

RESOLUTION 2016-097

PASSED: AUGUST 22, 2016

APPROVING THE CLOSURE OF A PORTION OF ILLINOIS ROUTE 38 ON THURSDAY, SEPTEMBER 29, 2016 FROM 5:00 P.M. THROUGH 7:30 P.M. FOR THE DEKALB HIGH SCHOOL HOMECOMING PARADE.

WHEREAS, DeKalb Community Unit School District 428 is sponsoring a DeKalb High School Homecoming Parade in the City of DeKalb, which event constitutes a public purpose; and,

WHEREAS, this parade will require the temporary closure of Illinois Route 38/Lincoln Highway, a State highway in the City of DeKalb, from 5:00 p.m. to 7:30 p.m., on Thursday, September 29, 2016, from Illinois Fourth Street to First Street; and

WHEREAS, Section 4-408 of the Illinois Highway Code authorizes the Department of Transportation to issue permits to local authorities to temporarily close portions of state highways for such public purposes.

NOW, THEREFORE, BE IT ORDAINED BY THE COUNCIL OF THE CITY OF DEKALB, ILLINOIS:

Section 1: That permission to close Illinois Route 38 between Fourth Street and Second Street, between the hours of 5:00 p.m. through 7:30 p.m. on Thursday, September 29, 2016, for the purpose of holding a DeKalb High School Homecoming Parade be requested of the Illinois Department of Transportation.

Section 2: That if such permission is granted, traffic from that closed portion of highway shall be detoured over routes with an all-weather surface that can accept the anticipated traffic, which will be maintained to the satisfaction of the Department and which is conspicuously marked for the benefit of traffic diverted from the State highway. (The parking of vehicles shall be prohibited on the detour routes to allow an uninterrupted flow of two-way traffic.) The detour route shall be as follows:

EASTBOUND ROUTE 38, BEGINNING AT THE INTERSECTION OF ILLINOIS ROUTE 38 AND ILLINOIS ROUTE 23, THE DETOUR ROUTE WILL GO SOUTH ON FOURTH STREET TO FRANKLIN STREET, THEN WEST ON FRANKLIN STREET, THEN NORTH ON SOUTH FIRST STREET, RETURNING TO ILLINOIS ROUTE 38. WESTBOUND ROUTE 38 WILL BE THE REVERSE, BEGINNING AT THE INTERSECTION OF ILLINOIS ROUTE 38 AND FIRST STREET.

The City of DeKalb assumes full responsibility for the direction, protection and regulation of the traffic during the time the detour is in effect. Police officers or authorized flaggers may be positioned at points as may be necessary to assist in directing traffic through the detour. The Police Officers, flaggers and officials shall

permit emergency vehicles in emergency situations to pass through the closed area as swiftly as is safe for all concerned.

Section 3: That if such permission is granted by the Department of Transportation, the City of DeKalb assumes full responsibility for the direction, protection, and regulation of two through- bound traffic lanes during the time the event is in effect, and all liabilities for damages of any kind occasioned by closing of the state highway, and it is further agreed that all weather traffic control devices will be maintained in accordance with the "Manual of Uniform Traffic Control Devices", and to the satisfaction of the Department and effectively placed for the benefit of traffic diverted.


Section 4: That all debris shall be removed by the City of DeKalb prior to the re-opening of the state highway.

Section 5: That a copy of this resolution shall be forwarded to the Department of Transportation to serve as formal request for the permission sought in this Resolution and to operate as part of the conditions of such permission.

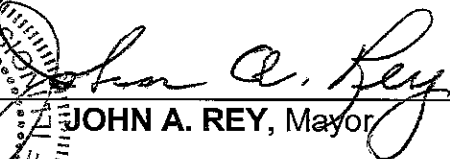
Section 6: That the City Clerk of the City of DeKalb, Illinois be authorized and directed to attest the Mayor's Signature and shall be effective thereupon.

PASSED BY THE CITY COUNCIL of the City of DeKalb, Illinois, at a Regular meeting thereof held on the day of August 22, 2016, and approved by me as Mayor on the same day. Passed by an Omnibus roll call vote of 8-0 on the Consent Agenda. Aye: Jacobson, Finucane, Marquardt, Snow, Noreiko, Baker, Faivre, Rey.


ATTEST:



JENNIFER JEEP JOHNSON, City Clerk



JOHN A. REY, Mayor





EVENT REQUEST

PARADE RUN
 MARCH RIDE

ATTENTION: Finance Department

DATE OF APPLICATION: 7/15/16

Notification is hereby given to the City of DeKalb as provided in Chapter 51.20 of the City of DeKalb Municipal Code to request an Event (Parade, March, Run, Ride) as follows:

PLEASE ALLOW (4) WEEKS FOR PROCESSING THE REQUEST.
 PLEASE ALLOW TWO (2) MONTHS FOR PROCESSING IF EITHER ILLINOIS ROUTE 23 OR ILLINOIS ROUTE 38 WILL BE CLOSED.

Name(s) of sponsoring organization(s): De Kalb High School - CUSD # 428

Date of Event: 9/29/16 Starting Time: [REDACTED] 5:30 Ending Time: [REDACTED] 7:00

Name(s) of person(s) responsible for organizing and conducting event:

Name	Address	Phone	Email
Jaci Schramm	501 W. Dresser Rd	(815) 754-2148	jaci.schramm@d428.org
Vicki Erwin	DeKalb, IL 60115	(815) 757-4436	vicki.erwin@d428.org

Number of: people (400) animals (0) vehicles (50) expected to participate.

Describe the event in detail: De Kalb High School Homecoming Parade.
Staging will take place on North 3rd Street from Oak St. to Lincoln Hwy.
The band will stage on Lincoln Hwy from 4th St. to 3rd St. We may need
to use the city parking lot on 3rd and Oak for staging too.

Specify event route from starting point to termination point (a map of the event route is required):

Parade will officially begin on Lincoln Hwy and 3rd St. It will
continue to Lincoln Hwy and [REDACTED]

2ND ST., TURN RIGHT ON 2ND ST., TURN RIGHT ON FISK AVE, LEFT ON DEKALB AVE AND END AT CLINTON ROSETTE MIDDLE SCHOOL PARKING LOT

Are you requesting streets to be closed? If so, list specifics below and provide notation on the event

route you are providing Yes. [REDACTED]

PLEASE SEE ENCLOSE MAP FOR ROAD CLOSURES.

Will either Illinois Route 23 or Illinois Route 38 be blocked (if YES, it will require approval from the Illinois Department of transportation): Yes No

Does this event require any of the following?

- Barricades Yes No
- Reflective vests for staff and/or volunteers Yes No
- Emergency Medical Services (an ambulance on site) Yes No
- Police Department presence (for traffic control) Yes No

A CERTIFICATE OF INSURANCE NAMING THE CITY OF DEKALB AS AN ADDITIONAL INSURED IS REQUIRED IN THE AMOUNT OF \$1 MILLION DOLLARS. YOUR APPLICATION WILL NOT BE CONSIDERED OR APPROVED WITHOUT RECEIPT OF THIS DOCUMENT.

IF EITHER ROUTE 23 OR ROUTE 38 WILL BE CLOSED, A CERTIFICATE OF INSURANCE NAMING THE CITY OF DEKALB AS AN ADDITIONAL INSURED IS REQUIRED IN THE AMOUNT OF \$1 MILLION DOLLARS. YOUR APPLICATION WILL NOT BE CONSIDERED OR APPROVED WITHOUT RECEIPT OF THIS DOCUMENT.

<p><u>Victoria J. Erwin</u> Signature of Person Making Application</p> <p><u>501 Dresser Rd DeKalb, IL 60115</u> Address</p> <p><u>(815) 757-4436</u> Telephone Number</p>	<p><u>Victoria J. Erwin</u> Printed Name of Person Making Application</p> <p><u>501 Dresser Rd DeKalb, IL 60115</u> Address</p> <p><u>vicki.erwin@d428.org</u> E-mail Address</p>
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Return this form to (can be mailed, emailed or faxed):

City of DeKalb Finance Department
200 S. Fourth Street
DeKalb, Illinois 60115
E-mail: Rachel.pacey@cityofdekalb.com
Fax: (815) 748-2304

Please contact the Finance Department at (815) 748-2387 with questions regarding this application.

CHECKLIST (FOR USE BY CITY PERSONNEL ONLY)	EVENT INFORMATION								
<input checked="" type="checkbox"/> Application <input checked="" type="checkbox"/> Event Map <input checked="" type="checkbox"/> Insurance Certificate	<p>E-mail complete event application to the staff listed below for review before scheduling a meeting (a meeting may not be necessary).</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">Police Dept. Dep. Chief Hoadley Dep Chief. Petragallo Cmdr. McDougall:</td> <td style="width: 40%;">Date: <u>7-28-14</u></td> </tr> <tr> <td>Fire Dept. Dep. Chief. Hoyle</td> <td>Date: <u>7-28-14</u></td> </tr> <tr> <td>Engineering Dept. Mike Bauling</td> <td>Date: <u>7-28-14</u></td> </tr> <tr> <td>Public Works/Streets Mark Espy</td> <td>Date: <u>7-28-14</u></td> </tr> </table>	Police Dept. Dep. Chief Hoadley Dep Chief. Petragallo Cmdr. McDougall:	Date: <u>7-28-14</u>	Fire Dept. Dep. Chief. Hoyle	Date: <u>7-28-14</u>	Engineering Dept. Mike Bauling	Date: <u>7-28-14</u>	Public Works/Streets Mark Espy	Date: <u>7-28-14</u>
Police Dept. Dep. Chief Hoadley Dep Chief. Petragallo Cmdr. McDougall:	Date: <u>7-28-14</u>								
Fire Dept. Dep. Chief. Hoyle	Date: <u>7-28-14</u>								
Engineering Dept. Mike Bauling	Date: <u>7-28-14</u>								
Public Works/Streets Mark Espy	Date: <u>7-28-14</u>								
Date and Time of Event Discussion Meeting (if required): _____									
<input type="checkbox"/> Approved on: _____ <input type="checkbox"/> Denied on: _____									



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/24/2016

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 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 Arthur J. Gallagher Risk Management Services, Inc. Two Pierce Place, 22nd Floor Itasca IL 60143	CONTACT NAME: Tyler MacKenzie
	PHONE (A/C. No. Ext.): 630-694-5165 FAX (A/C. No.): 630-285-4062 E-MAIL ADDRESS: tyler_mackenzie@ajg.com
INSURER(S) AFFORDING COVERAGE	
INSURER A : Collective Liability Insurance Coop	NAIC #
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 287761664 **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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Per District Agg GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CLICCG2016	7/1/2016	7/1/2017	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$Excluded PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$1,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						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)

*Collective Liability Insurance Cooperative Reinsurers - Great American Insurance Company (NAIC #16691)

Additional Insured status provided herein afforded by CLIC CG2028 0413, CLIC CG2012 0413, CLIC GG2013 0413, CLIC CG2026 0413, CLIC CG2015 0413 and/or CA CLIC 0715 when applicable.

City of DeKalb is shown as Additional Insured solely as respects the General Liability coverage evidenced herein with regard to use of facilities by the named insured during the policy period.

CERTIFICATE HOLDER	CANCELLATION
City of DeKalb 200 S. 4th Street DeKalb IL 60015 USA	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 

CITY USE ONLY

Approved/Denied

Fire Dept: _____

Public Works: _____

City Manager: _____

Police Dept: _____

Engineering: _____

Building: _____

License #: _____



APPLICATION FOR MASS GATHERING

License Fees: \$200.00 PER EVENT/PER DAY

Municipal Code Chapter 34, *minimum 30 day advance notice must be given prior to issuance of license.*

License requested as provided for in Chapter 34 of the City of DeKalb Municipal Code for a period beginning on Sept. 29, 2016 and ending Sept. 29, 2016, as indicated hereafter.

Describe Event Specifically: DeKalb High School 2016 Homecoming
Parade

Company Name: DeKalb High School, DUSD #428

Company Address: 501 W. Dresser Rd.
(City/State/Zip): DeKalb, IL 60115

Company Phone: (815) 754-2100

Applicant Name: Victoria Erwin

Applicant Address: 5 Greenview Ct.
(City/State/Zip): DeKalb, IL 60115

Applicant Phone: (815) 757-4436

List the two most current cities in Illinois that you conducted this type of business and the dates business was conducted: Ø

Location of Event Downtown DeKalb, IL

Dates of Event Sept. 29, 2016 Including additional Set up/Take down days _____

Days/Hours of Operation: _____ 5:30 PM-7:00PM

Number of Expended Participants: Guesstimate ≈ 400 (floats, students, community spectators...)

Property - See attached map.

Owner: _____

Property Address: _____

Property Owner Telephone: _____

Will you be requiring (check all that apply):

Electrical Access: no Water Access: no Other: _____

Specify Other: _____

Name, address, phone number of all responsible parties conducting, supervising and/or sponsoring the event

NAME: <u>Victoria Erwin</u>	PHONE: <u>(815) 757-4436</u>
RESIDENTIAL ADDRESS: <u>5 Greenview Ct</u>	
CITY: <u>DeKalb</u>	STATE: <u>IL</u> ZIP CODE: <u>60115</u>
NAME: <u>Jaci Schramm</u>	PHONE: <u>(815) 751-4835</u>
RESIDENTIAL ADDRESS: <u>3694 Pebble Beach Ct</u>	
CITY: <u>DeKalb</u>	STATE: <u>IL</u> ZIP CODE: <u>60115</u>

(Use additional sheet if necessary.)

THE FOLLOWING SHALL APPLY TO THIS APPLICATION:

Permit Application:

b) The permit application shall be accompanied by a site plan showing the proposed location and orientation of the event, and identifying: i) applicable occupancy limits; ii) temporary or permanent sanitation facilities; iii) all points of emergency ingress and egress; iv) any temporary structures, tents, facilities or utility connections anticipated to be utilized; and, v) the parking arrangements for anticipated attendees, showing that all anticipated attendees can be safely accommodated by planned parking. The site plan shall be accompanied by written letters from the owners of each parcel identified for use on the site plan (other than property owned by the applicant), consenting to the use of their property for the event.

c) The applicant shall be responsible for all costs of inspection or permitting for any inspection or permit which is required under applicable City Code. In addition, all permits shall be subject to review by the City of DeKalb Police Department, Fire Department and Public Works Department, which shall be authorized to require additional or supplemental inspections based on the nature of the proposed event; the cost of any such inspections shall be borne by the applicant. Any building within which an event including Hazardous Activity is proposed to be conducted within shall require a then-current Fire Life-Safety inspection and license (or such a License shall be acquired prior to issuance of a permit for the event).

d) For any Commercial Event or any event which requires a permit and is to be conducted on City-owned property, the applicant shall be responsible for entering into an agreement with the City of DeKalb which identifies a single person legally responsible for the ultimate collection and payment of any governmental fines, penalties, taxes or fees due in connection with the event, and which specifies any specific rules or regulations applicable to the event (including but not limited to regulations relating to the sale of any age-restricted items or services or the conduct of any Hazardous Activities).

1) Said agreement shall be in a form acceptable to the City Manager, and the City Manager is authorized to negotiate and enter into such agreements on behalf of the City. In the case of any event that is

identified by any City Department as requiring supplemental City services (e.g. an event with Hazardous Activity that the Fire Department determines requires standby ambulance service, an event that the Police Department determines requires supplemental police patrol, or an event that requires Public Works supervision and/or road closure, inspections or utility connections), the agreement shall require that the applicant post a cash escrow in an amount estimated to be adequate to cover the anticipated costs of such supplemental services prior to issuance of an event permit, and shall require that the applicant be responsible for the actual costs incurred by the City in providing any service, patrol, response, or other matter that requires an expenditure of City resources, services or funds in responding to, managing or patrolling such event or any conduct or occurrence arising out of such event.

2) Said agreement shall provide that the applicant shall be responsible for the payment of any cleanup, restoration, remediation or other similar expenses incurred by the City or any private property owner not affiliated with the event, occurring as a result of the event.

3) For any Commercial Event or event involving a Hazardous Activity, temporary structure, temporary utility connection or closure of a public street or right of way, said agreement shall also require the applicant to provide a certificate of insurance evidencing general commercial liability insurance coverage for the event and/or the premises at which the event is to be conducted, from an insurer licensed to do business in the State of Illinois, with policy limits not less than \$1,000,000 per person, per occurrence, and listing the City of DeKalb as additional primary insured without right of subrogation.

e) The applicant shall also be responsible for submitting a security plan providing for the safe and orderly conduct of the event in a fashion that protects the public health, safety, welfare and morals and minimizes or eliminates impact on surrounding property owners and the general public.

Proof of liability insurance in the minimum amount of One Million Dollars (\$1,000,000) per person per occurrence listing the City of DeKalb as an additional insured must be attached.

Letters of permission by any property owner affected that may necessitate the acquisition of temporary easements, use of leased land or as otherwise required.

Building permit applications shall be submitted and signed by licensed and bonded contractors (where required) in accordance with DeKalb Municipal Code provisions.

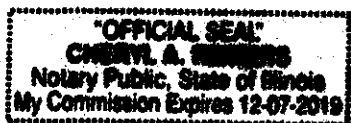
I, THE UNDERSIGNED APPLICANT OR AUTHORIZED AGENT THEREOF, SWEAR OR AFFIRM THAT: THE MATTERS STATED IN THE FOREGOING APPLICATION ARE TRUE AND CORRECT; THEY ARE MADE UPON MY PERSONAL KNOWLEDGE AND INFORMATION; THEY ARE MADE FOR THE PURPOSE OF REQUESTING THE CITY OF DEKALB TO ISSUE THE LICENSE HEREIN APPLIED FOR; AND THE APPLICANT WILL NOT VIOLATE ANY OF THE LAWS OF THE UNITED STATES OF AMERICA, THE STATE OF ILLINOIS, OR THE CITY OF DEKALB, IN PARTICULAR,

7/25/2016
Date

Victoria J. Erwin
Print Name and Title

Victoria J. Erwin
Signature

Subscribed and sworn to before me
this 25 day of July, 2016



Cheryl A. Summers
Notary Public

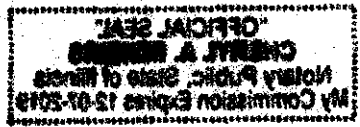
Please return completed applications to:

City of DeKalb/Finance Department

200 South Fourth Street
DeKalb, Illinois 60115
Fax: (815)748-2304

If you have any questions or require further assistance, please call (815)748-2085.

OFFICE USE ONLY:		Date After Hours	
Date Application		Inspection Fee	
Fee Received: _____	Paid Stamp Here	Received: _____	Paid Stamp Here
Amount Paid: _____		Amt. Paid: _____	
Check #: _____ Cash <input type="checkbox"/>		Check #: _____ Cash <input type="checkbox"/>	
Plot Plan Included: YES _____ NO _____			
Scale Drawing Included: YES _____ NO _____			
Certificate of Insurance Included: YES _____ NO _____			
Letter from Property Owner Included: YES _____ NO _____			





DeKalb High School - 501 W. Dresser Rd. – DeKalb, IL 60115

Phone: (815) 754-2100

Fax: (815) 754-2156

July 25, 2016

Dear Ms. Guara, DeKalb City Manager:

DeKalb High School would like to have their Homecoming Parade on Thursday, September 29, 2016. In getting all of the required paperwork completed, I was informed that there was another form, the Application for Mass Gathering, that also needed to be submitted.

Enclosed you will find the notarized application, along with the map of the parade route.

I am also writing this letter to request that the \$200.00 mass gathering fee be waived. Our homecoming parade is arranged, organized and planned by DHS Student Council and we do not have the funds available for this fee. In the past, we have not been required to pay any fee for this license.

I thank you for your consideration and hope you join us at this year's DHS Homecoming Parade.

Sincerely,

A handwritten signature in cursive script that reads "Vicki Erwin".

Vicki Erwin
Student Council Advisor



Illinois Department of Transportation

Office of Highways Project Implementation / Region 2 / District 3
700 East Norris Drive / Ottawa, Illinois 61350-1628

August 31, 2016

Honorable John Rey
Mayor, City of DeKalb
200 S. Fourth Street
DeKalb, IL 60115

Dear Mayor Rey:

In accordance with your request and in reliance upon the conditions noted in your resolution adopted August 22, 2016, the Illinois Department of Transportation grants the City of DeKalb permission, subject to the aforesaid conditions, to temporarily close Illinois 38, from Fourth Street to First Street, from 5:00 p.m. to 7:30 p.m. on September 29, 2016 for the purpose of a Homecoming parade.

Your cooperation in minimizing confusion and delay to through traffic is earnestly solicited and a reminder that the roadway needs to be open to clean traffic after 15 minutes, if there is no detour route available for through traffic to utilize.

If you have any questions, please contact Tom Schaefer, Traffic Engineer, at 815-434-8446.

Sincerely,

Kevin Marchek, P.E.
Region Two Engineer

A handwritten signature in black ink that reads "Tom Hufnagel".

By: Tom Hufnagel, P.E.
Acting District Operations Engineer

cc: Illinois State Police, District 2
DeKalb Police Department
S. Meiborg/D. Rennels
Julie Wielgolpolan