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MEMO

APPROVED  
06/28/2021



DATE: June 23, 2021  
FROM: Matney M. Ellis  
Procurement Director  
TO: Board of County Commissioners  
SUBJECT: Agreement – Dink N’ Flicka, LLC

A handwritten signature in black ink, appearing to read "Matney M. Ellis", with a long horizontal flourish extending to the right.

Submitted for your approval and execution is the attached agreement between the Board of County Commissioners on behalf of the Tulsa County Parks Department and Dink N’ Flicka, LLC for use of the Haikey Creek Pickleball Courts to host a pickleball tournament on July 3, 2021 from 8:00am to 6:00pm as further described in the attached.

This agreement is respectfully submitted for your approval and execution.

MME / mlb

SUBMITTED FOR: The June 28, 2021 BOCC meeting agenda.

CMF# 20211374



APPROVED  
06/28/2021

SPECIAL EVENT APPLICATION AND AGREEMENT FOR USE OF PARK FACILITIES

Applicant/Organization Information

Contact Name: David Graddy Company/Organization: Dink N' Flicka, LLC  
Contact Phone Number: 918.200.1324 Company Phone Number: 918.200.1324  
Email Address: DNFpickleball@gmail.com

Reservation Information

Facility/Park: Haikey Creek Pickleball Court Purpose of Event: Pickleball Tournament  
Event Date: 7/3/21 Event Time: 0800 to 1800  
Fees Owed: \$40/hr

List equipment or additional items you will be bringing: Tables and tents

User Agreement

This agreement is entered into by Tulsa County Parks and Recreation Department ("TULSA PARKS AND RECREATION") and Dink N' Flicka, LLC, hereinafter referred to as "ORGANIZATION."

I, David Graddy, the undersigned, acting as representative for ORGANIZATION have read and understood the **TERMS OF USE** attached. I agree that fee payments will be made in full by phone at 918-596-5990 or by check, made out to, and delivered to:

Tulsa County Parks and Recreation Department  
218 W. 6<sup>th</sup> St., Suite 230  
Tulsa, OK 74119

**HOLD HARMLESS AGREEMENT:** ORGANIZATION will hold harmless TULSA PARKS AND RECREATION, Tulsa County and its Board of County Commissioners, its divisions, elected officials, employees, and agents, from all causes of action, demands, and claims of any nature, including the cost of their defense, arising in favor of facility users, activity participants, or third parties on account of injuries, death, damage, rental/event changes, or cancellation, or other matters arising out of this Agreement or activities at the premises, or their users' performance or nonperformance of their obligations/duties under this Agreement, or otherwise connected with the rental/event.

David Graddy  
Organization Representative Signature

6/17/2021  
Date

Jo Sallee  
Chairperson  
Tulsa County Board of County Commissioners (BOCC)

06/28/2021  
Date

Attest:  
Michelle Hill  
Tulsa County Clerk

Approved as form:  
James G. Rea Digitally signed by James G. Rea  
Date: 2021.06.18 11:27:28 -05'00'  
Asst. District Attorney



Terms of Use on Page 2

CMF# 20211374



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/01/2021

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).

<b>PRODUCER:</b> CPH & Associates 711 S Dearborn St, Ste 205 Chicago, IL 60605	<b>CONTACT NAME:</b> C. Philip Hodson	
	<b>PHONE</b> (A/C, No, Ext): 312-987-9823	<b>FAX</b> (A/C, No, Ext): 312-987-0902
<b>E-MAIL</b> ADDRESS: info@cphins.com		
<b>INSURED:</b> Dink N Flicka, LLC 1701 S Main St # 2361 Broken Arrow, OK 74012	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Philadelphia Indemnity Insurance Company	<b>NAIC #</b> 18058
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	

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 LTD	COVERAGES	CERTIFICATE NUMBER	ADJL SUBR NSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC		X	EV72432	07/03/2021	07/04/2021	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$0 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMPI/OP AGG \$4,000,000	
	<b>AUTOMOBILE LIABILITY:</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED <input type="checkbox"/> SCHEDULED <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS							COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ PROPERTY DAMAGE (Per accident) \$ BODILY INJURY (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTIONS \$							EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION</b> <input type="checkbox"/> AND EMPLOYERS' LIABILITY <input type="checkbox"/> Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDER? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A					E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ CANCELLATION OF EVENT \$0.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Event: Pickle Ball Exhibitions / Tournaments Effective Date: 07/03/2021 End Date: 07/04/2021 Venue Location: Haikay Creek Park, 11327 S Garnett Rd, Broken Arrow, OK 74011

Certificate Holder is also added as Additional Insured.

<b>CERTIFICATE HOLDER</b> Tulsa Board of County Commissioners Tulsa County HQ 218 W. 6th St. Tulsa, OK 74119	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. <b>AUTHORIZED REPRESENTATIVE</b> C. Philip Hodson
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