Section I - Contact Information

Host Organization/Group/Person:

NOTE: Please complete the entire application by providing information in all fields. You may mark areas that do not apply with an "N/A." Incomplete applications cannot be accepted.

| This is the organization/group/person accepting all responsibility for the event and providing to required proof of insurance. |
|---|
| Organization/Group/Person Name: Iron Lung Ride |
| Type of Organization: (□) Corporation (□) LLC (□) Non-Profit (□) Other |
| Mailing Address: 5840 N Willow Bend Rd. Mt. Green UT 84050 |
| Physical Address (If different): |
| Primary Phone Number: (801)-941-5525 Fax Number: () |
| Website Address: http://ifon lungride.com |
| Event Organizer: The event organizer is the person representing the host as the contact person and who will be available for all questions prior to, during, and post event. |
| Name & Title: Kaidon Lyman |
| Mail Address: 5840 N millow Bend Rd. Mt. Green UT 84050 |
| Primary Phone Number: (81)-941-5575 Cell Phone Number: (1) |
| Email Address: Kaiden & ironlungfide. cum |
| On – Site Contact: Contact information for the person who will be on-site and will be the primary contact on the day of the event if different than the event organizer. Name & Title: |
| Nailing Address: |
| rimory Phone Number () Email Address: |

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Section II - Event Information

Event Details: If an event includes activities that occur within the boundary of an adjacent city, the event organizer must coordinate with the adjacent city to ensure that a similar Special Event application process IS or IS NOT required by the adjacent city. Event Name: Iron Lung Ride Location and Type of Event: HUM+Sville UT, Road CYCLIPO FILE. Road (V) Trail () Combination () Other () Event Description: I ron Luis Ride is a century road bike ride that Start and finisher at Huntsville Park with an out-and-back course Is this an annual event? (A) Yes (D) No Is this a multi-day event? (□) Yes (\(\Delta\)) No If yes, how many days? (□) No If yes, provide admission fee. \$ 120 Is there an admission fee? () Yes Overall: 150 / < 30 What is the anticipated attendance? Daily: ____/__ Participant/Spectator&Staff Participant/Spectator&Staff Previous year's attendance (if applicable): Overall: 133 / <30 Daily: / Participant/Spectator&Staff Participant/Spectator&Staff **Event Setup & Tear Down:** Event Setup Date: Friday 7-18-25 Event Setup Time: 3 pm to 9 pm (Day of the Week) (Date) AM/PM AM/PM Event Start Date: Saturday 7-19-25 Event Start Time: 6 am (Day of the Week) (Date) Event End Date: Saturday 7-19-25 Event End Time: 4 Pin (Day of the Week) (Date)

Event Tear Down Date: Sq turday 7-1925 Event Tear Down Time: 4 fm to 7 pm (Day of the Week) (Date)

Section III - Street Closure(s)



Temporary Street Closure:

The County requires that all temporary street closures (Soft/Intermittent access during event or Hard/No Access during event) be approved by the appropriate agency; for example, the Utah Department of Transportation (UDOT) is responsible for State Roads and the Weber County Engineer is responsible for County Roads. Any road closure requires written approval from the responsible agency.

| UDOT Road(s): | (□) Yes | (ロ) No | Street Name(s)/Location: |
|--|-------------------|------------|--------------------------|
| County Road(s): | (□) Yes | (□) No | Street Name(s)/Location: |
| Closure Type: | (□) Soft | (□) Hard | Describe: |
| Closure Start Date: | (Day of the Wee | k) (Date) | Closure Start Time:AM/PM |
| Closure End Date: _ | (Day of the Weel | k) (Date) | Closure End Time:AM/PM |
| Does the event have | e its own barrica | de equipme | ent? (□) Yes (□) No |
| Will event rent barricade equipment? (□) Yes (□) No If yes, please provide rental company information and contact person below: | | | |
| Company Name: | | | |
| Address: | | | |
| Contract Number: _ | | | |
| Contact Person/Em | ail Address: | | |
| Phone Number: (|) | | _Fax Number: () |
| Traffic Plan: If UDOT, the County Engineer, or any other County review agency requires the event organizer to obtain a professional traffic plan, it must be submitted at least fourteen (14) days prior to the event. | | | |
| All applications, involving street closures, must include a Traffic Plan Element that describes traffic impacts and mitigation strategies. It is suggested that all traffic impact locations and mitigation strategies be further shown on a site plan/map or attached as a separate illustration. | | | |
| | | P: | age 6 |

Section IV - Catering/Food & Beverage

Weber-Morgan Health Department Coordination/Permits:

The event organizer must coordinate with the Health Department's Environmental Health Services Office when food and/or beverages will be sold or provided. For more information call 801.399.7160 or email: envhealth@co.weber.ut.us.

Weber-Morgan Environmental Health 477 23rd Street, Suite 200 Ogden, Utah 84401

Food and Beverage Information:

Please mark which one applies:

(D) Food and/or beverages WILL NOT be sold or provided at event.

(⋈) Food and/or beverages WILL be sold or provided at event.

Describe food type and service method: We will have I food truck that will Provide a meal after the race for each Vider.

Food Service Vendor List:

In addition to possessing temporary food permits appropriately issued by the Health Department, all food vendors must possess a valid business license issued by Weber County or the jurisdiction where the vendor's business is based. For more information go to: http://www.webercountyutah.gov/Engineering/business.php

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Alcoholic Beverages:

If alcoholic beverages will be sold at the event, a separate application requesting "local consent" must be submitted to the Weber County Public Works Office located in the Weber Center, Suite #240, 2380 Washington Blvd., Ogden, Utah. 84401. The application requesting local consent must be submitted concurrently with or prior to making application for a Special Event.

Please mark which one applies:

| (x) Alcoholic beverages WILL NOT be sold or provided at event. (1) Alcoholic beverages WILL be sold or provided at event. Describe alcohol type and service method: | |
|--|--|
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Section V - Sanitation & Trash Removal

Restroom and Hand-Washing Station Information:

Some events will require the presence of portable restrooms and hand-washing stations. The number of these facilities is based on event type and attendance. Compliance with the Americans with Disabilities Act (ADA) is required. For information related to the required number/type of facilities, contact the Health Department's Environmental Health Services Office as describe above in Section IV. Restroom and hand-washing station information must be illustrated on event site plan/map submitted with the Special Event application. Will event organizer provide portable restroom facilities? (X) Yes (D) No If yes, please provide rental company information and contact person below: Company Name: The Crapper Company Address: 2996 N 4260 W Ogdan UT 84404 Contract Number: Contact Person/Email Address: Jared Felt / jared @ the Crafter company.com Phone Number: (385) - 985 - 2727 Fax Number: () Trash Removal: Trash removal includes, but is not limited to, emptying trash bins and removing all litter and debris from the event site and other affected areas. Please provide the following information for those responsible for trash removal. (Event Staff (□) Contract How will event organizer provide trash removal? Please provide staff member or company information below: Staff Member/Company Name: Kaidon Lyman Address: 5840 N Willow Bend Rd. Mt. Green UT 84050 Contract Number: Contact Person Name/Email Address:______

Phone Number: () ______ Fax Number: ()

Section VI - Venue, Structures & Equipment

Venue Information: When a Special Event is held at a County park, the event organizer must contact the appropriate facility manager to coordinate a schedule and determine whether or not the event will require the execution of an agreement for use of the facility. If an agreement is necessary, the event organizer must ensure that the agreement receives an official County approval prior to the event taking place. If an event is held on public, quasi-public or private property, the event organizer must provide proof that permission has been given by the owner. (X) Yes (D) No Will the event take place at a Weber County park? Venue Name or General Location if Not Properly Named: Huntsville Town Park. Venue Address: 7355 E 2005 Huntsville UT 84317 Venue Description and Specific Locations within Venue: We will be using the West Parision and Survounding area, Note: Please attach site plan/map to the Special Event Application Form and packet. Structures and Equipment: When a Special Event uses temporary structures and certain equipment it may be necessary for the event organizer to coordinate with the Weber County Building Official and Fire Marshal. It may also be necessary for the event organizer to address mitigation strategies when the event impacts neighboring properties. Please mark all that apply: (x) Amplified Speakers (□) Generator(s) (□) Bleachers (□) Stage ⟨ロ/ Start/Finish Line Structure (□) Fencing (v) Tents/Sun Canopy () Other (Please Describe) (□) Playground Equipment

Note: Please show and dimension all structures on the Special Event site plan/map.

Section VII - Parking & Shuttle Service

| Parking Information/Plan: |
|--|
| Describe the overall public parking plan, including specific information about each parking case |
| and provide a count for parking spaces in each: |
| We will we the church Parking lot arrest the Street a |
| The we have already filled and a temperature use point |
| the Church of Jews Christ of Latter Day Squits. |
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| Note: Please show all parking areas, including ADA accessible spaces on the Special Event site |
| plan/map. |
| |
| Shuttle Information: |
| Will shuttle service be provided from a parking area to the event site? |
| No () Yes, provided by event staff () Yes, provided by event staff |
| (□) No (□) Yes, provided by event staff. (□) Yes, provided by professional shuttle service. If yes, describe the shuttle plan and provide contact information below: |
| y assertible the shattle plan and provide contact information below: |
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| Note: Place show all wish was a line of |
| Note: Please show all pick-up and drop-off locations on the Special Event site plan/map. |
| Staff Member/Company Name: |
| Staff Member/Company Name: |
| Address: |
| |
| Contract Number: |
| |
| Contact Person/Email Address: |
| |
| Phone Number: () |
| Phone Number: () Fax Number: () |
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Section VIII - Security & Safety

Public Safety Services:

The County, as part of an event approval, may impose conditions in order to protect public and private property, ensure the proper management of traffic, and reduce the possibility of a public safety resource shortage in the community.

The event organizer may request the use of the Weber County Sheriff's Office resources or the County may require the use of Sheriff's Office resources if the Special Event warrants a moderate to high level of police protection. A fee, in addition to the Special Event application fee, will be charged by the Sheriff's Office and the cost may be based on number of officers needed, type and quantity equipment required, event date, time, location, and length, anticipated traffic and weather conditions, estimated number of participants and spectators, and the nature, format, and configuration of the event.

The event organizer must contact the Weber County Sheriff's Office to coordinate the use of County resources and fees must be paid prior to the issuance of the special event permit.

For Weber County Sheriff's Office participation information visit, email, or call:

OR

Weber County Sheriff's Office 1400 South Depot Drive (700 West) Ogden, Utah 84404

Sergeant Greenhalgh tgreenha@webercountyutah.gov 801-778-6634

Section IX - Emergency Services

Fire Prevention Plan:

All events are required to submit a fire prevention plan and be available to coordinate the review of the plan with the Weber Fire District if necessary. An additional fee may be charged for fire prevention services and equipment provided by the Weber Fire District.

| Please describe any possibility of igniting a fire and the event's plan for preventing, mitigating, a | 24 |
|---|----|
| suppressing a fire: | |
| There are no open flames or anything that might spark a | |
| THE BUT WE WIll have a tive extinovsher an bund in the | |
| event of an unlikely omersency. | - |
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Emergency Medical Plan:

All events are required to submit an emergency medical plan and be available to coordinate the review of the plan with the Weber Fire District if necessary. An additional fee may be charged for medical services and equipment provided by the Weber Fire District.

The level of medical service that is available at an event is dependent upon the size and type of event. The minimum plan for providing medical services for small events, with a low medical risk, may be the designation of an event staff member who can call 9-1-1 and is certified in CPR. Events that are larger and/or have a higher medical risk may be required to provide more services such as paramedic, ambulance, advanced life support, and on-site physician.

It is responsibility or the event organizer to ensure that all medical support personnel, whether paid or volunteer, are familiar with the Utah Health Code and have the appropriate licensing, certifications, and insurance to provide services at a Special Event.

Emergency medical plans should include but are not limited to:

- Name, contact number, and certification type/level for all medical services providers.
- · Description of communication type/method.
- Description or illustration (on Special Event site plan/map) of first aid and/or other medical service or staging locations.
- Description or illustration (on Special Event site plan/map) of medical evacuation strategies and/or staging locations.

| Please describe any likely medical condition(s) that can result from the event and describe the |
|--|
| event's plan for prevention, treating conditions/providing medical services, and evacuation: |
| A sider could crash and beceme injured. Each aid Station |
| has a first aid kit, we will also have voluntaers who will be |
| roaming the course in vehicles that will be wotthing for crashes, |
| In older to avoid not being able to contact amenency services due |
| to a lack of coverage they will be earlied with HAM parts |
| and will be in constant communication with each other and event |
| managment, |
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| NOTE: To assist in determining the appropriate level of medical services for an event, please |
| refer to the table on page 14. |
| |
| Medical Provider Information: |
| |
| If medical services will be provide by an entity other than a Weber Fire District resource, please |
| provide the following information: |
| Company Name: |
| |
| Address: |
| |
| Contract Number: |
| 0 0 |
| Contact Person/Email Address: |
| Phana Number: / |
| Phone Number: () Fax Number: () |
| |
| If medical services will be provided by individuals other than Weber Fire District personnel, |
| please provide name(s), contact number(s), and certification type/level below: |
| Name Number Certification Type/Level |
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SECTION X – Event Signage Plan

Standards for Temporary Signs:

Temporary Special Event signs are permitted when meeting the standards found in the County's Land Use Code. Please illustrate the type, dimension, and location of all proposed signs on the event Site Plan/Map or submit a separate sheet serving as a signage plan.

The unincorporated County is divided into two planning areas. All of the unincorporated area of the County located westerly of the Mount Ogden ridgeline, except for the Ogden Canyon, is the Western Weber County Planning Area. All of the unincorporated area of the County located easterly of the Mount Ogden ridgeline, including the Ogden Canyon, is the Ogden Valley Planning Area.

For events taking place in the Western Weber County Planning Area, refer to Weber County Sign Code Section 110-1-3 (6) - Special Provisions.

https://library.municode.com/ut/weber county/codes/code of ordinances?nodeId=PTIILAUSC O TIT110SI CH1WEWESI S110-1-3SPPR

For events taking place in the Ogden Valley planning area, refer to Weber County Sign Code Section 110-2-11 - Temporary Sign Usage.

https://library.municode.com/ut/weber county/codes/code of ordinances?nodeId=PTIILAUSC O TIT110SI CH2OGVASI S110-2-11TESIUS

What date will event signs be displayed:

Setup July 18 Take Down July 19

Section XI - Proof of Insurance

Insurance:

The host organization and/or event organizer must submit a certificate of insurance, listing the County as an additional insured, on an occurrence policy issued by an insurance company authorized to do business in Utah, showing comprehensive general liability and property damage coverage in the minimum amount of:

- 1. \$1,000,000.00 for injury or death for one person in any one occurrence; and
- 2. \$3,000,000.00 for injury or death for two or more persons in any one occurrence; and
- 3. \$500,000.00 for property damage in any one occurrence.

Section XII - Miscellaneous

Animals:

If animals will be present, food service canopies/tents/areas must be located at least fifty (50) feet away. The event organizer is required to provide hand-washing stations near animal attractions or enclosures.

Will there be any kind of animals at this event (i.e. petting zoo, pony rides, etc)? (□) Yes () No If yes, please illustrate the location of all animal attractions and enclosures on the Special Event site plan/map.

Indemnification Agreement

Host organization and event organizer(s) agree to defend, indemnify, and hold harmless Weber County and its employees and volunteers from any injury or death to any person or damage to any property including all reasonable costs for investigation and defense thereof (including but not limited to, attorney fees, investigation costs, expert witness costs, etc.) arising out of the issuance of applicant's Special Event Permit regardless of where the injury, death, or damage may occur.

Host organization and event organizer further agree to provide and maintain, during the proposed special event, the appropriate comprehensive general liability insurance and property damage coverage in an amount required by Weber County Code.

| Kaidon Lyman | Event Organizer |
|--------------|-----------------|
| Print Name | Title |
| Vice Se | 6/5/25 |
| Signature | Date |

Applicant Agreement

Host organization and/or Event Organizer(s) agree that any false statement or material misrepresentation made in this application is cause for denial of a Special Event Permit. Applicant also agrees that failure to comply with relevant codes, policies, procedures, and conditions, established by the County, is cause for revocation of the Special Event Permit. Applicant further agrees that the Special Event Permit may be revoked, at any time, by any review agency for disregarding the safety and welfare of the public and willful destruction of property:

| Kaiden Lyman | Even+ Organizer |
|--------------|-----------------|
| Print Name | Title |
| Fee Con | 6/5/25 |
| Signature | Date |