



Application: Special Event Permit

Date Received:	By:	Receipt #:	Check #:	Amount:
4/27/26	CM	22564	9918	\$75.00

Event Information

Event: Bike MS: Harmon's Best Dam Ride Type: Bike Ride

Dates with starting/ending times: June 27th, 2026 5 a.m.-10 p.m.

Agent/Contact Information

Agent/Contact: Thomas Hoffmann Email: thomas.hoffmann@racedayevents.com

Phone: 608-212-9517 Mailing Address: 2829 Royal Ave, Suite 100, Madison, WI 53713

Name of Promoting Entity: National Multiple Sclerosis Society

Acknowledgment

In accordance with Title 8 Section 8.40 of the Cache County Ordinance, I hereby submit and certify that the information contained in this application is accurate and complete to the best of my knowledge.

Thomas Hoffmann 2/27/2026
Applicant Date

Application Deadline: Completed application forms must be submitted to the Cache County Development Services Office forty-five (45) calendar days before an event is scheduled to take place. This allows sufficient time for evaluation of the application. Late applications shall be denied unless the applicant demonstrates that compliance with the 45 day deadline was impractical or impossible due to the nature of the event. A special event permit application may be approved and a permit issued to the applicant by the Director upon approval by all the agencies specified in Section 8.40.40.

Authority: Cache County has no authority to approve permits for events other than in the unincorporated area of Cache County. Permits issued by Cache County apply only to the unincorporated area of the county, and if an event crosses into a municipality within Cache County or across the county line, applicants should determine if a permit is necessary in the other jurisdiction.

Right to Deny: Cache County reserves the right to deny permit applications for proposed special events which may pose, or have posed a significant danger or threat to the public health, welfare or safety, or which may result in unreasonable inconvenience or cost to the public. In the event the application is denied, the applicant may appeal to the Cache County Executive.

Application Checklist

A complete application must include the following unless specified otherwise:

- 1) Completed application form and application fee (\$75 – no refunds) submitted 45 days prior to event. Additional fees for services provided by the Sheriff's Office, emergency services, or others may apply.
- 2) Proposed location, including a plat or map of the proposed area to be used, including any barricade, street route plans or perimeter/security fencing.
- 3) Total number of participants: Estimate must include event staff, participants, and spectators.
- 4) Public health plans, including plans for culinary water supplies, solid waste collections and disposal, and waste water (toilet facilities).
- 5) Proof of insurance in conformance with the County Ordinance 8.40.050(F) minimums: \$1,000,000 each occurrence, \$2,000,000 general aggregate, and \$100,000 property damage.
- 6) Fire prevention and emergency medical services plans.
- 7) Security plans and/or law enforcement response.
- 8) Admission fee, donation, or other consideration to be charged or requested.
- 9) Plans for parking
- 10) *If* the event will be held on private property, a current taxation certification for that property.
- 11) Further information may be required by staff, other departments and agencies, and/or the Board/Committee/Council that reviews the application based on the proposed event.

Project Review Process

- The applicant is encouraged to meet with staff prior to the deadline date to discuss the project and ensure that the information submitted is sufficient to provide a complete review of the project.
 - After the application is accepted, information packets are sent to various departments, agencies, and affected municipalities that provide comments and/or approval for the proposed event to the Director of Development Services.
 - In some instances a pre-event meeting may be held with planning staff and representatives from the departments and agencies that provide comments on the project review. Any issues present on a project will be discussed with the appropriate department or agency.
 - A draft permit is made available to the reviewing agencies, affected municipalities, staff, and the applicant.
 - Following agency/department review and approval, and correction of any outstanding concerns/issues, the permit can be issued.
-



Mimi Calverley <mimi.calverley@cachecounty.gov>

Fwd: Bike MS Utah: Harmons Best Dam Bike Ride 2026 Permit Request

Cache County DevServices <devservices@cachecounty.gov>
To: Mimi Calverley <mimi.calverley@cachecounty.gov>

Thu, Mar 5, 2026 at 11:28 AM

----- Forwarded message -----

From: **Thomas Hoffmann** <thomas.hoffmann@racedayevents.com>
Date: Thu, Mar 5, 2026 at 10:20 AM
Subject: Bike MS Utah: Harmons Best Dam Bike Ride 2026 Permit Request
To: devservices@cachecounty.org <devservices@cachecounty.org>

Hello,

My name is Thomas and I am helping produce the Bike MS Utah: Harmons Best Dam Bike Ride event for 2026! This event serves as a way to raise funds and awareness for multiple sclerosis. The ride takes place on June 27th and will begin and end from the Cache County Fairgrounds which we have already been approved for. Attached to this email is the filled out special event application, certificate of insurance, links to the routes, and a site map.

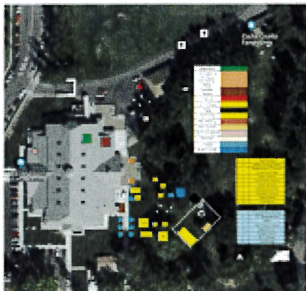
When it comes to admission, the minimum is \$250 per person which is fundraised by each individual prior to the event and is considered a donation to the National MS Society. Our total number of attendees will range between 650-700, which includes participants, volunteers, and staff. Cyclists participating are all expected to follow the rules of the road. Let me know if you need anything else at this time.

Thank you



Thomas Hoffmann
Project Manager
[2829 Royal Ave Suite 100](mailto:thomas.hoffmann@racedayevents.com)
[Madison, WI 53713](mailto:thomas.hoffmann@racedayevents.com)
P: (608) 316 5755

4 attachments



2026 Bike Utah Site Map Final.jpg
463K



Cache County Special Event app- filled out.pdf
564K

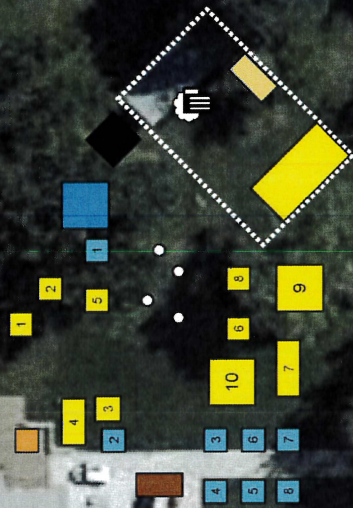
Cache County Fairgrounds



Registration
Information & Volunteers, Sign Making Station
Food/Bev Service
First Aid
Top Fundraiser
Stage
Team Tents
Bike Parking
Beer Garden
Communications
Mechanic
Vendors
Rider Lounge

1	Salt Cycles
2	eBay Cycling Team
3	Salesforce & Friends Cycle Out Utah
4	Team WinCo
5	Fee Fee's Flyers
6	Team Tamara
7	BadAssCycling
8	Elevate a Cure
9	Team Brain
10	Harmors

1	One Kind Act A Day
2	TG Therapeutics
3	NAMI
4	Rad Power Bikes
5	Session Co.
6	Rocket Sloth
7	SLC eBikes
8	Goldlocks



S 500 W

Cache County Event Center



AM Best Rating Services

Continental Casualty Company

BestLink  AMB #: 002128 NAIC #: 20443 FEIN #: 362114545

Mailing Address

151 N. Franklin Street
Chicago, Illinois 60606
[United States](#)

Web: www.cna.com

Phone: 312-822-5000

[View Additional Address Information](#)

AM Best Rating Unit: [AMB #: 018313 - CNA Insurance Companies](#)

Assigned to insurance companies that have, in our opinion, a superior ability to meet their ongoing insurance obligations.



View additional [news, reports and products](#) for this company.

Based on AM Best's analysis, [050177 - Loews Corporation](#) is the **AMB Ultimate Parent** and identifies the topmost entity of the corporate structure. View a list of [operating insurance entities](#) in this structure.

Best's Credit Ratings

Financial Strength View Definition

Rating (Rating Category): A+ (Superior)
Outlook (or Implication): Stable
Action: Upgraded
Effective Date: December 03, 2025
Initial Rating Date: June 30, 1922

Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.
Senior Financial Analyst: Elizabeth Blamble
Director: Alan Murray
Note: See the Disclosure information Form or Press Release below for the office and analyst at the time of the rating event.

Long-Term Issuer Credit View Definition

Rating (Rating Category): aa- (Superior)
Outlook (or Implication): Stable
Action: Upgraded
Effective Date: December 03, 2025
Initial Rating Date: June 21, 2005

Disclosure Information

Disclosure Information Form

View AM Best's [Rating Disclosure Form](#)

Press Release

[AM Best Upgrades Credit Ratings of CNA Financial Corporation and Its Subsidiaries](#)
December 03, 2025

Financial Size Category View Definition

Financial Size Category: XV (Greater than or Equal to USD 2.00 Billion)

AM Best Rating Services

The Continental Insurance Company

BestLink  AMB #: 002118 NAIC #: 35289 FEIN #: 135010440

Mailing Address

151 N. Franklin Street
Chicago, Illinois 60606
[United States](#)

Web: www.cna.com

Phone: 312-822-5000

[View Additional Address Information](#)

AM Best Rating Unit: [AMB #: 018313 - CNA Insurance Companies](#)

Assigned to insurance companies that have, in our opinion, a superior ability to meet their ongoing insurance obligations.



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Best's Credit Ratings

Financial Strength View Definition

Rating (Rating Category): A+ (Superior)
Affiliation Code: g (Group)
Outlook (or Implication): Stable
Action: Upgraded
Effective Date: December 03, 2025
Initial Rating Date: December 31, 1907

Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.
Senior Financial Analyst: Elizabeth Blamble
Director: Alan Murray
Note: See the Disclosure information Form or Press Release below for the office and analyst at the time of the rating event.

Disclosure Information

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Press Release

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December 03, 2025

Financial Size Category View Definition

Financial Size Category: XV (Greater than or Equal to USD 2.00 Billion)

AM Best Rating Services

American Casualty Company of Reading, Pennsylvania

BestLink  AMB #: 002127 NAIC #: 20427 FEIN #: 230342560

Mailing Address

151 N. Franklin Street
Chicago, Illinois 60606
[United States](#)

Web: www.cna.com

Phone: 312-822-5000

Fax: 312-822-6419

[View Additional Address Information](#)

AM Best Rating Unit: [AMB #: 018313 - CNA Insurance Companies](#)

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Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.
Senior Financial Analyst: Elizabeth Blamble
Director: Alan Murray
Note: *See the Disclosure information Form or Press Release below for the office and analyst at the time of the rating event.*

Disclosure Information

Long-Term Issuer Credit [View Definition](#)

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Disclosure Information Form

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Press Release

[AM Best Upgrades Credit Ratings of CNA Financial Corporation and Its Subsidiaries](#)
December 03, 2025

Financial Size Category [View Definition](#)

Financial Size Category: XV (Greater than or Equal to USD 2.00 Billion)

100 miles: <https://ridewithgps.com/routes/54076725>

73 miles: <https://ridewithgps.com/routes/54068326>

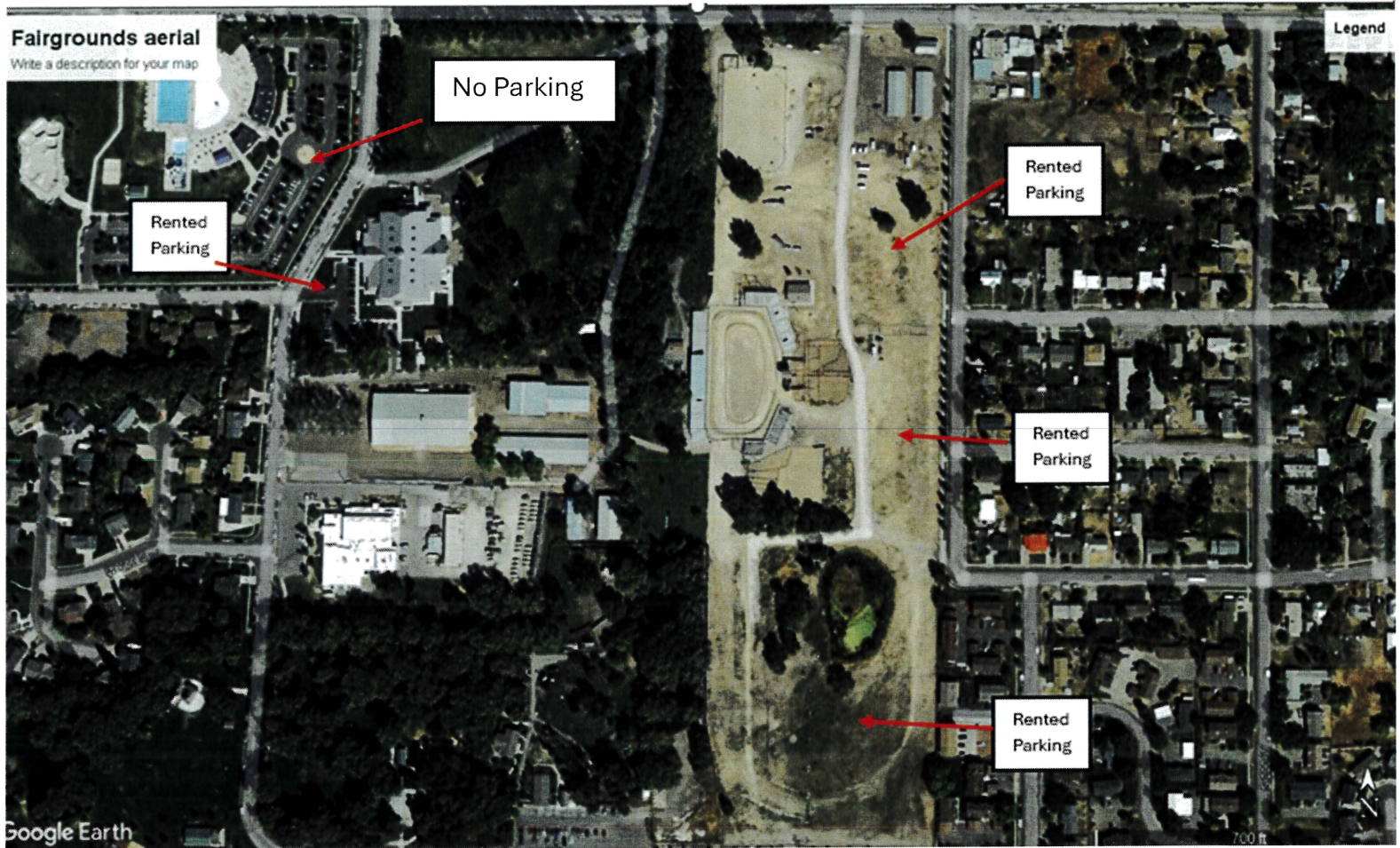
47 miles: <https://ridewithgps.com/routes/54068324>

35 miles: <https://ridewithgps.com/routes/54068323>

Bike MS Utah 2026: Cache County Special Event Permit Application

1. Parking available to attendees

Parking will be available in the lot of the Cache County Event Center as well as throughout the Cache County Fairgrounds. Parking will NOT be allowed in the parking lot of the aquatic center.



2. Location, Type, and Schedule of restroom facilities and handwashing stations, sanitation plan

Attendees will have access to toilets and sinks that are within the Cache County Event Center. There will be a 20 yard dumpster on grounds to collect all trash that will be provided by Honey Bucket

3. Security Plan

We plan to have overnight security on both Friday, June 26th from 8pm until around 6am as well as security from 4-7pm on Friday, June 26th and 10:45-7pm on Saturday, June 27th while our beer garden is open. Security Masters based out of Ogden, UT will be providing security.

Logan PD will help in escorting riders out of Logan on the morning of the event beginning at 7:00am. This has been confirmed by Brooks Davis of Logan PD

4. Certificate of Insurance

Attached here is the COI for Cache County that meets the requirements listed on the application:

ACORD®		CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY)		
		10/1/2026		3/2/2026		
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 Lockton Companies, LLC DBA Lockton Insurance Brokers, LLC as CA CA license #0F15767 1185 Avenue of the Americas, Ste. 2010 New York NY 10036 (646) 572-7300		CONTACT NAME: Northeast- National Multiple Sclerosis Society Cert Request PHONE: (A/C, No, Ext): FAX: (A/C, No): E-MAIL ADDRESS: NMSSCertRequests@lockton.com				
INSURED 1552861 NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 Third Avenue, 3rd Floor NEW YORK, NY 10017-3288		INSURER(S) AFFORDING COVERAGE INSURER A: Continental Casualty Company 20443 INSURER B: The Continental Insurance Company 35289 INSURER C: American Casualty Company of Reading, PA 20427 INSURER D: INSURER E: INSURER F:		INSURER(S) AFFORDING COVERAGE INSURER A: Continental Casualty Company 20443 INSURER B: The Continental Insurance Company 35289 INSURER C: American Casualty Company of Reading, PA 20427 INSURER D: INSURER E: INSURER F:		
COVERAGES		CERTIFICATE NUMBER: 23097940		REVISION NUMBER: XXXXXXX		
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	INSURER (IND. / NFD)	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 type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROTECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:	N N	7094847651	10/1/2025	10/1/2026	EACH OCCURRENCE \$ 1,000,000 COVERAGE TO RENTED PREMISES (EA occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 15,000 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"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS ONLY	N N	7094847634	10/1/2025	10/1/2026	COMBINED SINGLE LIMIT (EA accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXX BODILY INJURY (Per accident) \$ XXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXX \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	N N	7094847648	10/1/2025	10/1/2026	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXX
C	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NY) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	7094847665 (AOS) 7094851439 (CA)	10/1/2025 10/1/2025	10/1/2026 10/1/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Re: Event Name: Bike MS Harmons Best Dam Bike Ride 2026, Event Date: 6/27/2026, Location: Cache County Development Services Department.						
CERTIFICATE HOLDER			CANCELLATION			
23097940 Cache County Development Services Department 179 North Main, Suite 305 Logan, UT 84321			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: <i>[Signature]</i>			

CACHE COUNTY GOVERNMENT
179 NORTH MAIN
LOGAN UT 84321

435-755-1700

Receipt No: 5.000022564

Apr 27, 2026

Previous Balance:	.00
CHARGES FOR SERVICES - SEP Bike MS UT Harmons Best 200-32-13000 ZONING & SUBDIVISION	75.00
<hr/>	
Total:	75.00
<hr/>	
CREDIT CARD - ZIONS Check No: 9918 Payor: Thomas Hoffman	75.00
Total Applied:	75.00
<hr/>	
Change Tendered:	.00
<hr/>	

04/27/2026 11:04 AM



Claire Bentley <claire.bentley@cachecounty.gov>

SEP Proposal

Alex Hutchinson <ahutchinson@brhdut.gov>
To: Claire Bentley <claire.bentley@cachecounty.gov>

Mon, Apr 27, 2026 at 11:45 AM

I don't see any issues, thank you!

[Quoted text hidden]



CACHE COUNTY FIRE DISTRICT

600 North 1020 East
Hyrum, Utah 84319
(435) 755-1670

To: Clair Bentley
From: Troy Fredrickson
Bike MS: Harmons Best Dam Bike Ride 2026

4/27/2026

Bike MS: Harmons Best Dam Bike Ride 2026 event does not present a problem for Fire and EMS as long as the riders adhere to all traffic laws

In the past there has been a problem in other events where riders where bike riders were riding more than two abreast and not yielding to emergency vehicles when they were responding to an emergency.

I would advise that the riders be reminded to ride no more than two abreast and to yield to emergency vehicles.

We are in an active fire season. Road closures are possible as well as evacuations due to a fire.

Rod Hammer
Fire Chief

Jason Winn
Deputy Chief

Rod Kearl
Asst. Chief

Dave Erickson
Fire Board



Claire Bentley <claire.bentley@cachecounty.gov>

SEP Proposal

Jeremy Hudson <jeremy.hudson@cachecounty.gov>
To: Steven Taylor <steven.taylor@cachecounty.gov>
Cc: Claire Bentley <claire.bentley@cachecounty.gov>

Mon, Apr 27, 2026 at 4:05 PM

Hey Claire I think we are all clear on this event.

Thank You

Jeremy Hudson
Road Superintendent
[1020 E 600 N](#)
[Hyrum UT 84319](#)
Phone 435-755-1566
Cell 435-757-4729
Email jeremy.hudson@cachecounty.gov

PLEASE NOTE: Cache County is moving to a .gov domain and all emails intended for me should be sent to the address in my signature above

[Quoted text hidden]



Special Event Review

Purpose: In order to promote and protect the health, safety and welfare of all the persons in the county, including residents and visitors

Event:	<i>Bike MS UT Harmons Best Dam Bike Race</i>	Permit Number:	2026-02
Event Date:	6/27/2026	Site Visit Needed?	No
Reviewer:	<i>Steven Taylor, P.E.</i>	Hours Expected:	
Review Date:	4/27/2026	Fee Estimate:	

GENERAL

§8.40.40.C.3	Public Works Service Fee?	No Comment	
8.40.50.D	Public Works conditions disclaimer (see below).		
Extra Information Not Needed?		See Note	Road impacts are not specified.
Date(s) checked internally with Public Works Director and Road Super		Yes	
There appears to be no clear threat to public safety		No Comment	
Sufficient Parking Provided?		Unreviewed	
Parking not permitted along County road		See Note	
Using a County road?		Yes	See Roads Affected Below
Traffic control plan required?		See Note	Not Required. A traffic control plan is encouraged for all events. (Closed, open to traffic, accesses restricted, etc...)
Trucks and Traffic can turn around		No Comment	
Road road has viable detour and outlet?		No Comment	
Road Closures, Safety, and MUTCD Compliance		See Note	
Road Superintendent Maintenance Coordination		No Comment	

ROADS IMPACTED

ADT	SPEED LIMIT	FUNCTIONAL CLASS	ROAD	IMPACT	ROAD COMMENTS AND CONDITIONS
2000+	45	Minor Arterial	Mendon Road	UNSPECIFIED	Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
2000+	50	Minor Arterial	Airport Road	UNSPECIFIED	Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
2000+	50	Major Collector	3400 N	UNSPECIFIED	Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
2000+	50	Major Collector	3000 W	UNSPECIFIED	Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
2000+	50	Major Collector	3200 W	UNSPECIFIED	Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
400–1500	40	Major Local	6400 W	UNSPECIFIED	Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
400–1500	40	Major Local	9000 N	UNSPECIFIED	Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
2000+	55	Major Collector	5400 W	UNSPECIFIED	Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED

ADDITIONAL

Additional Comments	If County roads are to be closed clarify what authority will be closing them and how traffic will be dealt with.
----------------------------	--

SUMMARY OF CONDITIONS

1. Parking along County Roads for special events is not permitted and can pose serious threats to human safety. Ensure and enforce all participants park only in designated areas.
2. A traffic control plan may be required depending on impacts to roadways.
3. For any special event within the public right-of-way that results in road closures or affects normal traffic, the permittee shall provide adequate traffic control to ensure the safety of those involved. This may include providing advance notice to drivers, clearly marking closures and detours, controlling intersections or conflict points, and maintaining access for emergency vehicles. Traffic control measures shall be consistent with the principles of the Manual on Uniform Traffic Control Devices (MUTCD), using the current adopted edition.
4. SUMMARY OF ROADS AFFECTED AND SPECIFIC CONDITIONS:
 - Mendon Road (UNSPECIFIED) Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
 - Airport Road (UNSPECIFIED) Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
 - 3400 N (UNSPECIFIED) Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
 - 3000 W (UNSPECIFIED) Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
 - 3200 W (UNSPECIFIED) Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
 - 6400 W (UNSPECIFIED) Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
 - 9000 N (UNSPECIFIED) Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
 - 5400 W (UNSPECIFIED) Assumed Open to Traffic with Active Bike Race. SPECIFY IF ROAD WILL BE CLOSED
5. If County roads are to be closed clarify what authority will be closing them and how traffic will be dealt with.