

A MEETING OF THE BOARD OF PUBLIC WORKS & SAFETY OF THE CIVIL CITY OF NEW ALBANY, INDIANA, WILL BE HELD IN ROOM 100 AT NEW ALBANY CITY HALL ON TUESDAY, JULY 22, 2025 AT 10:00 A.M.

CALL TO ORDER:

PLEDGE OF ALLEGIANCE:

BIDS:

NEW BUSINESS:

COMMUNICATIONS – PUBLIC:

UNFINISHED BUSINESS:

TABLED ITEMS:

COMMUNICATIONS – CITY OFFICIALS:

1. Krystina Jarboe re: Special Events Permit
 - Saturday, October 25 – City of New Albany: All Hallows Eve Celebration

APPOINTMENTS:

CLAIMS:

APPROVAL OF MINUTES:

Regular Meeting Minutes for July 15, 2025

ADJOURN:

Board of Public Works & Safety Members

Michael Thompson; President; Appointing Authority: Mayor; Term Expires: 12/31/2027
David Brewer; Vice President; Appointing Authority: Mayor; Term Expires: 12/31/2027
Cheryl Cotner-Bailey; Member; Appointing Authority: Mayor; Term Expires: 12/31/2027

A MEETING OF THE BOARD OF PUBLIC WORKS & SAFETY OF THE CIVIL CITY OF NEW ALBANY, INDIANA, WAS HELD IN ROOM 100 AT NEW ALBANY CITY HALL ON TUESDAY, JULY 15, 2025 AT 10:00 A.M.

PRESENT: Cheryl Cotner-Bailey, member, David Brewer, member, and Mickey Thompson, president.

OTHERS PRESENT: Fire Chief Juliot, Deputy Chief Ken Fudge, Phil Aldridge, Brad Fair, Cameron McLaughlin, Michael Mifflin, Brad Ramsey, Linda Moeller, David Heeke, Jessica Campbell, Wendy Byrne and Vicki Glotzbach

CALL TO ORDER:

Mr. Thompson called the meeting to order at 10:04 a.m.

PLEDGE OF ALLEGIANCE:

BIDS:

NEW BUSINESS:

1. Pat Hauersperger, Dave O'Mara for IAWC re: Encroachment permit to install new water service to 1749 McDonald Ln., replace a valve box at 620 Durgee Rd., replace water service to 3723 Klerner Ln., retire water main at 3716 Klerner Ln., repair water main at 2799 Mt. Tabor Rd., replace water service at 758 Linden St., replace water meter set at 752 Linden St., replace water meter set at 224 Sloemer Ave., repair water main at 1101 State St., replace water meter set at 319 E. 14th St., replace water service at 1611 Ekin Ave., install new water service to 1626 and 1628 Ekin Ave., install new water service to 1630 Ekin Ave., replace water service to 2121 E. Market St., install new water service to 2109 E. Market St., repair water main at 2221 State Street, and replace water service at 920 Mt. Tabor Road.

Mr. Hauersperger presented the above encroachment permit requests for approval and explained that Linden required an 8X4 sidewalk cut in both locations, Mt. Tabor required a 3X5, 6X6 and a 4X20 street cut as well as a 5X14 and a 6X10 sidewalk cut, Durgee required a 4X7 street cut, Sloemer required a 4X5 street cut, East Market required a 6X7 and a 4X5 street cut, East 14th Street required a 5X5 sidewalk cut and a 8X10 street cut, Ekin Avenue required a 3X7, 3X7 and a 7X7 street cut, State Street required a 5X7 street cut at both locations, Klerner required a 6X6 and a 4X6 street cut, and McDonald Lane required a 5X7 street cut.

Mrs. Cotner-Bailey stated that on Klerner it looks like new patch work.

Mr. Thompson stated that it was a patch that the city did and it wasn't a complete mill/pave. He added that it might have been the cause of the leak because it didn't start until after the patchwork was completed. He added that 920 Mt. Tabor and 2221 State Street wasn't in the board's packets because he wasn't able to do a locate, but he will get that permit to the board members after the meeting.

Mrs. Cotner-Bailey moved to approve, Mr. Brewer second, motion carries.

COMMUNICATIONS – PUBLIC:

UNFINISHED BUSINESS:

TABLED ITEMS:

COMMUNICATIONS – CITY OFFICIALS:

1. Vicki Glotzbach re: Handicap Parking for Andria Jones at 1130 Greenaway Place

Mrs. Glotzbach presented a handicapped parking request for Andria Jones at 1130 Greenaway Place. She explained that there is a parking area out back but that is used by Ms. Jones's roommate, adding that traffic did a site visit and recommends approval.

Mr. Thompson stated that when he did a site visit there were two vehicles parked in the back but it is in an alley and much further from the front of the house.

Mrs. Cotner-Bailey moved to approve, Mr. Brewer second, motion carries.

2. Nick Pierce, Clark Dietz re: Paving Update

Mr. Pierce reported that Libs Paving will be here later in the week to lay out Charlestown Road/Vincennes Street and some other areas, adding that they are aware that they need to get this done before school starts back up. He stated that the patch on Charlestown Road by Hedden Park is on their list while they are doing the work on Charlestown/Vincennes and they are looking at the west lane of Silver Street going towards Silver Street Park, as the pavement there is rough. He reported that he has been working with AllTerrain and Mr. Summers regarding concrete work at State and Elm streets where they have identified at least four spots where the sidewalk doesn't ramp down to the commercial approaches. He stated that other locations they have identified is the east side of Grant Line Road across from Daisy Lane where they would like to address some old curb cuts for the old Salvation Army entrance, and a few spots on Scribner Drive while they are mobilized at State Street. He added that AllTerrain is going to try to rework their schedule to be able to address those areas and he should have a schedule to share with them soon.

Mrs. Cotner-Bailey asked Mr. Pierce if Mr. Summers said anything to him regarding the dip on Green Valley Road across from Farrington.

Mr. Pierce stated that they had engineers go out to the area and they have it quantified with and estimate put together.

Mrs. Cotner-Bailey asked if that was just overlooked when they were putting together areas to patch on Green Valley Road.

Mr. Pierce stated that at the time it wasn't as bad and in the last couple of months it has gotten worse. He added that it isn't a very high dollar item but it is on their radar as well as the rumble strips along Green Valley. He stated that they will try to do them concurrently and it will require an inch and half over overlay.

Mr. Brewer asked how long the work will take at Charlestown Road and Vincennes Street.

Mr. Pierce stated that once they start, it will be completed within three days and they will be opening the road each night.

Mr. Brewer asked that they keep in mind that school is starting on July 30 so that work needs to be completed before then.

APPOINTMENTS:

CLAIMS:

APPROVAL OF MINUTES:

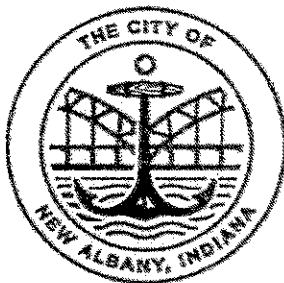
Mr. Brewer moved to approve the Regular Meeting Minutes for July 8, 2025, Mrs. Cotner-Bailey second, motion carries.

ADJOURN:

There being no further business before the board, the meeting adjourned at 10:19 a.m.

Mickey Thompson, President

Vicki Glotzbach, City Clerk



Special Event Permit Application

142 East Main Street, Suite 310
New Albany, IN 47150
812-948-5333

www.cityofnewalbany.com

Applicant and Host Organization Information

Host Organization – The Host Organization is legally and financially responsible for the overall permitting process, management and implementation of an event and its associated dynamics.

Host Organization Name: CITY OF NEW ALBANY

Host Organization Event Representative – The event representative will be the main point of contact for all planning activities and day-of activities.

Event Representative and Title: KRYSTINA JARBOE, LEGAL ASSISTANT

Host Organization Website: WWW.CITYOFNEWALBANY.COM

Address: 142 E MAIN ST.

City: NEW ALBANY State: IN Zip Code: 47150

Work Phone: 812-948-5333

Cell Phone: _____

Email: KJARBOE@CITYOFNEWALBANY.COM

Please list any additional person, professional event organizer or service contractor hired by the Host Organization that is authorized to make decisions on the Host Organization's behalf for this event.

Name: _____

Name: _____

Company: _____

Company: _____

Email: _____

Email: _____

Phone Number : _____

Phone Number: _____

Why would you like to hold your event in New Albany?

TO HOST A FUN, FAMILY-FRIENDLY EVENT FOR THE YOUNGEST
CITIZENS OF NEW ALBANY.

Banner Permit:

Will you be filling out a banner permit? _____ Yes X No

Please contact the City Clerk's Office for more information regarding the City's policy on banners and banner permits.

Event Specific Information

Event Name: ALL HALLOWS EVEWill this event be marketed as a family friendly event? ☒ Yes ☐ No (if yes, please attach flyer)Will this event be marketed as a gun-free/weapon-free event? ☒ Yes ☐ No (if yes, please attach flyer)Is this an annual event? ☒ Yes ☐ NoIf yes, how many years has this event been happening? 13Anticipated Attendance – The estimated amount of people expected at event. 2,000

Anticipated Participants – If the proposed event has registered participants,

the estimated number expected. N/AAnticipated Number of Event Staff/Volunteers - 20

Event Description (including purpose, target audience and description):

FUN, FAMILY-FRIENDLY EVENT.TRUNK-OR-TREAT = 5:00pm TO 8:00pm;GHOST STORIES = 6:30pm TO 7:00pm; DARSHWOOD THE MAGICIAN = 7:00pm TO 7:30pm

Requested Venue:

☒ Riverfront Amphitheater☐ City Square☐ Bicentennial Park☐ Other (Specify) _____

Type of Event:

☐ Run/Walk☐ Rally☐ Parade☐ Concert☐ Wedding Ceremony/Photos☐ Fair☐ Picnic☒ Other (Specify) HALLOWEEN FESTIVALProposed Event Date: OCT. 25, 2025Day of the Week: SATURDAYSet-Up Begin Time*: 1:00 AM/PMSet-Up End Time: 5:00 AM/PMEvent Begin Time: 5:00 AM/PMEvent End Time: 8:00 AM/PMBreak-Down Begin Time: 8:00 AM/PMBreak-Down End Time**: 9:00 AM/PMProposed Rain Date: N/ADay of the Week: N/A

* The Set-Up Begin Time is the time the venue reservation contract time begins and the earliest any event-related activity can happen in the venue/space.

**The Break-Down End Time is the time the venue reservation contract ends and the latest any event-related activity can happen in the venue/space.

Weather:

Is this event rain or shine? ☒ Yes ☐ No

Description of inclement weather plan:

IF RAIN OCCURS = MOVE THE EVENT TO THE PARKING GARAGEIF SEVERE WEATHER = WILL CANCEL EVENT

Event Logistics:

Will normal operations of residents or businesses be affected by your event? _____ Yes X No

If yes, please attach a copy of the notification letter to be approved by the Board of Public Works before being sent to the affected residents/businesses.

Is this event open to the public? X Yes _____ No

Will you charge admission or participation fees? If so, what is the charge? What will the monies collected at this event go towards?

THIS IS A FREE EVENT

Comprehensive Map Information:

Purpose: details the layout of the requested area and gives City officials a clear idea of layout.

A comprehensive map must be provided with the special event permit application.

Each comprehensive map must include:

1. An outline of the entire requested event area.
2. Label street(s) requested for closure and mark locations of barricades. If the event involves a route, please indicate the direction of travel and have barricade placement clearly marked.
3. Location of all physical equipment and structures being placed within the event site (i.e. staging, tents, portable restrooms, production equipment, tables, chairs, fencing, vendors, etc.).
4. Location of generators or other electrical equipment (if applicable).
5. Location of food, beverage, or alcohol area (if applicable). It is required by the State of Indiana for premises that are not part of an approved designated outdoor refreshment area (DORA) must be well-defined with a fence, rope, or other similar enclosure that reasonably deters ingress and egress.
6. Trash and recycling receptacles.
7. Entry and exit locations.
8. Location of accessible viewing area.
9. Requested general parking and accessible parking areas.
10. All requests for reserving the amphitheater **MUST** have volunteers stationed on both sides of the railroad. Please indicate these volunteers on site plan/route map.

Have you attached a site plan/route map to your special event permit using these criteria? X Yes _____ No

Road Closure Request:

Do you require a road closure? X Yes _____ No

If yes, list the street or lane closures:

Closure Type (full or partial lane)	Street Name	Start Date	Start Time	End Date	End Time
	WATER ST (WEST AMP PARKING LOT TO AMP RESTROOMS)	10/25/25	2:00PM	10/25/25	8:00PM
PARKING LOT	WEST AMP. PARKING LOT				
PARKING LOT	EAST AMP. PARKING LOT				

Security and First Aid:Will you have contracted security? _____ Yes ☒ No

Number of security personnel on-site for event: _____

Please list the provider of contracted security:

Company: N/AContact Name: N/AEmail: N/APhone Number: N/A*On attached map, please include where contracted security will be located.*Will you have a first aid kit on site? ☒ Yes _____ NoWill you have an on-site provider of primary first aid? ☒ Yes _____ No

Please list the provider of first aid:

Company: NAFD

Contact Name: _____

Email: _____

Phone Number: _____

*On attached map, please include where first aid kit(s) and/or provider of first aid will be located.*Will you request the New Albany safety/traffic control services? ☒ Yes _____ NoIf yes, please explain your request: BARICADES FOR WATER STREET E TO HELP WITH ACCESSIBLE PARKING IN WEST AMP. PARKING LOT**Food and Beverage:**Will there be concessions at your event? ☒ Yes _____ No

If yes, describe:

SMOKIN' FRANKS BBQ*On attached map, please include where each concession will be located.**Please note all food vendors must obtain a license from the Floyd County Health Department.***Alcohol:**Will alcohol be served at your event? _____ Yes ☒ No

If yes, is alcohol going to be served within the DORA? _____ Yes _____ No

If alcohol will be served outside of DORA, what will alcohol floor plan be enclosed with? _____

*On attached map include a well-defined area where alcohol will be located.**Please note, a representative from the Host Organization to attend the Board of Public Works meeting at least 60 days in advance to answer any questions regarding their event.*

Fencing:Will you have fencing? _____ Yes X No

Please list the provider of fencing:

Company: N/AContact Name: N/AEmail: N/APhone Number: N/ADate and time fencing will be set up: N/ADate and time fencing will be taken down: N/A*On attached map, please include where fencing will be located.***Restrooms:**Will you be requesting use of the amphitheater restrooms? _____ Yes X No*(Amphitheater restrooms are closed due to winterization November 1st to March 1st each year.)*

If yes, what time will you request the restrooms be open? _____ AM/PM

If yes, what time will you request the restrooms be closed? _____ AM/PM

If no, please list the provider of portable restrooms:

Company: A1 PORTA POTTYContact Name: COLLETTNEY KIEPEREmail: CKIEPER@A1PORTAPOTTY.COMPhone Number: 812-728-8465Date and time portable restrooms will be dropped off: FRI. OCT. 24 @ 1:00PMDate and time portable restrooms will be picked up: MON. OCT. 27 @ 8:00AMTotal number of portable restrooms on site: 6Will you have ADA portable restrooms on site? X Yes _____ No*On attached map, please include where the portable restrooms will be located.***Equipment and Decorations:****DO NOT** put nails or staples into trees/structures or stake anything in the ground.Will you use tents? X Yes _____ NoWhat type of tents will be used? 10X10 POP-UP TENTSWhat will be used to weigh tents down? SAND BAGSWill other temporary structures be used? _____ Yes X NoIf yes, what other temporary structures will be used? NO*On attached map, please include where tents and temporary structures will be located.*

Trash Plan:

How will trash be monitored during and after your event? How will trash be removed from premises after the event?

TRASH BOXES WILL BE PLACED THROUGHOUT EVENT FOOTPRINT. STAFF WILL MONITOR TRASH BOXES. AT THE END OF THE EVENT STAFF & VOLUNTEERS WILL WALK THROUGH
 Number of trash receptacles: 13 & PICK UP ANY ADDITIONAL TRASH. ALL TRASH WILL
 Number of recycling receptacles: 3 BE REMOVED AT END OF EVENT.

Please list the provider of trash services:

Company: STAFF & VOLUNTEERS

Contact Name: _____

Email: _____

Phone Number: _____

On attached map, please include where trash cans will be located.

Entertainment Activities:

Will you have music? X Yes _____ No

If yes, list the time(s) of music during the event:

4:00 PM TO 8:00 PM

If yes, what type of music/amplification?

HALLOWEEN MUSIC

SPEAKERS ON STAGE FOR ANNOUNCEMENTS & MUSIC

On attached map, please include where the entertainment activities will be located.

Will you have inflatables? X Yes _____ No

If yes, please list the inflatable provider:

Company: TONS OF FUN

Contact Name: _____

Email: TONSOFFUN@GMAIL.COM

Phone Number: 502-962-7102

On attached map, please include where inflatables will be located.

Electric:

Will you use electricity? X Yes _____ No

Will you use generators? _____ Yes X No

Outdoor extension cords must be 3-prong UL listed extension cords.

On attached map, please include where the generators or other large electrical equipment will be located.

Describe electrical usage:

SPEAKERS FOR ANNOUNCEMENTS & MUSIC.

Affidavit of Application:

Everything that I have stated on this Special Event Permit Application is correct to the best of my knowledge. I have read, understand and agree to abide by the policies, rules and regulations listed on this and all applicable forms, including the City of New Albany ordinances, as they pertain to the requested usage. Applicant agrees and understands any significant damage to city property will be the sole responsibility of the applicant. By signing this application, the applicant agrees to follow all rules and regulations and city ordinances. The permit, if granted, is not transferrable and is revocable at any time at the absolute discretion of the New Albany Board of Public Works. All programs and facilities of the City of New Albany are open to all citizens regardless of race, sex, age, color, religion, national origin and abilities.

Name of Applicant (please print): KRYSTINA JARBOE

Signature: Krystina Jarboe

Date: JULY 18, 2025

Completed Special Event Permit Applications may be mailed or delivered in person to:

City of New Albany, ATTN: Krystina Jarboe
142 East Main Street, Suite 310
New Albany, IN 47150

Completed Special Event Permit Applications may also be emailed to Krystina Jarboe at:
kjarboe@cityofnewalbany.com

Office Use Only

☐ Taken under advisement

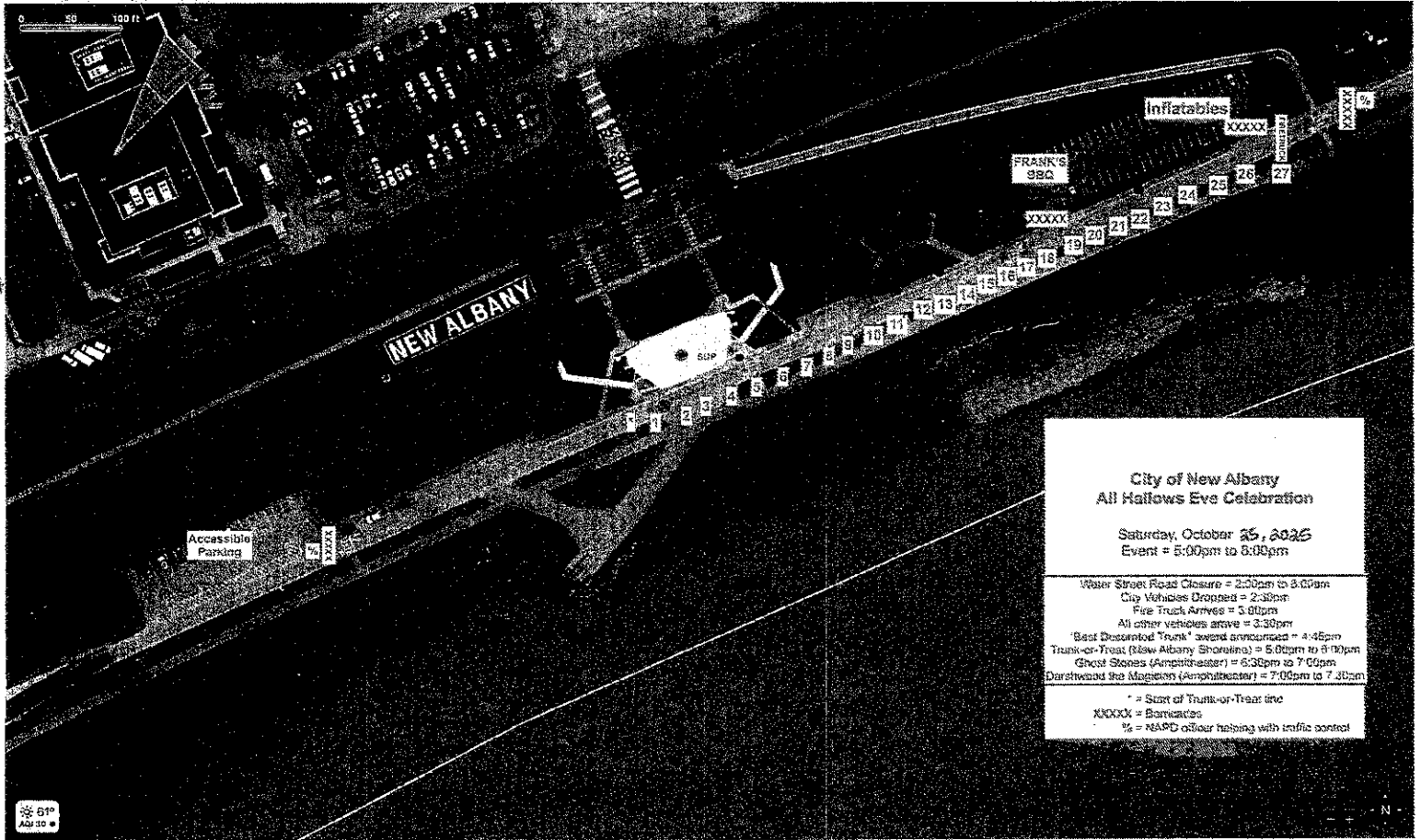
☐ Approved

☐ Denied

Signed: _____
(Board of Works President)

Date: _____, 2025

Notes:





Presented by Mayor Jeff M. Gahan and the City of New Albany

ALL HALLOWS EVE Celebration

Saturday | October 25 | 5pm to 8pm

TRUNK OR
TREAT

5:00PM

GHOST
STORIES

6:30PM

DARSHWOOD
THE MAGICIAN

7:00PM

GAMES / INFLATABLES / CANDY / MAGIC / AND MORE!



LOCATION: NEW ALBANY SHORELINE
RAIN LOCATION: STATE STREET PARKING GARAGE