* Event Title

2024 PARA Endurance Adaptive Triathlon - Austin

* Events Date(s):

April 20-21, 2024

* Event Category: Bike Tour / Race Run / Walk*

If 'Other' please specify:

SKIPPED

* PLEASE BE AWARE IF YOU ARE HAVING A RUN/WALK, BIKE TOUR/RACE, OR ANY OTHER EVENT THE CITY OF PFLUGERVILLE DEEMS APPLICABLE, YOU WILL BE REQUIRED TO PLACE AT LEAST ONE DIGITAL MESSAGE BOARD ALERT SIGN WITHIN THE ROUTE AREA NOTIFYING THE COMMUNITY OF THE EVENT ONE WEEK PRIOR TO YOUR EVENT AT THE EXPENSE OF THE ORGANIZATION. CITY HAS LIMITED SIGNS AVAILABLE.

* Event Description

The inaugural 2024 PARA Endurance Adaptive Triathlon will be held at the Lake Pflugerville. This is the first time this type of event has ever been held in the USA. All participants must have a physical challenge of some sort to participate. The participants will swim (500-750 yd), bike (12-16 miles) and run (5k).

* Anticipated Number of Staff/Volunteers:

50

Total number of people expected, including spectators and participants

Anticipated Number of Attendees (total):

500

Anticipated Number of Attendees (per day):

500

Total number of registrants (or floats/units if parade/procession)

Anticipated Number of Participants (total):

35

Anticipated Number of Participants (per day):

35

* Event Setup (Date and Time)

04/20/2024 12:00 AM

* Event Start (Date and Time)

04/20/2024 9:00 AM

* Event End (Date and Time)

04/21/2024 12:00 PM

* Event Breakdown (Date and Time)

04/21/2024 3:00 PM

* Event Location 18216 Weiss Ln Pflugerville TX 78660

If this event takes place at multiple locations, please list below:

There will be training camps on Thursday April 18th and Friday April 19th. They will be at The Pfield parking lot as well as Gilleland Pool.

* Parking Location(s)

We plan to offer the onsite parking of the Lake to the participants. Spectator parking will be at Weiss High School with shuttles running for their convenience.

Please list any street(s) or lane(s) requiring closure as a result of this event. Please include street name(s), as well as a date and time for the closing and reopening of each:

We will be discussing with the City if Weiss Rd can be shut down for a portion of the race. We do not have specific times as of today.

Attachment

Run and Bike map.jpg

Your event site plan / route map should be submitted with this application, and include (but not be limited to):

- An outline of the entire event venue including the names of all streets or areas that are part of the venue and the surrounding area, along with parking. If the event involves a moving route of any kind, indicate the direction of travel and all street or lane closures.
- · The location of First Aid facilities and ambulances.
- The location of all stages, platforms, canopies, booths, portable toilets, cooking areas, trash containers and dumpsters, generators, fencing, mobile food trucks, barriers, or any other temporary structures.
- Entrance and exit locations for outdoor events that are fenced or enclosed.
- Identification of all event components that meet accessibility standards, other related.
- Event components not listed above (e.g. parking, shuttles, etc).

Additional information

Please remember that a minimum of twenty feet (20') is required for emergency vehicle/personnel access. Please refrain from advertising or publicizing event maps and/or routes until you have received notification that the maps and/or routes have been formally approved.

Contacts

* Host Organization

PARA Endurance Coaching

* Point of Contact

Scott Bennefield

* Telephone

505-401-6331

* Email (if you wish to provide it)

scott@paraendurance.com

On-site Contact (if different than event contact)

Kristen Cepak

On-site Point of Contact Telephone (if different than event contact)

512-496-8307

Event Website

SKIPPED

Applicant Name Scott Bennefield

Full Address 4408 Bentgrass Meadows NE Rio Rancho NM 87144

Telephone 505-401-6331

Alt. Telephone 512-496-8307

Email

scott@paraendurance.com

Does your event take place on a City street or Right-of-Way? Yes
If yes, will there be an entry fee for your event? Yes
(This includes charging admission to enter an area or charging a registration fee to participants)
If yes, will there be booth fee for your event? Yes
Booth Fee List **SKIPPED**
Please include booth fee price list with application
* Is your organization considered "Tax-Exampt / Non-Profit"? Yes
Required: If yes, please attach to this application a copy of your IRS 501)c) Tax Exemption letter, providing proof and certifying your current Tax Exempt, Non-Profit status.
Proof of Tax-Exempt / Non-Profit status **SKIPPED**

Please include ticket, entry, vendor, product & sponsorship sales from this event, and explain how this amount was computed:

Estimaed Gross Receipts (USD):

\$5000

Explanation of Gross Receipts estimation:

The \$5000 is a combination of registration fees, and booth fees.

Estimated Expenses for this Event (USD):

\$15,000

Project Revenue or Net Dollar Amount the house organization will receive from this event (USD):

\$100.00

* Will you or have you hired off-duty officers from Pflugerville Police Department? Yes

Notes for the Pflugerville Police Departments (if applicable)

We plan on having officers during the race portion on Sunday for traffic control. We have not had a meeting with the police dept yet.

You may be required to have a medical plan for your event. if you have not already arranged for first aid staffing or hired a certified medical organization to handle this event.

Every application is required to include an Emergency Medical Plan that describes total number of EMS personnel you are planning to use for the event, including their level of training and a map showing resource deployment. The applicant will also be required to contract ambulance service through the City's provider (Allegiance Mobile Health).

- * Will you or have you contracted ambulance service with allegiance mobile health? Yes
- * Will you or have you hired a certified medical organization for on-site first aid? Yes

* Medical organization:

Still working on this portion.

Address:

SKIPPED

Contact name

SKIPPED

Contact telephone **SKIPPED**

Contact email address

SKIPPED

* Please describe or attach the arrangements you have made for first aid staffing & equipment:

We are still working on getting this portion of the event worked out.

EMS / Fire Department notes:

We will be working with Travis County ESD.

This checklist serves as a planning guideline and may not be inclusive of all City, County, State, and Federal access requirements. It is the applicant's responsibility to comply with all accessibility requirements applicable to this event. You may not attach more detailed information if necessary.

 st Will there be a clear path travel throughout yout event venue (vehicle and pedestrian)?

Yes

Please describe:

The Lake does not allow for vehicle pass thru but it does for pedestrians.

* Have you developed a disabled parking and/or transportation plan (including the use of public transportation or shuttle services) for your event?
Yes

Please describe:

All participants will be disabled. They will be directed to park at the lake. All others will park at Weiss High School and be shuttled to the Lake

 $\ensuremath{^{*}}$ Will your event involve the use of a parking and/or shuttle plan?

Yes

Please describe:

All participants will be disabled. They will be directed to park at the lake. All others will park at Weiss High School and be shuttled to the Lake.

Required

City officials will need to verify any shuttle/transportation service vendor and include their USDOT/ TXDOT Operating Authority and Tx Vehicle registration and the driver's CDL and passenger vehicle endorsement. All inspections of the vehicle and actual driver(s) need to take place 48-72 hours prior to the service. All inspections can be completed at the Pflugerville Police Department, and a requested needs to be made for a specific date and time by the vendor.

 $\ensuremath{^{*}}$ Is your event taking place at night while outdoors?

No

If yes, please describe how the event and surrounding area will be illuminated to ensure the safety of the participants and spectators:

SKIPPED

Required

Unless the applicant can substantiate the availability of both ADA accessible and non-accessible facilities in the immediate area of the event site available to the public during the event, the City will determine the total number of portable toilet facilities on a case-by-case basis. The City of Pflugerville requires 1 portable toilet per every 100 attendees.

 st Do you plan to use permanant and/or portable toilet facilities at your event?

Yes

If yes, please provide the total number of toilet facilities (temporary & permanent):

We will be providing ADA portable toilets as well as use the ones available at the park for this event.

Where are these facilities located:

We will place the portable toilets at the entrance of the park near the permanent ones

Total number of portable/temporary toilet facilities:

We are not sure yet.

Total number of permanent toilet facilities:

What ever is available at the facility

Total number of ADA accessible toilet facilities:

We are not sure yet.

Toilet facility company:

SKIPPED

Please note: a minimum of 1 or at least 10% of total toilet facilities at your event shall be ADA accessible The City of Pflugerville requires 1 portable toilet per 100 attendees.

 $\ensuremath{^{*}}$ Are there any musical entertainment features related to your event? No

* Will sound amplification be used?

Yes

Please complete the following information or provide an attachment listing all bands and/or performers, type of music, sound check and performance schedule:

Number of stages:

1

Number of performers / bands:

SKIPPED

Performers(s) / Band Name(s) & Music Type:

SKIPPED

Performance Date(s):

SKIPPED

Please include the date, start, and end times above

Will sounds check be conducted prior to the event?

Please describe the sound equipment that will be used:

A stage and amplification will only be used to make announcements and announce winners of the events.

 $\ensuremath{^*}$ Will inflatables, hot air balloons, drones or similar devices be used at your event?

Yes

If yes, please describe:

We will have drones for recording video for future marketing purposes.

* Will any fireworks, rockets, laser, or other pyrotechnics be used at your event? No

If yes, please describe:

SKIPPED

 $\ensuremath{^{*}}$ Will any signs, banners, decorations, or special lighting be used at your event?

Yes

If yes, please describe:

We will have yard signs as directional signs and possibly banners for sponsorships.

(EVENT ORGANIZERS ARE RESPONSIBLE FOR PROVIDING ANY ELECTRICAL NEEDS, GENERATORS ECT.)

PLEASE NOTE THAT CITY OF PFLUGERVILLE IS IN PRIVATE AIRSPACE. EVENT ORGANIZER WILL NEED TO CONTACT AUSTIN EXECUTIVE AIRPORT FOR ACCESS TO AIRSPACE.

FOR ANY PYROTECHNICS PFLUGERVILLE FIRE DEPARTMENT WILL NEED TO BE CONTACTED AND CORRECT PERMITS PULLED

 $\ensuremath{^{*}}$ Will your event involve the sale of alcoholic beverages?

No

If yes, please describe:

SKIPPED

IMPORTANT: GLASS CONTAINERS ARE STRICTLY PROHIBITED. THE APPLICANT ALONE IS RESPONSIBLE FOR ENSURING THE SAFE SALE OR DISTRIBUTION OF ALCOHOL AT THE EVENT, AND FOR COMPLIANCE WITH ALL APPLICABLE LAWS, RULES, AND REGULATIONS; THE CITY OF PFLUGERVILLE ASSUMES NO RESPONSIBILITY FOR ESTABLISHING COMPLIANCE OF TEXAS ALCOHOLIC BEVERAGE COMMISSION (TABC) PROCEDURES AND REQUIREMENTS.

* Does your event include food vendors?

Yes

If yes, please be aware you will be required to obtain a permit from Austin Public Health Department if you intend to sell food of any kind. Please describe or attach a detailed description of what type of food is involved and how it will be served:

We plan on only have food trucks provide food. They already have their own food permits.

* Does your event include mobile food vendors:

Yes

If yes, please attach their mobile food permit from Austin Public Health, it have "Pflugerville" listed on the tag. If they do not have the "Pflugerville" permit they will need to apply for a temporary food permit.

Please note that "Cottage Food Vendors" do not need a Temporary Food Permit.

Please check with The Texas Department of State Health Services for up-to-date Cottage Food Vendor Laws.

* Does your event have tent food vendors?

No

If yes, please describe:

SKIPPED

* Will this event be marketed, promoted, or advertised in any manner?

Yes

If yes, please describe:

Our main sources of advertising will be on social media and website. Marketing will be primarily to the triathlon community for participation.

Will there be live media coverage during the event?

Yes

If yes, please describe:

We will be sending out press releases to all of the news stations with hopes of some day of event coverage.

Will there be sponsors for the event?

Yes

If yes, please describe:

We will be submitting sponsorship packages to several large companies. Sponsorships range from \$20,000 to \$500.

* Will you have on-site signage / banners / posters?

Yes

If yes, please describe:

Signage will be for sponsors and directional.

IF YOU WILL HAVE SPONSORS AT YOUR EVENT, PLEASE SUBMIT A LIST OF ALL SPONSORS NO LATER THAN 15 DAYS PRIOR TO YOUR EVENT TO CITY MANAGERS OFFICER FOR OFFICIAL APPROVAL

Number of trash cans:

25

Number of trash cans with lids:

25

Number of recycling containers:

SKIPPED

Number of dumpsters with lids:

SKIPPED

Required: One (1) for every increment of 400 people

Sanitation company:

Waste Connection

Contact telephone number:

737-802-1932

Please describe or attach a detailed description of your plan to clean-up and removal of waste and garbage during and after the event:

This portion has not been worked out. We will have waste bins with lids around the park area. There will be volunteers assigned to make sure the waste bins are not overflowing and emptied during the event.

REQUIRED

INSURANCE FOR YOUR EVENT WILL BE REQUIRED BEFORE FINAL PERMIT APPROVAL IS GIVEN. INSURANCE COVERAGE MUST BE MAINTAINED FOR THE DURATION OF THE EVENT, INCLUDING SET UP AND TEAR DOWN DATES. THE APPLICANT MUST OBTAIN COMMERCIAL GENERAL LIABILITY INSURANCE THAT NAMES THE CITY AND ANY OTHER ENTITIES IMPACTED BY THIS EVENT AS AN "ADDITIONAL INSURED."

CERTIFICATE HOLDER MUST REFLECT:

THE CITY OF PFLUGERVILLE PARKS & RECREATION DEPARTMENT P.O. BOX 589 PFLUGERVILLE, TX 78691

CERTIFICATES OF INSURANCE MUST REFLECT: **COMMERCIAL GENERAL LIABILITY WITH LIMITS OF:**

- \$1 MILLION PER OCCURRENCE
- \$2 MILLION GENERAL AGGREGATE

WORKERS' COMPENSATION WITH LIMITS OF:

• \$1 MILLION (REQUIRED IF THE INSURED HAS PAID EMPLOYEES)

LIQUOR LIABILITY

• REQUIRED IF ALCOHOL WILL BE CONSUMED AT THE EVENT

Name of Insurance Agency: **SKIPPED** Address

Alternate telephone **SKIPPED**

SKIPPED

Contact telephone

SKIPPED Contact name:

SKIPPED

Policy type: **SKIPPED**

Policy number: **SKIPPED**

Policy amount:

SKIPPED

PLEASE OBTAIN AND ATTACH A "CERTIFICATE OF INSURANCE" (COI) REFLECTING THE ABOVE AND NAMING THE CITY OF PFLUGERVILLE AS AN ADDITIONAL INSURED.

Proof of Insurance **SKIPPED**

Site Map Information: At least 15 days before the event, the event organizer shall supply all of the information required below to the City of Pflugerville.

See below for an example, and to submit your Site Map:

Information that must be shown on site plan	Included	Not Included
(a) Tents, identified with description of use and size		
(b) Generators or cords (marked with "G/C")		
(c) Access points, including ingress and egress from each area, tent,		
lounge, etc.		
(d) Location of emergency medical services personnel		
(e) Location of each emergency aid station (marked with red+)		
(f) Location of event organizers headquarters		
(g) All stage locations with description of use and size		
(h) All food preparation and food service locations including mobile		
food vendors		
(i) All restroom facilities		
(j) Any on-site electricity usage marked		
(k) Location of each toilet, a description of the type of toilet and hand		
washing stations		
(I) Location of any hazards on the property such as streams, ponds, or	·	
steep or uneven terrain		
(m) Location of lighting		
(n) Location and number of officers providing traffic control		
(o) Location and capacity of on-site parking,		
including location and capacity of parking for recreational vehicles		
(p) Route for ingress/egress for attendees		+
(q) Route for emergency access		+
		+
(r) Location and description of traffic control signage		
(s) Location for pick-up and drop off for any shuttle that will be used.	-	-
(t) Please mark the area where alcohol will be served.		

Upload Site Map
SKIPPED

Event Load-In and Load-Out Plan:

The event organizer must include a load-in and our plan for all vendors, equipment, and logistical needs. Site Clean-Up Plan:

The event organizer must include a site clean-up plan for returning the site to its pre-event condition at the conclusion of the event.

Medical and Safety Plan:

Attach a description the preparations that are being made to provide adequate medical and nursing care for the event, including:

- The number of emergency medical services personnel that will be on-site during the event,
- A description of the qualifications of emergency medical services personnel that will be on-site during the event, and
- The promoter's plan for evacuation of sick or injured persons

Emergency Operations/Safety Plan Continued:

The event organizer must submit an emergency operations/safety plan that sets forth the event organizers plan for handling inclement weather, bomb threats, and active shooter threats.

Food and Beverage Safety Requirements:

- All mobile vendors/trailers will be subject to fire and health inspections. The promoter must ensure that all food and beverage vendors comply with the following requirements and not allow a vendor to operate if it does not.
- Propane bottles utilized by food vendors must be securely attached to the mobile food unit. All spare bottles must be kept off event grounds at designated location.
 No spare bottles may be stored on event grounds. All other flammable liquids and gases must be kept off event grounds at designated secure location during the event.
- Each vendor/ tent must have a 2A1OBC rated fire extinguisher.
- Any cooking operation involving combustible cooking media (frying vegetable or animal oils and fats) requires a Class K rated extinguisher, in addition to a 2A1OBC rated fire extinguisher. All extinguishers must have a current annual inspection.
- Propane appliances must have LPG stamped on their hoses.
- No grilling with charcoal or wood is allowed under any tented structure.
- Generators and other internal combustion power sources shall be separated from tents by a minimum of 20 feet and shall be isolated from contact with the public by fencing or enclosure or other approved means.
- A minimum of 10 feet separation is required between cooking tents and non-cooking tents.
- 10X10 pop-up canopies are permissible if they are properly staked and positioned. Walls, dressings. etc., may not be hung to enclose the canopy or provide walls.
- If a tent will be used, the vendor must comply with all requirements regarding tents.

Triathlons, Competitve Race / Walk / Swim / Cycle events

Minimum Program Requirements

At the time contract is signed, applicant must provide documentation of the following:

- 1. USAT certified race director for all triathlons
- 2. General Liability Insurance
- 3. Medical staff on site for duration of events
- 4. Open water certified lifeguards for all event which include swimming
- 5. Emergency Action Plan
- 6. At least one (1) year of documented business experience.
- 7. Current Sales Tax Permit (if applicable)
- 8. Event proposal outlining every aspect of your event
- 9. Course Map (including event layout & parking plan)

Waiver

Applicant agrees that, in consideration of permission to use the park facility for the conduct of the activity or event applicant will maintain the present condition of the park. Applicant is responsible for any damage to the grounds or facilities that are a direct or indirect result of the activity, whether caused by participants, referee, coach, spectator, etc of the activity. Applicant shall at all times comply with all laws and ordinances and all rules and regulations of Municipal, State and Federal Government authorities relating to the conduct of the activity authorized herein.

Applicant shall fully indemnify, protect and hold harmless the City of Pflugerville, its employees and agents from all claims, demands, and causes of actions of every kind and character, including the of defense thereof, for any injury to, including death of, persons and any losses for damages to property caused by or alleged to be caused, arising out of, either directly or indirectly or in connection with this agreement or the activities authorized to be performed here under.

Fee Structure: All events must pay facility permit fee to book event date: Other fees listed below. Pavilion rental is a separate fee.			
Athletic Permit Fee:			
Less than 200 Participants: \$125.00 per permit			
200-400 Participants: \$150.00 per permit			
400-1,000 Participants: \$175.00 per permit			
Greater than 1,000 Participants: \$200.00 per permit			
Type of Event	Athletic Event Impact Fee		
5k or Less	\$2.00 per participant		
More than a 5k	\$3.00 per participant		
Triathlon	\$4.00 per participant		

Within three days from completion of event, the event director agrees to provide the City with access to all of its books and financial records, including, but not limited to, registration database, accounting records and banking records, in order to verify the amount of payments due to the City.

I CERTIFY THAT THE INFORMATION CONTAINED IN THE FOREGOING APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF; THAT I HAVE READ, UNDERSTAND, AND AGREE TO ABIDE BY THE RULES AND REGULATIONS GOVERNING THE PROPOSED SPECIAL EVENT UNDER THE CITY OF PFLUGERVILLE AND I UNDERSTAND THAT THIS APPLICATION IS MADE SUBJECT TO THE RULES AND REGULATIONS ESTABLISHED BY THE CITY COUNCIL AND/OR THE CITY MANAGER OR THE CITY MANAGER'S DESIGNEE. I AGREE TO ABIDE BY THESE RULES, AND FURTHER CERTIFY THAT I, ON BEHALF OF THE HOST ORGANIZATION, AM ALSO AUTHORIZED TO COMMIT THAT ORGANIZATION, AND THEREFORE AGREE TO BE FINANCIALLY RESPONSIBLE FOR ANY COST AND FEES THAT MAY BE INCURRED BY OR ON BEHALF OF THE EVENT TO THE CITY OF PFLUGERVILLE. THE APPLICANT FURTHER ACKNOWLEDGES THAT SUBMITTAL OF THIS APPLICATION DOES NOT ENTITLE THE APPLICANT OR ORGANIZATION TO HOLD THE EVENT, AND THAT THEY MUST OBTAIN PERMISSION FROM THE CITY OF PFLUGERVILLE TO DO SO.

Full Name of Applicant (or Organization)

Scott Bennefield

Title

Creator

Type your intitials below to sign this document

SB

Date signed

11/20/2023