

COLUMBIA COUNTY
Department of Public Works



ST. HELENS, OR 97051

1054 Oregon St.
Direct (503) 397-5090
Fax (503) 397-7215

publicworks@columbiacountyor.gov

PUBLIC ROAD EVENT PERMIT APPLICATION

Name of Event: Mike Nagle Rally Sprint Application Date: 9/12/2025
 Sponsor: Oregon Rally Group (Non Profit)
 Type of Event: One Day Car Race
 Purpose of Event: Car Race
 Date of Event: 11/15/2025 Beginning Time: 12:00pm
 Expected Number of Participants: 70 Ending Time: 9:00PM
 Location of Assembly Area(s): _____
 Assembly Beginning Time: _____
 Number of Volunteers: 125 Number/Type of Support Vehicles: 50
 Name of Applicant: Oregon Rally Group
 Address: P.O. Box 3511, Tualatin, OR 97062
 Work Phone: 503-969-2867 Home Phone: _____ E-mail: mike@oregonwings.com
 Contact Person (other than applicant): AJ Rossiter
 Address: P.O. Box 3511, Tualatin, OR 97062
 Work Phone: 360-949-3061 Home Phone: _____ Email: ajrossiter127@gmail.com
 Chair/Race Director (for athletic events): Casey Jones/Mike Shaw
 Address: P.O. Box 3511, Tualatin, OR 97062
 Work Phone: 406-581-9028 Home Phone: _____ Email: caseyjl@mail.com
 Previous Experience: We have put on Oregon Trail Rally for the past 27+ years.

Route: Submit a map with the route clearly drawn. Indicate starting point, direction and ending point. Also include plans for rest stops, first aid stations, support vehicles, etc.

Fee: Applicant must submit with completed application \$100 for small events (less than 300 participants) and \$300 for large events (300 or more participants).

By signing this application, sponsor agrees to all terms and conditions set forth in the Public Road Event Ordinance, and any special conditions listed in the Permit, if this application is accepted and a Permit is issued by the County.

Oregon Rally Group
 Name of Sponsor: _____
 Signature of Authorized Agent: [Signature]

FOR COUNTY USE ONLY:

Application Received: 9/12/25 Insurance Certificate Received: 11/7/25
 Application Fee Paid: 11/10/25 Indemnity Agreement Signed: 10/22/25
 Permit Issued: 11/10/25 Deposit Received: NA

Public Works Director or Designee: [Signature] Date: 11/10/25

COLUMBIA COUNTY
Department of Public Works



ST. HELENS, OR 97051

1054 Oregon St.
Direct (503) 397-5090
Fax (503) 397-7215

publicworks@columbiacountyor.gov

INDEMNITY AGREEMENT

In consideration of the issuance of a permit by Columbia County for the Public Road Event known as the Mike Nagle Rally Sprint to be held on November 15, 2025, the undersigned sponsor/applicant for the event hereby agrees to indemnify, defend, save, and hold harmless Columbia County, its officers, agents and employees, and other affected public agencies, their officers, agents and employees (collectively, the "indemnitees") from all suits, actions, damages or claims to which the indemnitees may be subjected of any kind or nature whatsoever resulting from, caused by, and arising out of or as a consequence of such Public Road Event and the activities permitted in connection therewith.

Sponsor/applicant shall maintain commercial general liability and property damage insurance in an amount of not less than \$2 million per occurrence to protect indemnitees. Sponsor/applicant shall provide County a certificate or certificates of insurance in the amount described above, which names County, its officers, agents, and employees, and the affected public agencies, their officers, agents and employees as additional insureds. Such certificate or certificates shall be accompanied by an additional insured endorsement.

BOARD OF COUNTY COMMISSIONERS
FOR COLUMBIA COUNTY

Oregon Rally Group

Agency

Handwritten signature of the authorized agent.

Signature of Authorized Agent

9/12/2025

Date Signed

Handwritten signature of the Board of County Commissioners Chair.

Chair

10/22/2025

Date Signed

RETURN TO:
Columbia County Public Works
1054 Oregon Street
St. Helens, Oregon 97051
Phone | 503.397.5090
Fax | 503.397.7215
Email | publicworks@columbiacountyor.gov



INSURANCE REQUIREMENTS

Before Columbia County can issue a permit for a public event, the sponsor must provide proof of public liability insurance, including property damage, covering all sponsor's activities, including volunteers, arising out of the event with a single limit policy of not less than \$2,000,000 covering all claims per occurrence.

The policy also shall bear the following endorsement:

"Without prejudice to coverage otherwise existing herein, Columbia County and all other affected public agencies, the Board of County Commissioners and the boards of other affected public agencies, their officers including the Columbia County Sheriff, agents and employees are included as additional insureds under this policy as to any claims or claims for injury to person, including death, or damage to property, resulting from or growing out of the activities of the named insured, including all volunteers, under the permit issued by the county for:

Mike Nagle Rally Sprint

Name of Event

"It is understood and agreed that this policy shall not terminate or be canceled prior to the completion of the event without first giving 30 days written notice of intention to terminate or to cancel said policy to the county.

"Notwithstanding the naming of additional insureds, the said policy shall protect each insured in the same manner as though a separate policy had been issued to each; but nothing herein shall operate to increase the insurer's liability as set forth elsewhere in the policy beyond the amount or amounts for which the insurer would have been liable if only one person or interest had been named as insured."

A Certificate of evidence of such insurance, together with the above endorsement, shall be submitted to the County and shall be subject to the approval of the County Counsel on behalf of Columbia County as to the adequacy of protection.

SEND CERTIFICATE TO:
Columbia County Public Works
1054 Oregon Street
St. Helens, Oregon 97051
Phone | 503.397.5090
Fax | 503.397.7215
Email | publicworks@columbiacountyor.gov

THIS PAGE IS TO BE MADE A PART OF INSURANCE POLICY #

GIVE THIS SHEET TO YOUR INSURANCE CARRIER.



UNITE-5

OP ID: YE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/31/2025

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 Jones Birdsong Ins Division of Specialty Program Group, LLC 600 Market St., Suite 210 Chanhassen, MN 55317 Matt Mowan 866-998-3864	CONTACT NAME: Matt Mowan PHONE (A/C, No, Ext): 866-998-3864 FAX (A/C, No): E-MAIL ADDRESS:														
INSURED United States Auto Club, Inc. and its Affiliate Members DBA USAC 4910 W 16th St Indianapolis, IN 46224	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Markel Insurance Company</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Markel Insurance Company		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Markel Insurance Company															
INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES **CERTIFICATE NUMBER:** **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 Owners & Contractor <input checked="" type="checkbox"/> E&O \$100,000 GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: Per Event	X		M1-MKM -00005505744-00	02/01/2025	02/01/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ NC PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 5,000,000 BI to Par \$ 1,000,000 COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						PER STATUTE OTH-ER E.I. EACH ACCIDENT \$ E.I. DISEASE - EA EMPLOYEE \$ E.I. DISEASE - POLICY LIMIT \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED ; RETENTION \$			M2-MKX -00005505748-00	02/01/2025	02/01/2026	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / <input type="checkbox"/> N / A If yes, describe under DESCRIPTION OF OPERATIONS below						

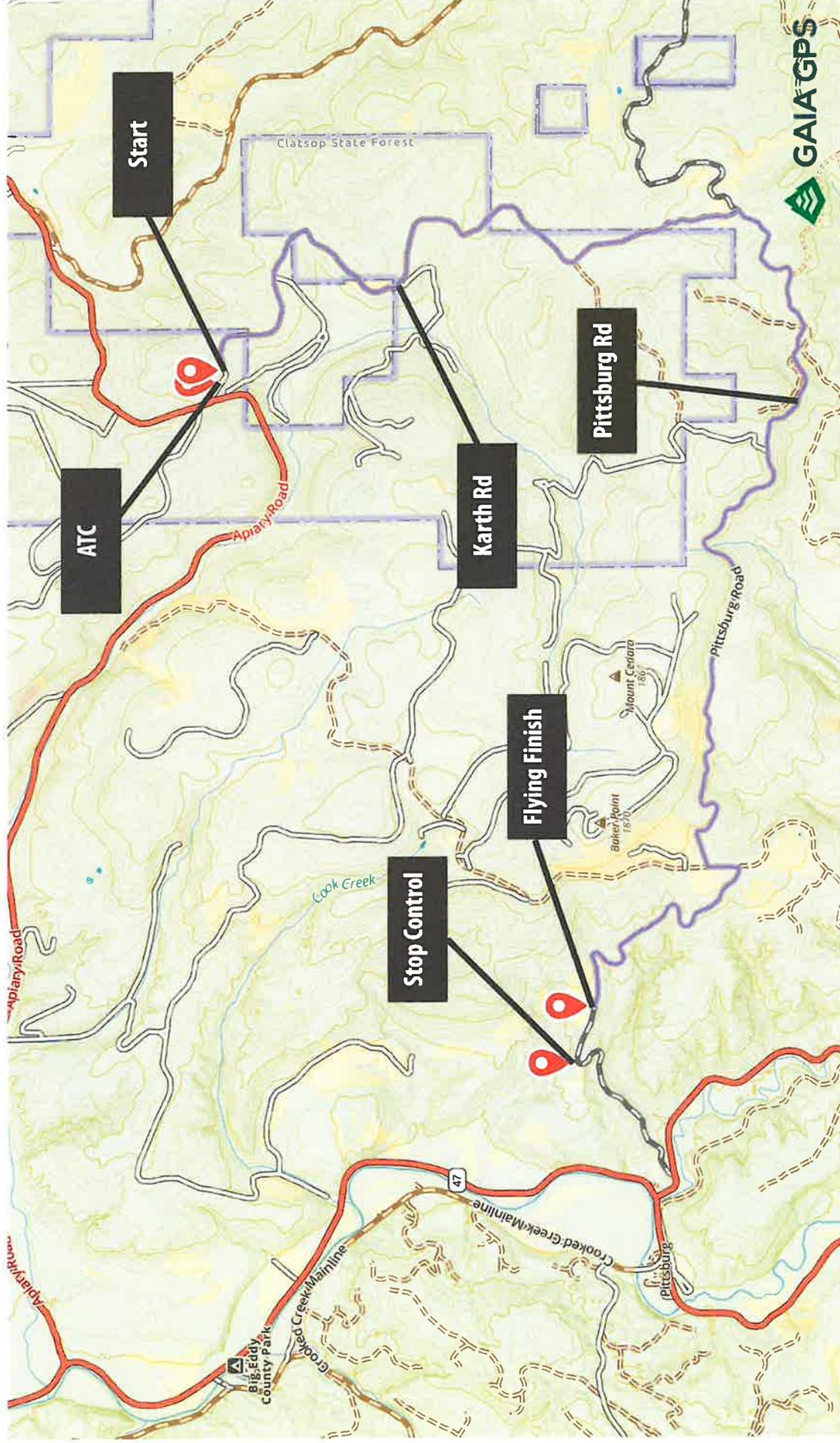
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

EVENT TYPE: USAC ARA Mike Nagle RallySprint
DATE: 11/15/2025 - Setup 11/14/2025; Teardown 11/16/2025
LOCATION: St. Helens, OR
ADDITIONAL INSURED: SEE ATTACHED ADDENDUM

CERTIFICATE HOLDER Columbia County, its officers, agents, and employees and the affected public agencies, their officers, agents and employees. 1054 Oregon Street, Saint Helens, OR 97051	CANCELLATION 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>Matthew Mowan</i>
---	--

MTC Out	St. Helens Recreation Center	1st car in	1st car out	Stage Miles	Lateness Time	Transit Miles	Transit/Service Time
							hr:min
Transit to Stage 1			13:00			21.7	1:01
Stage 1	Nehalem Divide	14:01	14:04	9.83	0:12		
Transit to Stage 2						10.94	0:40
Stage 2	Nehalem Divide	14:56	14:59	9.83	0:12		
Transit to Service						23.3	0:48
Service	St. Helens Recreation Center	15:59					0:45
	Loop miles...	75.6		19.66		55.94	
RGC							
Transit to Stage 3		16:44				21.7	0:15
Stage 3	Nehalem Divide	18:05	18:08	9.83	0:12		1:06
Transit to Stage 4						10.94	0:40
Stage 4	Nehalem Divide	19:00	19:03	9.83	0:12		
Transit to MTC In						23.3	0:48
MTC In	St. Helens Recreation Center	20:03					
	Loop miles...	75.6		19.66		55.94	
	Day total...	151.2		39.32		111.88	

Mike Nagle Rally Sprint - November 15th, 2025 Competition Length 39 miles



ATC: 45.93336, -123.05787

Start: 45.93315, -123.05655

Flying Finish: 45.90588, -123.12422

Stop: 45.90715, -123.13029



Mike Nagle RallySprint Safety Plan

Organizer: Oregon Rally Group

Summary:

This is a one day regional rally organized by the Oregon Rally Group. Estimated number of teams will be 40 each with about 4-5 people per team. Number of volunteers will be 150. The planned race date and time is 11/15/2025 from 8:00AM-7:00PM. The roads we are planning to use are in Columbia County and are Pittsburg, and Karth roads.

Operational Safety:

The race will consist of cars with one driver and one co-driver. The vehicle is prepared to the competition standards of the American Rally Association. This includes two in car fire extinguishers & in-car fire suppression systems. The land has controlled access via gates, barricades, and personnel. It is a road maintained by Columbia County Oregon. The road will be a typical gravel roads. Ham radios will be used by the marshals and officials, for a basic communication network. Communication will remain active for the entirety of the testing period. The sweep team has fire suppression procedures in place, consisting of handheld fire extinguishers and other tools.

Local Emergency services:

Closest Fire Department: Columbia River Fire & Rescue station 11 miles away

Closest Police Department: St Helens Police Department 150 S 13th St, St Helens, OR 97051 13 miles

Closest Emergency Hospital: Legacy Health St Helens (11 miles away), Legacy Emanuel Level 1 Trauma Center, 36 miles

We will also have EMTs from Columbia County on site all day as well as Mountain Wave Search & Rescue

Other Information:

Oregon Trail Rally sweep team will be present all day.

Insured: See special insurance requirements in permit application