



City of Coral Gables Community Recreation

SPECIAL EVENTS APPLICATION AND PERMIT

PERMIT #:

Today's Date: 5/6/26

Application guidelines and timelines:

- You must complete this application at least four weeks prior to your event (including the notarized page).
- Site map must be attached to application.
- Insurance must be attached to application.
- Applications are reviewed on a first-come, first-serve basis.
- After review, applicants will be invited to a Special Events meeting (typically the first Friday of the month), to review your application and related details with city staff.

ADA Notice: To request a modification to a policy, practice or procedure or to request an auxiliary aide or service (such as a sign language interpreter) in order to participate in a city program, activity or event, please contact the city's ADA Coordinator Raquel Elejabarrieta or the Director of the sponsoring department at least seven (7) days in advance where circumstances permit. ADA Coordinator Raquel Elejabarrieta may be reached by email: Ada@CoralGables.com, or by telephone: 305-722-8686 (voice) or 305-442-1600 (TTY/TDD).

1. PERMIT APPLICANT INFORMATION

Legal Name of the Permit Applicant (Company or Individual): Satchmo Blues Bar & Grill Inc.

Contact Person for this Permit Application: Harald Neuweg Contact Person Phone: 305-776-4048

Contact Person Email: hn25@aol.com

Applicant Address: 60 Merrick Way City: Coral Gable State: FL Zip: 33134

Applicant Phone: 305-774-1883 Applicant Email: miamibierhaus@aol.com

Is the Contact Person an Officer of the Legal Entity?

☒ YES*

☐ NO**

*If YES, attach verification from GatherGuard.

**If NO, go to next question

Is the Contact Person an Authorized Agent of Applicant?

☐ YES*

☐ NO

*If YES, Contact Person (Authorized Agent) must provide the city with a Limited Power of Attorney evidencing that they are authorized to execute legally binding contracts on behalf of the permit applicant.

2. EVENT INFORMATION

Name of Event: 2026 FIFA WorldCup Watch Party at Fritz & Franz Bierhaus

Event Date(s): July 3rd 2026 (incl. June 28th) Hours of Event: TBD

Set-Up Time: July 2nd 2026 Take Down Time: July 19th 2026 after the Final game

Location of event: Bierhaus Plaza in front of Fritz & Franz Bierhaus

Event Description: (Provide an attachment if additional space is needed.)

World Cup 2026 Soccer Watch Party

PLAZA USE ONLY 14 DAYS plus 1 DAY SET UP!

NO GAME ON OUTSIDE SCREEN AFTER 10 PM!

Anticipated Attendance: 300-500 Admission Fees: \$10- \$ 20 # of year event has been in existence: 32 Years

Previous Location(s): Same Past Attendance: Same for some games

PLAZA USE

SET UP July 1st & 2nd

Friday, July 3

- **Match 88:** Group D 2nd place **USA** vs. Group G 2nd place, 2 p.m., Dallas
- **Match 86:** Group J winner **ARG** vs. Group H 2nd place, 6 p.m., Miami
- **Match 87:** Group K winner **Colombia** vs. 3rd place D/E/I/J/L, 9:30pm Kansas City

Round of 16

Saturday, July 4

- **Match 90:** Match 73 winner vs. Match 75 winner, 1 p.m., NRG Stadium, Houston
- **Match 89:** Match 74 winner vs. Match 77 winner, 5 p.m., Philadelphia

Sunday, July 5

- **Match 91:** Match 76 winner vs. Match 78 winner, 4 p.m., New York/New Jersey
- **Match 92:** Match 79 winner vs. Match 80 winner, 8 p.m., Estadio Banorte, Mexico City

Monday, July 6

- **Match 93:** Match 83 winner vs. Match 84 winner, 3 p.m., AT&T Stadium, Dallas
- **Match 94:** Match 81 winner vs. Match 82 winner, 8 p.m., Lumen Field, Seattle

Tuesday, July 7

- **Match 95:** Match 86 winner vs. Match 88 winner, noon, MB Stadium, Atlanta
- **Match 96:** Match 85 winner vs. Match 87 winner, 4 p.m., BC Place, Vancouver

Quarterfinals

Wednesday, July 9

- **Match 97:** Match 89 winner vs. Match 90 winner, 4 p.m., Gillette Stadium, Boston

Thursday, July 10

- **Match 98:** Match 93 winner vs. Match 94 winner, 3 p.m., SoFi Stadium, Los Angeles

Friday, July 11

- **Match 99:** Match 91 winner vs. Match 92 winner, 5 p.m., Hard Rock Stadium, Miami
- **Match 100:** Match 95 winner vs. Match 96 winner, 9 p.m., Kansas City

Semifinals

Tuesday, July 14

- **Match 101:** Match 97 winner vs. Match 98 winner, 3 p.m., AT&T Stadium, Dallas

Wednesday, July 15

- **Match 102:** Match 99 winner vs. Match 100 winner, 3 p.m., MB Stadium, Atlanta

Saturday, July 18 Third-place match **No Plaza USE**

Match 103: Match 101 loser vs. Match 102 loser, 5 p.m., Hard Rock Stadium, Miami

Final

Sunday, July 19

- **Match 104:** Match 101 winner vs. Match 102 winner, 3 p.m., New York/New Jersey

2. EVENT INFORMATION (CONTINUED FROM PAGE 1)

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.

Fritz & Franz Bierhaus Employees

2 Security

List all vehicles associated with this event: (if applicable) (Provide an attachment if additional space is needed.)

n/a

How will the event rules, regulations, terms and conditions of the event be communicated to the participants?

(Provide an attachment if additional space is needed.)

Signs / BANNERS

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.)

no Live Music / recorded Music yes, as in the past 32 years

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.)

two (2) speakers on top and next to the big screen outside (as shown in scetch, " Plaza Set Up"), attached!

3. VENDOR INFORMATION

Number of Food Vendors: 1 BH

Vendors list provided to the city? ☒ Yes ☐ No

Number of Other Vendors: 0

Vendors list provided to the city? ☐ Yes ☒ No

Food vendors have all permits/licenses? ☒ Yes ☐ 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/organization? _____

4. SPECIAL EVENTS PERMIT COVER SHEET FOR EVIDENCING INSURANCE TO THE CITY OF CORAL GABLES

Legal Name of Permit Applicant (Individual or Company): Satchmo Blues Bar & Grill Inc. d/b/a Fritz & Franz Bierhaus

Insurance is being submitted for an ongoing Special Event (check one): ☐ YES or ☐ NO

Insurance is being submitted for one Special Event permit (check one): ☐ YES or ☐ NO

Will liquor be served at the Special Event (check 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;

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.

Certificate Holder should read:

**City of Coral Gables
Insurance Compliance
P.O. Box 100085 - CE
Duluth, GA 30096**

Email address: SpecialEvents@CoralGables.com

5. INSURANCE REQUIREMENTS FOR COMPANIES

Companies are required to evidence the following Insurance to the city;

<u>Insurance Coverage Type</u>	<u>Limit of Liability Required</u>
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

- 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 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;

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.

6. INSURANCE REQUIREMENTS FOR INDIVIDUALS

Individuals are required to evidence the following Insurance to the city;

<u>Insurance Coverage Type</u>	<u>Limit of Liability Required</u>
Personal Liability Insurance (including host liquor liability coverage is if liquor is served)	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.

7. 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 at www.GatherGuard.com.

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: SpecialEvents@CoralGables.com

8. CITY SERVICES

POLICE

of Officers TBD Date(s) Required TBD Hours Needed (i.e. 8 a.m. - 5 p.m.) TBD

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 emailing OffDuty@CoralGables.com

Clearance Form received: ☐ Yes ☐ No

FIRE/MEDICAL

☐ On Call ☐ On Site

Contact the Coral Gables Fire Department Administration Division for questions or costs associated with onsite coverage at 305-460-5581 or FireAdminStaff@CoralGables.com

Clearance Form received: ☐ Yes ☐ No

CITY FACILITIES

Location n/a If using a park, do you need the restrooms opened? ☐ Yes ☒ No

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 Jul 2nd to July 19th Hours per day needed TBD

TRASH

Who will be responsible for trash pick-up during the event? Fritz & Franz Bierhaus / extra Pick up

CITY EQUIPMENT

NO need, they have their own barricade company

☐ Barricades (Contact Public Works, Barricades Div. to reserve equipment: 305-733-0132 or JRivero@CoralGables.com.)

SIGNS/BANNERS

Please list any requests for use of city signs and/or location of signs: *banners for barricades only*
n/a

CITY PARKING LOT

Does this event propose the use of any parking lot? (Contact parking at Parking@CoralGables.com) ☐ YES ☒ NO

If yes, please fill in information below:

Parking Lot Location: _____

Date(s) _____ Time(s): _____

OTHER

Please list any other requests for city services (be specific):

9. CLOSURE OF STREETS OR CITY RIGHT-OF-WAY

CITY STREETS

Does this event propose closure or use of any street(s)?

☐ YES ☒ NO

If yes, please fill in information below:

Street Location: _____

From/To: _____

Date(s) _____

Time(s): _____

CITY SIDEWALKS

Does this event propose closure or use of any sidewalks?

☒ YES ☐ NO

If yes, please fill in information below:

Sidewalk Location: Plaza in front of Fritz & Franz Bierhaus

From/To: _____

Date(s) July 3rd to July 19th

Time(s): _____

CITY ALLEYS

Does this event propose closure or use of any alleys?

☐ YES ☒ NO

If yes, please fill in information below:

Alley Location: _____

From/To: _____

Date(s) _____

Time(s): _____

CITY RIGHT-OF-WAY

Does this event propose closure or use of any City right-of-way?

☐ YES ☒ NO

If yes, please fill in information below:

Right-of-way location: _____

From/To: _____

Date(s) _____

Time(s): _____

PARADE ROUTE

Does this event propose closure or use of any street(s)? (Contact parking at Parking@CoralGables.com) ☐ YES ☒ NO

If yes, please fill in information below:

Parade Route: _____

From/To: _____

Date(s) _____

Time(s): _____

If you checked yes to any of the above, a site plan showing all of the above requests must be provided and a street closure permit may be needed.

Please contact SpecialEvents@CoralGables.com for more information.

10. ADDITIONAL EVENT FEATURES (APPLICANTS MUST CHECK ALL THAT APPLY)

- | | | |
|---|--|---|
| ☒ Temporary Fencing | ☐ Inflatable Attractions | ☐ Food truck |
| ☒ Signs/Banners | ☒ Music (Recorded) | ☐ Open Flames (with floor protection) |
| ☒ Port-A-Johns | ☐ Music (Live) | ☐ Carnival/Amusement Rides |
| ☒ Tents or Canopies | ☐ Bike Valet: | ☐ Electrical Services/Generators |
| ☒ Barricades | ☐ Fireworks | ☒ Amplifying Devices Or Loud Speakers |
| ☐ Other: _____ | | |

11. ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES

A Permit Applicant is required to make its special events accessible to individuals with disabilities and to provide reasonable accommodations to enable individuals with disabilities to participate in the event in compliance with all applicable federal, state and local accessibility requirements, including the Americans With Disabilities Act (ADA).

Each special event must designate at least one (1) person as the "Accessibility Coordinator." The Accessibility Coordinator is responsible for overseeing the accessibility of the event, handling requests for reasonable accommodations related to the event, and ensuring that the event personnel are knowledgeable about the event's accessible features.

Provide the name, telephone and email contact information for the event's Accessibility Coordinator(s):

Name Harald Neuweg Telephone: 3057764048 Email: hn25@aol.com

The city's "Special Event Accessibility Checklist" brochure is intended to assist the Permit Applicant to plan the accessible features for the event; however, the checklist may not be inclusive of all accessibility requirements. It is the Permit Applicant's responsibility to comply with all applicable federal, state and local accessibility requirements, including the Americans With Disabilities Act (ADA).

**All booths, stands, signs/banners must be removed immediately following the event.
For additional information call Code Enforcement at (305) 460-5226.**

SCHEDULE OF FEES, REFUNDABLE PERFORMANCE DEPOSIT AND EXCEPTIONS

The schedule of fees, refundable performance deposit and exemptions for special events shall be as follows:

SPECIAL EVENT FEE STRUCTURE				
Event Type	Base Fee			
	(Does not include Additional fees as described further below)			
	1 Day	2 Day	3 Day	4 Day
NON-PROFIT/GOVERNMENT ORGANIZED EVENT				
Event of up to 500 persons/day	\$315	\$475	\$575	\$735
Event between 500 - 1,000 persons/day	\$420	\$735	\$1,000	\$1,200
Event of more than 1,000 persons/day	\$525	\$945	\$1,200	\$1,575
FOR-PROFIT EVENT				
Event of up to 500 persons/day	\$630	\$1,050	\$1,365	\$1,575
Event between 500 - 1,000 persons/day	\$840	\$1,470	\$1,890	\$2,205
Event between 500 - 1,000 persons/day	\$1,050	\$1,890	\$2,520	\$2,940

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

- A. 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 refundable performance deposit shall be waived **by a special event representative**.
- B. Neighborhood or block parties shall be exempt from certain 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.
- C. 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.
- D. Political or public issue events shall be exempt from certain 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.
- E. Funeral processions shall be exempt from the terms of this article.

Event Fee \$ TBD **Refundable Performance Deposit \$ _____

* Fees are determined through Fee Resolution approved by City of Coral Gables City Commission. The refundable performance deposit must be purchased online through link provided by Special Events staff.

** Refundable performance deposit is based on the scope the event; deposit will be determined by the Coral Gables Community Recreation Department.



Coral Gables Community Recreation

REFUND, TRANSFER OR CREDIT REQUEST FORM

☐ Refund ☐ Transfer ☐ Credit Date: _____ Household #: _____

PRIMARY ACCOUNT HOLDER

Name: _____

Address: _____

Contact: _____

Cell phone

Other phone

E-Mail

Name of participant: _____

Program/Event: _____ Session/Dates: _____

TRANSACTION DETAILS

Reason for refund, transfer or credit:

☐ Medical (Doctors' note required) ☐ Program canceled ☐ Not satisfied ☒ Rental/Event deposit ☐ Other

Requesting transfer: From _____ To _____ Program/Event/Session

Reason details: _____

A \$15 processing fee will be applied to all requests unless otherwise stated. Processing fees will not apply to return of rental deposits.
Credits are valid for one year from the date issued; all remaining credit values after one year will be forfeited.

Signature of patron requesting the change: _____ Date: _____

FOR OFFICE USE ONLY

Classes taken/attended: _____ Payment used: ☒ Credit card ☒ Check ☐ Cash ☐ Computer credit

Receipt# _____ Amount paid: _____ Refund processing fee: _____ Total due: _____

Cashier processing request (Print) _____

Facility supervisor signature _____

Director or designee signature _____

COMMENTS

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Action/Status	Date	Staff Init.
Paperwork received by staff		
Attendance verified by instructor		
Customer notified and paperwork sent to finance for check processing		

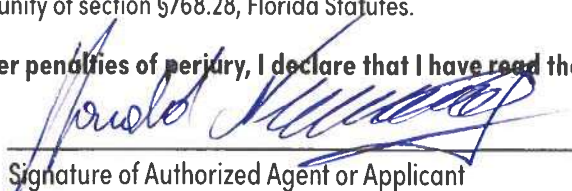
☒ Approved
☒ Not Approved

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 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.

Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.


Signature of Authorized Agent or Applicant

11/19/25
Date

HARALD NEUWEG

PRESIDENT

Print Name

Title

2425 SW 27th AVE

MIAMI 33145

305-776-4048

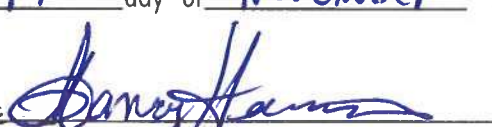
Address

City/State/Zip Code

Phone

Subscribed and sworn to before me, this 19th day of November 2025.




Notary Public State of Florida at Large

Approval Signatures Required:


Print Name: Scoveyro

Community Recreation Director


Print Name: Nicholas Kanarev

Fire Chief/Capt.


Print Name: JOHN P. LUNA

Police Major/Chief


Print Name: MS Refuel

Code Enforcement Director

Supervisor
NOT NEEDED

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

Special Projects Supervisor
Coral Gables Community Recreation/Special Events
405 University Drive; Coral Gables, FL 33134
E-mail: SpecialEvents@CoralGables.com
305-460-5607

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 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.

Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

Signature of Authorized Agent or Applicant

Date

11/19/25

HARALD NEUWEG

PRESIDENT

Print Name

Title

2425 SW 27th AVE

MIAMI 33145

305-776-4048

Address

City/State/Zip Code

Phone

Subscribed and sworn to before me, this

19th

day of

November

20 25



Notary Public State of Florida at Large

Approval Signatures Required:

Print Name:

Community Recreation Director

Print Name:

Police Major/Chief

Print Name:

Fire Chief/Capt.

Print Name:

Code Enforcement Director

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

Special Projects Supervisor
Coral Gables Community Recreation/Special Events
405 University Drive; Coral Gables, FL 33134
E-mail: SpecialEvents@CoralGables.com
305-460-5607

Merrick Way

Aragon Ave.

EXIT

ELECTR. Panel

Beer
Bar

Beer
Bar

Soccer
Locker

Villiger
Cigars

Wine
Bar

Sponsor

F & B
Ticket
sales

ATM's

Entrance

Entrance

Celsius
Sponsor

Beer

Food

Food

High Top Tables

World Cup 2026 Plaza Set Up

Bierhaus Outdoor-

Seating area

Entrance
Bierhaus



17 SF

PARKING GARAGE ENTRANCE



OPEN

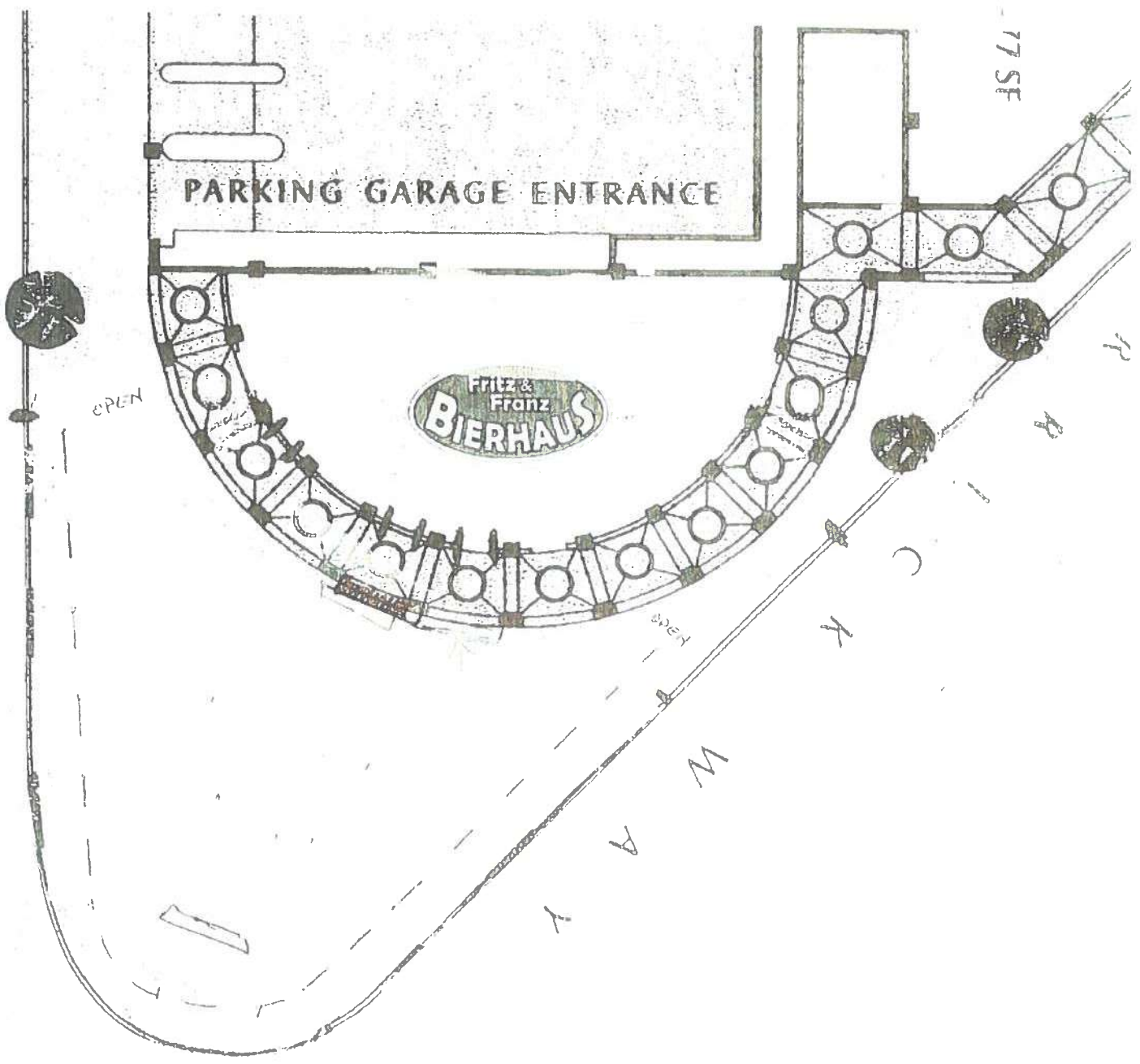
OPEN

K

W

A

Y





Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

DIV OF ALCOHOLIC BEVERAGES & TOBACCO

THE RETAILER OF ALCOHOLIC BEVERAGES HEREIN IS LICENSED UNDER THE
PROVISIONS OF CHAPTER 561, FLORIDA STATUTES
SERIES: 4COP TYPE: SFS DUAL LICENSE
CONSUMPTION ON PREMISES ONLY

SATCHMO BLUES BAR AND GRILL INC

FRITZ & FRANZ BIERHAUS
60 MERRICK WAY
CORAL GABLES FL 33134

LICENSE NUMBER: BEV2323374

EXPIRATION DATE: MARCH 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 04/01/2025

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



ADDITIONAL CONDITIONS OR CHANGES TO APPLICATION:

Event Name: 2026 FIFA WorldCup Watch Party at Fritz & Franz Bierhaus

Event Date June 11th to July 19th 2026

Additional conditions or requirements requested by committee: _____

barage - time

OFFICE USE ONLY

Date received: _____

Date Permitted: _____

Have business owners and/or residences been notified? ☐ Yes ☐ No

Reviewed by: ☐ Director ☐ Police ☐ Fire ☐ Code Enforcement

DEPOSIT FEE: \$ _____

SPECIAL EVENT FEE: \$ _____

TOTAL FEES: \$

Type of permit:

- ☐ Non-profit/government event
- ☐ For-profit/government event
- ☐ City-hosted event.

Supervisor Approval _____

Date _____

APPLICATION COMPLETION CHECKLIST:

- ☐ Special Event Permit
- ☐ Certificate of Insurance (COI)
- ☐ Site Diagram (Showing Event and Parking Areas)
- ☐ Neighborhood Notification Letter
- ☐ Commercial Notification Letter



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/26/2025

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
Avante Insurance Group
8700 West Flagler Street
Suite 402
Miami FL 33174

CONTACT
NAME: Joyce Corp
PHONE (A/C, No, Ext): (305) 221-2400
E-MAIL: jcorp@avanteins.com
ADDRESS: (305) 221-2411

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Trisura Specialty Insurance Company	16188
INSURER B: RetailFirst Insurance Company	10700
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
Satchmo Blues Bar & Grill, Inc. dba
Fritz and Franz Bierhaus
60 Merrick Way
Coral Gables FL 33134-5319

COVERAGES

CERTIFICATE NUMBER: CL2562617512

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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER ☒ POLICY ☐ PRO-JECT ☐ LOC ☒ OTHER Liquor Liability	Y		OSCPP100239301	06/19/2025	06/19/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$1,000,000 Each \$ \$2,000,000 Agg COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	☐ AUTOMOBILE LIABILITY ☐ ANY AUTO OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS NON-OWNED AUTOS ONLY	Y		OSCPP100239301	06/19/2025	06/19/2026	EACH OCCURRENCE \$ AGGREGATE \$ PER STATUTE ☒ OTH-ER ☐
	☐ UMBRELLA LIAB ☐ EXCESS LIAB DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ PER STATUTE ☒ OTH-ER ☐
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	52062720	05/25/2025	05/25/2026	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)

Waiver of subrogation and Primary & Non-Contributory is hereby granted (see endt).

City of Coral Gables listed as additional insured respects General Liability and Auto.

30 Days notice of cancellation applies for all except 10 days notice for non-payment.

CERTIFICATE HOLDER

City of Coral Gables
P.O. Box 100085 - CE

Duluth

GA 30096

CANCELLATION

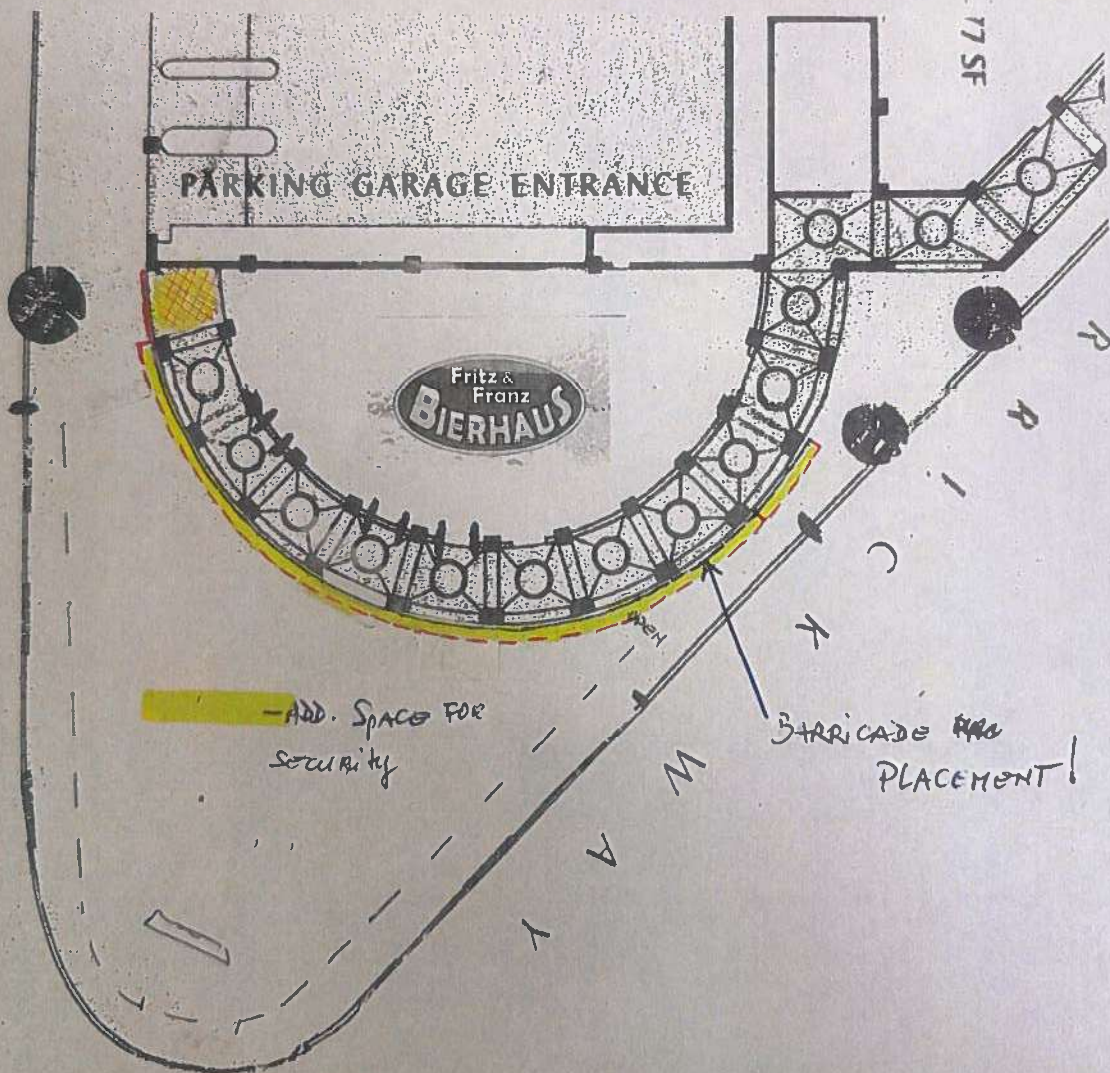
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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----- BARRICADES with GFT easement!

SATELITE BEER BAR setup!



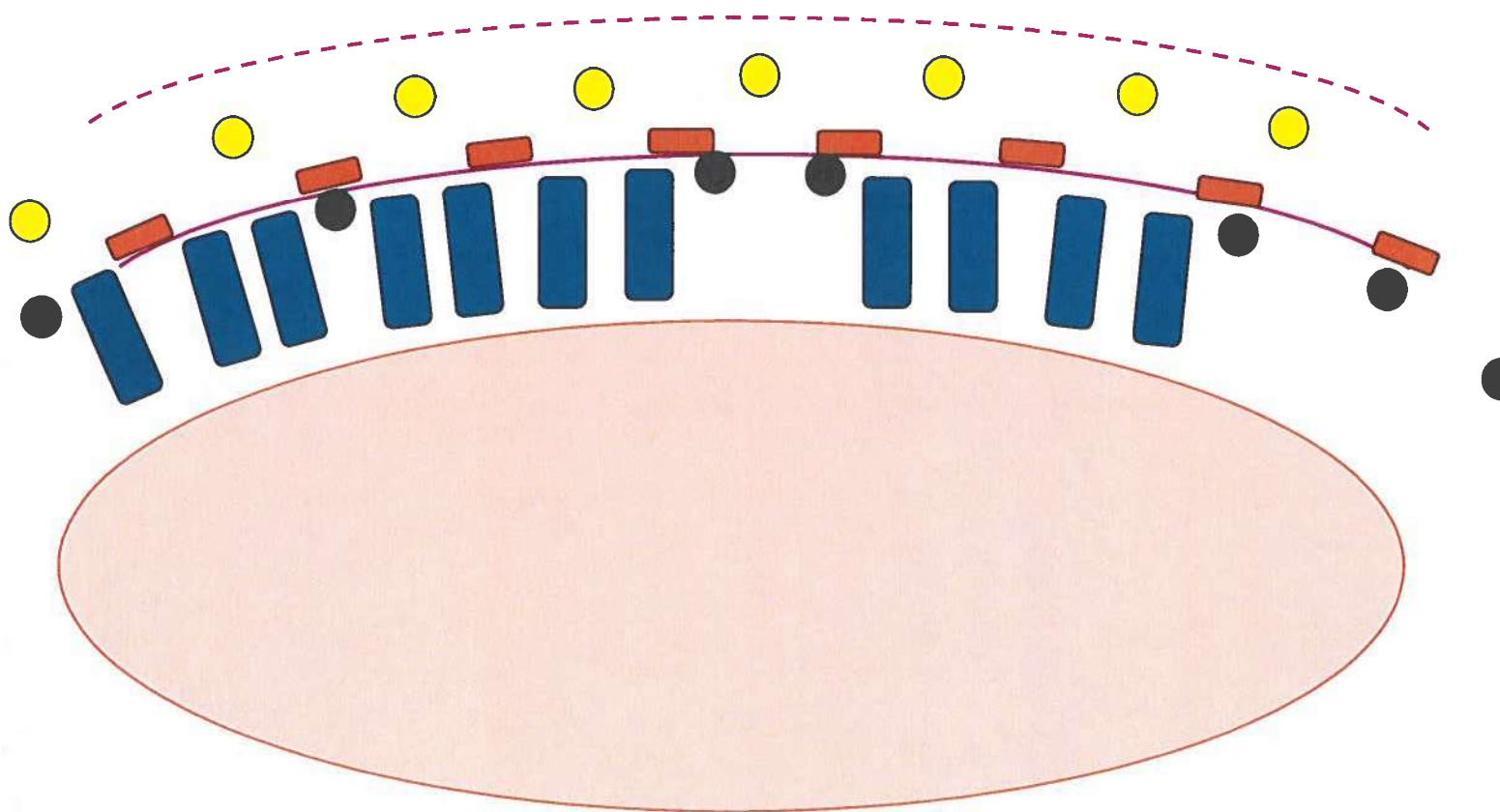
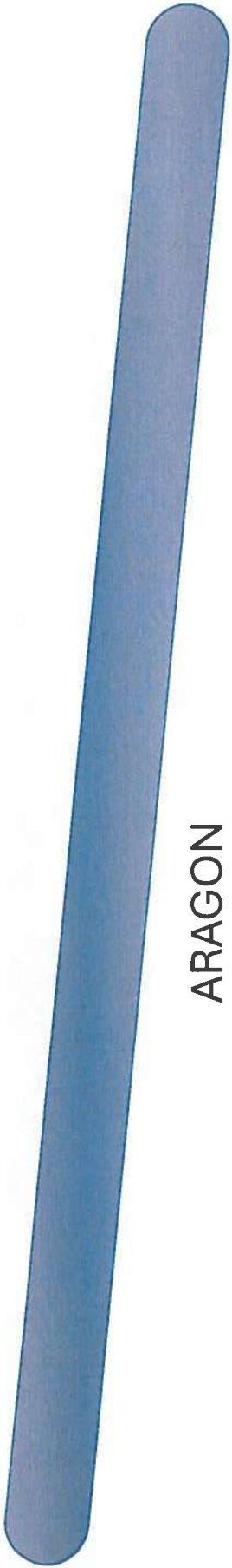
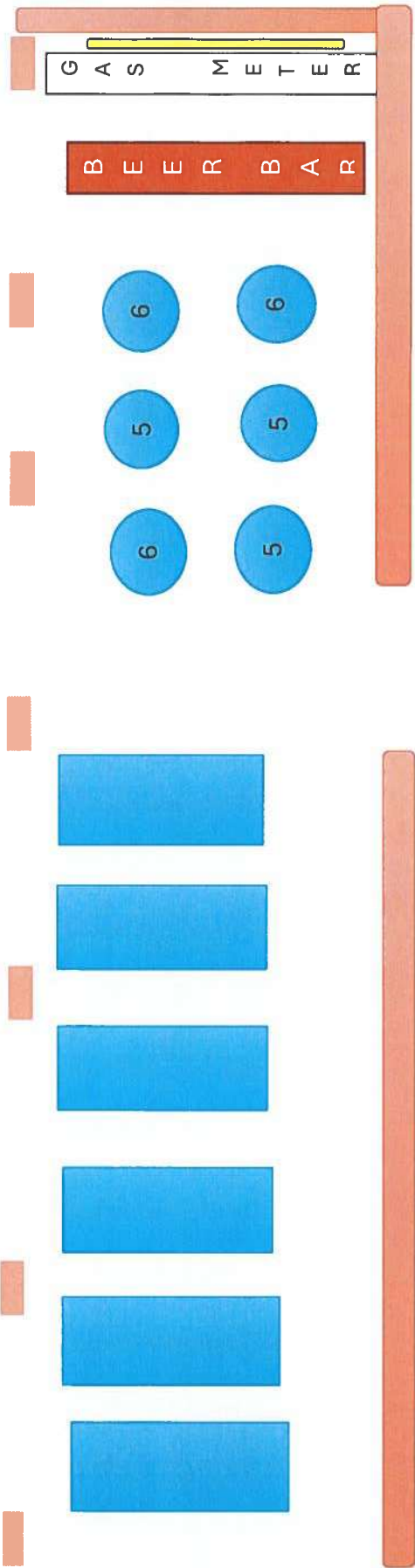


EXHIBIT # 1



ARAGON





Public Viewing events on the Plaza

Permission to set up plaza on July 1st & 2nd of July

Run World Cup Public Viewing event on the Plaza from July 3rd to July 19th

Limit Public viewing events to 11 Days

No public viewing JULY 8, 12, 13, 16, 17 & 18th

Coral Gables Off Duty Police protection every time we have a public viewing event on the plaza

2 additional Security personal hired by Fritz & Franz Bierhaus for big games

Additional garbage pick-up from 2 times a week to 4 times a week

Clean up of Plaza after every game at the end of the night!

Sounds on Plaza speakers to be kept at normal standard sound but with "FIFA acknowledgement"

No public viewing on the plaza after 10pm except when games run to overtime!

No Food or alcoholic beverage sales after 10pm on the Plaza

Limit amount of 10x10 tents to 6 (down from 11)

Permission to set up red Umbrella on the plaza during public viewing events (Like during covid)

No Public Viewing events on the Plaza

Inside Restaurant (Bierhaus) and outside covered area used only

Permission to extend the outside covered area by 6 feet outworth (barricades)

Permission to set up small Beer Bar at the Corner of Bierhaus/Aragon inside Covered area!

Covered area is part of F & F Bierhaus daily business operations

F & F Bierhaus Covered Area starts at Gas meters and ends at F & F Bierhaus Kitchen entrance

Permission to place WELCOME BANNER on Building outside F & F Bierhaus