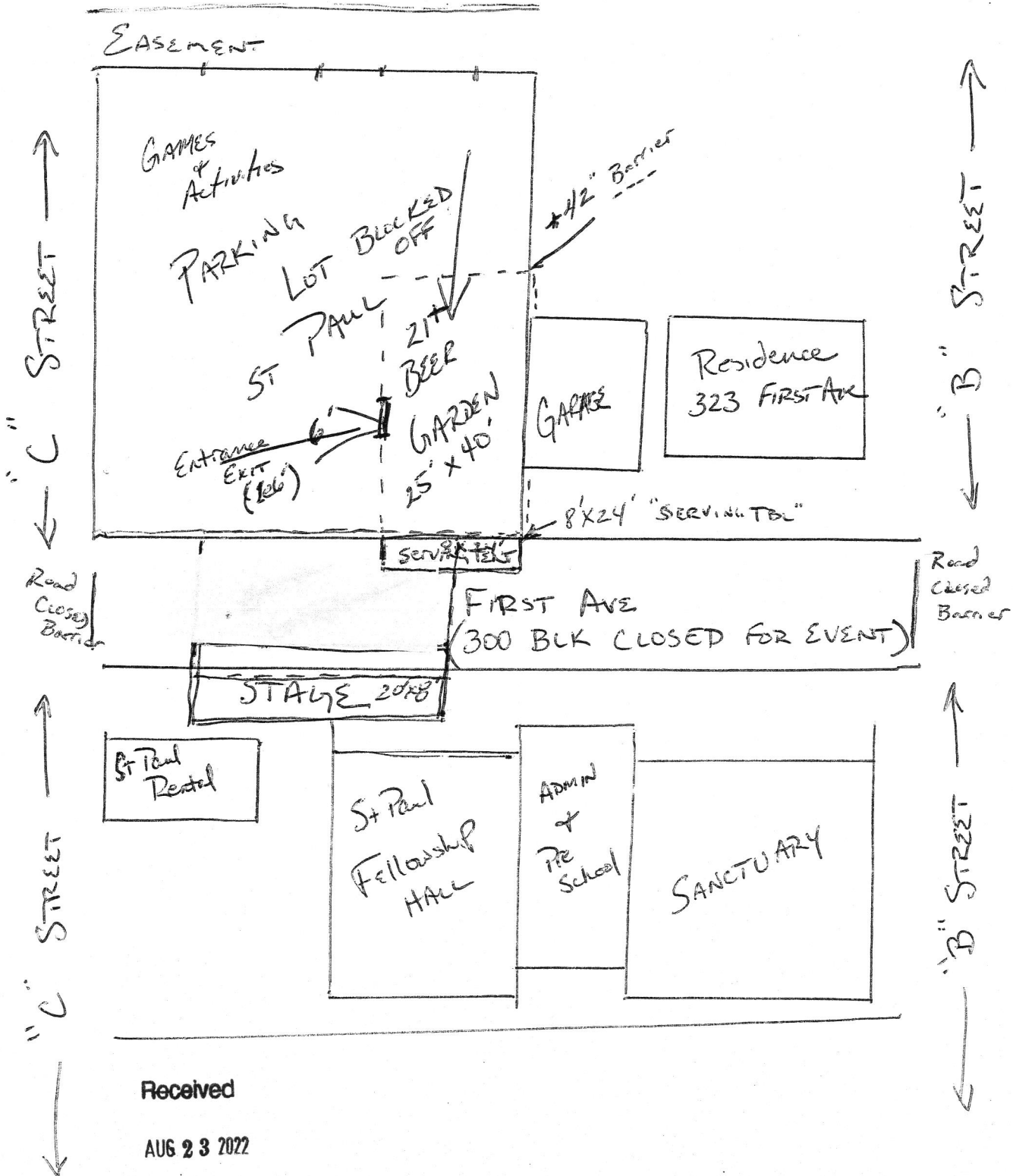
Fees/Payments/Refunds

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

Proof of insurance required? ☐ Yes ☐ No	Bond Required? ☐ Yes ☐ No
---	---

Oktoberfest @ St Paul Oct 15th, '22

Castle Rock



Received
AUG 23 2022
Castle Rock
Finance

Special Event Signature Collection Sheet

Event: OKtoberfest Date: ~~Oct 15th~~
Sep 17 Time: 1pm to 9:30pm

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
Bill Zimmerman	<i>William I. Zimmerman</i>	Home Residence	344 First Ave SW CR	✓	
DAVE WANZER	<i>D. Wanzer</i>	Home Residence	323 First Ave SW CR	✓	
Received					
AUG 30 2022					

Castle Rock
Finance



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.

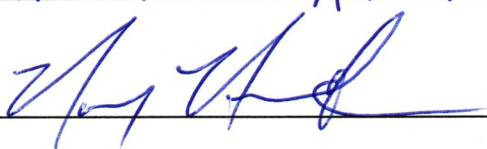
Organization: St. Paul Lutheran Church

Title of Event: Oktoberfest

Date of Event: ~~Oct 15th~~
~~Sep 17th~~, 2022

Phone Number: 360 274 6604

Name of Applicant (please print): REV. NORM ARNOLD

Signature of Applicant: 

Date Signed: Aug 17th, 2022

Received

AUG 23 2022

Castle Rock
Finance

**Washington State Liquor and Cannabis Board
Olympia, Washington**

SPECIAL OCCASION LICENSE

License Number: 092358

In accordance with and subject to the provisions of the Washington State Liquor Control Act and the rules and regulations of the Washington State Liquor and Cannabis Board:

**ST. PAUL LUTHERAN CHURCH
C/O: REV. NORM ARNOLD
312 FIRST AVE SW
CASTLE ROCK, WA 98611**

is hereby licensed to sell beer to be consumed on site only at the location, date(s), and time(s) listed below:

ST. PAUL LUTHERAN CHURCH - 312 FIRST AVE SW, CASTLE ROCK

OCTOBER 15, 2022

4:30 PM TO 9:00 PM

This special occasion license is for the on premise sale of beer only.

No one under the age of 21 may buy, consume, or possess alcohol at any time.

No one under the age of 21 may enter the enclosed area where alcohol is being served.

The operation of the beer garden must be in compliance with the local authority rules and regulations.

You must ask for approved identification from all people who order alcohol at the point of sale.

Per RCW 66.28.090, the licensed premises shall, at all times, be open to any enforcement officer, inspector, or peace officer.

If you have any questions, please contact Customer Service at (360) 664-1600, email: specialoccasions@lcb.wa.gov, or your Enforcement Officer at (253) 471-5200.

Dated in Olympia, Washington on Thursday, September 01, 2022.

David Postman

Board Chair



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/16/2022

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 Church Mutual Insurance Company 3000 Schuster Lane P.O. Box 357 Merrill WI 54452		CONTACT NAME: Katie G Giese PHONE (A/C, No, Ext): 1-800-554-2642 Option 1 E-MAIL ADDRESS: CustomerService@churchmutual.com FAX (A/C, No): 855-264-2329	
INSURED ST PAUL LUTHERAN CHURCH OF CASTLE ROCK 312 1ST AVE SW CASTLE ROCK WA 98611-9127		INSURER(S) AFFORDING COVERAGE INSURER A: Church Mutual Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 18767	

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC ☐ OTHER:	Y		0246376-02-388814	06/01/2022	06/01/2023	EACH OCCURRENCE \$ 2,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000						
	MED EXP (Any one person) \$ 15,000						
	PERSONAL & ADV INJURY \$ 2,000,000						
							GENERAL AGGREGATE \$ 5,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB ☐ EXCESS LIAB ☐ OCCUR ☐ CLAIMS-MADE ☐ DED ☐ RETENTION \$						EACH OCCURRENCE \$
							AGGREGATE \$
							\$
	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				PER STATUTE 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)

In compliance with written contract, agreement or permit requirements, certificate holder is an additional insured under the policy. A267.1

Received

AUG 16 2022

CERTIFICATE HOLDER**CANCELLATION**

Castle Rock Finance

Received

AUG 23 2022

Castle Rock Finance

City of Castle Rock
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.

AUTHORIZED REPRESENTATIVE

Katie Giese

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CITY OF CASTLE ROCK
WATER UTILITY
ADJUSTMENT REQUEST FORM

ORDINANCE 2010-02

*Return Form and Supporting Documents to Castle Rock City Hall, Finance Office
141 'A' St SW or mail to: PO Box 370
Castle Rock, WA 98611

CUSTOMER NAME: Andrea + Jeff Butler

CONTACT #: [REDACTED]

SERVICE ADDRESS: 517 Larue St.

ACCT #: [REDACTED]

I am requesting a leak adjustment for my water service resulting from a malfunction and the leak has been repaired. I understand that no adjustments shall be made until the public works department verifies that the leak no longer exists. Adjustments are based on a 12-month average consumption and only the sewer billing amount will be adjusted for qualified leaks and this adjustment will be credited to the account for any amount billed over my average sewer use, for the applicable billing period. Leak adjustments shall be limited to only two adjustments per service, within a 12-month period. Subsequent requests for the same address will not be granted until I replace the plumbing and provide proof of the repair to the city.

I provided notification of this leak to the city on July 27; date leak repaired: 8-16-22
The following is being provided as proof of the leak and also of the repair:

- ☒ Receipts for the repair costs
☒ Pictures of the break/leak and pictures of the repair
☐ Other: _____

Please describe in full; location of leak and steps taken to make the repair:

A Castle Rock employee (Selena), contacted us and told us we had a leak. We had no idea. I was able to go searching and found
(You may continue on the back of the form if needed.)

Signed: Jeff Butler

Date: 8-16-2022

NO ADJUSTMENTS GIVEN FOR:

Leaky faucets, faulty plumbing fixtures, faucets or hose bibs left on, hot water heaters, faulty irrigation systems or water features (ponds, pools, fountains, etc.), neglected or failure to repair broken pipes, or leaks not repaired within thirty days of notification.

CITY USE ONLY:

FINANCE STAFF SIGNATURE: Cubert

PWD REVIEW & APPROVAL TO ALLOW ADJUSTMENT PER
ORDINANCE PROVISIONS: YES ☒ NO ☐ INITIAL: DV

LEAK VERIFIED BY: LR DATE: 7/27/22

REPAIR VERIFIED BY: BA DATE: 8/17/22

ADJUSTMENT AMOUNT: \$484.36 (474.96 + 9.40)

COMMENTS: 2 Billing Cycles (June/July July/August)

Received

AUG 17 2022

Castle Rock
Finance

AKESON/LEAK ADJUSTMENT REQUEST FORM (2018)

W02 16442435

that an outside hose bib was broken, I was able to shut the valve off and isolate the line to allow it to dry out so I could make the repair. Where it broke was sch 40 so I repaired it with sch 80 and reinforced the pipe to eliminate this from happening again.

Received

AUG 17 2022

Castle Rock
Finance

City of Castle Rock
Citywide Catch Basin and Tub Settler Basin Cleaning
Bid Results 9/7/2022

Contractor	Vac Truck w/ Operator	Laborer	Vac Truck w/Operator & Laborer	References Provided	Notes	Total Estimated Cost
CCS, Longview, WA	\$ 245.00	\$ 94.00	\$ 339.00	Y	Conf. Trailer \$36/hour	\$ 23,730.00
Pro-Pipe Inc., Portland, OR	\$ 355.00	\$ 196.00	\$ 551.00	Y		\$ 38,570.00
Tidewater Environmental Services, Vancouver, WA			\$ 596.01	Y		\$ 41,721.00
AIMS Co., Hillsboro, OR	\$ 475.00	\$ 145.00	\$ 620.00	Y		\$ 43,400.00

Cowlitz County Net Maps Instructions

To start your search click the magnifying glass icon on the map.

To view the property details, click inside the boundary of the parcel.

For questions or comments contact the Assessor's Office at 360-577-3010 or via email at assessor@co.cowlitz.wa.us.

Basemap Gallery



Chartered Territory
Map



Colored Pencil
Map



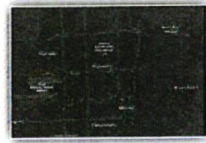
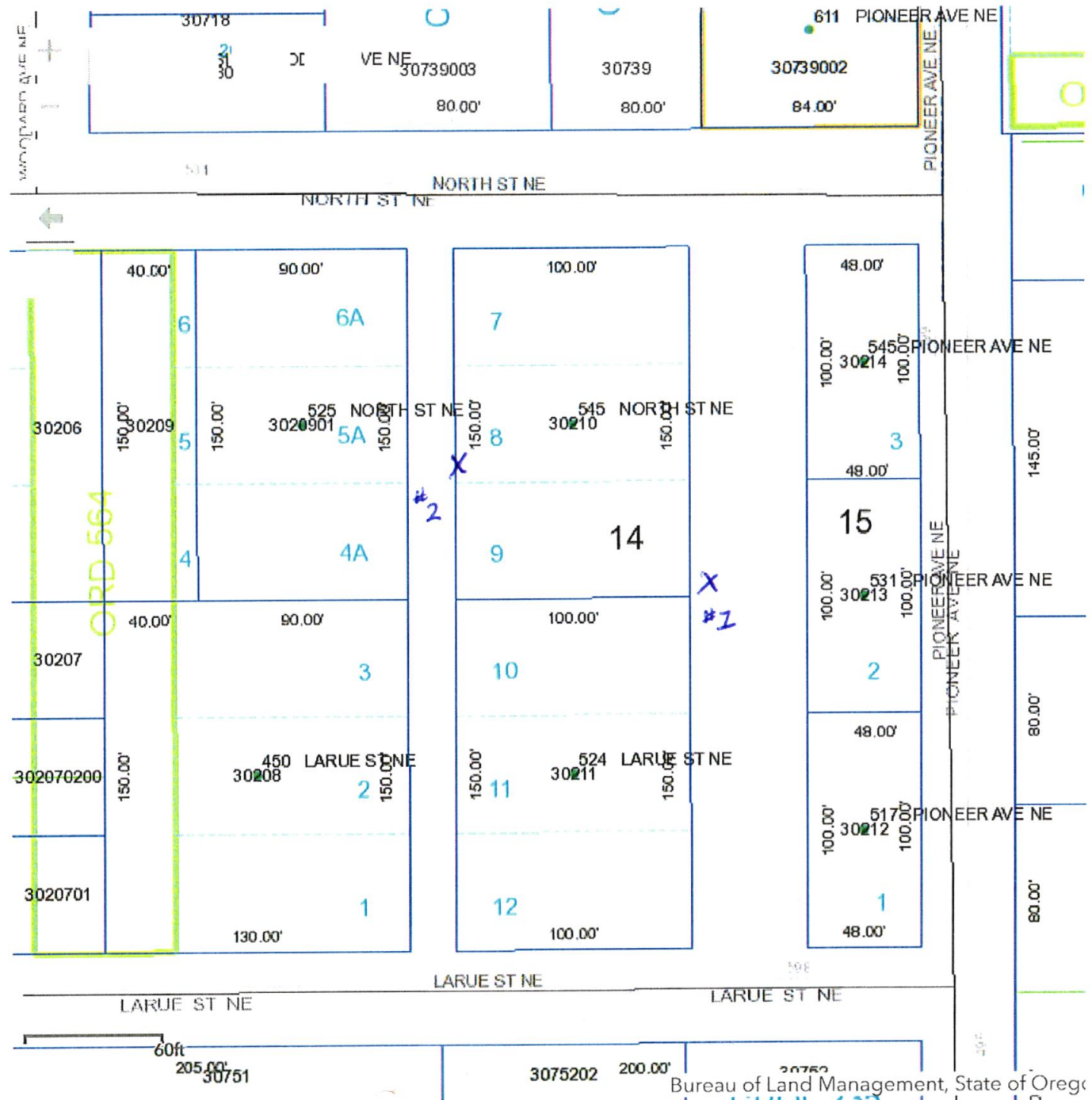
Community Map



Dark Gray Canvas



Firefly Imagery
Hybrid

Human
Geography Dark

Cowlitz County Net Maps Instructions

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Basemap Gallery



Human Geography Map



Imagery



Imagery Hybrid



Light Gray Canvas



Mid-Century Map



Modern Antique Map

