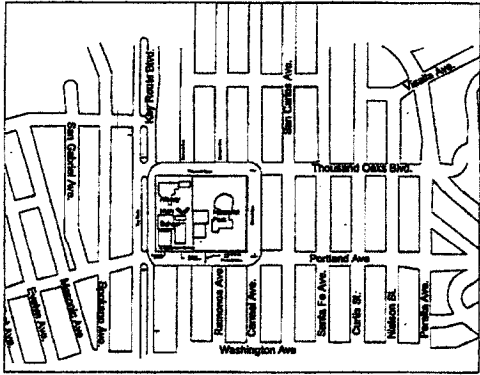




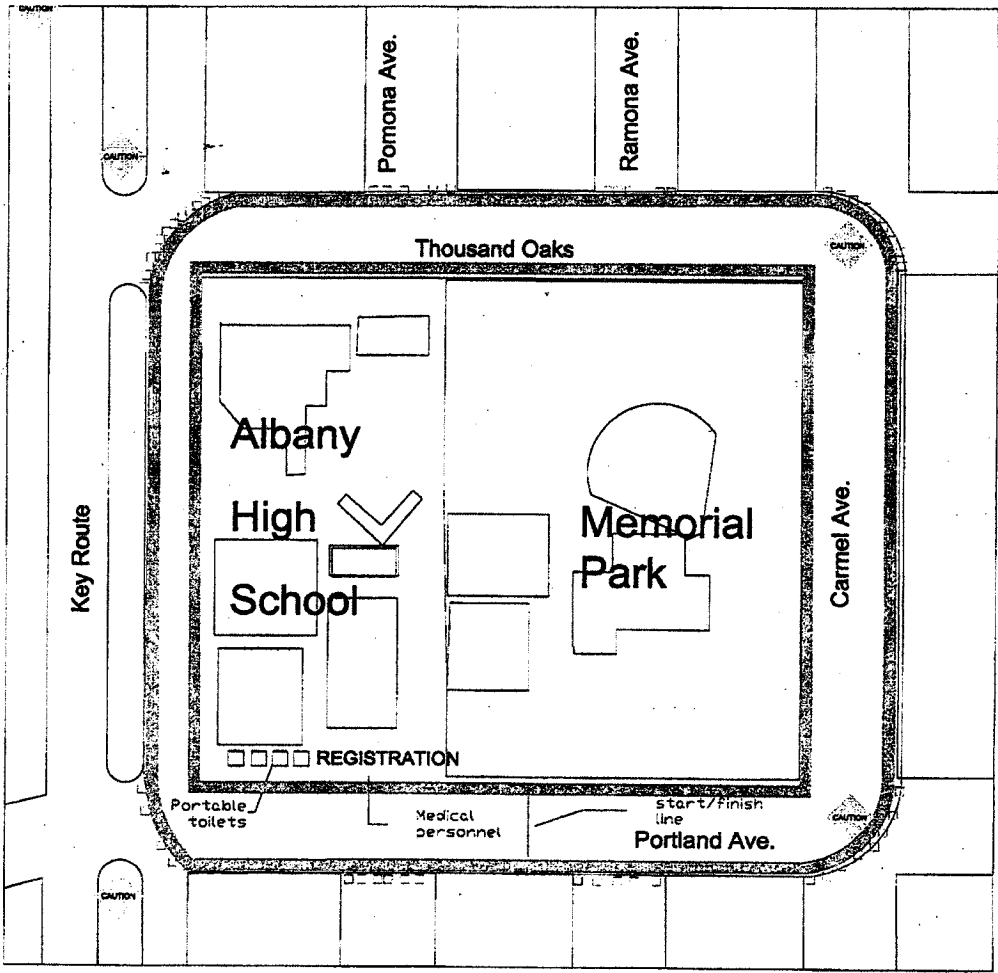


**Proposed Race Course
BBC Criterium
July 18, 2010**



LEGEND

-  Traffic sign
-  Cone Location
-  No Parking Zone
-  Limits of race course





City of Albany



ENCROACHMENT PERMIT PERMANENT OR TEMPORARY CONSTRUCTION WITHIN CITY RIGHT OF WAY

PERMIT NO. _____

LOCATION: Around Mem. Park ~ East Side, Thousand Oaks, Carmel Ave, Portland Ave

NAME	ADDRESS	Phone No. Normal/Emergency	Business Lic. No. Workers Comp. No.
Applicant: <u>JOHN ANNER</u>	<u>819 Talbot Ave, Albany</u>	<u>(415) 846-4559</u>	<u>X</u>
Owner:			
Engineer / Architect:			
Contractor:			

CITY OF ALBANY
MAY 26 2010
COMMUNITY DEVELOPMENT
DEPARTMENT

TYPE OF WORK

- Sidewalk Curb & Gutter Sewer Street Tree
 Utility Co. Permanent Structure Other: _____

DESCRIPTION OF WORK

Bicycle race around Memorial Park ~ Annual Event

REQUIRED CONDITIONS

- All work shall be in accordance with the attached standard conditions.
- No refund after 120 days or work begins; 70% of fee refundable within 120 days provided no work has begun.
- Permanent structures require City Council approval (City Code 14-2).
- CALL USA 1-800-227-2600 before excavating.
- Call for Final Inspection and Sign-Off 48 hr. in advance at (510) 528-5760 (510) 524-9543.
- Special Conditions may be imposed following City review and prior to issuance of this permit.

Applicant's Signature: [Signature] Date: 5/26/10

STAFF USE ONLY	
Permit Fee Computation	
Total construction cost subject to fee:	
New construction at 8% of construction cost	
In-Lieu slurry seal fee (when street is out)	
Minimum fee per schedule (if greater than % fee)	
Total Fee due (transfer to fee schedule from) (Utilities to be billed, copy of permit to Finance)	
Special Conditions: _____	
Issued by: _____	Date: _____
Permit Expiration Date: _____ (not to exceed 180 days from date issued)	
Final Sign Off by: _____	Date: _____

City of Albany

ENVIRONMENTAL PROTECTION STATEMENT OF RESPONSIBILITY FOR DISCHARGE & DAMAGE

I. PURPOSE

This statement is to provide notice to property owners, contractors, and others of the responsibility for compliance with Albany Municipal Code (AMC) as it relates to protection of public trees and waterways.

Public Trees: Damage to street trees or other trees locate on public property is considered damage to public property. Damage to trees includes, but is not limited to cutting any amount of trees roots, ripping or tearing of branches, and peeling, tearing, or scarring of tree bark. Damage may cause death and/or a dangerous condition by destabilizing the tree. Restoring a tree is a priority to the City of Albany.

Waterways: The City's storm water runoff system conveys rain water directly to the San Francisco Bay through a network of surface flows, underground pipes, and creek channels. Materials discharged to a sidewalk, street gutter, storm drain or creek can cause creeks and the Bay to become polluted. Any material other than rain water is considered an illicit discharge under the Federal Clean Water Act. Examples of illicit discharge include: concrete wash water, stucco wash water, paint warm water, chemicals, and runoff from stockpiled materials such as dirt aggregate, soil products, and other construction materials.

II. RESPONSIBILITY FOR DAMAGE TO PUBLIC TREES AND/OR ILLICIT DISCHARGE TO WATERWAYS

Public Trees: Pursuant to Albany Municipal Code Section 14-1.2., it is unlawful to cause damage to public property. When a public tree is damaged the cost of the damage and the value of the tree will be calculated by a certified arborist in accordance with International Society of Arboriculture Standards. Because valuable resources such as time, energy and money are invested in trees over many years, the calculated value of a tree can be high. The party damaging the tree is liable for all costs associated with the loss of the tree and the repair or replacement of the tree.

Waterways: Pursuant to Albany Municipal Code Section 15.4, it is unlawful to discharge materials (liquid or solid) to a sidewalk, street, gutter, storm drain or creek. An illicit discharge is defined as "any discharge to the City storm drain system that is not composed entirely of storm water...". The contractor and/or property owner is responsible for all fines and costs associated with the illicit discharge.

III. CERTIFICATION OF COMPLIANCE

I understand that as the applicant I am responsible for any damaged to public trees and/or all illicit discharges resulting from this project and that I am responsible for all fees and fines as a result or non-compliance.

Berkeley Bicycle Club

Property Owner or Permittee

5/26/10

Date

BBC / JOHN ANNOR

Business Name & Contractor's Authorized Representative

Date

Location or Title of Project: Berkeley Bicycle Club Criterion

City of Albany

SPECIAL PROVISIONS FOR ENCROACHMENT PERMIT FOR PERMANENT IMPROVEMENT IN CITY RIGHT-OF-WAY

Permit # _____
LOCATION: Memorial Park / Massey Oaks, Key Rate, Astland, Carmel

This APPLICATION MUST BE ACCOMPANIED by the DATA and PLANS indicated below:

- Description of Job
- APPROVED Construction Plans and/or Documents
- An Engineer's Estimate of the value of all public improvements and utility services within the public right-of-way
- A Soils Report prepared by a Registered Civil Engineer
- Others: Specify _____

ALL FEES SHALL BE PAID AND DEPOSITS MADE PRIOR TO THE ISSUANCE OF THIS PERMIT: except Utility Companies. Utility Companies will be invoiced.

Standards/Specification:

The following conditions and provisions of the Albany Municipal Code apply to this permit. All work shall be in accordance with City Standard Specifications and Drawings.

Commencement of Work

The permittee shall begin the work or use authorized by a permit issued pursuant to this chapter within ninety (90) days from the date of the issuance unless a different period is stated in the permit, or an extension of time is granted by the Director of Community Development * Environmental Resources. If the work or use is not begun accordingly, the permit shall become void.

INSPECTION

In general, inspection producers and requirements shall be as established by the Director of Community Development & Environmental Resources. Unless specifically exempted by the City Code, no encroachment work shall take place without inspection by the Director of Community Development & Environmental Resources or his/her authorized agent. Inspections by the City must be requested at least TWENTY-FOUR (24) HOURS (excluding weekends) IN ADVANCE of the work to be performed. No work shall be performed on weekends without PRIOR AUTHORIZATION of the Director of Community Development & Environmental Resources.

DISPLAY OF PERMIT

The permittee shall keep a copy of this permit at the site of the work, or in the cab of a vehicle when movement on a public street is involved. The permit shall be shown to any authorized representative of the Director of Community Development & Environmental Resources or Law Enforcement Officer on demand.

ACCEPTANCE OF PERMIT BY APPLICANT

Acceptance by the applicant of the permit shall be conclusive evidence of the reasonableness of the terms imposed and shall constitute a waiver of any right to legislative determination thereof.

NON-ASSIGNMENT OF PERMIT

Permits shall only be issued only to the person making application and may not be assigned to another person by the permittee. If any permittee assigns his permit to another, the permit will be revoked.

CHANGES IN PERMIT AND WORK

No work may be made in the location, dimensions, character, or duration of the encroachment or use as granted by the permit except upon written authorization of the Director of Community Development & Environmental Resources.

City of Albany

EXCAVATION OF PAVED STREETS

No excavations shall be permitted within the paved area of the public streets unless the applicant can prove to the satisfaction of the Director of Community Development & Environmental Resources that the following conditions exist:

1. Boring of the utility is not feasible; and
2. No reasonable alternative utility arrangement is available outside the paved street area; and
3. The cut area and an adjacent area shall be resurfaced as approved by the Director of Community Development & Environmental Resources. The limits of resurfacing shall be as determined by the Director of Community Development & Environmental Resources to insure the excavating area blends visually with the surrounding area. The applicant shall be responsible for the replacement of any and all obliterated or removed pavement markers or striping.

REVOCAION OF PERMIT

This encroachment permit may be revoked at any time at the option of the Director of Community Development & Environmental Resources, whenever:

1. It appears that continuing allowance of the permitted work, whether because of changed conditions or otherwise, interferes with full, adequate or safe public use of the right-of-way involved; or
2. The permittee fails to comply with or violates any city ordinance, city standard, safety regulations, or any condition of the issuance of the permit.

Upon revocation of the permit, the permittee shall immediately restore the public right-of-way to a condition as required by the Director of Community Development & Environmental Resources. If the restoration is not completed within the time specified by the Director of Community Development & Environmental Resources, the City may take any and all necessary action so required to restore the right-of-way. Any and all costs incurred by the City will be deducted from any deposits posted by the permittee and if necessary recovered by legal action.

HOURS OF WORK

No work shall commence prior to 8:00AM and no work shall be conducted after 6:00PM Monday through Saturday and before 10:00AM or after 6:00PM on Sundays and Holidays.

COMPLETION OF WORK

The permittee must complete the work or use authorized by a permit issued pursuant to this chapter within the time specified in the permit. If at any time the Director of Community Development & Environmental Resources finds that the delay in the prosecution or completion of the work or use authorized is due to lack of diligence on the part of the permittee, the permit may be revoked.

PERMITTEE LIABILITY

The permittee shall agree to hold the City, its officers, and employees harmless from any and all liability, claims, suits, or actions for any and all damages alleged to have been suffered by any person or property by reason of the permittee's installation, operation, maintenance or removal of the encroachment.

BY MY SIGNATURE HEREUNDER, I state that I have read and understood the above conditions and agree to comply therewith. I hereby attest that I am either the owner of the property or duly authorized agent of the applicant.

APPLICANT'S SIGNATURE: _____

Date: _____

NAME (print): _____

Company: _____



Berkeley Bicycle Club Criterium

Presented By Mike's Bikes



CITY OF ALBANY

MAY 26 2010



Sponsored by the Berkeley Bicycle Club and East Bay Velo Club

COMMUNITY DEVELOPMENT DEPARTMENT

(USAC Permit #xxx)

Sunday July 18th, 2010

A portion of race proceeds will benefit
Albany Public Schools through

GILLIN JACOBSON
ELLIS & LARSEN
GJEL.COM



LA NOTE RESTAURANT



Make your commitment to
Albany Schools today!

Schools and Citizens of Albany to Rescue Education

Category	Start Time	Prizes	Places	Time	Field	Fee
Juniors 15-16, 17-18*	7:30am	Awards	6	40 min.	50	\$19
Elite 5 Men	8:15am	Awards	6	40 min.	50	\$27
Elite 4 Men	9:00am	\$150	6	50 min.	75	\$27
Masters 45+, 55+*	9:55am	\$150/\$150	6/6	50 min.	75	\$27
Women 4, 35+*	10:50am	\$150/\$150	6/6	40 min.	50	\$27
Masters 35+ 1, 2, 3	11:35am	\$250	6	50 min.	75	\$27
Kids Races	12:35pm	Prizes	All	40 min.	Open	Free
Master 35+ 4/5	1:20pm	\$150	6	40 min.	50	\$27
Elite 3 Men	2:05pm	\$250	6	50 min.	75	\$27
Women 1/2, 3*	3:00pm	\$300/\$150	8/6	50 min.	75	\$27
Men Pro/1/2	3:55pm	\$500	8	60 min.	75	\$32

* picked separately

Merchandise prizes from **Peets Coffee & Tea** and **GU**
Registration opens at 6:30am and closes 15 min. before each event
Course: 0.6 mi. slightly-inclined, 4-corner crit around Memorial Park. Good pavement.
Directions: Albany is north of Berkeley. *Hwy 80, take Central Ave Exit.* Go east for ~1 mile. Turn right at Ashbury follow until Thousand Oaks Blvd. Park on Ashbury/KeyRoute.
Start/Finish: Portland between Key Route Blvd. and Carmel (south side of the park).
 Please be considerate of local residents. We need their continued support for our race.
Rules: USCF rules apply **Pre-Registration:** Online registration at **BikeReg.com** (*plus \$2.80 BikeReg service fee) **NO MAIL-IN REGISTRATION.** Online reg closes July 16th **9:45PM Pacific Daylight Time.** \$7 fee for day-of registration. Second race is \$10 if pre-registered; also \$10 on race day. Current district champions: \$3 (register day of race) and must race in the class in which you are champion.
 Rain or shine. **NO REFUNDS, NO SUBSTITUTIONS.**
Prizes: Merchandise and cash. At least half cash for all fields. Prizes will be offered in addition to prize list.
Kids Race: Three categories, ages 4-5, 6-9, and 10-12. Fun, short races (less than ¼ mile). All receive prizes. Parents must be present and sign release. Helmets are mandatory.
Race Promoter: John Anner [email: janner123@yahoo.com; phone (415) 846-4257]

Part of the Cycles Gladiator wine 'Uninhibited Racer' Series



EVENT NAME BBC Criterium PERMIT # _____
 EVENT DATE(S) 7/10/10 SET-UP/TEAR-DOWN DATE(S) (\$25/DAY) 7/10/10



ROAD/TRACK/CYCLOCROSS COMPETITIVE EVENT PERMIT APPLICATION
 (REV. 2010)

210 USA Cycling Point, Suite 100 Colorado Springs, CO 80919-2215 * ph: 719/434-4200 * f: 719/434-4300 * www.usacycling.org
 For competitive events only. Applications must be submitted to USA Cycling no later than six weeks in advance of the event date.

ROAD/TRACK/CYCLOCROSS EVENT TYPES

NRC UCI

STATE Criterium Road Race Track Race Series Race Collegiate LAJORS

LOCAL Cyclocross Time Trial Stage Race Amateur Only Open (Pro-Am) Other

EVENT INFORMATION PLEASE PRINT

EVENT LOCATION (city, state) Albany, CA

SPONSORING USA CYCLING MEMBER CLUB(S) [UP TO 5 CLUBS] Berkeley Bicycle Club / East Bay Velo Club

PROMOTER John Anner

PRIMARY CONTACT " " TELEPHONE (415) 846-4257

ADDRESS 219 Talbot Ave FAX ()

CITY Albany STATE CA ZIP 94706

EVENT WEBSITE _____ E-MAIL janner183@yahoo.com

Feel free to check your information on the USA Cycling website at www.usacycling.org.

PERMIT FEE WORKSHEET For all Road/Track/Cyclocross Competitive permitted events. Cancellation of event will result in a \$50 fee.

Event Category	Highest Payout for Any One Category	Permit Fee for All Events Per Day	Permit Fee Formula
A	\$10,000+	7% of total prize list	Total prize list \$ x 7% = \$ = Permit Fee
B	\$5,000 - \$9,999	7% of total prize list	Total prize list \$ x 7% = \$ = Permit Fee
C	\$2,000 - \$4,999	7% of total prize list	Total prize list \$ x 7% = \$ = Permit Fee
D	\$500 - \$1,999	\$50 per day	Number of Days x \$50 = \$ = Permit Fee
E	\$0 - \$499	\$25 per day	Number of Days x \$25 = \$ = Permit Fee
Set up date		\$25 per day	Number of Days x \$25 = \$ = Permit Fee

TRAINING RACE SERIES PERMIT - State championship series are not eligible

A training race series is a sequence of race meets of the same kind conducted on a regular basis at the same location, time and day of the week (state championship series are NOT eligible). A prize list of less than \$499 per day may be offered. Fee: 1-3 days = \$15.00, 4-30 days = \$50. All State Championships are at least a category D event. All riders must be licensed and sign waivers. Promoters pay \$3.00 (per rider per day) for insurance coverage.

PERMIT FEE TOTAL

Permit Fee = _____
 Set-up/Tear-Down fee = _____
 Late filing fee = (within 6 weeks of event) + \$50
 Rush filing fee = (within 2 weeks of event) + \$100
TOTAL PERMIT FEE DUE: 25.00

INSURANCE SURCHARGE is \$3.00 per rider per day and must be submitted in full with post event report.
All riders must be licensed and sign waivers.

NO REFUNDS ON RUSH FILING FEES, LATE FILING FEES, OR AUTOMOTO INSURANCE FEES
NO REFUNDS NO EXCEPTIONS

Due to insurance and reporting obligations, your Post Event Report and subsequent paperwork must arrive at USA Cycling within 21 days of your event. Event reporting and paperwork must be sent in after each race in a series of races. Additional service fees will apply to all late filings: \$50 if within 22-30 days of event, \$100 if within 31-60 days of event. After 60 days you may face future permit cancellation/submissions. Please avoid this and remit all fees on time.

Form of payment: Check Money Order VISA MasterCard

Credit Card #: _____ Expiration Date: _____ Signature: _____
 Cardholder Name: _____ Cardholder Address: _____

The undersigned, as agent of the sponsoring clubs and promoter (collectively, "Organizers"), having read the information in the accompanying permit packet, agree to the same, and agree to abide by and enforce the rules, regulations and decisions of USA Cycling, Inc. (USAC) and its agents, officials and member associations. The Organizers agree to defend, to hold harmless and to indemnify USAC and its agents, officials and member associations against any and all costs, claims, legal fees and liabilities which are connected with or arise directly or indirectly out of the preparation for or conduct of the above event(s); to cooperate with USAC and its agents in the event of any personal injury or other claims and/or other legal action(s) arising out of the above event(s) and to make available to USAC, upon request, all records of the event(s) including, but not limited to, participant entry forms and waivers. The Organizers agree to maintain copies of the event waivers for a minimum of 10 years and acknowledge this is a condition of the Organizers' insurance coverage. It is understood and agreed that USAC makes no warranties, expressed or implied, to the Organizers, to entrants, competitors, or spectators, or to any other person. USAC and its member associations are not promoting organizations. Organizers understand any permit issued by USAC is not assignable to another event. USAC will have access to all data should Organizers' event use online registration. By signing this form, Organizers agree that Organizers are responsible for all insurance surcharges and race fees due to USAC. This permit does not create a principal-agent relationship between the parties thereto. I understand that if I would like to insure my non-owned/hired automobiles and/or motorcycles with USA Cycling, I must complete and submit the non-owned/hired automobile and/or motorcycle insurance application with accurate payment. I also understand that if I do NOT complete and submit on time the non-owned/hired automobile and/or motorcycle insurance application, any automobiles and/or motorcycles at my event will not be covered by USA Cycling insurance.

Organizers Signature [Signature] Date 5/20/10
 Regional Coordinator/Local Association _____ Date _____
 USAC Authorized Signature _____ Date _____



EVENT MEDICAL PLAN

EVENT BBC criterium DATE 7/18/10

1. Will there be an EMT or ambulance on site? Yes No
If not on site, how will emergency medical staff be notified?
 Pay Phone Cell Phone Radio Other: _____
2. Are there event staff or certified volunteers with Red Cross First Aid training? Yes No
If yes, what training? Basic Advanced - Identify staff: hirmy EMT
3. Is there a First Aid kit on site? Yes No
4. Will police or security services be on site? Yes No
5. Will emergency medical staff at event site be clearly identified? Yes No
6. First aid and emergency medical stations identified? Yes No
7. Does course design allow easy access for emergency vehicles? Yes No
8. Describe emergency medical transportation? hospital ambulance
9. City/Location of nearest hospital: Alta Bates in Berkeley 2450 Ashby Ave
10. Distance from event: 4 Miles 10 Minutes
11. Has hospital been notified of the event? Yes No
12. Is emergency air transportation available? Yes No
Response time: _____ Minutes
13. How will air transport be notified? Phone Radio EMT
14. What is the plan for suspending or postponing the event if a serious injury occurs?
event is stopped until ambulance departs
15. Who will compile and submit USA Cycling First Reports of Occurrence for all injuries at the event to the Chief Referee?
 Event Director EMT/Medical Staff Other (specify): _____

NOTES:
HOSPITAL PHONE NUMBER: _____

AMBULANCE PHONE NUMBER: _____

POLICE/SHERIFF PHONE NUMBER: 911

PHILADELPHIA INSURANCE COMPANY: PHONE 1-800-765-9749, FAX 1-800-685-9238

ADDITIONAL INFORMATION:
with contact local police & fire 1 month
& 1 week before event



**REQUEST FOR CERTIFICATE OF INSURANCE
AND ADDITIONAL INSURED
FOR ALL USAC PERMITTED EVENTS**

Applications must be submitted with the permit unless information is not yet available.
Application must be received **prior to the event** or it will not be processed.

Mail to: ♦ USA Cycling ♦ 210 USA Cycling Point, Suite 100, Colorado Springs, CO 80919-2215 ♦ Ph: 719/434-4200
♦ Fax: 719/434-4300 ♦ Email: membership@usacycling.org

Event Permit # _____

Name of Club/Organizer: Berkley Bicycle Club **Club/Organizer #:** 229
Phone Number: (415) 846-4257 **Fax:** _____
Event Name: RBC Criterium **Event Date:** 7/18/10
Event Location: Albany, CA **E-mail:** janner125@yahoo.com

List all parties who are requiring that they be named as additional insured for this event. **THIS IS NOT VALID WITHOUT A RELATIONSHIP INDICATED.** Examples of relationship categories include landowner, permit holder (governmental bodies which have issued permits), sponsor, municipality, etc. **The first five additional insured parties are FREE.** You may request as many more additional insured parties as necessary **for an additional administrative fee of \$5 each** (please attach additional copies of this page as needed). **PLEASE PRINT. NO REFUNDS NO EXCEPTIONS**

- 1) Name East Bay Velo Club Phone (415) 668-4688
 Address 116 Geelan St. Relationship co-sponsoring club
 City San Francisco State CA Zip 94118
- 2) Name City of Albany Phone (510) 558-3750
 Address 1000 San Pablo Ave Relationship municipality, race course location
 City Albany State CA Zip 94706
- 3) Name Berkley Bicycle Club (BBC) Phone (415) 846-4257
 Address P.O. Box 165 Relationship sponsoring club
 City Berkeley, CA State CA Zip 94701
- 4) Name Albany Unified School Dist. Phone (510) 558-3750
 Address 904 Talbot Ave Relationship race course site
 City Albany State CA Zip 94706
- 5) Name _____ Phone _____
 Address _____ Relationship _____
 City _____ State _____ Zip _____

Have you entered into any agreement, contract, or permit in conjunction with this event that contains assumption of liability, indemnification, or hold harmless language? YES NO
 If yes, please forward a copy of the document with this Request for Certificate of Insurance and Additional Insured.

NO REFUNDS NO EXCEPTIONS