CITY OF CORAL GABLES
SPECIAL EVENTS APPLICATION & PERMIT

Permit #: _____

The City Beautiful ™

Applicant Information	**Name of Organization/Company** JOHN MARTINS **Date of Request**
	Address 253 MIRACLE MILE **City** CORAL GABLES **State** FL **Zip** 33134
	Event Representative MARTIN LYNCH
	Daytime Phone 3/445.3777 **Fax Number** 3/445.6927 **Email Address** Martin @ jhnmartins.com

Event Information	**Name of Event** ST PATRICKS DAY FESTIVAL **Event Date(s)** 3/17/2010
	Hours of Event 5PM — MIDNIGHT **Set-up Time** 10·00AM 3/17 **Take Down Time** 1·00AM 3/18
	Location of Event SALZEDO & ARAGON **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.

Anticipated Attendance 3000 – 5000	**Admission Fees** NONE
# of year's event has been in existence? 16 YRS	**Previous Location(s)?** SAME	**Past Attendance** SAME

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

AN EVENING OF MUSICAL ENTERTAINMENT WITH FOOD & BEVERAGE

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

How will rules, regulations, terms and conditions of the event be communicated to the participants?
(Provide an attachment if additional space is needed.)

BY STAFF AND SIGNAGE

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.)

IRISH & ROCK & ROLL

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 COVER SHEET MUST BE PROVIDED WITH ALL INSURANCE DOCUMENTS♦

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<tr><td rowspan="2">

Special Events Permit

Cover Sheet

For

Evidencing Insurance to the City of Coral Gables

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Legal Name of Permit Applicant (Individual or Company): _JohnMartins_

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 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**
	Insurance Compliance
Email address:	**PO Box 12010 - CE**
cityofcoralgables@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) days in advance of any cancellation, non-renewal or material change of any insurance policy.

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Insurance Requirements For Companies

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

Insurance Coverage Type	Limit of Liability Required			
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.

Insurance Requirements For Individuals

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)		

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: cityofcoralgables@ebix.com

Vendor Information	Number of Food Vendors NONE JMs Only	Vendors list provided to the City ☐ Yes	☐ No
	Food vendors have all permits/licenses.	☐ Yes	☐ No
	Number of Other Vendors	Vendor list provided to the City ☐ 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/organization?	☑ Yes Coral Gables Rotary	☐ No
	Have you completed the City application?	☐ Yes	☐ No
	Have you completed the State application?	☐ Yes	☐ 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.

City Services	Police	# of Officers	Date(s) Required		Hours Needed (i.e. 8 a.m.-5 p.m.)
		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 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) 442-1600.			
		Clearance Form received: ☐ Yes			☐ No
	City Facilities	Location	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			Hours per day needed
	Trash	Who will be responsible for trash pick-up during the event? *S. P M*			Hours per day needed *8*
	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, stands, signs/banners must be removed immediately following the event. For additional information call Code Enforcement at (305) 460-5266.

Additional Event Features

(Applicants must check all that apply)

- ☑ Temporary Fencing
- ☑ Signs/Banners
- ☑ Port-A-Johns
- ☑ Tents or Canopies
- ☑ Barricades

- ☐ Inflatable
- ☐ Open Flames
- ☐ Fireworks
- ☐ Carnival/Amusement Rides
- ☑ Electrical Services/Generators

- ☑ Music (Recorded)
- ☑ Music (Live)
- ☑ Amplifying Devices Or Loud Speakers

Company Name: *FLORIDA TEAM GOLF*

Contact: *JASON VEGNER*   Phone Number: *786-368-5494*

If any of the following apply, a separate narrative description of each additional feature shall be provided to the City with this application.

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 Name	From/To	Date(s)	Time(s)
SALZEDO	MIRACLE/GIRAUA	3/17/2010	10 AM

City Sidewalks	**Does this event propose closure or use of any sidewalks?** ☑ Yes ☐ No

If yes, please fill in information below:			
Sidewalk Location	From/To	Date(s)	Time(s)
ARAGON	Car Park to corner.	3/17/2010	10 M

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)
200 BLK	SALZEDO/Ponce	3/17	12 NOON

Public Parking Lot	**Does this event propose closure or use of any parking lot?** ☐ Yes ☑ No

If yes, please fill in information below:			
Parking Lot 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)?** ☐ 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 call (305)460-5607 for more 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	$178.00	$500.00
Over 5K to 10K	$205.00	$500.00
Over l0K	$294.00	$500.00
Parades	$294.00	$500.00
Single day event, projected to be less than 2,500 persons	$294.00	$500.00
Multi-day event or event projected to be attended by 2,500 or more persons	$577.00	$1,000.00
For-profit event	$1,155.00	$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 $_____   **Performance Bond $_____**

* 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 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 2/1/2010

Print Name MARTIN LYNCH
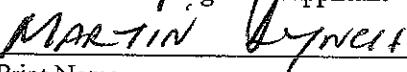
Title OWNER FAL 2520-560-56-204-0

Address _____ City/State/Zip Code _____ Phone _____

State of Florida, County Miami-Dade

Subscribed and sworn to before me, this ___ day of FEB 20 10.

Notary Public State of Florida at Large
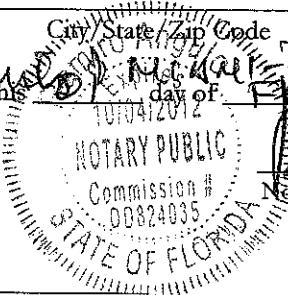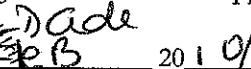
Approval Signatures Required:

_____
Fred Couceyro
Parks and Recreation Director

_____
Scott Masington
Police Mayor

_____
Walter Reed
Fire Chief

_____
Eli Gutierrez
Code Enforcement Officer

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 Division
Parks and Recreation Department
405 University Drive
Coral Gables, FL 33134
Phone: (305) 460-5607 • Fax: (305) 460-5639
E-mail: ngavarrete@coralgables.com

Internal Use only:

Approved ☐ Yes ☐ No   Permit # _____

Date Received: _____   Presentation Date: _____

Application Fee: _____   Performance Bond(s): _____   Date Insurance Approved: _____

Initials: Police: _____   Fire: _____   Code Enforcement: _____   Risk Management: _____