

Planning & Development • 22500 Salamo Rd #1000 • West Linn, Oregon 97068 Telephone 503.656.4211 • Fax 503.656.4106 • westlinnoregon.gov

OWT 2092

## **DEVELOPMENT REVIEW APPLICATION**

		For Office U	e Only	CONTROL CONTROL CONTROL CONTROL				
STAFF CONTACT DUTTEN Wy	'SS	ROJECT NO(S).	C-17-	02				
NON-REFUNDABLE FEE(S)	280- R	EFUNDABLE DEPOSIT(S)		TOTAL 280 -				
Type of Review (Please chec	k all that apply):			•				
Annexation (ANX) Appeal and Review (AP) * Conditional Use (CUP) Design Review (DR) Easement Vacation Extraterritorial Ext. of Utilities Final Plat or Plan (FP) Flood Management Area Hillside Protection & Erosion Home Occupation, Pre-A	Lot Line A    Minor Pa   Non-Con   Planned   Pre-Appl   Street Va  Control   pplication, Sidewalk l	ve Plan or Change Adjustment (LLA) */* artition (MIP) (Prelimin forming Lots, Uses & Unit Development (Pi ication Conference (Pi acation Use, Sign Review Peri	ary Plat or Plan) Structures JD) A) */** mit, and Temp	Water Resource Area Protec Water Resource Area Protec Willamette & Tualatin River Zone Change	tion/Wetland (WAP) r Greenway (WRG)			
different or additional ap	plication forms, avail	able on the City web	site or at City I	Hall.				
Site Location/Address:				Assessor's Map No.: 21E2	26D			
22000 SALAMO RD, WE	ST LINN, OR 970	068		Tax Lot(s): 906				
		5.		Total Land Area: 800 sq ft				
Brief Description of Propos TO 7/6/17.			S OF CONS	SUMER FIREWORKS FRO	JM 6/23/17			
Applicant Name: SHANEI (please print)	E LARON/TNT FI	REWORKS		Phone: 503-653-965	5			
Address: P.O. BOX	X 836			Email: LaronS@tntfireworks.com				
·	MAS, OR 97015							
Owner Name (required): AL	BERTSONS COM	PANIES, LLC		Phone: n/a				
Address: 250 PARKCENT				Email: <b>n/a</b>				
City State Zip: BOISE, ID 8	3706							
Operator Name: GEORGI	ENNE FIREWORI	KS/VANESSA MO	ORA	Phone: 503-428-49	01			
	UARRY AVE, NE		Email: n/a					
City State Zip: SILVER	ΓON, OR 97381							
<ol> <li>All application fees are non-refundable (excluding deposit). Any overruns to deposit will result in additional billing.</li> <li>The owner/applicant or their representative should be present at all public hearings.</li> <li>A denial or approval may be reversed on appeal. No permit will be in effect until the appeal period has expired.</li> <li>Three (3) complete hard-copy sets (single sided) of application materials must be submitted with this application.         One (1) complete set of digital application materials must also be submitted on CD in PDF format.         If large sets of plans are required in application please submit only two sets.</li> </ol>								
* No CD required / ** Only or	e hard-copy set ne	eded						
comply with all code requirement to the Community Development C	s applicable to my appli Code and to other regula	cation. Acceptance of ations adopted after the	his application a application is a	es on site review by authorized staf does not infer a complete submitta approved shall be enforced where a at the time of the initial application	I. All amendments applicable.			
Shaw Low		3/27/17	See attache	ed lease				
Applicant's signature		Date	Owner's sig	gnature <i>(required)</i>	Date			

## Temporary Use Standards:

- 1. a. The tent will be place along the side of the Safeway parking lot where it is out of the main flow of traffic and away from driveways. It will not be blocking the line of site for any traffic to make turns in and out of the parking lot. The flow of traffic should not be disrupted at all.
- 1. b. The parking lot that the tent will be on is a paved surface lot.
- 1. c. The existing parking lot has a drainage system.
- 1. d. The temporary tent will be held down with water barrels, so no wind can move it. There will a perimeter around the tent to keep vehicles at least 15 feet away. No damage will be done to the parking lot or the surrounding areas.

# **Proposed Use and Information Sheet:**

## Temporary Sales site:

Safeway #1713 22000 Salamo Rd West Linn, OR 97068 (See attached diagram)

## Type of Sales and Product:

Retail Sales of 1.4 g fireworks.

## Type of Structure:

20' x 40' Framed Tent

## Hours of operations:

Approximately 8:00 am - 11:00 pm daily June  $23^{rd}$  through July  $6^{th}$ .

## **Contact Persons Information:**

Vanessa Mora

24 HR Phone: 503-428-4901

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#### MASTER FIREWORKS AGREEMENT

THIS MASTER FIREWORKS AGREEMENT (this "Master Agreement") is dated as of March 117, 2016, and is entered into by and between Albertsons Companies LLC, a Delaware limited liability company ("Albertsons") on behalf of itself and its subsidiaries and American Promotional Events, Inc. - West, a California Corporation, dba TNT Fireworks ("TNT").

#### RECITALS:

- A. Albertsons. Albertsons through the Companies operates grocery supermarkets in the United States.
- **B.** TNT. TNT desires to enter upon a portion of the parking lot of some of the Stores for the sole purpose of selling fireworks on and around the 4<sup>th</sup> of July and New Year's Eve holidays.

#### AGREEMENT.

Now, therefore, for good and valuable consideration, the receipt and sufficiency of which are acknowledged, the parties agree as follows:

#### 1 Definitions.

1.1 **Definitions.** When used in this Master Agreement, the following terms shall have the meanings set forth below.

"Company" shall mean each of Albertsons LLC, a Delaware limited liability company, New Albertson's Inc., an Ohio corporation, Safeway Inc., a Delaware corporation, The Vons Companies, Inc., a Michigan corporation, and Randall's Food and Drugs Market, LP, a Delaware limited partnership (collectively "Companies").

"Confidential Information" is defined in Section 7.

"Event" shall mean a single holiday fireworks sale occasion in connection with the 4<sup>th</sup> of July or New Year's Eve. In that regard a single Store may be the location of two (2) Events in a single year.

"Fireworks Wholesale Sales" is defined in Section 4.2.

"Individual Vendor" shall mean those nonprofit organizations or other entities which contract with TNT to operate a fireworks stand on the License Premises.

"License" shall mean the right to install and operate a fireworks stand in the area of the parking lots of the Stores pursuant the Revocable License Agreement, the form of which is attached as Exhibit A. "License Premises" shall mean the area of the parking lots licensed under the Revocable License Agreement for the placement of the fireworks stands.

"Store" shall mean a grocery supermarket operated by any Company.

#### 2 Term.

2.1 Term of Master Agreement. The term of this Master Agreement shall commence on the date of this Master Agreement as indicated above (the "Effective Date") and shall expire on September 15, 2018. There are no option terms to extend this Master Agreement.

#### 3 Agreement To Install Fireworks Stands.

3.1 Agreement To Install Fireworks Stands in Identified Stores. Albertsons has provided (and will provide form time to time) TNT with a list of Stores which may have space available for fireworks stands. TNT will identify in writing to Albertsons on or before March 15th of each year this Master Agreement is in effect which Stores it would like to have fireworks stands in for the 4<sup>th</sup> of July holiday. TNT will identify in writing to Albertsons on or before October 31<sup>st</sup> of each year this Master Agreement is in effect which Stores it would like to have fireworks stands in for the New Year's Eve holiday. Upon the parties agreement on a list of Stores for each Company for fireworks stands, Albertsons shall prepare and the parties shall execute a Revocable License Agreement for each Company listing the agreed upon Stores for fireworks stands. TNT's right to install fireworks stands is limited to the Stores listed on the Revocable License Agreements. Albertsons may place, or may contract with any third party to place, any other fireworks stands on any Store not identified by TNT and listed on the agreed stores list by March 15th or October 31<sup>st</sup> as applicable.

#### 4 Payment for Fireworks Stands.

4.1 Fixed Payment. In consideration for having up to a total of '(305) Events in each calendar year, TNT shall pay Albertsons the amounts set forth below on the dates set forth below to such payees, in such increments and to such lock boxes as Albertsons shall designate ("Fixed Payments"):

this Master Agreement may be disclosed for valid business purposes provided, however, that a party shall notify the other in writing at least ten (10) days prior to disclosure and confer with the other concerning means of maintaining the confidentiality of the terms of this Master Agreement. Prior to such disclosure, the disclosing party shall obtain the recipient's agreement to keep such information confidential

7.3 Survival. The confidentiality obligations set forth in this Section 7 shall survive the expiration or termination of this Master Agreement. When this Master Agreement is terminated or expires, each party's Confidential Information and any copies thereof shall be returned to that party except as may reasonably be required for the other party's records.

#### 8 Assignment

8.1 Assignment. TNT may not transfer, assign or sublicense this Master Agreement or any interest therein, and any such assignment shall be deemed null and void and of no force or effect. Nothing herein shall limit Albertsons ability to transfer, assign or sublease its interest in any or all of the Stores or this Master Agreement.

#### 9 Notices.

9.1 Notices. Any notice required or permitted by this Master Agreement to be provided to either party by the other party shall be in writing and signed by a duly authorized representative, and shall be deemed duly given (i) when personally delivered, (ii) when delivery is made or attempted on a business day by Federal Express or similar overnight delivery service, or (iii) three (3) business days after deposit in the United States mail, sent certified or registered mail return receipt requested, with first-class postage prepaid, (or any combination of the methods listed above), and addressed as follows:

If to Albertsons:
Albertsons Companies, LLC.
Attn: Legal Department Real Estate
250 Parkcenter Blvd.
Boise, ID 83706

With a copies to: Albertsons Companies LLC. Attn: Real Estate Law 5918 Stoneridge Mall Road Pleasanton, CA 94588

Albertsons Companies, LLC. Attn: Property Management Department 250 Parkcenter Blvd. Boise, ID 83706 IN WITNESS WHEREOF, the parties hereto have executed this Master Agreement as of the year and date written above.

ALBERTSONS COMPANIES LLC., a Delaware limited liability company

Marilyn K. Beardsley

Title: Vice President

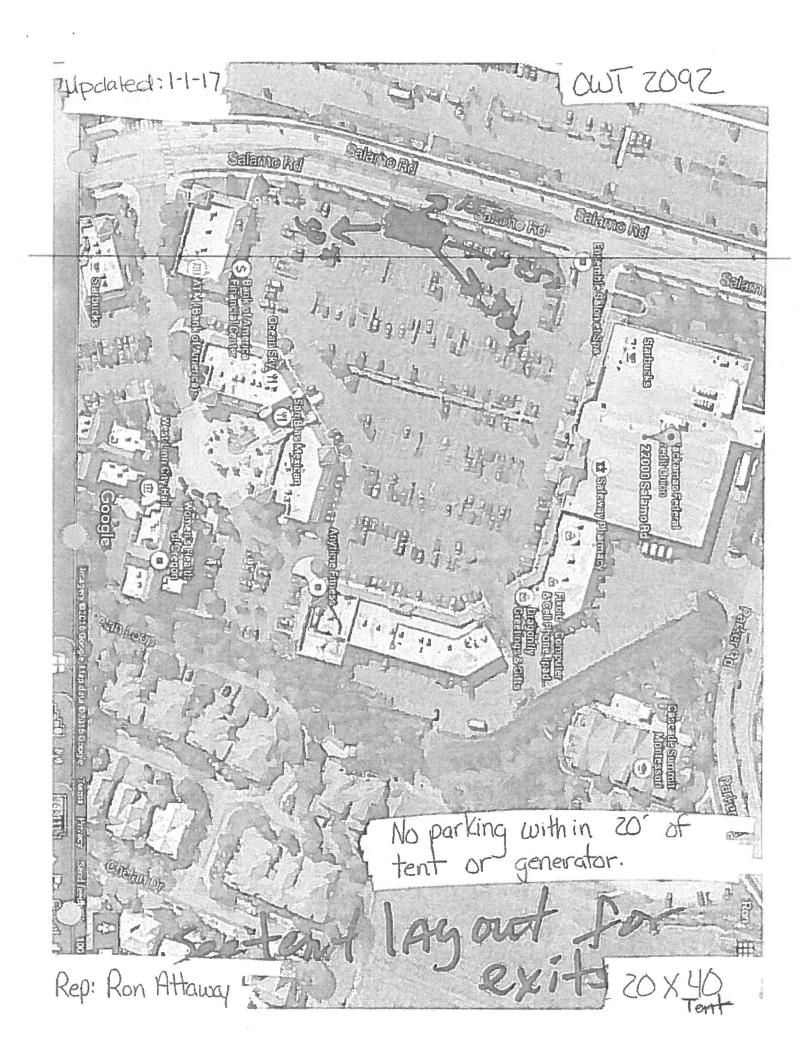
Form Approved:

American Promotional Events, Inc. - West, a California Corporation

By:

Sitle: PRESIDENT

3/11/16





Dear Fire Authority,

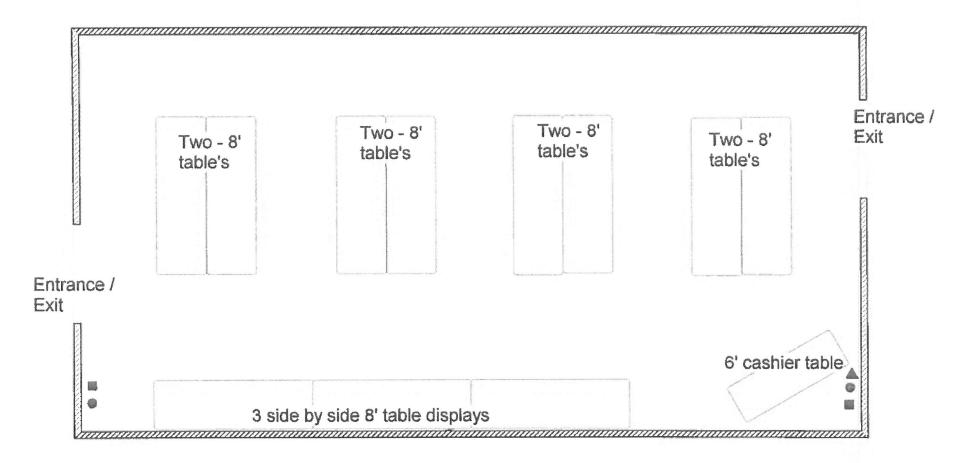
The following is information regarding the Tent operation for your review:

- 1. Tent size = 20' X 40' framed tent
- 2. Entrance/Exits = Each tent will have two entrance/exit.
- 3. Fire extinguishers = Minimum of 2 ea, 2A: 10BC, 2 ea, type 2A water and 1 ea, 40BC
- 4. Aisles = Aisle ways of at least 4' will be maintained.
- 5. Signs = Exit and No Smoking signs will be posted above every exit.
- 6. Product = Will be displayed on 8' tables and free standing pallet displays.
- 7. Security = 24 hour security will be provided at each site.

Enclosed is a diagram of the tent layout along with a copy of the certificate of flame resistant and the certificate of insurance.

Please contact us if you have any questions or request for further information.

Enclosure



# 20' X 40' Fireworks Sales Tent

- 2A:10B:C FIRE EXT.
- 2A-WATER-FIRE EXT.
- 40B:C FIRE EXT. (For Generator)



REGISTERED FABRIC NUMBER

REGISTERED FABRIC NUMBER

# Certificate of Flame Resistance

SNYDER MANUFACTURING, INC. 3001 PROGRESS STREET

Date manufactured

08/07/15

FOR KEY EVENTS	ADDRESS	18179 S.W. BOONES FERRY ROAD
GITY FORTLAND	STATE	OR 97224
The articles described below are made from a flat Fire Marshal for such use.	me-resistant labric	or material registered and approved by the Stat
The Flame Retardant Process Us	ed WILL NOT Be Re	emoved By Washing
* FABRIC MEETS THE REQUIREMENTS OF THE SPE	CIFICATIONS LIST	ED BELOW INDICATED BY
□ NFPA-701-2010 (Large Sqale) /	MIL-C-43006_	☐ FMVSS-302
☐ NFPA-701-2010 (Large Scale) ☐ CAN/ULC-S109-2003	SPAI-842	☐ A-A-55308
STYLE PRV 1610R BLACKOUT WHITE 61" HI GUOSS		Title Supervisor, Quality Control
CONTROL NO. 15183	CUSTOMER	ORDER NO. KEN
SNYDER S-ORDER NO. 241623	DATE PROCI	ESSED 08/07/15
YARDS OF QUANTITY 300	NATE ACCUS	IFIED _09/25/15

8.2-10-36F

# Certificate of Flame Resistance

SNYOER MANUFACTURING INC 3001 PROGRESS STREET DOVER, OHIO 44622

Date manufactured

07/08/15

This is to certify that the materials described below are flame-retardant and inherently nonflammable,

KEY EVEHTS 18179 S.W. BOONES FERRY ROAD ADDRESS PORTE AND 97726

CITY	STATE
The articles described below are made from a fifther Marshal for such use.	llame-resistant fabric or material registered and approved by the State
The Flame Retardant Process U	sod WILL NOT Be Removed By Washing
* FABRIC MEETS THE REQUIREMENTS OF THE SP	ECIFICATIONS LISTED BELOW INDICATED BY
CAN/ULC-S109-2003  SNYDER MANUFACTURING INC. By  STYLE PRV 1610R BLACKOUT WHITE 61" HI CLOSS	MIL-C-43006 FMVSS-302 CPAI-D4
CONTROL NO. 15062	CUSTOMER ORDER NO. 13032
SNYDER S-ORDER NO. 240950	DATE PROCESSED 07/08/15
YARDS OR QUANTITY 305	DATE CERTIFIED 07/30/15



# Certificate of Flame Resistance

Oate manufactured

08/15/14

REGISTERED FABRIC NUMBER

ISSUED 8Y SNYDER MANUFACTURING, INC 3001 PROGRESS STREET DOVER, OHIO 44822

140,01

This is to	certify that the materials described below are flame-retardal	nt and Inherently	y noni	lammat	de.	***************************************	M	
FOR	KEY EVENTS	ADDRESS_	1817	9 S.W.	BOOMES	FERRY RO.	AD	
CITY	PORTLAND	STATE	OR	97224				

The adicies described below are made from a flame.  Fire Marshal for such use.	-resistant fabric or material registered and approved by the State
The Flame Retardant Process Used V	WILL NOT Be Removed By Washing
* FABRIC MEETS THE REQUIREMENTS OF THE SPECIF	ICATIONS LISTED BELOW INDICATED BY
	AIL-C-43006 FMVSS-302 PAI-84
CONTROL NO. 13975  SNYDER S-ORDER NO. 237149  YARDS OR QUANTITY 451	CUSTOMER ORDER NO. 12827  DATE PROCESSED 08/15/14  DATE CERTIFIED 09/10/14

4.10-4-38F-R2-2003



# Certificate of Flame Resistance

ISSUED BY

Date menufactured

04/17/15

FOR KEY EVENTS	ADDRESS 18179 S.W. BOONES FERRY ROAD
CITYPORTLAND	STATE OR 97224
The articles described below are n Fire Marshal for such use.	nade from a flame-realetant fabric or material registered and approved by the State
The Flame Retards	nt Process Used WILL NOT Be Removed By Washing
	A SECTION OF THE PROPERTY OF T
* FABRIC MEETS THE REQUIREMENTS	OF THE SPECIFICATIONS LISTED BELOW INDICATED BY
	1
☑ NFPA-701-2010 (Large Scale	1
□ NFPA-701-2010 (Large Scale	MIL-C-43008 FMVSS-302  A-A-55308
NFPA-701-2010 (Large Scale CAN/ULC-S109-2003 // CAN/ULC-S109-2003 // CAN/ULC-S109-2003	MIL-C-43008 FMVSS-302
NFPA-701-2010 (Large Scale CAN/ULC-S109-2003  SNYDER MANUFACTURING INC. By  STYLE PRV 13109 WHITE 61" HI GLDSS	MIL-C-43008 FMVSS-302  CPAI-8 A-A-55308
□ NFPA-701-2010 (Large Scale	MIL-C-43008 FMVSS-302  CPAI-8  Title  Supervisor, Quality Control

# Oregon Office of State Fire Marshall

LICENSE & PERMITS FIREWORKS PROGRAM RETAIL SALES FIREWORKS APPLICATION

### RECOMMENDED SUBMITTAL DATE: APRIL 15

Phone Number: (503) 934-8274 Fax Number: (503) 934-8288



IMPORTANT: It is recommended completed applications and fee be submitted to the State Fire Marshal no later than April 15 of the year for which the permit is sought. Applications received after that date may not be processed. The retail permit shall be issued prior to any activities allowed by the permit being conducted. See information page for instructions on completing each section of this form,

A permit issued under ORS 480.127 is for the sole use of the permit holder and is not transferable: the permit rights cannot be leased, subleased, contracted, or subcontracted to any other person.

MAIL APPLICATION AND FEE TO

Office of State Fire Marshal License & Permits PO Box 4395 Unit 09 Portland, OR 97208-4395

**OSFM USE ONLY** 

Fee \$100 0230

All sections must be completed. Do not use "same" to complete information requested.

Issue

Permit No: RS-

#### PERMIT HOLDER INFORMATION

COMPANY, ORGANIZATION, OR PERSON TO WHOM PERMIT IS TO BE ISSUED Name GEORGENNE FIREWORKS

Mailing Address 6827 QUARRY AVE NE SILVERTON OR 97381

(Street, City, State, Zip)

Work Phone No. 503-428-2380

Fax No.

**Email Address** 

INDIVIDUAL REPRESENTING COMPANY OR ORGANIZATION LISTED ABOVE

Name GEORGENNE KUENZI

Phone No. 503-428-2380

Mailing Address 6827 QUARRY AVE NE SILVERTON OR 97381 (Street, City, State, Zip)

INDIVIDUAL RESPONSIBLE FOR SALES

INDIVIDUAL SHALL BE RESPONSIBLE FOR ONE LOCATION ONLY Name VANESSA MORA

24-HOUR NUMBER 503-428-4901

Mailing Address 6827 QUARRY AVE NE SILVERTON OR 97381

(Street, City, State, Zip)

Age 30

#### STORAGE INFORMATION

Address (es) Where fireworks will be stored (Street, City, State, Zip)

FIREWORKS DELIVERED DIRECT TO SITE FROM WHOLESALER

Phone No.

N/A

Storage location type (CHECK ONE)N/A

U-Detached □

Approximate dates the fireworks will be at

the storage area(s) N/A

Explain:

 $M \square$ S-1 🗆

Beginning Date

**Ending Date** 

Location of fireworks to open flames, exposed heating elements, and direct sources of ignition Indicate which of

the following apply: N/A None: ☐ Distance in Feet

Type of Ignition Source

Describe fire extinguishing equipment available at storage area(s) N/A

FIRE AUTHORITY SIGNATURE FOR STORAGE LOCATION (if storing)

Signature

Fire Department TUALATIN VALLEY FIRE & RESCUE

**Mailing Address** 

11945 SW 70TH AVE., TIGARD, OR 97223

Printed Name of JOHN WOCFF

Title of Fire Authority

Phone No. 503-259-150ff

Fax No.503-259-1520

**Date Fire** 

**Authority Signed** 

Email Address john . WOIFF@ TVFr. com

Yes D No D

Identification provided to local fire official at time of application

#### RETAIL SALES LOCATION INFORMATION

Numbered street address of sales (STREET, CITY, STATE, ZIP) 22000 Salamo Rd. WEST LINN OR 97068 County CLACKAMAS

Check One

Inside Sales 

Outside Sales 

X

Tent □XStand □ Dimensions 20'x40 FEET

#### WHOLESALE INFORMATION

Wholesaler from whom applicant intends to purchase allowed fireworks (select up to three)

AMERICAN PROMOTIONAL EVENTS - #001 & #044

#### INDIVIDUAL COMPLETING APPLICATION INFORMATION

NAME OF INDIVIDUAL COMPLETING APPLICATION

Printed RON ATTAWAY

Phone No. 503-653-9655

Fax No. 503-654-0619

Address PO BOX 836 CLACKAMAS OR 97015

(Street, City, State, Zip)

Signature

**Email Address** 

NOTE: By signing this application I verify the information is true to the best of my knowledge.

Age 47

FIRE AUTHORITY SIGNATURE FOR SALES LOCATION

Fire Department TUALATIN VALLEY FIRE AND RESCUE

**Mailing Address** 11945 SW 70TH AVE., TIGARD, OR 97223

Printed Name of

Fire Authority

Fax No. 503-259-1520

Title of Fire

Authority

Phone No. 503-259-1500

**Date Fire** 

**Authority Signed** 

Email Address John. Wolffety Fr. com

Identification provided to local fire official at time of application

Yes No D

Signature

#### MAP INFORMATION

## REQUIRED INFORMATION

INSIDE SALES DIAGRAM

Location of fireworks display inside the structure Location of all exits and distance (in feet) from fireworks to all exits Location of highly combustible materials, open flames, heating elements, or direct ignition sources within a 20 foot radius of fireworks display

## REQUIRED INFORMATION

**OUTSIDE SALES DIAGRAM** 

Location of outside sales stand or tent and location of all exits Show the distance from tent or stand to the following: Streets/sidewalks - minimum 15 feet Buildings/ combustible structures - minimum 10 feet

Dispensers of flammable liquids - minimum 50 feet

ATTACH A SEPARATE SHEET OF PAPER WITH A DETAILED MAP OF THE SALES AREA



#### 2017 RETAIL SALES PERMIT FOR ALLOWED FIREWORKS

### **OREGON STATE POLICE** OFFICE OF STATE FIRE MARSHAL (503) 934-8285 or 8274

RONALD ATTAWAY **PO BOX 836** CLACKAMAS OR 97015 PERMIT NO: RS-0265-17

VALID DATES: June 23, 2017 to July 6, 2017

ANY AND ALL LOCAL PERMITS MUST BE OBTAINED AND REQUIREMENTS MET FOR THIS PERMIT TO BE VALID. THIS PERMIT IS VALID ONLY DURING THE DATES INDICATED ABOVE. THIS PERMIT DOES NOT AUTHORIZE THE SALE, USE, OR DISCHARGE OF FIREWORKS IF BY LAW OR ORDINANCE THE LOCAL FIRE AUTHORITY PROHIBITS THE SALE, USE OR DISCHARGE OF FIREWORKS. FOR OUTSIDE STANDS AND TENTS THIS PERMIT MUST BE POSTED IN THE SALES AREA. FOR INSIDE SALES THIS PERMIT MUST BE IMMEDIATELY AVAILABLE FOR VIEWING UPON REQUEST. STORAGE OF FIREWORKS IS NOT ALLOWED IN TENTS OR STANDS. ALL UNSOLD FIREWORKS MUST BE RETURNED TO THE SUPPLYING FIREWORKS WHOLESALER NO LATER THAN JULY 31ST OF THE YEAR IN WHICH THIS RETAIL SALES PERMIT IS VALID.

PERMIT ISSUED TO:

Georgenne Fireworks

INDIVIDUAL RESPONSIBLE FOR SALES: Vanessa Mora

SALES SITE ADDRESS:

22000 Salamo Rd

West Linn OR 97068

SALES SITE FIRE AUTHORITY:

**DFM II John Wolff** 

Tualatin Valley F&R

**LOCATION AT SALES SITE:** 

Outside

TYPE AND SIZE:

Tent

STORAGE SITE ADDRESS:

20' x 40'

**Direct to Site** 

STORAGE TYPE:

STORAGE SITE FIRE AUTHORITY:

WHOLESALER(S):

American Promotional Events NW



#### CERTIFICATE OF LIABILITY INSURANCE

11/1/2017

DATE (MM/DD/YYYY) 10/31/2016

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 if SUBROGATION IS WAIVED, subject this certificate does not confer rights to	to th	e ter	ms and conditions of th	e polic	y, certain po	olicies may r				
PRODUCER Lockton Companies				CONTAC NAME:						
3280 Peachtree Road NE, Suite #250							FAX (A/C, No):			
Atlanta GA 30305					o, Ext):		(A/C, No):			
(404) 460-3600				ADDRE						
							DING COVERAGE		NAIC#	
				INSURE	RA: Everest	Indemnity I	Insurance Company		10851	
1359629 American Promotional Events, Inc.					RB:					
DBA INT FILEWORKS, IIIC.					RC:					
P.O. Box 1318 4511 Helton Drive					RD:					
Florence AL 35630					RE:					
Florence AL 33030				INSURE	RF:					
COVERAGES CERTIFICATE NUMBER: 1218692							REVISION NUMBER:	XX	XXXXX	
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.							WHICH THIS			
INSR LTR TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
A X COMMERCIAL GENERAL LIABILITY	Y	N	SI8GL00242-161		11/1/2016	11/1/2017	EACH OCCURRENCE	\$ 1,00	00,000	
CLAIMS-MADE X OCCUR	1		2.302002.2101		-12010	- 1, 1, 2017	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500	,000	
							MED EXP (Any one person)	\$ 5,00	00	
							PERSONAL & ADV INJURY	\$ 1,000,000		
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000		
PRO- V							PRODUCTS - COMP/OP AGG		00.000	
							TROBUCTS - COMPTOR AGG	\$ 2,00	50,000	
OTHER: AUTOMOBILE LIABILITY			NOT APPLICABLE	-			COMBINED SINGLE LIMIT	\$ VV	XXXXX	
ANY AUTO							(Ea accident) BODILY INJURY (Per person)		XXXXX	
OWNED SCHEDULED							BODILY INJURY (Per accident)			
AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE		XXXXX XXXXX	
AUTOS ONLY AUTOS ONLY							(Per accident)		XXXXX	
UMPD5UA UMP			NOT A DRI ICA DI E							
UMBRELLA LIAB OCCUR			NOT APPLICABLE				EACH OCCURRENCE		XXXXX	
EXCESS LIAB CLAIMS-MADE							AGGREGATE		XXXXX	
DED RETENTION \$							PER OTH-	\$ XX	XXXXX	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			NOT APPLICABLE				STATUTE ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$ XX	XXXXX	
(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$ XX	XXXXX	
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ XX	XXXXX	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) THIS CERTIFICATE SUPERSEDES ALL PREVIOUSLY ISSUED CERTIFICATES FOR THIS HOLDER, APPLICABLE TO THE CARRIERS LISTED AND THE POLICY TERM(S) REFERENCED. Tent operations at Safeway 1713 located at 22000 Salamo Rd in West Linn, OR 97068(OWT2092) Certificate holder is an additional insured on the General Liability as required by written contract subject to policy terms, conditions, and exclusions.										
CERTIFICATE HOLDER				CAN	CELLATION					
12186923 Georgenne Fireworks City of West Linn Tualatin Valley Fire And Rescue					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
11945 SW 70th Ave Tigard OR 97223					AUTHORIZED REPRESENTATIVE  Authorized Representative  Authorized Representative  Authorized Representative  Authorized Representative					