

CITY OF CORAL GABLES SPECIAL EVENTS APPLICATION & PERMIT

Permit #:	

	Legal Name of the Permit Applica		or Indiv	ridual):		Today's D	ate:
	Satchmo Blues Bar and (
Applicant	Contact Person for this Permit Ap	pplication:					
Information	Harald Neuweg						
A CONTRACTOR OF THE PARTY OF TH	Contact Person Phone:	Contact Perso			1	erson Email:	
- 1 a 1	305-774-1883	<u>305-774-1</u>	528		<u>miamib</u>	<u>ierhaus@a</u>	201
4	Permit Applicant Address:			City:		State:	Zip:
	60 Merrick Way		إ	Coral G		FL	33134
	Permit Applicant Phone: 305-774-1883	Permit Applie 305-774-15		C:	miamibie	oplicant Ema erhaus@ac	il: ol.com
	Is the Contact Person an Office	er of the Lega	l Entity	·5	YES*	NO**	
100	*If YES, attach verification from	Sunhiz.org.					
	**If NO, go to next question	54					
	Is the Contact Person an Author	orized Agent o	of Appli	icant?	YES*	П NO	
	*If YES, Contact Person (Author	ized Agent) mu	ıst prov	ide the City	with a Lim	ited Power o	f Attorney
	evidencing that they are authorize						
	Name of Event					vent Date(s)	.,
	21st annual Coral Gables	Oktoberfest	t			Oct.1 to Oc	t.11,2015
	Hours of Event	Set	-up Tim	ie		ake Down T	
Event	noon to midnight	Se	pt.28ti	h, 2015		ct. 12, 201	
Information	Location of Event Bierhaus plaza @ 60 Meri	rick Wav				Is Location Reserved?	
	A list of all staff, monitors, and ve		ing in th	is event an	d must be r	rovided with	this
	application including a sample of						
	your staff, monitors and voluntee						, ,
		•	•		•		
	Bierhaus Staff						
- FY-31 J. 1971	Dicinaus otan						
S 1 S 1 1							
5 5 1							
					<u> </u>		
	Anticipated Attendance				A	dmission Fe	2S
-1 *S-7 **	5000 over 11 days	. 5 1	(i) T	. (1)		n/a	<u> </u>
	# of year's event has been in exis		wious L ame	ocation(s)?	P	ast Attendan same	ce
	Event Description: (Provide an at				-1-17	Same	
	Event Description. (Flovide an at	nacimiem ir au	шпопяп	space is ne	eded.)		
	Traditional German Okto	berfest with	origin	ıal Bavari	an/Austri	an live mu	sic, tradtional
	German food and Germa	an beer.					
Land Transfer	Live dance performance						
	· '						
	Live entertainment						
E							
		1.5					
1100	I.						

Posset	List all vehicles associated with this even					
Event Information	(Provide an attachment if additional space	e is needed.)				
(Continued from	n/a					
page 1)	II/a					
	77 11 1 1 1	Pri 61	- 340 m3			
	(Provide an attachment if additional space	nditions of the event be communicated to t	the participants?			
		,				
	Will there be one liste music or recorded	music at this great? What are a few size of	11 1 1			
	(Provide an attachment if additional space	music at this event? What type of music wi	ш be playedr			
	ì	,				
	Live and recorded music					
	Bavarian/Austrian folk music					
	action motion made					
	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.)					
	(This information can be provided on a map as an attachment to this application.)					
8 speakers with amplifier						
	Number of Food Vendors	Vendors list provided to the City				
	n/a	☐ Yes	□ No			
	Food vendors have all permits/licenses.	□ Yes	□ No			
Vendor	Number of Other Vendors	Vendor list provided to the City				
Information	n/a	□ Yes	□ No			
	Will there be alcohol at this event?	Yes 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? the woody foundation				
	Have you completed the City application	? Yes	□ No			
	Have you completed the State application		□ No			

THIS COVER SHEET MUST BE PROVIDED WITH ALL INSURANCE DOCUMENTS. Legal Name of Permit Applicant (Individual or Company): Insurance is being submitted for an ongoing Special Event (circle one): YES or NO Special (circle one): YES or NO Insurance is being submitted for one Special Event permit Events Will liquor be served at the Special Event (circle one): YES or NO Permit 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 Cover programs of insurance. Such programs and evidence of insurance shall be satisfactory to the CITY and Sheet 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; For Certificate Holder should read: City of Coral Gables Insurance Compliance Evidencing **Email address:** PO Box 12010 - CE Insurance cityofcoralgables@ebix.com Hemet, CA 92546-8010 to the City of Such certificates or other evidence of coverage shall be delivered prior to commencing performance under Coral Gables 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 Insurance Commercial General Liability Each Occurrence \$1,000,000 Aggregate \$2,000,000 Requirements Liquor Liability (required if liquor is served) Each Occurrence \$1,000,000 Aggregate \$2,000,000 For 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. Companies All insurance policies evidenced to the City shall contain A Waiver of Subrogation Endorsement in 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; 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 on a primary and non-contributory basis including a Waiver of Subrogation in favor of the City. 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. Individuals are required to evidence the following Insurance to the City; Insurance Coverage Type Limit of Liability Required Insurance Personal Liability Insurance Each Occurrence Requirements (including host liquor liability coverage is if liquor is served) For 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. Individuals Alternatively, Companies & Individuals may obtain liability insurance through a TULIP (Tenant User Liability Insurance Program) established by the City @ www.ebi-ins.com/tulip. If Applicant Does Not The City of Coral Gables reserves the right to require additional types of insurance coverage or higher Have limits of liability for any event. This determination will be made by the Risk Management Division. Insurance City of Coral Gables Insurance Compliance Contact Information Phone: (951) 652-2883 • Fax: (770) 325-0417 • Email: cityofcoralgables@ebix.com

	Police	# of Office	ers	Date(s) Req	uired 2 weekends	Hou 7p	rs Needed (i.e. 8 a.m5 p.m.)
City Services		The final number of Coral Gables Regular-Off-Duty Police Officers required event will be determined by the Coral Gables Police Department upon the anof all required permits for this event. Please contact the Coral Gables Police Department to obtain an Off-Regular-Duty Police Services Permit Application Fee Schedule by calling (305) 460-5427.					partment upon the approval Coral Gables Police
		Clearance F	orm r	eceived:	□ Yes		□ No
	Fire/Medical			0.0"	·		
			Coral		☐ On Site Department Admi verage at (305) 442		tion Division for questions or
					· · · · · · · · · · · · · · · · · · ·	2-1000	
	City Facilities	Clearance F Location	orm r	eceived: I	☐ Yes If using a park.	do voi	□ No u need the restrooms opened?
					□ Yes		□ No
	Electrical Requirements	amperage n	eeded,	the number		type o	of electricity (i.e. 110V), f equipment needing the
		Dates need	ed	Hours per day needed			
	Trash	Who will be responsible for trash pick-up during the event? Hours per day needed					
	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):					
		ds, signs/banners must be removed immediately following the event. Information call Code Enforcement at (305) 460-5266.					
	Temporary Fenc	ing		nflatable		4	Music (Recorded)
Additional	Signs/Banners	Ü	1 27			Music (Live)	
Event	Port-A-Johns		□F	•		Amplifying Devices	
Features	Tents or Canopi	es		☐ Carnival/Amusement Rides		(Or Loud Speakers
(A 1)	M Barricades				ices/Generators		
(Applicants must check all	Company Name:	Fritz & Frai	nz Bie		<u> </u>		
that apply)	Contact: Harald	Neuweg		Phone I	Number: <u>305-7</u>	74-18	383
	If any of the follo shall be provided					n of e	ach additional feature

		Does this event p	propose closure or	use of any street(s)				
	City		□ Yes		□ No			
Closure of	Streets	If ves, please fill	in information belo	ow:				
Streets		Street Name	From/To	Date(s)	Time(s)			
Or City		Does this event	propose closure or	use of any sidewalk	:s?			
Right-of- Way	City Sidewalks		□ No					
			n information belo	ow:				
		Sidewalk Location	From/To	Date(s)	Time(s)			
		Does this event p	propose closure or	use of any alleys?				
	City Alleys		☐ Yes	· ·	□ No			
			n information belo					
		Alley Location	From/To	Date(s)	Time(s)			
		Does this event propose closure or use of any parking lot?						
	Public Parking Lot	☐ Yes ☐ No						
		If yes, please fill in information below:						
		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						
		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	Does this event propose closure or use of any street(s)? □ Yes □ No						
			in information belo					
		Parade Route	From/To	Date(s)	Time(s)			
	If you checked yes to provided and a street information.							

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 I0K	\$309.00	\$500.00
Parades	\$309.00	\$500.00
Single day event, projected to be lethan 2,500 persons	ss \$309.00	\$500.00
Multi-day event or event projected attended by 2,500 or more persons	to be \$606.00	\$1,000.00
Multi-Day Event (not to exceed 3 o	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 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

^{*} 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:
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, indemnify and defend the City of Coral Gables, its representatives, officers, agents, affiliates, employees, the administration and elected and appointed officials from and against all liability, suits, actions, claims, costs, expenses or demands (including, without limitation, suits, actions, claims, costs, expenses or demands resulting from death, personal injury and property damage) or expenses of every kind and character, including reasonable attorney's fees, costs and appeals, arising or resulting in whole or in part, as a result of any tort, intentional action, negligent acts or omissions

officers, agents, affiliates, employees, the administration and elected and appointed officials from and against all liability, suits, actions, claims, costs, expenses or demands (including, without limitation, suits, actions, claims, costs, expenses or demands resulting from death, personal injury and property damage) or expenses of every kind and character, including reasonable attorney's fees, costs and appeals, arising or resulting in whole or in part, as a result of any tort, intentional action, negligent acts or omissions on the part of the Permit Applicant or any of the participants of the Event outlined in this application. This indemnification provision shall survive the termination of this contract and shall be in full force and effect beyond the term or termination of this contract, however, terminated. This indemnification provision includes claims made by the entitlement, if any, to immunity under section 440.11, Florida Statutes. Nothing contained herein shall be construed as a waiver of any immunity or limitation of liability the City may have under the doctrine of sovereign immunity of section §768.28, Florida Statutes.

Signature of Authorized	Agent or Applicant	Date	
Harald Neu		President	
Print Name	<u>v</u>	Title	
60 Merrick W	Vay, Coral Gables, FL 33	305-774-1883	
Address	City/State/Zip	Code Phone	
Subscribed and sworn to b	pefore me, this day o	of20	
Approval Signatures Requi	ired:	Notary Public State of Florida at Large	
Fred Coo Parks and	uceyro d Recreation Director	Brian Lawrence Police Major	
Gilbert F	Hernandez	William Ortiz	

Application, performance bond(s), comprehensive site plans, event publications, flyers, and insurance must accompany this application and must be submitted to:

Norma-Milena Gavarrete
Special Events/ Film Subdivision
Parks and Recreation Division
405 University Drive
Coral Gables, FL 33134
e: (305) 460-5607 • Fox: (305) 460-563

Phone: (305) 460-5607 • Fax: (305) 460-5639 E-mail: ngavarrete@coralgables.com

Internal Use	only:		Approved □ Yes □ No	Permit #
Date Receive	ed:	Presentation Da	ite:	
Application	Fee:	_ Performance Be	ond(s):	Date Insurance Approved:
Initials:	Police:	Fire:	Code Enforcement:	Risk Management:

nt Name:	Event Date	