

## CITY OF CORAL GABLES SPECIAL EVENTS APPLICATION & PERMIT

	Legal Name of the Permit Applicant (Company or Individual): Satchmo Blues Bar and Grill, Inc.d/b/a Fritz & Franz Bierhaus					Today's Date: October 31, 2012		
Applicant Information	Contact Person for this Permit Application: Peter Lerperger							
	Contact Person Phone: Contact Person Fax: Contact Pe				erson Email: erhaus@aol.com			
	Permit Applicant Address:  60 Merrick Way  City:  Coral Gable				State: FL	Zip: 33134		
					plicant Ema	ul:		
	Is the Contact Person an Office	er of the Legal Entity	/ <sub>5</sub>	YES*	× NO**			
	*If YES, attach verification from Sunbiz.org.  **If NO, go to next question							
	Is the Contact Person an Authorized Agent of Applicant?   X YES* NO							
	*If YES, Contact Person (Authorite evidencing that they are authorize							
	Name of Event Ex							
Event	Hours of Event Thurs. Set-up Time noon till midnight Fri. Set - walled Jan 21-23, 2013				Take Down Time Jan 28, 2013			
Information					Is Location Reserved?			
	A list of all staff, monitors, and volunteers assisting in this event and must be provided with this application including a sample of the badge or unique name tag that will be used at the event identifying							
	your staff, monitors and volunteers from the participants and/or general public.							
	Bierhaus staff							
					2/			
	Anticipated Attendance			LA	lmission Fee			
	800			n/	a			
	# of year's event has been in exist  14 years	same		50	st Attendand 00	ce		
	Event Description: (Provide an attachment if additional space is needed.)  local and national bands over 4 days, live music and culinary specialities							
	from Louisiana and Germany							
100								
			/#					

	Tiot all reshiples appointed with this array	on GE and E all 1								
Event	ion									
Information										
(Continued from	n/a									
page 1)										
	1									
	How will rules, regulations, terms and co		ommunicated to the participants?							
	(Provide an attachment if additional space	ce is needed.)								
	N/A									
	1 ' / ''									
	Will there be any live music or recorded music at this event? What type of music will be played?									
	(Provide an attachment if additional space	ce is needed.)								
	live and recorded music on the	nlaza from 1nm. till 11	nm and Sunday till 8 nm							
	into and rootings made on the	piaza irom ipin aii i i	pin and canady an opin							
	Norther tops and bearing Calling to									
	Number, type and location of all loud speakers and amplifying devices.  (This information can be provided on a map as an attachment to this application.)									
	(1 ms morniadon can be provided on a map as an attachment to this application.)									
	Stage with one sound board, amplifiers and 4 speakers									
	Number of Food Vendors	Vendors list provided to	the City							
	n/a	1	·							
	11/4	☐ Yes	<b>⊠</b> No							
	Food vendors have all permits/licenses.	☐ Yes	N/A □ No							
Vendor	Number of Other Vendors	Vendor list provided to the	he City							
Information	NA	□ Yes	<b>≧</b> No							
	Will there be alcohol at this event?	☑ Yes	□ No							
	If yes, has liquor license been issued?	☐ Yes	☑ No							
	Is this a charitable event?	▼ Yes	□ No							
	If yes, what is the name of the charity/or	ganization? CHARLEI	HOMES FOR CHILDREN							
	Have you completed the City application	? I Yes	□ No							
	Have you completed the State application	OS:	□ No							
	If you checked yes to any of the questions above, you must contact the City of Coral Gables Licensing. Tax. & Utility Service office at (305) 460-5607									

Legal Name of Permit Applicant (Individual or Company): Satchmo Blues Bar a. Grill, Inc					
Insurance is being submitted for an ongoing Special Event (circle one): YES or NO (circle one): YES or NO Will liquor be served at the Special Event (circle one): YES or NO					
Without limiting PERMIT APPLICANT'S indemnification of the CITY, and during the term of this Agreement, PERMIT APPLICANT shall provide and maintain at its own expense the below described programs of insurance. Such programs and evidence of insurance shall be satisfactory to the CITY and shall be primary to and not contributing with any other insurance or self-insurance program maintained by the CITY. Certificates or other evidence of coverage shall be delivered via email, fax or US mail to;					
Certificate Holder should read: City of Coral Gables					
Email address:  Email address:  Cityofcoralgables@ebix.com  Such certificates or other evidence of coverage shall be delivered prior to commencing performance under this Permit, and shall contain the express condition that the CITY is to be given written notice of at least thirty (30) days in advance of any cancellation, non-renewal or material change of any insurance policy.					
Companies are required to evidence the following Insurance to the City;					
Insurance Coverage Type   Limit of Liability Required					
All insurance policies evidenced to the City shall name the City of Coral Gables as an Additional Insured on a Primary and Non-contributory basis.					
<ul> <li>All insurance policies evidenced to the City shall contain A Waiver of Subrogation Endorsement if favor of the City of Coral Gables.</li> <li>All insurance companies providing coverage must have an A.M. Best rating of at least (A-/VI) or an equivalent rating given by a recognized rating agency.</li> </ul>					
<ol> <li>Companies evidencing insurance must provide the following documents to the City;</li> <li>This Cover Sheet with all of the questions above answered.</li> <li>A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured on a primary and non-contributory basis including a Waiver of Subrogation in favor of the City.</li> <li>A copy of the Endorsements evidencing that Additional Insured status has been provided to the City and that this coverage has been provided on a Primary &amp; Non-Contributory Basis.</li> <li>A copy of the all Waiver of Subrogation Endorsements for each line of coverage required.</li> </ol>					
Individuals are required to evidence the following Insurance to the City;					
Insurance Coverage Type Personal Liability Insurance (including host liquor liability coverage is if liquor is served)  Limit of Liability Required  Each Occurrence \$300,000					
Individuals evidencing insurance must provide the following documents to the City;  1. This Cover Sheet with all of the questions above answered.					
2. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured.					
Alternatively, Companies & Individuals may obtain liability insurance through a TULIP (Tenant User Liability Insurance Program) established by the City @ www.ebi-ins.com/tulip.  The City of Coral Gables reserves the right to require additional types of insurance coverage or higher limits of liability for any event. This determination will be made by the Risk Management Division.					

	Police	# of Officers	Date(s) R Fri&Sat	equired	Hour 7pm	rs Needed (i.e. 8 a.m5 p.m.)	
City Services		The final number of Coral Gables Regular-Off-Duty Police Officers required for an event will be determined by the Coral Gables Police Department upon the approval of all required permits for this event. Please contact the Coral Gables Police Department to obtain an Off-Regular-Duty Police Services Permit Application and Fee Schedule by calling (305) 460-5427.					
		Clearance For	m received:	X Yes		□ No	
	Fire/Medical						
	N/A		On Call	☐ On Site		Division Control	
	N/A	Contact the Co	ion Division for questions or				
	D						
	Ci. E. III	Clearance For	m received:	Yes	do voi	N/A □ No  need the restrooms opened?	
	City Facilities	Location Garage Pl	10-0	☐ Yes	do you		
	Electrical	Please list all e	lectrical remin	rements including the	e type o	of electricity (i.e. 110V),	
	Requirements	amperage need	ded, the numb	er of outlets and the	type o	f equipment needing the	
	1	electricity (i.e.	sound system	, popcorn machine, e	etc.):		
		limited.	electri	in plana			
		Dates needed	/ 22.15	purpo		Hours per day needed	
	Trash	Dates needed    Dates needed   Hours per day needed   1/24 - 1/27 20   1/2     Who will be responsible for trash pick-up during the Hours per day needed   1/2   1/2     Hours per day needed   1/2					
	1 rasn	event? Fi	event? Fritz o France N/A				
	City	event? Fitz & Franz N/R  Barricades - Their own  Contact Pat Burns to reserve equipment or receive a fee schedule at (305) 460-51					
	Equipment						
	Signs/Banners			se of City signs and/			
	3.0,	NIA	•				
100	Other		other requests	s for City services (be	e specif	īc):	
		W/R					
		1				P. 11 1. A	
	All booths, stands, signs/banners must be removed immediately following the event.  For additional information call Code Enforcement at (305) 460-5266.						
	Tot additional						
	☑ Temporary Fend	ing [	Inflatable		[Z]	Music (Recorded)	
Additional	☐ Signs/Banners		Open Flam	es		Music (Live)	
Event	□ Port-A-Johns		Fireworks			Amplifying Devices	
Features			Carnival/A	musement Rides	(	Or Loud Speakers	
	☑ Barricades	· C	l Electrical S	ervices/Generators			
(Applicants	Company Name: Fritz & Franz Bierhaus						
must check all that apply)	Contact: Peter Le			ne Number: 305-77	74-18	33	
P TALL 9							
	If any of the following apply, a separate narrative description of each additional feature shall be provided to the City with this application.						

	City	Does this event propose closure or use of any street(s)?  Yes  No					
Closure of	Streets	If yes, please fill in information below:					
Streets	Saccas	Street Name	From/To	Date(s)	Time(s)		
Or City Right-of- Way	City Sidewalks	Does this event	? No				
		If yes, please fill	in information belo	w:			
		Sidewalk	From/To	Date(s)	Time(s)		
		Location	Playa -u	111110 141110 1411	hestamant		
		Does this event	propose closure or 1	ise of any alleys? V	•		
	City Alleys		☐ Yes		ĭ No		
		If yes, please fill	in information belo	w:			
		Alley Location	From/To	Date(s)	Time(s)		
		Does this event propose closure or use of any parking lot?					
	Public	Does this event					
	Parking Lot	Yes  No					
			in information belo				
		Parking Lot Location	From/To	Date(s)	Time(s)		
		Does this event	t-of-way?				
	City Right-Of-Way		I No				
		If yes, please fill in information below:					
		Right-of-way location	From/To	Date(s)	Time(s)		
		Does this event propose closure or use of any street(s)?					
	Parade Route	☐ Yes ☐ No  If yes, please fill in information below:					
		Parade Route	From/To	Date(s)	Time(s)		
	If you checked yes to provided and a street information.	any of the above closure permit m	, a site plan showing be needed. Ple	ng all of the above ase call (305)460-5	requests must be 607 for more		

## Schedule of Fees, Performance Bonds and Exceptions

A. The schedule of fees, bonds and exemptions for special events shall be as follows: (Please circle appropriate activity fees.)

Event	Application User Fee	Performance Bond
Run, walk or bike-a-thon		
Up to 5K	\$187.00	\$500.00
Over 5K to 10K	\$215.00	\$500.00
Over IOK	\$309.00	\$500.00
Parades	\$309.00	\$500.00
Single day event, projected to than 2,500 persons	be less \$309.00	\$500.00
Multi-day event or event proj attended by 2,500 or more per		\$1,000.00
Multi-Day Event (not to exce	ed 3 days) \$1,213.00	\$1,000.00

<sup>\*</sup> All applications must be received 30 days in advance of date or a 25% additional fee will be applied.

- B. The City may waive one or more of the enumerated charges for nonprofit organizations based upon experience with previous events, size, duration, location, nature of the event and the likelihood of un-removed litter or damage to property. In the event that the nonprofit organization demonstrates that it has contracted for clean-up activities with a city-approved group, the performance bond shall be waived.
- C. Neighborhood or block parties shall be exempt from the provisions of this article so long as no commercial activity is conducted, no admission fee is charged, and members of the general public are not allowed access. Provided, however, that individuals or organizations should notify the City Manager's Office when a neighborhood party is planned so that police, fire, and other emergency service organizations will be aware of the time, place, and scope of the event.
- D. The closing fee set forth in this article shall be construed as being in addition to other fees or charges imposed for labor, materials, police or fire protection services, or any other charges for City services incidental to the assembly or street closing and other fees shall still be levied and collected in addition to the closing fee herein provided.
- E. Political or public issue events shall be exempt from the provisions of this Section. Individuals or organizations planning such an event shall notify the City Manager's Office when a political or public issue event is planned so that police, fire, and other emergency service organizations will be aware of the time, place, and scope of the event and the name or names of persons in charge.
- F. Funeral processions shall be exempt from the terms of this article.
- G. Applicant must comply with such other requirements the City may deem necessary in order to provide for traffic control, street and property maintenance, and the protection of the publics health, safety and welfare.

Event Fee \$ 606.00

Performance Bond \$ 1,000.00

<sup>\*</sup> Fees are set by the Parks and Recreation Director. The Performance Bond must be issued by a separate check and all checks must be made payable to the City of Coral Gables.

Indemnification:	1 11 C id France Bando or Public					
For and in consideration of the City of Coral Gables consent to allow the Applicant to hold a Special Event, Parade or Public Assembly (as defined by City Ordinance) within the limits of the City of Coral Gables, the Applicant agrees as follows:						
The Permit Applicant jointly and severally, hereby hold harmless, indem officers, agents, affiliates, employees, the administration and elected actions, claims, costs, expenses or demands (including, without limit resulting from death, personal injury and property damage) or expenses fees, costs and appeals, arising or resulting in whole or in part, as a result on the part of the Permit Applicant or any of the participants of the provision shall survive the termination of this contract and shall be in contract, however, terminated. This indemnification provision includes section 440.11, Florida Statutes. Nothing contained herein shall be contract, may have under the doctrine of sovereign immunity of section to	ration, suits, actions, claims, costs, expenses or demands of every kind and character, including reasonable attorney's olt of any tort, intentional action, negligent acts or omissions e Event outlined in this application. This indemnification full force and effect beyond the term or termination of this is claims made by the entitlement, if any, to immunity under extrued as a waiver of any immunity or limitation of liability					
(9)	10/31/12					
Signature of Authorized Agent or Applicant	Date					
	eneral Manager					
Print Name	Title					
60 Merrick Way, Coral Gables, FL 33134	305-774-1883					
Address City/State/Zip Code	Phone					
Subscribed and sworn to before me, this day of	NORMA-MILENA GAVARRETE Notary Public - State of Florida My Comm. Expires Apr 20, 2016 Commission # EE 159367 Bonded Through National Notary Asso					
Approval Signatures Required						
X Com	Max. of Hoolif.					
Fred Couceyro	Edward Hidak					
Parks and Recreation Director	Police Major nonding Policense					
	Olesson William					
David Martin	William Ortiz  Code Enforcement Directoring to steps of the state of t					
Fire Chief	Code Entorcement Directory					
	Was the second					
Application, performance bond(s), comprehensive site plans, even application and must be	t publications, flyers, and insurance must accompany this					
Norma-Milena G Special Events/ Film						
Parks and Recreatio						
405 University						
	y Drive					
Coral Gables, F	y Drive IL 33134					
Phone: (305) 460-5607 • Fa	y Drive TL 33134 ux: (305) 460-5639					
	y Drive TL 33134 ux: (305) 460-5639					
Phone: (305) 460-5607 • Fa E-mail: ngavarrete@co	y Drive TL 33134 ax: (305) 460-5639 gralgables.com					
Phone: (305) 460-5607 • Fa E-mail: ngavarrete(@co	y Drive FL 33134 ax: (305) 460-5639 analyables.com					
Phone: (305) 460-5607 • Fa E-mail: ngavarrete@co	y Drive L 33134 ax: (305) 460-5639 aralgables.com					

Additional Conditions or changes to application:	
Event Name: Blues fest Event Date 124-127	
Thurs - Sat - Music til 11, San. Music til event done at midnight > Them - Sat., 10pm-S	8pm
event done at midnight > Them - Sat., 10pm-S	in