

## **Greenway Technical Committee Staff**

**June 19, 2007  
Grand Forks Park District Office  
1210 7<sup>th</sup> Ave. S. Grand Forks, ND  
10:30 am- Noon**

### **DISCUSSION ITEMS**

- I. Greenway Map**
- II. Golf cart request**
- III. Greenway Agency Updates**
- IV. Other new business**

**Next Greenway Technical Committee meeting: July 10, 2007 – 10:30 am at Grand Forks Park District**

#### **Upcoming events:**

- o GF Park District presents Family Fun Night July 24, 2007 at Lincoln Drive Park**

**Greenway Technical Committee Staff  
Meeting Notes  
GF Park District Office Conference Room  
10:30 am – June 19, 2007**

Ann Sande, Friends of the Greenway  
Dave Aaker, EGF Parks & Rec  
Steve Mullally, GF Parks District

Kim Greendahl, City of GF  
Foster Hudson, MNDNR  
Melanie Parvey-Biby, City of GF

**DISCUSSION ITEMS**

- I. **Greenway Map:** The map has been reviewed by all the managing agencies and will sent to the manufacturer to have panels fabricated. The map will also be featured in the brochure.
  
- II. **Golf Cart Request:** Jim Richter of the EGF Economic Development Housing Authority sent a request for permission to drive a seven person cart on the trails. Kim spoke with Corey from OPTIONS to get his opinion on whether or not denying this request would be compliant with ADA accessibility. His opinion was that technically, you couldn't refuse someone from using their chosen mobility device if they have limited mobility or are handicapped. He suggested that the Greenway should allow people to apply for permits to operate mobility devices on the trails through the CAT, using their existing Dial-A-Ride application process.. Steve wonders whether there would be abuse of the permit system, as disability can have a very vague definition.

The DNR will allow golf carts in their parks during special events and can give special permits from the Parks Commissioner to suspend the rules duration of the event. Golf carts are currently prohibited on the Greenway by ordinance, therefore the City Council would have to be the ones to allow them on any regular basis.

It is decided that interested parties can fill out special events applications, which will then be routed for approval. Kim will look at the application and make any necessary changes to specify that it is for trail permission only, so there won't be golf carts tearing up the grass or in other public areas, and then look at getting it available for download from the website so it can be submitted digitally.

- III. **Greenway Agency Updates:**
  - A. **EGF Parks & Recreation:** There are two races coming up, a 5k and a 10k, both will use a route that goes in both GF and EGF with a turn-around. Kim points out that the bridge and part of the trail they want to use is still under contractor control, and therefore closed to the public, but she says she will ask the contractor for permission for them to use it for their events. EGF is also trying to get their disc golf installed as soon as possible; Dave hopes it will operational before the Jubilee event, which is July 18-22. There is a ND

State Disc Golf Tournament will be held in Lincoln Drive Park July 28<sup>th</sup>, and that they could get some good traffic from visiting players if they have it up and running by then.

- B. GF Park District:** They have been busy flood fighting, with the river on the rise several trail areas are close to being flooded. They have also been coordinating with city staff on the dog park proposal, and there will be a public meeting on Thursday, June 21 at 5:00pm at Lincoln Drive Park to discuss with citizens.
- C. City of Grand Forks:** The YMCA has planned a 10k Race and Family Fun Walk for the 4<sup>th</sup> of July, prior to the annual Sertoma events. They have moved the date of their half marathon (usually called the Firecracker) to Catfish Days, hoping that having it annually on a weekend day will up their participation. Kim attended a 3-day conference in Winnipeg where she participated in several seminars, mostly regarding vegetation control, and also gave a presentation about our area's recovery from the flood of 1997 and how our perception of the river has changed and we now look at it as an asset instead of just a necessity.

Greenway management has shifted from Engineering (as we move out of the construction phase of the project) to Public Works (as we develop a permanent management plan), so she and Melanie are once again working together.

- D. Friends of the Greenway:** FoG has basically stopped meeting, with no one to lead the organization, and all members busy with their jobs and lives, they have a hard time keeping up with all the responsibility. She did get a phone call from someone wondering whether or not the annual chili cook-off will be happening, and can report that it will, under the management of GGF Young Professionals group.
- E. Minnesota DNR:** Foster will be retiring, probably August 1<sup>st</sup> of this year. He is unsure of who his replacement will be at this time. The Deputy Director of Parks was visiting with him last week, and Foster took him to several parks he hadn't been to before, including EGF's campground. Campground usage is up 7%, even with the bad weather. They have a new reservation system in place, and are adjusting to it nicely.

**IV. Other new business:** None.

**Next Greenway Technical Committee meeting: July 10, 2007 10:30 am at Grand Forks Park District**

Submitted by: Kelly Kennedy, Office Specialist, City of Grand Forks



## INSTRUCTIONS FOR FILLING OUT PARATRANSIT/ DIAL-A-RIDE APPLICATION



The Paratransit/Dial-A-Ride Program is a service of the Grand Forks and East Grand Forks Public Transportation system.

**TO RECEIVE THIS FORM IN ALTERNATE FORMAT, PLEASE CALL  
746-8108.**

Part A of this form should be filled out by the applicant. If the applicant is under 18 years old, it must be signed by the legal guardian of the child.

Part B should be filled out by the licensed health care professional most familiar with your disability.

This application consists of five pages.

After completing this application, please return the completed application to:

Cities Area Transit  
Attn: Janelle Menard  
P.O. Box 5200  
Grand Forks, ND 58206-5200

Cities Area Transit will review and determine the applicant's eligibility within twenty-one (21) days. The applicant will be notified of the City's decision and if approved, a date will be scheduled to issue the Paratransit/Dial-A-Ride ID Card.

Cities Area Transit reserves the right to:

- (1) verify the license of the health care professional providing certification
- (2) make the final determination on an applicant's eligibility



**Please Keep This Part of the Application for Future Reference  
Eligibility Criteria**

Eligibility is based on whether a person's functional limitations prevent him/her from using regular mass transportation services. It presumes a level of personal mobility and independence to the degree that use of mass transportation would be a reasonable expectation. Financial need is **not** a criteria for receiving a paratransit ID.

**OFFICE LOCATION**

ID cards for people with disabilities are issued at the Cities Area Transit Office at, 867 S. 48th St., **BY APPOINTMENT ONLY**. Call the Cities Area Transit office at 701-746-8108. |  
Appointments are scheduled after the applicant has been determined to be eligible.

**SCHOOLS AND GROUPS OF 5 OR MORE**

Please contact the Cities Area Transit Office at, 701-746-8108 prior to your visit to prevent delays in processing for large groups. We will advise you as to the best day and time based on the size of your group. Everyone must have an appointment.

**RENEWING YOUR ID CARD**

If your disability is permanent and your ID card has expired, you must apply for a new card by completing a new application. It is your responsibility to notify the Cities Area Transit office and request a renewal before your card expires.

**REPLACING LOST ID CARDS**

In the event you lose your ID card, you may obtain a replacement. A fee of \$5.00 is charged for the first replacement and \$10.00 for each subsequent replacement.

**USING YOUR PARATRANSIT/DIAL-A-RIDE ID CARD**

The Paratransit/Dial-A-Ride ID Card must be in the possession of the qualifying patron at all times while riding the City Bus or Paratransit/Dial-A-Ride service. The Paratransit ID card must be presented when boarding City Bus, or Dial-A-Ride, and when purchasing fare tickets. ID cards used in any unlawful manner shall be confiscated.



HEALTH CARE PROFESSIONAL CERTIFICATION (MUST BE COMPLETED ENTIRELY)



Part B is to be completed by a licensed/certified health care professional who is most familiar with the applicant's disability. Information on this form will remain on file with the Cities Area Transit Office and is not subject to public review.

Name: (Print or Type) Title: License Number/State: Phone: ( )

Address: City, State, Zip:

Check one: Physician, Podiatrist, Psychologist/Psychiatrist, Audiologist, Occupational Therapist, Physical Therapist, Optometrist, Other (Please specify)

Patient's Name: Patient's date of birth: Patient's social security number:

1. List the physical, cognitive, or emotional functional limitations including specific diagnosis, which prevent the applicant from using bus transportation. Does the patient require any mobility aids such as wheelchair, walker, or cane?

2. Does the patient's condition affect his/her capability to use bus transportation, i.e. does his/her disability specifically impair his/her ability to use bus transportation rather than taxi or van? No/Yes options and note: Failure to provide how this disability affects their capability to use regularly scheduled bus transportation renders this application incomplete.

3. Does the applicant require an attendant to utilize public transportation? Yes/No

4. Expected Duration of Disability: Temporary: Short-term conditions lasting for at least 90 days but likely to improve within one year. Please check one: 3 months, 6 months, 9 months, 1 year. Permanent: Conditions with absolutely no expectation of improvement. I hereby certify the information included is true and correct.

Signature of Health Care Professional: Date:

Please return signed application to the applicant. False certification may be reported to the licensing under North Dakota.

Office use only: City Bus Only, Van, Taxi, Sr. Rider, Card Number, Category, Issued Date, Expiration Date, Issued By:

## Special Event Permit Application



The information provided in this document is intended to help you plan a safe and enjoyable event. The staff of the Public Information Center is dedicated to making this process flow as quickly and smoothly as possible. To accomplish that, it's important this form be completed in its entirety, and that all additional documents that are requested be submitted. If you have any questions or need assistance completing this application, please contact the Grand Forks Public Information Center at 701-746-4636.

All of the following sections are to be completed by the event coordinator or representative, and are subject to the following requirements:

- Type or use black or blue ink
- Print clearly
- Complete the application **no later than 15 business days** prior to the event (Applications completed after this deadline may jeopardize approval)
- **Use of Town Square will include additional costs and a mandatory walk-through**

**All applications must be signed and witnessed by a notary public. This service is available in the Public Information Center and other City Hall locations.**

### **Processing Procedure:**

- The Public Information Center will review the completed application and notify all required agencies and / or departments.
- All departments and / or agencies involved will need to approve of the event and notify the Public Information Center.
- Notification of the status of your application will be available from the Public Information Center within 5 business days after submission.



### GF Special Event Permit Application

Event Representative(s): \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Event: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

Time of Event: From: \_\_\_\_\_ To: \_\_\_\_\_

Sponsoring Organization(s): \_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Location(s) of Event: \_\_\_\_\_

**NOTE: Appropriate departments must approve location. Please contact Public Information Center at 701-746-4636 with any questions.**

Estimated Number of Total Attendants: \_\_\_\_\_

Do you plan to sell alcohol or will alcohol be present? (please explain) \_\_\_\_\_

**Approval required from City Clerk, Police Department & Fire Department.**



Will your event involve the use of a tent or canopy?

~~Approval required from Fire Department~~

If yes, if the tent or canopy flame retardant? \_\_\_\_\_

Who will erect the tent or canopy? \_\_\_\_\_

What date will it be erected? \_\_\_\_\_

Will your event involve a bonfire or other open burning of any nature?

~~Approval required from Fire Department~~

Will your event involve a fireworks display?

~~Approval required from Fire Department. Include dimensioned site plan.~~

If yes, list ATF License Holder \_\_\_\_\_

ATF License Number \_\_\_\_\_

Pyrotechnic Operator's License # (Include License Classification) \_\_\_\_\_

Provide the following information:

Quantity of pyrotechnic or special effect material for each device; MSDS on each device used; exact description of the desired effect \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Location of materials prior to display \_\_\_\_\_

Location of materials during display \_\_\_\_\_

Storage locations & provisions for return of unused materials after display \_\_\_\_\_

\_\_\_\_\_  
Type of fire extinguishing equipment available on site \_\_\_\_\_

***Attach Proof of Current General Liability Insurance and Workers Compensation coverage. The City of Grand Forks, agents and employees shall be named as an additional insured on the General Liability certificate.***

Will your event involve the sale of food and/or beverages?

~~Approval required from City Clerk~~

~~Cooking equipment needs approval from Fire Department~~

~~Vendors must be approved by Public Health~~

Will you be selling any kind of merchandise at your event?

~~Permit required from City Clerk~~

Will this event require street closure or any other traffic obstruction concerns? \_\_\_\_\_

~~Approval needed from Public Works, Police Department and Fire Department~~  
~~Attach map of parade route or of roads that will be blocked off~~

Do you have plans for recycling and waste disposal? \_\_\_\_\_

~~Approval needed from Public Works~~

Is sufficient parking available for this event? (please explain) \_\_\_\_\_

~~Approval needed from Police Department and Fire Department~~

Is this event a Neighborhood Block Party?

~~Approval needed from Community Service Bureau~~

If event includes a parade, fun run, bike race, etc. please include map of route

~~Approval needed from Police Department, Fire Department and Street Department~~

Does event include a party, festival or celebration that requires a noise variance? \_\_\_\_\_

~~Approval needed from Police Department~~

Does event involve use of Town Square?

~~Approval needed from Urban Development~~

If so, do you need electricity? \_\_\_\_\_

PA System? \_\_\_\_\_

~~Charges apply~~

If you plan to use Town Square, please indicate any planned decorations. \_\_\_\_\_

If using Town Square, please indicate how you plan to clean up after the event. If you plan to contract with the City, please write "Contract with City"

~~Charges may apply~~

**\*\*\*\* Events requiring Police or Fire Officers on site may require additional fees \*\*\*\***

If you have any questions on how to make your event accessible to persons with disabilities please contact Options at 218-773-6100.

Please contact Altru Health System at 701-780-1551 if you will need an Ambulance or Bike Medics, as well as any other medical needs at your event.



**REIMBURSEMENT, INDEMNITY AND HOLD HARMLESS AGREEMENT**

The applicant must promptly reimburse the City for any costs incurred of any kind that are a result of use by applicant under the permission granted. This includes, but is not limited to; cleanup, maintenance, preventive, or replacement costs.

Furthermore, applicant hereby agrees to defend the City and its employees and hold harmless the city from any and all liability to any person or entity that may be caused by damage or injury incurred as a result of this event.

This agreement is effective on the date of which this event is to take place and is complete for the entirety of the event.

**Individual Applicant:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Drivers License #: \_\_\_\_\_

**Sponsoring Organization:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Federal Tax ID: \_\_\_\_\_

Subscribed and sworn to before me, a Notary Public, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

Notary Public  
Grand Forks County, North Dakota  
My Commission Expires: \_\_\_\_\_