

**ORDINANCE NO. 2025 - 078**

**AN ORDINANCE AUTHORIZING THE CITY MANAGER OR HIS DESIGNEE TO APPROVE A SPECIAL EVENT APPLICATION FROM KENT STATE UNIVERSITY FOR THE KENT STATE UNIVERSITY HOMECOMING PARADE TO BE HELD ON SATURDAY, OCTOBER 11, 2025, AND THE TEMPORARY CLOSURE OF LOOP ROAD, JOHNSTON DRIVE, RHODES ROAD, SUMMIT STREET AND TERRACE DRIVE AND DECLARING AN EMERGENCY.**

**WHEREAS**, the Kent State Homecoming Parade is traditionally held on East Main Street, but this year must use an alternate route due to the East Main Street project; and

**WHEREAS**, the Kent State Homecoming Parade will take place Saturday, October 11, 2025 from 10:30 a.m. until 12:00 p.m. The new proposed route will have the parade start at the intersection of Loop Road, Johnston Drive and Rhodes Road. It will then proceed southbound on Loop Road to Summit Street and continue westbound on Summit Street, where it will conclude at Summit Street and Terrace Drive. The street closures will begin Saturday at 7:00 a.m. until 1:00 p.m.; and

**WHEREAS**, the Kent City Council consents to authorizing the City Manager or his designee to sign the Special Event Application as long as he is comfortable and believes the safety and security of the City's citizens will not be adversely affected.

**NOW, THEREFORE, BE IT ORDAINED** by the Council of the City of Kent, Portage County, Ohio:

**SECTION 1.** That the Kent City Council authorizes the City Manager or his designee to execute the Special Event Application from Kent State University in substantial conformance with the Special Event Application attached hereto as Exhibit "A", as long as the City Manager or his designee believes the safety and security of Kent's citizens are adequately projected.

**SECTION 2.** That it is found and determined that all formal actions of this Council concerning and relating to the adoption of this Ordinance were adopted in an open meeting of this Council and that all deliberations of this Council, and of any of its committees that resulted in such formal action, were in meetings open to the public in compliance with all legal requirements of Section 121.22 of the Ohio Revised Code.

**SECTION 3.** That this Ordinance is hereby declared to be an emergency measure necessary for the immediate preservation of the public peace, health, safety, and welfare of the residents of this City, for which reason and other reasons manifest to this Council this Ordinance is hereby declared to be an emergency measure and shall take effect and be in force immediately after passage.

PASSED: 8/20/25  
Date

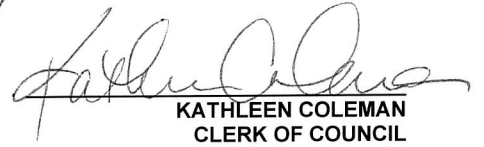
EFFECTIVE: 8/20/25  
Date

ATTEST: Kathleen Coleman  
Kathleen Coleman  
Clerk of Council

Jerry T. Fiala  
Jerry T. Fiala  
Mayor and President of Council

I, KATHLEEN COLEMAN, CLERK OF COUNCIL FOR THE CITY OF KENT, COUNTY OF PORTAGE, AND STATE OF OHIO, AND  
IN WHOSE CUSTODY THE ORIGINAL FILES AND RECORDS OF SAID COUNCIL ARE REQUIRED TO BE KEPT BY THE LAWS  
OF THE STATE OF OHIO, HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND EXACT COPY OF *ORDINANCE No.*  
2075-078, ADOPTED BY THE COUNCIL OF THE CITY OF KENT ON August 20, 2025.

(SEAL)

  
KATHLEEN COLEMAN  
CLERK OF COUNCIL



# CITY OF KENT, OHIO



## DEPARTMENT OF COMMUNITY DEVELOPMENT

DATE: July 28, 2025

TO: Dave Ruller, City Manager

FROM: Eric Helmstedter, Economic Development Director *EH*

RE: Special Event Permit: Kent State University Homecoming Parade

The Kent State University Homecoming Parade is traditionally held on East Main Street, but this year it will need to use an alternate route because of the East Main Street Project. Kent State University has identified a new proposed route and has submitted a special event permit application to hold its Homecoming Parade on Saturday, October 11, 2025.

The Homecoming Parade will begin at 10:30 a.m., and the new proposed route will have the parade start at the intersection of Loop Road, Johnston Drive and Rhodes Road. The Parade will proceed southbound on Loop Road to Summit Street, then continue westbound on Summit Street, where it will conclude at the intersection of Summit Street and Terrace Drive. A number of street closures have been requested.

I am respectfully requesting time at the August 6, 2025 Council Committee session to discuss this item in more detail and to request Council's authorization, with emergency, for the alternate route and associated street closures from 7:00 a.m. to 1:00 p.m. on October 11, 2025.

Please let me know if you have any questions concerning the attached materials or if you need any additional information to add this to the August 6, 2025 agenda.

Thank you.

### Attachments

cc: Bridget Susel, Community Development Director  
Hope Jones, Law Director  
Kathy Coleman, Clerk of Council

## CITY OF KENT SPECIAL EVENT PERMIT APPLICATION

*This application is used for events held on public property within the City of Kent. This application must be submitted at least 60 days prior to the event, but no sooner than one year prior to the event. Acceptance of your application is not a final approval or confirmation of your request.*

NAME OF EVENT: Homecoming Parade  
EVENT DATE & TIME: 10/11/2025 - 10:30 AM - 12:00 PM  
EVENT LOCATION(S): Loop Road and Summit Street (between Loop Road and Terrace Drive)  
EVENT PROCEEDS BENEFICIARY: N/A; no funds raised.

### APPLICANT INFORMATION

Organization Sponsoring Event: Center for Student Involvement; Kent State University

Is it Nonprofit: ☒ YES ☐ NO

*If so, provide documentation certifying tax exempt, nonprofit status with this application.*

Applicant Name: Joe Robinson Title/Position: Asst. Director

Mailing Address 120 Kent Student Center City: Kent State: OH Zip: 44240

Phone: 330-672-5288 Email: jrobi118@kent.edu

Name(s) and phone number(s) of person(s) responsible during the event: \_\_\_\_\_  
Joe Robinson - 740-816-2746  
Katie Syvanych - 330-316-6401

Event Website (if applicable): \_\_\_\_\_

### EVENT INFORMATION

Type of Event or Special Activity: Parade (ex. Parade, 5k, Festival, etc.)

Provide a detailed description of the Event (please attach flyer or additional sheet if needed): \_\_\_\_\_  
Annual Kent State University Homecoming Parade. This event is the culmination of a full week of home-  
coming programming that brings together students, alumni, and Kent community members.

REQUESTED PERMIT TIME: Start set up: 7:00 AM Start event: 10:30 am  
End event: 12:00 PM End cleanup: 1:00 PM

Anticipated attendance: 1000

Has this Event ever been held in the past: ☒ YES ☐ NO

*If so, provide documentation detailing the previous event location, date, and number of attendees.*

Admission charged: ☐ YES ☒ NO If so, list the amount of the admission or participation fee: \$ \_\_\_\_\_

Who will receive the proceeds: \_\_\_\_\_



## EVENT COMPONENTS

Check all boxes that apply to your event.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Alcohol Sales                 | <input type="checkbox"/> Clean Up/Litter Management           | <input type="checkbox"/> Electric               |
| <input type="checkbox"/> Fireworks                     | <input type="checkbox"/> Food Vendors                         | <input type="checkbox"/> Handwashing Facilities |
| <input type="checkbox"/> Generators                    | <input checked="" type="checkbox"/> Music/Sound Amplification | <input type="checkbox"/> Portable Toilets       |
| <input type="checkbox"/> Pyrotechnics                  | <input checked="" type="checkbox"/> Street Closures           | <input type="checkbox"/> Tents                  |
| <input type="checkbox"/> Vendors (Merchandise/Service) | <input type="checkbox"/> Vendors (Informational)              | <input type="checkbox"/> Water                  |
| <input type="checkbox"/> Other: _____                  |   |   |

## ALCOHOL SALES (if checked above)

Name of applicant/licensee: \_\_\_\_\_

*A copy of the Ohio Department of Commerce, Division of Liquor Control Approval/Permit must be provided to the City prior to the event.*

## CLEAN UP/LITTER MANAGEMENT

Applicant is responsible for all trash/litter, grease, damages, ash, and gray water generated by an event.

Describe how you will clean the site generated by the event: \_\_\_\_\_

\_\_\_\_\_

*A \$100 deposit is required to ensure that the event area is cleaned to pre-event conditions. Refund of deposit is at the discretion of the City, based upon the appearance of the event area once it has been cleaned.*

## ELECTRIC & WATER SERVICE

Does your event require use of City electric: ☐ YES ☒ NO

If so, please explain: \_\_\_\_\_

*Outdoor extension cords must be 3-prong, with proper grounding and rating approved for outdoor use.*

Does your event require use of City water: ☐ YES ☒ NO

If so, please explain: \_\_\_\_\_

\_\_\_\_\_

## MUSIC/SOUND AMPLIFICATION

Describe any music and/or amplifying equipment that is part of your event: \_\_\_\_\_

*Will work with Woodsy's Music to provide professional-grade audio to the parade's grandstand area, which is currently slated to be set up along the University Student Green on Summit Street (by the University Library and Student Center).*

*The number and location of stages, number of bands/performers, and a schedule indicating the times and location of bands/performers must be submitted with the application.*

## PORTABLE RESTROOMS/HANDWASHING FACILITIES

Applicant is responsible for providing any portable restrooms and handwashing facilities needed to accommodate your event attendees and participants. Portable restroom suppliers can assist you with determining the quantity needed for your event.

Name and phone number of company supplying the portable restrooms and handwashing facilities: \_\_\_\_\_

Number of portable restrooms: \_\_\_\_\_

Number of handwashing facilities: \_\_\_\_\_

Delivery date and time: \_\_\_\_\_

Post event removal date and time: \_\_\_\_\_

*Attach a copy of the contract showing proof of the Portable Restroom suppliers' liability insurance.*

## STREET CLOSURES

Does your event require street closure(s): ☒ YES ☐ NO

If yes, what street(s) (include specific boundaries with street addresses, use additional pages if necessary): \_\_\_\_\_

Loop Road and Summit Street (between Loop Road and Terrace Drive). Also, we will need to close Loop Road to Jackson Drive for parade staging purposes. We will feed the parade from the intersection of Loop Road, Johnston Drive, and Rhodes Road.

Therefore, Johnston Drive and Rhodes Road (to College Towers Apartments on Rhodes Rd.) will need to be closed as well.

*The Service Director will determine the amount and location of barricades and cones required for your event. Applicant may be required to pick up and return the barricades and cones. Barricades and cones may be picked up/returned to the Service Administration Complex, 930 Overholt Road. A \$100 deposit is required to ensure that the barricades and cones are returned in good condition. Refund of deposit is at the discretion of the City based upon condition of the barricades and cones. Additional fees may be incurred should City staff be required to be present for the event.*

## TENTS

Name and phone number of company supplying the tents: N/A. \_\_\_\_\_

Number of tents and size of each: N/A. \_\_\_\_\_

Method in which tent(s) will be secured: N/A. \_\_\_\_\_

*Tents may require a permit and must comply with Ohio Fire Code, Ohio Building Code. Tents may also require liability insurance. Applicant is responsible for reviewing said codes and attaching a copy of the contract showing proof of the Tent supplier's liability insurance. Tent(s) may not be secured in any manner that is damaging to City property.*

## VENDORS/FOOD SALES

Number of Food Vendors: 0 Number of Merchandise/Service/Informational Vendors: 0

*Applicant is required to submit a Vendor List with this application indicating all vendors who will participate in the event. The Vendor List must indicate what each vendor will do, sell, demonstrate, cook (including cooking method), make, hand out, etc.*

## SITE PLAN

All applicants are required to submit a detailed site plan for all events. Please attached a detailed site plan of your event that clearly indicates the names of all streets or areas that are part of the event footprint, and includes the locations of entrances and exits, food vendors, hand washing facilities, portable restrooms, signage, trash receptacles (not including City trash receptacles) tents, and vendors. Parade/Race applicants should include a map, which clearly indicates the names of all streets or areas, and directions of the proposed route.

## COMMUNITY IMPACT

Will the normal operations of residents and businesses be affected by your event: ☒ YES ☐ NO

If so, please explain: \_\_\_\_\_

This annual event brings together both the university and Kent communities in the name of Blue and Gold pride. Due to the nature of the homecoming parade, there will be road closures that may affect businesses along Summit Street and \_\_\_\_\_  
The parade will take place between 10:30 AM - 12 PM, so that is when they may be affected.

*For events with any street closure(s), the applicant must attach a copy of the proposed pre-event information. The City of Kent Community Development Department will provide the applicant with a list of affected residents and businesses resulting from any street closure(s). It is the responsibility of the applicant to provide all listed residents and businesses with a copy of the proposed pre-event information and written notification of any street closure(s) by hand delivery or First Class U.S. Mail.*

By signing this application, I am certifying that I have received a copy of the rules and regulations of Chapter 316 of the Codified Ordinances of the City of Kent, and I fully understand that should the permit be approved, it can be revoked if any of the provisions of this Chapter are violated.

~~Joe Robinson~~ **Michael O'Karma**  
~~Director~~  
~~Kent State University~~  
Applicant Name  
**Michael O'Karma**  
**Senior Director**  
**Kent State University**

*[Signature]*  
Applicant Signature

6-26-25  
Date

## FOR OFFICIAL USE ONLY. DO NOT WRITE BELOW THIS LINE

On \_\_\_\_\_ this application was sent for review to the following Departments: Fire, Health, Police, Safety, and Service.

Application Status: ☐ APPROVED ☐ DENIED

Memorandum Agreement Required: ☐ YES ☐ NO

Proof of insurance reviewed and approved by the Law Director: ☐ YES ☐ NO

\_\_\_\_\_  
Law Director

\_\_\_\_\_  
Date

## ACKNOWLEDGEMENT

Subject in all cases to the protections, immunities, and limitations provided by the laws of the State of Ohio, including but not limited to Ohio Revised Code 9.27.

### COST AND DAMAGES

I understand that the application fee of \$100 is due upon submission to the City of Kent. I understand that for events held in the South Water Street Parking lot, the \$100 application fee will be waived. I understand that all fees associated with my event are due upon approval of my event and before a permit will be issued. I understand that additional restitution for any damages incurred during use will be my responsibility.

ms 6-26-25  
Initials and Date

### CERTIFICATE OF INSURANCE/INDEMNIFICATION/RISK INFORMATION

Once an Applicant receives approval for their event, the Permit holder must furnish a certificate of insurance, in an amount of no less than one million dollars (\$1,000,000), explicitly releasing the City of Kent from all liability relating to the event and naming the City of Kent as an additional insured party for the respective event. This certificate must be provided to the City at least twenty (20) days prior to the event.

I agree to indemnify and hold harmless the City of Kent and its agents and employees from and against all claims, damages, losses and expenses including attorney's fees arising out of or resulting from the Special Event.

ms 6-26-25  
Initials and Date

### ADDITIONAL FEES

I understand that upon review, and based on the information supplied in this application, it may be determined that my event requires the use of additional City resources, including, but not limited to: Police, Fire, Service, and Health Department personnel and/or equipment. Further information may be requested to make this determination. I understand that there may be additional fees associated with these services which will be my responsibility. I understand that additional fees associated with my event must be paid at least twenty (20) days prior to the event.

ms 6-26-25  
Initials and Date

### CITY LOGOS

I understand that I am expressly prohibited from the use of the City of Kent's identifying marks without first obtaining written approval from the City.

ms 6-26-25  
Initials and Date

### APPROVAL

I understand that this application is to request the use of City property, and submission of this application does not guarantee event approval. I understand that approval is based upon the description of the event in the application, and if changes to the event occur that are not stipulated in the original application, they must be submitted in writing for consideration. I understand that all requests must be approved by the City of Kent.

ms 6-26-27  
Initials and Date



## HOMECOMING PARADE ROUTE - ICE ARENA STAGING



Roughly 1.20 miles.



Staging area.



Grandstand area by Student Green/ISB/Library.



Parade route from Loop/Rhodes, Loop/Summit, Summit to Terrace.



To Whom It May Concern:

Kent State University will be having the 2025 edition of the annual Homecoming Parade on Saturday, October 11, 2025.

Each entrant is responsible for securing their own parade mobility, whether by foot or vehicle. Signs and/or banners are also the responsibility of the entrant. Entries are welcome to pass out promotional items and/or candy to the parade spectators, both children and adults. Please note that throwing promotional items and/or candy is not permitted as this creates a safety hazard for spectators.

Please note that all entries are to be in good taste and family friendly. Any music played as part of the parade is to be the clean radio version.

Each student organization entry (not departments or community groups) will be required to have at least one representative attend an in-person, pre-parade session to discuss expectations, day-of logistics, and policies and procedures. Failure to have at least one representative attend in-person for one of the required sessions will result in the removal of a group from the parade. Dates for the required sessions are September 24 and 29, and October 8, 2025. All three sessions will be at 6 PM in room 220 of the Kent Student Center. offerings.

During the parade, entries are not permitted to stop to perform. Entries stopping, if to dance or for anything else during the parade, not only creates large gaps, but also initiates a safety concern for both the City of Kent and Campus police. If an entry is in violation of this principle and is stopping throughout the parade, the University reserves the right to dismiss the group from the parade.

The parade will step-off at 10:30 a.m. from the Kent State University campus on the intersection of Loop Road, Johnston Drive, and Rhodes Road by the University Ice Arena. The parade will then proceed from Loop Road to Summit Street, and then down Summit Street towards the Kent Campus. The parade route will conclude at the intersection of Summit Street and Terrace Drive. This is a new parade route from year's past and is roughly 1.20 miles in length. The parade will conclude around 11:30 a.m. as always.

This parade is a cherished, annual tradition here at Kent State University and we look forward to a new rendition of this celebration with a new route. If you have any questions, please contact the Center for Student Involvement at Kent State University at [csi@kent.edu](mailto:csi@kent.edu) and/or 330-672-2480.

Best,



Joe Robinson



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/9/2024

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).

<b>PRODUCER</b> Arthur J. Gallagher Risk Management Services, LLC 235 Highlandia Drive, Suite 200 Baton Rouge LA 70810		<b>CONTACT NAME:</b> Caitlin Knoll <b>PHONE (A/C, No, Ext):</b> 512-652-2445 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> Caitlin_Knoll@ajg.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Inter University Council - Insurance Consortium	
		<b>INSURER B:</b>	
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

**INSURED**  
Kent State University  
310 Harbourt Hall, 615 Loop Road  
Kent, OH 44242

IUC0000-01

**COVERAGES****CERTIFICATE NUMBER:** 456994728**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  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			IUCIC-GL-JULY 2024-2025	7/1/2024	7/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Not Covered PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ Included \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			IUCIC-AL-JULY 2024-2025	7/1/2024	7/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	IUCIC-GL-JULY 2024-2025	7/1/2024	7/1/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	<input checked="" type="checkbox"/> ELL/Professional Liability (Claims Made)			IUC-IC-ELL JULY 2024-2025	7/1/2024	7/1/2025	Each Occurrence Aggregate \$1,000,000 \$3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
City of Kent is named as an additional insured for any events sponsored and/or approved by Kent State University.

**CERTIFICATE HOLDER****CANCELLATION**

CITY OF KENT  
LAW OFFICE  
319 S WATER ST  
PO BOX 5192  
KENT OH 44240

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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## Sales and Use Tax Unit Exemption Certificate

The purchaser hereby claims exception or exemption on all purchases of tangible personal property and selected services made under this certificate from:

City of Kent, OH

(Vendor's name)

and certifies that the claim is based upon the purchaser's proposed use of the items or services, the activity of the purchase, or both, as shown hereon:

KENT STATE UNIVERSITY PURCHASES ARE EXEMPT FROM SALES TAX BASED ON THE EXEMPTION FOUND IN SECTION 5739.02 (B) (1) OF THE OHIO REVISED CODE "SALES TO THE STATE OR ANY OF ITS POLITICAL SUBDIVISIONS."

***Purchaser must state a valid reason for claiming exception or exemption.***

Kent State University

Purchaser's name

Public University

Purchaser's type of business

227 Kent Student Center

Street address

Kent, OH, 44242-0001

City, state, ZIP code

*Joe Robinson*

Assistant Director

Signature

Title

05/27/2025

Date signed

Vendor's license number, if any

Vendors of motor vehicles, titled watercraft and titled outboard motors may use this certificate to purchase these items under the "resale" exception. Otherwise, purchaser must comply with either Administrative Code Rule 5703-9-10 or 5703-9-25.

This certificate cannot be used by construction contractors to purchase material for incorporation into real property under an exempt construction contract. Construction contractors must comply with Administrative Code Rule 5703-9-14.



For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: \_\_\_\_\_

# New Special Event Road Closure Petition

Name: Paloma Kent  
Address: 1450 E. Summit St.  
Kent, OH 44240  
Signature: Brittany Wagner

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

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Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: 6.23.25

# New Special Event Road Closure Petition

The Province Kent

Name: Nicola Dorsey  
Address: 609 S. Lincoln  
St. Kent OH 44240  
Signature: [Signature]

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

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Address: \_\_\_\_\_  
Signature: \_\_\_\_\_



For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: \_\_\_\_\_

# New Special Event Road Closure Petition

University Edge

Name: Weslee Smith  
Address: 5094 Rhodes Road  
Kent, OH 44240  
Signature: W Smith

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Signature: \_\_\_\_\_

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For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

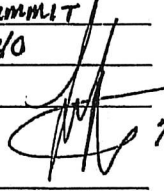
Date: \_\_\_\_\_

# New Special Event Road Closure Petition

Name: GOLD ZONE RIDGE

Address: 548 E. SUMMIT  
KENT, OH 44240

Signature: \_\_\_\_\_

 7-7-25

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: 7/15/25

# New Special Event Road Closure Petition

College Towers

Name: AJ Yount  
Address: 1800 Rhodes Rd  
Kent, OH 44240  
Signature: [Signature]

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

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For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: \_\_\_\_\_

# New Special Event Road Closure Petition

642 E. Summit Street

Name: Larry Nathan

Address: 642 E. Summit St

Signature: [Signature]

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: \_\_\_\_\_

# New Special Event Road Closure Petition

Name: Thomas Baltus  
Address: Kent  
\_\_\_\_\_  
Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Thomas R. :  
Signature: \_\_\_\_\_

Name: UNIVERSITY CHURCH  
Address: 1456 Summit St  
KENT, OH 44240  
Signature: Thomas R. Baltus

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
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For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: \_\_\_\_\_

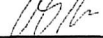
# New Special Event Road Closure Petition

Delta Gamma House

Name: Adrijana Medic

Address: 1068 Fraternity Circle

Kent OH 44240

Signature: 

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: 7/7/25

# New Special Event Road Closure Petition

(Alpha Phi) Name: <u>Nicole Bluso</u>	Name: _____
Address: <u>1063 Fraternity Circle</u>	Address: _____
<u>Kent, OH 44240</u>	_____
Signature: <u>Nicole Bluso</u>	Signature: _____
 Name: <u>Phi Delta Theta</u>	Name: _____
Address: <u>1060 Fraternity Circle</u>	Address: _____
<u>Kent, OH 44240</u>	_____
Signature: <u>[Signature]</u>	Signature: _____
 Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Signature: _____	Signature: _____
 Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Signature: _____	Signature: _____
 Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Signature: _____	Signature: _____

For 2025 Kent State University  
Homecoming Parade October 11, 2025.

Date: 7/7/2025

# New Special Event Road Closure Petition

Phi Mu House

Name: Sheila Mendoza

Address: 1061 Fraternity Circle,

Signature:

*Sheila Mendoza*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: Kacy Vanscoy

Address: 1061 Fraternity Circle

Signature:

*Kacy Vanscoy*

Name: Ashley Spooner

Address: 1061 Fraternity Circle

Signature:

*Ashley Spooner*

Name: Mara Phillips

Address: 1061 Fraternity Circle

Signature: *Mara Phillips*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_

For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: 7/9/2025

# New Special Event Road Closure Petition

Sigma Sigma Sigma House

Name: Abby Snowberger  
Address: 1066 Fraternity  
Circle, Kent, OH 44240  
Signature: Abby M. Snowberger

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

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For 2025 Kent State University  
Homecoming Parade on October  
11, 2025.

Date: 7/2/25

# New Special Event Road Closure Petition

Delta Zeta House

Name: DRZGK House Corp.  
Jennifer Anderson  
Address: 1064 Fraternity Cr.  
Kent OH 44240  
Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
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For 2025 Kent State University Homecoming Parade  
on October 11, 2025.

Date: \_\_\_\_\_

# New Special Event Road Closure Petition

Kent State University

Name: DOUG PEARSON  
Address: 615 LOOP ROAD  
KENT, OH 44240  
Signature: DOUG PEARSON

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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Division of Student Life

Public Relations Notification ☐  
Safety ☐



DATE: 06/23/2025

TO: Tim Coyne, Senior Business Manager, Division of Student Life

FROM: Joe Robinson, Associate Director, Center for Stu

RE: Request for contract approval for the Division of Student Life \*

In accordance with university Administrative policy 3342-5-04.1 regarding contract administration (<http://www.kent.edu/policyreg/administrative-policy-contract-administration>), the attached contract or agreement is for:

Name of contracting department: Kent Student Center and Involvement

Department index number contract will be paid from: 336011

Name of non-university contracting party: City of Kent

Contract effective date: 10/11/2025

Contract termination date: 10/11/2025

Contracted amount (or range of scheduled fees): \$0.00

Location(s) of event or services to be performed: Loop Rd. - E. Summit Street

If contract is for an event, please circle one: ☒ In-person event ☐ Virtual event

Brief description of event, services, or goods procured by the contract or, if not a purchasing contract, the nature of the agreement:

This is a city application for road closures for the 2025 KSU Homecoming Parade on October 11, 2025.

With the signing and submittal of this request, I certify that this contract is valid and the contract has been reviewed and deemed legally sufficient by the Office of General Counsel. Any necessary changes have been made and initialed by the appropriate representative.



Joe Robinson

Joe Robinson  
Joe Robinson (Jun 23, 2025 11:21 EDT)

06/23/2025

Requester's printed name

Requester's signature

Date

As department director, I have reviewed the contract(s) or agreement(s) and attest to its validity.

Benjamin Davis

Benjamin Davis

06/23/2025

Department director's printed name

Department director's signature

Date

TRC

Timothy Coyne

Once all contracting parties, university and non-university, have signed, please forward the full contract along with a bio and/or background information for the person, performer, or service provider (including the website and any additional resource information) with this cover page to Tim Coyne ([tcoyne1@kent.edu](mailto:tcoyne1@kent.edu)), Senior Business Manager, Division of Student Life.

\* Senior Director, Finance and Technology can approve contracts up to or equal to \$10,000.00. Associate VP, Administration can approve contracts up to or equal to \$99,999.99. Senior VP for Student Life must approve all contracts exceeding \$99,999.99.