

CITY OF CORAL GABLES SPECIAL EVENTS APPLICATION & PERMIT

Permit #:		

Pre CON Hernalfol	Legal Name of the Permit Ap Gables Hispanic Cultural	plicant (Company or Foundation, Inc.	Individual):		Today's 3/25/14	
Applicant Information	Contact Person for this Permit Application: Emilio Sauma, Jr.					
	Contact Person Phone: (305) 302-9750	Contact Person (305) 667-0577	7		ract Person Email: nva@yahoo.com	
	Permit Applicant Address: 4680 SW 72 Ave		City: Miami		State: FL	Zip: 33155
	Permit Applicant Phone: (305) 302-9750	Permit Applica (305) 667-057	7	Permit Applicant Email: lacanva@yahoo.com		
	Is the Contact Person an O		Entity?	YES*	NO**	
	*If YES, attach verification fr **If NO, go to next question Is the Contact Person an Ar		Applicant?	× YES*	Пи	0
	*If YES, Contact Person (Au- evidencing that they are author	horized Agent) mus	t provide the Ci	ty with a Lin	nited Powe	r of Attorn
	Name of Event Happy Hour at the Park	Fresta at H	ne Park	J 5	Event Date	line 13,200
Event	Hours of Frent 5pm-10pm		p Time -5pm	1	0pm-12an	n
Information	Location of Event Merrick Park on Biltmore Way					Reserved?
	A list of all staff, monitors, an application including a sample your staff, monitors and volumential Sauma, Jr. Lucia Zas Ariel Fernandez Leandra Lopez Annie Villiers	e of the badge or uni	que name tag th	at will be us	ed at the ev	rent identifying
	Anticipated Attendance 100 people				Admission Yes	Fees
	# of year's event has been in	existence? Prev N/A	ious Location(s)		Past Attend N/A	lance
(Event Description: (Provide Happy Hour at the Park is an or opportunity for the foundation.)	fficial Gables Hispanio Fundraising will be use	: Cultural Founda ed for the 5th Anr	tion event. The niversary Gab	oles Hispani	c Cultural Festival.
		The				
City of Coml Cable	¢		//			Page 1 of 8

Special Events Application & Permit

Revised - 09/2012

Event Information (Continued from page 1)	List all vehicles associated with this event: (if applicable) (Provide an attachment if additional space is needed.) N/A					
	How will rules, regulations, terms and conditions of the event be communicated to the participants? (Provide an attachment if additional space is needed.) Entrance booth					
	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 is needed.) Yes, there will be recorded music at the event. Music will be Latin and popular music. Number, type and location of all loud speakers and amplifying devices. (I'his information can be provided on a map as an attachment to this application.) TBD					
	Number of Food Vendors	Vendors list provided to the City				
	TBD	Yes	□ No			
Vendor	Food vendors have all permits/licenses. Number of Other Vendors	☐ Yes Vendor list provided to the City	D 140			
Information	TBD	☐ Yes	□ No			
	Will there be alcohol at this event?	ĭ Yes	□ No			
	If yes, has liquor license been issued?	□ Yes	□ No			
	Is this a charitable event? If yes, what is the name of the charity/or	rganization? Hispanie Cultural	Faurelatian			
	Have you completed the City application? (1) Yes					
	Have you completed the State application	n?	□ 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):					
Special Events Permit	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					
Cover Sheet For	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;					
Evidencing Insurance to the City of Coral Gables	Certificate Holder should read: City of Coral Gables Insurance Compliance Email address: PO Box 12010 - CE city of coral gables@ebix.com Hemet, CA 92546-8010 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) clays in advance of any cancellation, non-renewal or material change of any insurance policy.					
Insurance Requirements	Companies are required to evidence the following Insurance to the City; Insurance Coverage Type Commercial General Liability Each Occurrence \$1,000,000 Aggregate \$2,000,000 Liquor Liability (required if liquor is served) Each Occurrence \$1,000,000 Aggregate \$2,000,000					
For Companies	 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. All insurance policies evidenced to the City shall contain A Waiver of Subrogation Endorsement is favor of the City of Coral Gables. 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. 					
	Companies 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 on a primary and non-contributory basis including a Waiver of Subrogation in favor of the City. 3. 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 & Non-Contributory Basis. 4. A copy of the all Waiver of Subrogation Endorsements for each line of coverage required.					
Insurance Requirements	Individuals are required to evidence the following Insurance to the City; Insurance Coverage Type Limit of Liability Required Personal Liability Insurance Each Occurrence \$300,000 (including host liquor liability coverage is if liquor is served)					
For Individuals	 Individuals evidencing insurance must provide the following documents to the City; This Cover Sheet with all of the questions above answered. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured. 					
If Applicant Does Not Have Insurance	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.					
	City of Coral Gables Insurance Compliance Contact Information Phone: (951) 652-2883 • Fax: (770) 325-0417 • Email: cityofcoralgables@cbix.com					

	Police	# of Officers	Date(s) Requ	nired	Hours Needed (i.e. 8 a.m5 p.m.)				
City Services	z.	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.							
	Fire/Medical	Clearance Form	LI NO						
	I-ne/ Medical	ĭ On Call □ On Site							
		Contact the Coral Gables Fire Department Administration Division for question costs associated with onsite coverage at (305) 442-1600.							
		Clearance Form	received: [□ Yes	□ No				
	City Facilities	Location			do you need the restrooms opened?				
				□ Yes	□ No				
k:	Electrical Requirements	Please list all electrical requirements including the type of electricity (i.e. 110V), amperage needed, the number of outlets and the type of equipment needing the electricity (i.e. sound system, popcorn machine, etc.):							
		Dates needed			Hours per day needed				
	Trash	Who will be responsible for trash pick-up during the event? TBD -							
	City Equipment	Barricades — Contact Pat Burns to reserve equipment or receive a fee schedule at (305) 460-5173.							
	Signs/Banners	Please list any requests for use of City signs and/or location of signs:							
	Other	Please list any other requests for City services (be specific):							
	All booths, stand	is, signs/banno formation call	ers must be re Code Enforc	emoved immed ement at (305)	liately following the event. 460-5266.				
	N Temporary Fence	ing 🗆	Inflatable		Music (Recorded)				
	Signs/Banners		☐ Open Flames		☐ Music (Live)				
Additional	Port-A-Johas		☐ Fireworks		Amplifying Devices				
Event Features	N Tents or Canopi	es 🗆	- Orlo		Or Loud Speakers				
L'atures	☐ Barricades	☐ Electrical Services/Generators							
(Applicants	TPO								
must check all that apply)			Phone l	Number:					
	If any of the follo shall be provided				n of each additional feature				

	City		☐ Yes		No No		
Closure of			L (C3		Ц 110		
	Streets	If yes, please fill in information below:					
Streets		Street Name	From/To	Date(s)	Time(s)		
Or City		Does this event propose closure or use of any sidewalks?					
Right-of- Way	City Sidewalks		☐ Yes		No No		
		If yes, please fill	w:				
		Sidewalk Location	From/To	Date(s)	Time(s)		
		Does this event propose closure or use of any alleys?					
	City Alleys		□ Yes	, ,	No No		
		If yes, please fill in information below:					
		Alley Location	From/To	Date(s)	Time(s)		
		Does this event propose closure or use of any parking lot?					
	Public Parking Lot		☐ Yes		No No		
		If yes, please fill	in information belo				
		Parking Lot Location	From/To	Date(s)	Time(s)		
		Does this event propose closure or use of any City right-of-way?					
	City Right-Of-Way		☐ Yes		No 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 belo	ow:			
		Parade Route	From/To	Date(s)	Time(s)		
		1					
	If you checked yes to provided and a stree	any of the above	, a site plan showi	ng all of the above	e requests must be		

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	Λ	pplication User Fee	Performance Bond
Run, walk or bike	e-a-thon		
Up to	5K	\$187.00	\$500.00
Over :	5K to 10K	\$215.00	\$500.00
Over	0K.	\$309.00	\$500.00
Parades		\$309.00	\$500.00
Single day event, than 2,500 person	projected to be less	\$309.00	\$500.00
	or event projected to be or more persons	\$606.00	\$1,000.00
Multi-Day Event	(not to exceed 3 days)	\$1,213.00	\$1,000.00

- * 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 a 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 \$ 309

Performance Bond \$_500_

^{*} 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:	Duda a Dudia				
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, inderr officers, agents, affiliates, employees, the administration and elected actions, claims, costs, expenses or demands (including, without lim resulting from death, personal injury and property damage) or expenses fees, costs and appeals, arising or resulting in whole or in part, as a res 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 cothe City may have under the doctrint of sovereign infimumity of section	itation, suits, actions, claims, costs, expenses or demands of every kind and character, including reasonable attorney's alt of any tort, intentional action, negligent acts or omissions to 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 instrued as a waiver of any immunity or limitation of liability				
Signature of Authorized Agent or Applicant	Date				
	0 1				
Emilio Sauma, Jr.	President				
Print Name	Title				
4680 SIN 72 NE MIGMI, FL, 33	155 (305)302-9750				
Address City/State/Zip Code	Paonowy Norma-Milena Gavarrete				
acc lar	Notary Public - State of Florida				
Subscribed and sworn to before me, this day of July	20 My Comm. Expires Apr 20, 2016 Commission # EE 159367				
δU	Bonded Through National Notary Assn				
	MU A VI MANA				
	Public State of Florida at Large				
Approval Signatures Required:					
Au /					
Fred Coucerto	Edward Hudak				
Parks and Recreation Director	Police Major				
1 MERS MILLI CELEBOOT MEETO	XxxxxXXX				
M	1 00000000 1100000				
Desplanes Clik I MM	William Ortiz 1100000				
Fire Division Chief	Code Enforcement Director				
Application, performance bond(s), comprehensive site plans, ever application and must b	nt publications, flyers, and insurance must accompany this e submitted to:				
Norma-Milena C	Savarrete				
Special Events/ Film					
Parks and Recreation					
405 Universi					
Coral Gables,					
Phone: (305) 460-5607 • F	ax: (305) 460-5639				
E-mail: <u>ngavarretet@c</u>	orangabies.com				
Internal Use only: Approved	□ Yes □ No Permit #				
Date Received: Presentation Date:					
Application Fee: Performance Bond(s):	Date Insurance Approved:				
Initials: Police: Fire: Code Enforce	rement: Risk Management:				