AGENDA
Committee on General Services Special Meeting
Friday, March 23, 2018 @ 11:15 a.m. (note day/time)
City Council Conference Room, City Hall 10th Floor

Council Member Patricia Spitzley, Chair
Council Member Adam Hussain, Vice Chair
Council Member Carol Wood, Member

1. **Call to Order**

2. **Public Comment on Agenda Items**

3. **Discussion/Action:**

   A.) RESOLUTION – Fireworks License Application; Lansing Lugnuts; Melrose Pyrotechnics

4. **Other**

5. **Adjourn**

PUBLIC COMMENT AND SIGN IN SHEET

COMMITTEE GENERAL SERVICES

DATE March 23, 2018

Please print

NAME	ADDRESS	Purpose for Attending	Email Address	PHONE
Miko VanLoo	POB 123 Belding, MI 48809	Firework	mvanloo@melrosepyro.com	
Claire Wombacle				

Virg Bernero
Mayor

City of Lansing

Contract Routing Form

IDENTIFYING INFORMATION		
CONTRACT NAME: Melrose Pyrotechnics Inc.		
CONTRACT POINT PERSON: Tracy	PHONE: 7830	E-MAIL:
INITIATING DEPARTMENT/DIVISION: City Clerk	CONTRACT, P.R. OR P.O. NUMBER:	

DEADLINE INFORMATION	
REQUEST DATE: 3/15/18	HIGH PRIORITY? Y N
DEADLINE FOR MAYOR APPROVAL:	
DEADLINE FOR COUNCIL APPROVAL (if applicable):	

ROUTING INFORMATION

INITIATING DEPARTMENT: Please list the departments that need to approve this contract **IN ORDER** in the boxes below. All contracts must be routed to the Controller, City Attorney, Mayor and Clerk. NOTE: If the contract requires a signature from an outside organization, please put your own department on the list in the appropriate order so you can obtain this signature.
APPROVING DEPARTMENTS: Please fill in the Received, Approved, and Forwarded boxes next to the name of your department. Once approved, **Hand Deliver** this contract to the next department on the list and send a confirmation **e-mail** to the Contract Point Person.

DIVISION/ DEPARTMENT	RECEIVED		APPROVED		FORWARDED		
	Date	By	Date	By	Date	By	To
City Atty							

NOTES AND ADDITIONAL INSTRUCTIONS

Original Contract and Routing Form MUST be filed with the City Clerk at the end of the process.

Chris Swope
Lansing City Clerk

Fireworks Display License Application

(City Codified Ordinances – Chapter 1615.01 – 1615.06)
http://mi-lansing.civicplus.com/171/Business-Licenses

Applicant Checklist:
(Ensure All Items Completed)

Payment: ☑ **Bond and/or Insurance:** ☑

Copies of ID's: ☐ **Treasury Form Completed:** ☑

Application Completed: ☑

ANNUAL NON-REFUNDABLE LICENSE FEE: $150.00

Additional Requirements:

- Proof of a bond, an insurance policy naming the City as co-insured, or a combination of both, available for the payment of any damages arising out of an act or omission of the licensee or his agents, employees, or subcontractors, covering the following: (a) At least $500,000.00 for property damage; and (b) at least $500,000.00 for injury to one person and $1,000,000.00 for injury to two or more persons resulting from the same occurrence.
- Copies of State issued identification for each person who will operate the display.
- If the applicant is a nonresident person, written appointment of a resident agent to serve as legal representative upon whom all process in an action or proceeding against the person may be served

Business Name	Business Phone Number
Melrose Pyrotechnics Inc	800-771-7976

Business Address	City	State, Zip
P.O. Box 123	Boaing	MI 48809

Business Owner	Owner Phone Number
Michael Cartolano	800-771-7976

Owner Address	City	State, Zip
P.O. Box 302	Kingsbury	IN 46345

Owner Email Address	Owner DOB (MM/DD/YY)
Mike@melrosepyro.com	

Lansing City Clerk's Office
Ninth Floor, City Hall, 124 W. Michigan Ave., Lansing, MI 48933-1695
517-483-4131 • 517-377-0068 FAX
www.lansingmi.gov/clerk • city.clerk@lansing.mi.gov

Same as above: ☒

Applicant Name		Applicant Phone Number
Applicant Address	**City**	**State, Zip**
Applicant Email Address	**Applicant DOB (MM/DD/YY)**	

Bonded By (Bond to be filed with City)	
Bond Expiration Date	**Bond Amount**

↑ **AND/OR** ↓

Insured By (Policy to be filed with city)	
Expiration Date	**Insured Amount**

Date of Display 4/7, 5/4, 5/19, 6/15, 6/16, 6/19, 6/22, 6/23, 7/4, 7/6, 7/7, 7/20, 7/21, 8/3, 8/10, 8/11, 8/18 - 2018	Time of Display POST GAMES
Exact Location of Display Cooley Law School Stadium 505 E Michigan Ave	
Type and Quantity of Fireworks to be used in Display (attach listing if available) Approximately 500 Aerial Display Shells 19mm to 2.5" in Diameter Approximately 25 Close Proximity Special Effects	
Manner and location of the storage of the fireworks prior to the display No Storage - Delivery on Date of Display	

List All Persons Who Will Operate the Display:

Name	Age	Description of Relevant Experience
BLANE QUILHOT	56	25 YEARS EXPERIENCE 250+ DISPLAYS
RICHARD QUILHOT	58	25 YEARS EXPERIENCE 250+ DISPLAYS
SHAWN HUBBARD	35	10 YEARS EXPERIENCE 50+ DISPLAYS
BRIAN QUILHOT	34	10 YEARS EXPERIENCE 50+ DISPLAYS

Has the applicant, any person with an ownership interest in the applicant, or any person who will operate the display had any citation or conviction for, or guilty plea to, a violation of the laws of the United States, any State or any local unit of government regulating the sale, use, or possession of fireworks?

☐ Yes ☒ No If yes, disclose details:

I certify that neither the Applicant nor any person with ownership interest is in default to the City of Lansing.

By my signature, I swear (or affirm) that all information provided in this application is true.

APPLICANT'S SIGNATURE

OFFICIAL USE ONLY

Approvals:

Sig. Officer M. Foed Police Department	3/8/18 Date	Sig Tammy Good City Treasurer	3/12/18 Date
Sig. Marshaun Blake Fire Marshal	3/8/18 Date	_____ City Attorney	_____ Date

OFFICIAL USE

Amount paid: $2550.00

Date paid: 3/7/18

License #: _____

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 3/2/2018

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 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	CONTACT NAME:	
Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	PHONE (A/C, No, Ext): 216-658-7100	FAX (A/C, No):
	E-MAIL ADDRESS:	

INSURED	INSURER(S) AFFORDING COVERAGE	NAIC #
Melrose Pyrotechnics, Inc. Kingsbury Industrial Parkway Heinold Complex Kingsbury IN 46345	INSURER A : Everest Indemnity Insurance Co.	10851
	INSURER B : Everest National Insurance Company	10120
	INSURER C : Travelers Indemnity Co	25658
	INSURER D : Maxum Indemnity Company	26743
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 2072532095 **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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY	Y		SI8ML00042-181	1/15/2018	1/15/2019	EACH OCCURRENCE	$1,000,000
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	$500,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$1,000,000
							GENERAL AGGREGATE	$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	$2,000,000
	POLICY X PRO-JECT LOC							$
B	AUTOMOBILE LIABILITY			SI8CA00025-181	1/15/2018	1/15/2019	COMBINED SINGLE LIMIT (Ea accident)	$1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS / X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
D	UMBRELLA LIAB X OCCUR			EXC6017975	1/15/2018	1/15/2019	EACH OCCURRENCE	$4,000,000
	X EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$4,000,000
	DED RETENTION $							$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N	N/A		0323N491 (MI)	4/1/2018	4/1/2019	X WC STATU-TORY LIMITS / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$1,000,000
							E.L. DISEASE - POLICY LIMIT	$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Additional Insured extension of coverage is provided by above referenced General Liability policy where required by written agreement.
DISPLAY DATES: 4/7/18; 5/4/18; 5/19/18; 6/15/18; 6/16/18; 6/19/18; 6/22/18; 6/23/18; 7/4/18; 7/6/18; 7/7/18; 7/20/18; 7/21/18; 8/3/18; 8/10/18; 8/11/18; 8/18/18
LOCATION: Cooley Law School Stadium, 505 East Michigan Ave., Lansing, MI
ADDITIONAL INSURED: City of Lansing; LAFCU; Lansing Entertainment and Public Facilities Authority (LEPFA); Outfield Partners, LLC; Gillespie Property Management, Inc.; Take Me Out to the Ballgame, LLC dba Lansing Lugnuts

CERTIFICATE HOLDER

Lansing Lugnuts
505 East Michigan Ave.
Lansing MI 48912

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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MICHIGAN MI USA

COMMERCIAL DRIVER LICENSE

[redacted]

BLANE EDWARD QUILHOT

16600 OLD 27 NORTH

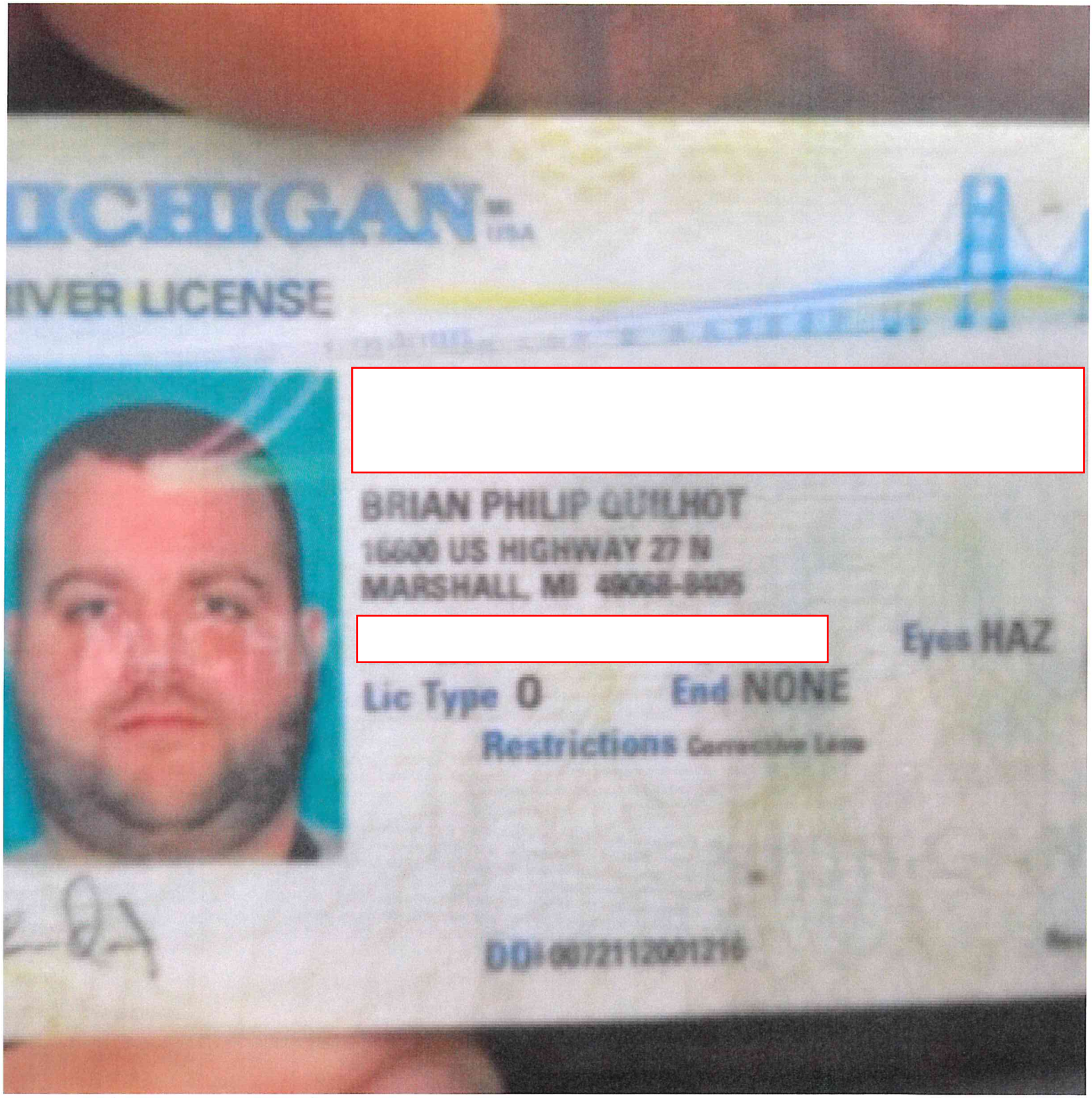
MARSHALL, MI 49068

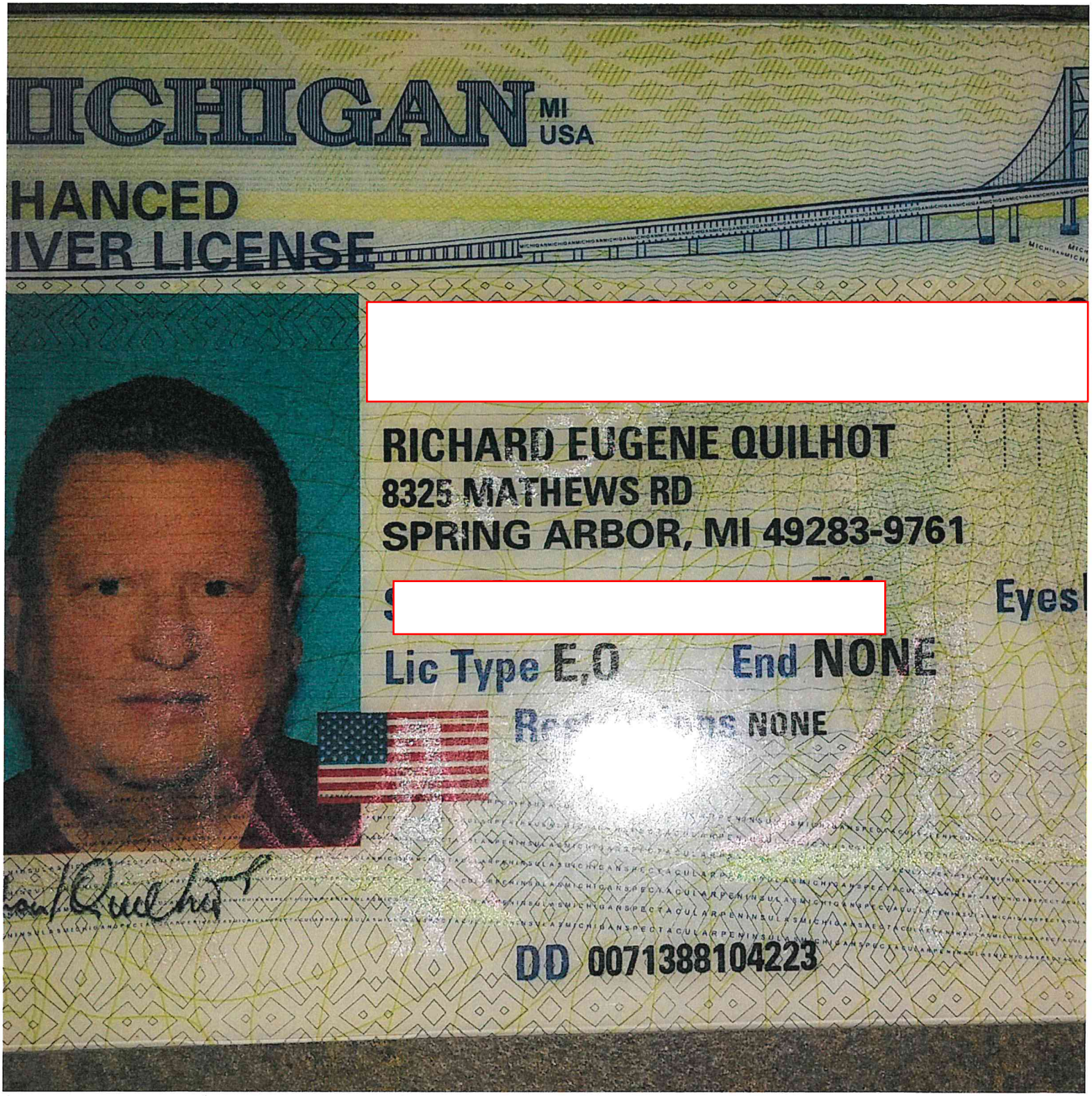
[redacted] Eyes

Lic Type CB End CY,H

Restrictions Corrective Lens

DD# 0073065545226


ICHIGAN
IVER LICENSE
BRIAN PHILIP QUILHOT
16600 US HIGHWAY 27 N
MARSHALL, MI 49068-8405
Eyes HAZ
Lic Type O
End NONE
Restrictions Corrective Lens
DD: 007211200121


ICHIGAN MI USA
HANCED
IVER LICENSE
RICHARD EUGENE QUILHOT
8325 MATHEWS RD
SPRING ARBOR, MI 49283-9761
Eyes
Lic Type E,O
End NONE
NONE
DD 0071388104223

ICHIGAN MI USA

VER LICENSE

T FOR FEDERAL IDENTIFICATION

[redacted]

SHAWN MICHAEL HUBBARD

78 N CHESTER RD

CHARLOTTE, MI 48813-8564

[redacted]

Eyes B

Lic Type O End CY

Restrictions NONE

DD 0077611196226

OFFICIAL USE ONLY

Approvals:

Sig. Officer M. Ford Police Department	3/8/18 Date	Sig. Tammy Good City Treasurer	3/12/18 Date
Sig. Marshaun Blake Fire Marshal	3/8/18 Date	Sig. Brandon Waddell City Attorney	3/21/18 Date

OFFICIAL USE

Amount paid: $ 2550.00

Date paid: 3/7/18

License #: _____

Lansing City Clerk's Office
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OFFICIAL USE ONLY

Approvals:

OFFICER MFord Police Department #007	3/8/18 Date	_____ City Treasurer	_____ Date
_____ Fire Marshal	_____ Date	_____ City Attorney	_____ Date

OFFICIAL USE

Amount paid: $ 2550.00

Date paid: 3/7/18

License #: _____

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Approvals:

Police Department	Date	City Treasurer	Date
Fire Marshal	3/8/18 Date	City Attorney	Date

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OFFICIAL USE ONLY

Approvals:

Police Department	Date	City Treasurer	Date 3/12/18
Fire Marshal	Date	City Attorney	Date

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CITY OF LANSING
TREASURER'S OFFICE/INCOME TAX DIVISION
Room G-29, First Floor, City Hall
124 W Michigan Ave
Lansing, Michigan 48933
(517) 483-4114
FAX (517) 483-6084

City Clerk License Checklist

March 7, 2018

Name (RA): Michael Vanloo Business Name: (Fireworks display)Cooley Law school stadium-Event Producer

Social Security: FEIN #:

Delinquent Income Taxes: ☐ Yes ☒ No If due, amount:

Comments: Non resident

Real Property Address: Parcel #:

Delinquent Real Property: ☐ Yes ☐ No If due, amount:

Comments: NA

Personal Property Address: Personal Property Tax #:

Delinquent Real Property: ☐ Yes ☐ No If due, amount:

Comments: NA

Reviewed by

3/7/18
Date

Approval: ☒ Yes ☐ No

OFFICIAL USE ONLY

Approvals:

Sig. Officer M. Ford Police Department	3/8/18 Date	Sig Tammy Good City Treasurer	3/12/18 Date
Sig. Marshall Blake Fire Marshal	3/8/18 Date	[signature] City Attorney	3/21/18 Date

OFFICIAL USE

Amount paid: $ 2550.00

Date paid: 3/7/18

License #: _____

CITY TREASURER * INCOME TAX DIVISION
(517) 483-4121 (517) 483-4114

1ST Floor – City Hall
124 West Michigan Avenue
Lansing MI 48933

VIRG BERNERO, MAYOR

LANSING TREASURY INFORMATION REQUEST

Complete a separate form for each individual subject to verification

Applicant/Employee Information

Name: MICHAEL VANLOO

Home Address: 6926 RIVERWOOD

BELDING Since 2015

Daytime Phone Number: 616 794-0205

Social Security #: _____

Driver's License #: _____

Date of Birth: _____

Employer/Business Information

Corporate Name: MELROSE PYROTECHNICS, INC

Doing Business As: _____

Address: P.O. BOX 123

BELDING, MI 48809

Business Phone #: 800-771-7976

Federal Employer Identification #: _____

Do you, or any of these businesses, owe the City money for any reason? Yes ___ No ✓

If Yes, for what reason? _____

Name of any other Lansing area business in which your ownership participation exceeds 25% _____

_____

Signature 3/7/18 Date

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BY THE COMMITTEE ON GENERAL SERVICES
RESOLVED BY THE CITY COUNCIL OF THE CITY OF LANSING

WHEREAS, the City Clerk has forwarded an application for a City License, which has been routinely processed without objection, and is ready for final action by this Council; and,

WHEREAS, all required signatures have been obtained supporting the application for a fireworks display license;

NOW, THEREFORE, BE IT RESOLVED, the Lansing City Council, hereby, approves the application for a City License as follows:

FIREWORKS DISPLAY LICENSE:

Lansing Lugnuts/Roger Bonney for a public display of fireworks in the City of Lansing at 505 E Michigan Ave., to be held on April 7, May 4, 19, June 15, 16, 19, 22, 23, July 4, 6, 7, 20, 21, August 3, 10, 11, 18, 2018