

## 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 Bierha				Today's Date: us May 1st, 2014	
Applicant	Contact Person for this Permit Ap				11	
nformation	Peter Lerperger					
	Contact Person Phone:	Contact Person Fax:			erson Email:	
	305-774-1883	305-774-1528		miamib	erhaus@a	aol.com
	Permit Applicant Address: 60 Merrick Way		City: Coral G		State: FL	Zip: 33134
	Permit Applicant Phone:	Permit Applicant Fa	x:		plicant Ema	ч:
	Is the Contact Person an Office	r of the Legal Entity	y? []	YES* [	*] NO**	
	*If YES, attach verification from S	Sunbiz.org.				
	**If NO, go to next question	1 1 A C A I	1	YES*	INO	
	Is the Contact Person an Author	rized Agent of Appl	icant:	[X] 1129.	1140	
	WENTER CO. I. B	and Acoust and	ride the City	r with a Lim	ited Power r	f Attorney
	*If YES, Contact Person (Authorite evidencing that they are authorized	zeo Agenti must pro	nde die City	acts on beh	alf of the per	mic applica
		a to execute regard in	THE COME	F	Event Date(s)	
	Name of Event	and out event			June 6, 2014	
	Y100 Saved by the Bell Sch					
	Hours of Event Set-up Time 4 pm till 10 pm Set-up Time June 6, 2014			June 7, 2014		
Event	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Location Re	
Information	Location of Event Plaza @ 60 Merrick Way				10	
	A list of all staff, monitors, and vo	dunteers assisting in t	his event an	d must be t	rovided with	this.
	application including a sample of	the badge or unique of	ame tag tha	t will be use	ed at the ever	it identifyir
	your staff, monitors and volunteer	s from the participan	ts and/or g	eneral publ	ic.	
	Bierhaus staff					
	Bierhaus staff				draission Fa	ac ac
	Bierhaus staff  Anticipated Attendance				admission Fe	es
	Bierhaus staff  Anticipated Attendance 500-800		(a)	1	1/a	
	Anticipated Attendance 500-800 # of year's event has been in exist		ocation(s)	r P	n/a 'ast Attendar	
	Anticipated Attendance 500-800 # of year's event has been in exis	Hard Ro	ock	r P	1/a	
	Anticipated Attendance 500-800 # of year's event has been in exis 4 Event Description: (Provide an at	Hard Ro	ock I space is ne	reded.)	n/a last Attendar 500	
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	Anticipated Attendance 500-800 # of year's event has been in exis 4 Event Description: (Provide an at	Hard Ro	ock I space is ne	reded.)	n/a last Attendar 500	

Event Information (Continued from	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.)					
page 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 is needed.)  recorded music, DJ from Y100					
	Number, type and location of all loud spe (This information can be provided on a r DJ with 3 speakers, 1 amplifier	eakers and amplifying devices.  nap as an attachment to this application.)				
		Vendors list provided to the City				
	Number of Food Vendors	☐ Yes	□ No			
		☐ Yes	□ No			
Vendor	Food vendors have all permits/licenses.  Number of Other Vendors	Vendor list provided to the City				
Information	Trainible of Guide Vehicles	☐ 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?  If yes, what is the name of the charity/or	ganization? (BRANCHES	□ No			
	Have you completed the City application	Δ	□ No			
	Have you completed the State application?					
	If you checked yes to any of the questions above, you must contact the City of Coral					
	Gables Licensing, Tax, & Utility S	ervice office at (305) 460-5607.	•			

•THIS COVE	ER SHEET MUST BE PROVIDED WITH ALL INSURANCE DOCUMENTS.				
	Legal Name of Permit Applicant (Individual or Company):				
Special Events Permit Cover	Insurance is being submitted for an ongoing Special Event (circle one): YES or NO Insurance is being submitted for one Special Event permit (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				
Sheet	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:  Insurance Compliance  Email address: PO Box 12010 - CE  city of coral gables  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) days 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 Liquor Liability (required if liquor is served)  Each Occurrence \$1,000,000 Aggregate \$2,000,000  Aggregate \$2,000,000				
For Companies	<ul> <li>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.</li> <li>All insurance policies evidenced to the City shall contain A Waiver of Subrogation Endorsement in 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>				
Insutance Requirements	Individuals are required to evidence the following Insurance to the City;  Insurance Coverage Type  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;  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.				
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: envolcoralgables@ebix.com				

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	Police	# of Officers	Date(s)	Requ 6, 20	red <b>14</b>	Hour 5-9	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 Fo	rm received:		Yes		□ No
	Fire/Medical	Ø On Call □ On Site  Contact the Coral Gables Fire Department Administration Division for questions of					District for guestions of
		costs associated with onsite coverage at (305) 442-1600.					ton Division for questions of
		Clearance Fo	rm received:		Yes		□ No
	City Facilities	Location				do you	need the restrooms opened?
					☐ Yes		□ No
	Electrical Requirements	amperage ne	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	d				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):					
	All bootbs, stand For additional in	ls, signs/bar aformation c	nners must all Code E	be re	moved immed ement at (305)	liately 460-5	following the event. 266.
	☐ Temporary Fenc	ing	☐ Inflatable	<u>.</u>			Music (Recorded)
A date - a	☐ Signs/Banners		□ Open Fla	unes			Music (Live)
Additional Event	☐ Port-A-Johns		☐ Firework	s			Amplifying Devices
Features	Tents or Canopi	es	☐ Carnival	/Amu	sement Rides	'	Or Loud Speakers
A. WILLIAM	□ Barricades		□ Electrica	al Servi	ces/Generators		
(Applicants	Company Name: F	ritz & Franz	Bierhaus				
must check all that apply)	Contact: Peter Le		Pl	none N	lumber: 305-77	74-18	83
	If any of the follo shall be provided	wing apply, to the City	a separate with this ap	narra plica	tive descriptio tion	n of e	ach additional feature

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		Does this event	propose closure or	use of any street(s)			
	City		Yes		■ No		
Closure of	Streets	If yes, please fill in information below:					
Streets		Street Name	From/To	Dutc(s)	Time(s)		
Or City Right-of-	City	Does this event propose closure or use of any sidewalks?  Yes  No					
Way	Sidewalks						
		If yes, please fill in information below:					
		Sidewalk Location	From/To	Date(s)	Time(s)		
		Does this event	propose closure or	use of any alleys?			
	City Alleys		☐ Yes		△ 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		
			in information belo	ow!			
		Parking Lot Location	Fram/To	Date(s)	Time(s)		
		Does this event	nt-of-way?				
	City Right-Of-Way		■ No				
	l lagare or way	If yes, please fill	ease fill in information below:				
		Right-of-way location	From/To	Date(s)	Time(s)		
		Does this event	?				
	Parade Route		I No				
		If yes, please fill	in information belo	ow:			
		Parade Route	From/To	Date(s)	'   Time(s)		
	If you checked yes to provided and a stree	any of the above	, a site plan show	ing all of the abov	re 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	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 than 2,500 persons	be less \$309.00	\$500.00
Multi-day event or event proje attended by 2,500 or more per		\$1,000.00
Multi-Day Event (not to excee	ed 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 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 \$ 309.00

Performance Bond \$ 500.00

\* 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 of Assembly (as defined by City Ordinance) within the	nsent to allow the Applicant to hold a Special Event, Parade or Public limits of the City of Coral Gables, the Applicant agrees as follows:
officers, agents, affiliates, employees, the administration actions, claims, costs, expenses or demands (including resulting from death, personal injury and property damage fees, costs and appeals, arising or resulting in whole or in on the part of the Permit Applicant or any of the part provision shall survive the termination of this contract are contract, however, terminated. This indemnification pro-	emless, indemnify and defend the City of Coral Gables, its representatives, and elected and appointed officials from and against all liability, suits, without limitation, suits, actions, claims, costs, expenses or demands of or expenses of every kind and character, including reasonable attorney's part, as a result of any tort, intentional action, negligent acts or omissions cipants of the Event outlined in this application. This indemnification id shall be in full force and effect beyond the term or termination of this rision includes claims made by the entitlement, if any, to immunity under in shall be construed as a waiver of any immunity or limitation of liability the of section \$768.28, Florida Statutes.
	05/01/14
Signature of Authorized Agendor Applicant	Date
Peter Lerperger	General Manager
Print Name	Title
60 Merrick Way, Coral Gables, FL 33	Notary Public - State of Florida
Address City/State/Z	
Subscribed and sworn to before me, this day	of
,	
	love y a received
DM 56 WeV 1 140	Notary Public State of Florida at Large
Approval Signature Required:	
MA	
Fred Couceyro	Edward Hudak
Parks and Recreation Director	Poller Major
	William Ortiz 11001
14	- Tronse
Beautimes 612 HANAM.	Code Enforcement Director
Fire Division Chief	Code Emolectical Director
Application, performance bond(s), comprehensive sit	e plans, event publications, flyers, and insurance must accompany this and must be submitted to:
Nor.	na-Milena Gavarrete
Special I	vents/ Film Subdivision
	nd Recreation Division
	05 University Drive
	tal Gables, FL 33134
Phone: (305) 4	60-5607 • Fax: (305) 460-5639 avarrete(@coralgables.com
	at arterene extragalises acom
	Th. :: 44
Internal Use only:	Approved   Yes   No Permit #
Date Received: Presentation Date	
Initials: Police: Fire:	Code Enforcement: Risk Management:

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Additional Conditions or changes to application:		
vent Name:	Event Date	