



## Private Use of Public Right-Of-Way Request

(street, sidewalk, parking lot,  
boulevard)

**\$30.00 Fee**

### Applicant & Request Information

**Applicant Full Name \*** Amanda McDonald

**Organization Name, if applicable** Take 16 Brewing

**Contact Phone Number \***

**Contact Email \***

**Applicant Address \*** Street Address  
509 E Main Street  
Address Line 2  
City  
Luverne  
Postal / Zip Code  
56156

State / Province / Region  
MN  
Country  
USA

**Public Property Requested \*** Blue Mound Avenue closed from Main Street to Lincoln Street

**Describe in detail the exact location and nature of the private use. \*** We will use the street for our Block Party that night. Buffalo Days weekend. Sanford is the sponsor and expects many of their employees and families to attend. Could we close at 3 or so?

**Attach document(s) for additional explanation of location** Map, drawing, etc...

**Date(s) and period(s) of time you are requesting the use \*** 3pm to midnight? might not be that late. The food trucks will probably arrive around 3. Block party starts at 5.  
Please include details such as, set up time, start of event, end of event, clean-up, etc...

**What are your insurance liability limits? \*** \$1,000,000  
Minimum Required: \$1,000,000 in general liability, City name as an additional insured

What is your  
insurance basis? \*

Occurrence

## Insurance Agent Information

---

Name \* Cory Bloemendaal

Address \*  
Street Address  
808 S Kniss Ave  
Address Line 2  
City  
Luverne  
Postal / Zip Code  
56156

State / Province / Region  
MN  
Country  
USA

Phone Number \* (507) 283-2381

Certificate of Insurance \* Certificate of insurance for the dates of the event, listing the City of Luverne as additional insured.  
DOLI renewal dec eff 22325-26.pdf 317.91KB

## Terms & Conditions

---

I hereby certify that all the foregoing statements are true and accurate to the best of my knowledge. I am making this application in accordance with City Code, Section 151.09, Subdivision 1. I understand that, prior to the granting of this permission by the City, I will be required to furnish proof of insurance and that I will hold the City harmless including costs of defense from any and all claims or causes of action resulting from this application and its use, if granted.

I further understand that the City may charge a fee for the use of the public property. In no event will I acquire any rights, title or interest in the public property whatsoever and the City may cancel my use of the property at any time, with or without prior notice to me.

## Release and Indemnity From all Claims

---

This release made by the authorized undersigned individual, member or officer or the above named organization or individual to the City of Luverne, a municipal corporation, of the County of Rock, State of Minnesota.

In consideration of permission granted to the undersigned, by the City of Luverne, to have said City close the public property described above.

To all pedestrian and vehicular traffic on the date(s) mentioned above, I/we hereby and forever release, discharge, and hold harmless the City of Luverne, its agents and employees, its successors and assigns from all actions, causes of action, damages, claims, debts, or demands whatsoever, which we now have or may hereafter have, in any way involving said closing. I/We further agree to forever indemnify the City of Luverne, its agents and employees, its successors and assigns from all actions, causes of actions, damages, claims, debts, or demands whatsoever, which may be brought by third parties in any way involving said closing. In connection therewith, I/we further agree to obtain liability insurance to provide coverage against any and all actions, causes of actions, damages, claims or demands which may be brought by any party which involves in any way said closing, and to provide the City of Luverne with proof of said liability insurance coverage. I/We also agree to provide a fire lane of a width sufficient to accommodate fire and other emergency vehicles and equipment over and across said closed sidewalks and/or streets.

I/We, the undersigned, have read this release and understand all of its terms. I/We execute it voluntarily on behalf of the above-named individual or organization/business and with full knowledge of its significance.

In witness whereof, I/we, the undersigned, have executed this release at the place and on the day and year appearing after each of our signatures.

Signature \*

*Amara McDonald*

Date \*

4/2/2025