

AGENDA REPORT

TO: Mayor Pat Humphrey and the Clare City Commission
FROM: Jeremy Howard, City Manager
DATE: April 27, 2023
RE: Fireworks Permit

For the Agenda of May 1, 2023

Background. The Clare Area Chamber plans to sponsor the annual summer fireworks show in the City on Saturday, June 24, 2023 (inclement weather date: Sunday, June 25, 2023) as part of the annual Clare Summerfest event. In order to lock in the selected date for the show, the Chamber must submit the approved permit to the fireworks vendor. The State of Michigan requires the governing body hosting fireworks displays to approve said permit (*copy of permit application and certificate of insurance att'd*) for the display. The Commission has traditionally approved the permit in the past and is asked to do so again this year.

Issues & Questions Specified. Should the City Commission approve the fireworks display permit?

Alternatives.

1. Approve the permit.
2. Disapprove the permit.
3. Defer decision regarding the matter to a subsequently scheduled meeting.

Financial Impact. N/A.

Recommendation. I recommend that the City Commission approve the permit by adoption of Resolution 2023-028 (*copy att'd*).

Attachments.

1. Permit Application and Supporting Documents.
2. Resolution 2023-028.

2023 Application for Fireworks Other Than Consumer or Low Impact

FOR USE BY LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD ONLY

Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes

DATE PERMIT(S) EXPIRE:

Authority: 2011 PA 256

The LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD will not discriminate against any individual or group because of race, sex, religion, age, national origin, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc. under the Americans with Disabilities Act, you may make you needs known to this Legislative Body of City, Village or Township Board.

TYPE OF PERMIT(S) (Select all applicable boxes)

- | | | |
|---|---|---|
| <input type="checkbox"/> Agricultural or Wildlife Fireworks | <input type="checkbox"/> Articles Pyrotechnic | <input checked="" type="checkbox"/> Display Fireworks |
| <input checked="" type="checkbox"/> Public Display | <input type="checkbox"/> Private Display | |
| <input type="checkbox"/> Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes | | |

NAME OF APPLICANT Clare Chamber of Commerce	ADDRESS OF APPLICANT 201 W 4th St, Clare, MI 48617	AGE OF APPLICANT 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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NAME OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER	ADDRESS OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER
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IF A NON-RESIDENT APPLICANT (LIST NAME OF MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)	ADDRESS (MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)	TELEPHONE NUMBER
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NAME OF PYROTECHNIC OPERATOR Great Lakes Fireworks, LLC	ADDRESS OF PYROTECHNIC OPERATOR 3275 W. M-76, PO Box 276 West Branch, MI 48661	AGE OF PYROTECHNIC OPERATOR 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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NO. YEARS EXPERIENCE 20+	NO. DISPLAYS 200+	WHERE Throughout Michigan
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NAME OF ASSISTANT TBD	ADDRESS OF ASSISTANT TBD	AGE OF ASSISTANT 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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NAME OF OTHER ASSISTANT TBD	ADDRESS OF OTHER ASSISTANT	AGE OF OTHER ASSISTANT 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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EXACT LOCATION OF PROPOSED DISPLAY
Shamrock Park: 221 Wilcox Parkway, Clare, MI 48617

DATE OF PROPOSED DISPLAY June 24th, 2023 (Rain: June 25th, 2023)	TIME OF PROPOSED DISPLAY Approx. 10:00 PM
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MANNER AND PLACE OF STORAGE, SUBJECT TO APPROVAL OF LOCAL FIRE AUTHORITIES, IN ACCORDANCE WITH NFPA 1123, 1124 & 1126 AND OTHER STATE OR FEDERAL REGULATIONS. PROVIDE PROOF OF PROPER LICENSING OR PERMITTING BY STATE OR FEDERAL GOVERNMENT

Stored at federally licensed facility until date of display.

AMOUNT OF BOND OR INSURANCE (TO BE SET BY LOCAL GOVERNMENT) \$5,000,000	NAME OF BONDING CORPORATION OR INSURANCE COMPANY BRITTON GALLAGHER
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ADDRESS OF BONDING CORPORATION OR INSURANCE COMPANY
ONE CLEVELAND CENTER, 1375 E 9TH ST, 30TH FLOOR, CLEVELAND OH 44114

NUMBER OF FIREWORKS	KIND OF FIREWORKS TO BE DISPLAYED (Please provide additional pages as needed)
Approx. 360	3" Shells
Approx. 250	4" Shells
Approx. 150	5" Shells
Approx. 60	6" Shells
Approx. 30	Various Barrage Cakes 3" & Smaller

SIGNATURE OF APPLICANT 	DATE
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2023 Permit for Fireworks Other Than Consumer or Low Impact

Authority: 2011 PA 256	The LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD will not discriminate against any individual or group because of race, sex, religion, age, national origin, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc. under the Americans with Disabilities Act, you may make your needs known to this Legislative Body of City, Village or Township Board.
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This permit is not transferable. Possession of this permit authorizes the herein named person to possess, transport and display fireworks in the amounts, for the purpose of an at the place listed below only through permit expiration date.

TYPE OF PERMIT(S) (Select all applicable boxes) <input type="checkbox"/> Agricultural or Wildlife Fireworks <input type="checkbox"/> Articles Pyrotechnic <input checked="" type="checkbox"/> Display Fireworks <input checked="" type="checkbox"/> Public Display <input type="checkbox"/> Private Display <input type="checkbox"/> Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes	FOR USE BY LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD ONLY. PERMIT(S) EXPIRATION DATE (ENTER DATE OF EXPIRATION)	
NAME OF PERSON PERMIT ISSUED TO Clare Chamber of Commerce	AGE (18 YEARS OR OLDER) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
ADDRESS OF PERSON PERMIT ISSUED TO 201 W. 4th St, Clare, MI 48617		
NAME OF ORGANIZATION, GROUP, FIRM OR CORPORATION		
ADDRESS		
NUMBER AND TYPES OF FIREWORKS (Please attach additional pages if necessary) Approx. 360 3" Shells Approx. 250 4" Shells Approx. 150 5" Shells Approx. 60 6" Shells Approx. 30 Various Barrage Cakes 3" & Smaller		
EXACT LOCATION OF DISPLAY OR USE Shamrock Park: 221 Wilcox Parkway, Clare, MI 48617		
CITY, VILLAGE, TOWNSHIP Clare	DATE June 24th, 2023 (Rain: June 25th, 2023)	TIME Approx: 10:00 PM
BOND OF INSURANCE FILED Yes		AMOUNT \$5,000,000

Issued by action of the Legislative Body of a <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township of _____ on the _____ day of _____, 2023. <div style="text-align: center; border-top: 1px solid black; margin-top: 20px;"> (Signature and Title of Legislative Body Representative) </div>

THIS FORM IS VALID UNTIL THE DATE OF EXPIRATION OF PERMIT

GREAT LAKES FIREWORKS

3275 W. M-76 • West Branch, MI 48661 • Office: 989.726.5040 • Fax: 989.726.5041 • greatlakesfireworks.com

THIS CONTRACT AND AGREEMENT for the sale of Fireworks made and concluded this 16th Day of March, 2023, and between GREAT LAKES FIREWORKS, LLC of Eastpointe, Michigan, (hereinafter referred to as "Great Lakes"), And Clare Chamber of Commerce, (hereinafter referred to as "Customer").

GREAT LAKES agrees:

1. To sell, furnish and deliver to Customer, fireworks to be exhibited on the following dates set forth and agreed upon at the time of signing this contract and Customer agrees to pay Great Lakes for the fireworks as follows:
Display Date(s): June 24th, 2023
Alternate Date(s): June 25th, 2023
Contract Amount: \$20,000.00*; Fifty percent (50%) due upon signing the contract and balance due within 15 days of the display date. All payments shall be made by draft or certified check payable to Great Lakes Fireworks, LLC. Great Lakes will assess a \$25.00 late charge and a 7% per annum late fee on balances not paid in full by the display date.
2. Great Lakes further agrees to furnish sufficiently trained personnel to present a display.
3. Great Lakes agrees to furnish Customer with liability insurance in the amount of \$5,000,000 and other coverages as identified in the COI attached. All Individual/Entities listed on the certificate will be deemed an additional insured per this contract.

CUSTOMER agrees:

4. To procure and furnish a suitable place to display said fireworks, to furnish the necessary police and fire protection; to secure all police, local, and state permits, and to arrange for any security bonds or insurance as required by law in their community when necessary.
5. Prior to, during, and immediately following the display, Customer shall be solely responsible to keep all persons (except employees of Great Lakes) out of the designated danger areas and behind safety zone lines and limits.
6. Immediately following the display, Great Lakes, to the best of its ability, will police the area for any misfires ("duds"). Great Lakes agrees to police the area again at "first light." Great Lakes will pick up misfires for disposal. If Customer must move misfires for safety reasons, Customer understands that the misfires are only to be handled by trained personnel. Customer is responsible for debris clean up and the refilling of any holes.
7. Customer agrees to hold harmless Great Lakes for any liability caused by other than the employees or products supplied by Great lakes

The PARTIES mutually agree:

8. Should inclement weather prevent firing of said display on the "Display Date(s)," then it will be understood the program is postponed and will be fired on the "Alternate Date(s)," and there will be a charge to cover the costs of the postponement of ten percent (10%) of the contract amount. If the program is not fired on either the "Display Date(s)" or the "Alternate Date(s)," then it will be understood the program is canceled; and there will be an additional charge of ten percent (10%) of the contract amount to cover the cancellation costs.
9. Great Lakes reserves the exclusive right to make minor modifications and substitutions provided that such changes are reasonable and necessary and do not materially adversely affect price, time of delivery, functional character, or display performance.
10. If the location of the firing site, spectators' location, parking areas, or structures is deemed unsuitable or unsafe, Great Lakes may refuse to fire the display until conditions are corrected. If such conditions are not corrected, Great Lakes may cancel the display without further liability to the Customer for such cancellation.
11. In the event of fire, accident, strikes, delay, flood, act of God or other causes beyond the control of Great Lakes, which prevent the delivery of said materials, the parties hereto release each other from any and all performances of the covenants herein contained and from damages resulting from the breach thereof.

Amendments: *Display will be on the island located in the middle of Lake Shamrock and customer agrees to provide means transportation to and from the island.

Show duration expected to be between 20-22 minutes.

For: **GREAT LAKES FIREWORKS, LLC** For:

Signature: 

Name: Bruce Tyree, Member

For: **Clare Chamber of Commerce**

Signature: 

Name: 3-16-23



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
1/24/2023

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 Britton-Gallagher and Associates, Inc. One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114	CONTACT NAME:	
	PHONE (A/C, No, Ext): 216-658-7100	FAX (A/C, No): 216-658-7101
E-MAIL ADDRESS: info@brittongallagher.com		
INSURED Great Lakes Fireworks LLC 3275 W M76 P.O. Box 276 West Branch MI 48661	INSURER(S) AFFORDING COVERAGE	
	INSURER A : Everest Indemnity Insurance Co.	
	INSURER B : Everest Denali Insurance Company	
	INSURER C : Axis Surplus Ins Company	
	INSURER D :	
	INSURER E :	

COVERAGES**CERTIFICATE NUMBER:** 742209468**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	SI8GL01969-231	1/21/2023	1/21/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y	Y	SI8CA00273-231	1/21/2023	1/21/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	P-001-000798280-02	1/21/2023	1/21/2024	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / <input checked="" type="checkbox"/> N (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Additional Insured extension of coverage is provided by above referenced General Liability policy where required by written agreement.
 Display date : June 24th, 2023 Rain date: June 25th, 2023
 Location: Shamrock Park: 221 Wilcox Parkway, Clare, MI 48617

RE: General Liability, the following are named as additional insured in respects to the negligence of the named insured:
 City of Clare and all it's appointed and elected officials, employees, volunteers, boards commissions and/or other authorities.

CERTIFICATE HOLDER Clare Chamber of Commerce 201 W 4th St Clare MI 48617 USA	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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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/03/2023

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 have ADDITIONAL INSURED provisions or 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 State Farm  Maury Irwin State Farm 1011 N. McEwan. St. Clare MI 48617	CONTACT NAME: Robin Kilbourne PHONE (A/C, No, Ext): 989-386-4141 E-MAIL ADDRESS: Robin@myclareagent.com FAX (A/C, No): 989-285-3080
	INSURER(S) AFFORDING COVERAGE INSURER A: State Farm Fire and Casualty Company INSURER B: <input type="button" value="v"/> INSURER C: <input type="button" value="v"/> INSURER D: <input type="button" value="v"/> INSURER E: <input type="button" value="v"/> INSURER F: <input type="button" value="v"/>
INSURED Clare Chamber of Commerce 201 W 4th St. Clare MI 48617	NAIC # 25143

COVERAGES **CERTIFICATE NUMBER:** **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
X	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			92-PE-7724-0	10/29/2022	10/29/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

Summer Fest Week & Saturday Night Fireworks
June 19-25, 2023

CERTIFICATE HOLDER City of Clare, Michigan 202 W 5th ST. Clare MI 48617	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 Completed by an authorized State Farm representative. If signature is required, please contact a State Farm agent.
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RESOLUTION 2023-028

A RESOLUTION OF THE CLARE CITY COMMISSION APPROVING A PERMIT FOR A FIREWORKS DISPLAY.

WHEREAS, the Clare Area Chamber of Commerce traditionally sponsors a firework display within the City of Clare in conjunction with other activities scheduled for and associated with the 4th of July holiday; and

WHEREAS, the State of Michigan requires that municipalities issue a permit for the display of fireworks; and

WHEREAS, the City of Clare has traditionally provided said permit to the contracted fireworks display agent of the Clare Area Chamber of Commerce; and

WHEREAS, the Clare Area Chamber has again requested that the City of Clare issue said requisite permit to allow the display of fireworks on Saturday, June 24, 2023 (inclement weather date: Sunday, June 25, 2023).

NOW THEREFORE BE IT RESOLVED THAT the City Commission of the City of Clare hereby approves the issuance of a Permit for a Fireworks Display to the Clare Area Chamber of Commerce.

BE IF FURTHER RESOLVED THAT said permit approval is contingent upon a valid and active insurance certificate listing the City of Clare, all elected and appointed officials, all employees and volunteers, and all boards and commissions of the City of Clare as additional insured, and that includes insurance coverage for the date of the actual fireworks display.

ALL RESOLUTIONS AND PARTS OF RESOLUTIONS INsofar AS THEY CONFLICT WITH THE PROVISIONS OF THIS RESOLUTION BE AND THE SAME ARE HEREBY RESCINDED.

This Resolution was introduced by Commissioner ____ and supported by Commissioner ____.
The Resolution declared adopted by the following roll call vote:

YEAS:

NAYS:

ABSENT:

Resolution approved for adoption on this 1st day of May, 2023.

Diane Lyon, City Clerk