

CITY OF CORAL GABLES SPECIAL EVENTS APPLICATION & PERMIT

	Legal Name of the Permit Applicant (Company or Individual Unlimited Sales Group Inc.			vidual):		Today's 1/15/14	
Applicant Information	Contact Person for this Permit Mario R. Pi	ontact Person for this Permit Application: ario R. Pi					
	Contact Person Phone: 786-558-5234	0.00	Contact Person Fax: Contact Person Email: 305-425-7626 mrp2001@bellsouth.net				
				City: Miami		State:	7.ip. 33143
	Pennit Applicant Phone:	Permit	Applicant Fax	Cl Cl	Permit	Applicant En	nail
	Is the Contact Person an Off			? X	YES*	□ NO**	
	*If YES, attach verification from **If NO, go to next question						
	Is the Contact Person an Aut *If YES, Contact Person (Auth				☐ YES	_	Ban all
21 6 7	evidencing that they are authori	zed to execu	ute legally bin	ding cont	racts on b	chalf of the p	crinit amplicant
	Coral Bables Fine Food Fest	Indo.	Festiva	4 1	estiti)	Event Date(The second secon
Event	Hours of Event // Frm Sct-up Time Saturday 12-10PM Sunday 10 to PM 8 hours roughly			c	Lunt	Take Down	Tune .
Event	Saturday 12-19PM Sunday 1	td PM	8 hours rot	ugniy PV	m. h.	4 hours roug	July
	Saturday 12-49PM Sünday 1 Location of Event Giralda east of LeJuene and west A list of all smff, monitors, and application including a sample of	of Ponce volunteers : of the badge	assisting in the	is event ai	it will be i	Is Location I	Reserved?
	Saturday 12-49PM Sünday 1 Location of Event Giralda east of Leduene and west A list of all smff, monitors, and application including a sample of your staff, monitors and volunte	of Ponce volunteers : of the badge	assisting in the	is event ai	it will be i	Is Location I no provided with series at the even blic.	Reserved? th this ent identifying
	Saturday 12-49PM Sünday 1 Location of Event Giralda east of Leduene and west A list of all smff, monitors, and application including a sample of your staff, monitors and volunte Anticipated Attendance 3 to 6K per day	of Ponce volunteers : of the badge rers from th	assisting in the or unique na ne participants	is event ar me tag this s and/pr	it will be i	Is Location I no provided with series at the even blic.	Reserved? th this ent identifying
Event Information	Saturday 12-49PM Sünday 1 Location of Event Giralda east of Leduene and west A list of all smff, monitors, and application including a sample of your staff, monitors and volunte	of Ponce volunteers of the badge rers from th	Previous Lo	is event ai me tag this s and/or p	it will be i	Is Location I no provided with series at the even blic.	th this ent identifying

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Event Information (Continued from page 1)	List all vehicles associated with this eve (l³rovide an attachment if additional sp TBD	:nt: (if applicable) nce is needed.)		
	How will rules, regulations, terms and of (Provide an attachment if additional sport Via a signed contact and an exhibitor man	ace is needed t	be communicated to the	participants?
	Will there be any live music or recorded (Provide an attachment if additional spa	I music at this event?	What type of music will b	e played?
	Number, type and location of all loud sp (flus information can be provided on a	peakers and amplifying map as an attachment	devices. to this application.)	
	Number of Food Vendors 50 to 75	Vendors list provide	में to the City	
		X Yes		□ No
Vendor oformation	Food vendors have all permits/licenses. Number of Other Vendors 50 to 75	Vendor list provided	to the City	₽ No
	Will there be alcohol at this event?	☐ Yes		■ No
	If yes, has liquor license been issued?	(Yes		□ Nu
	Is this a charitable event? If yes, what is the name of the charity/or	X Yes	FIRE FIGHTERS	No CORF
	Have you completed the City application	P Yes		E No
	Have you completed the State application	l?		F/1 > 4
	If you checked yes to any of the qu Gables Licensing, Tax, & Utility So	estions above, von	must contact the City	of Coral
		.7 4	13	

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•THIS COV	ER SHEET MUST BE PROVIDED WITH ALL INSURANCE DOCUMENTS
	Legal Name of Permit Applicant (Individual or Company): Unlimited Sales Group Inc
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 ClTY, and during the term of the Agreement, PERMIT APPLICANT shall provide and maintain at its own expense the below describ programs of insurance. Such programs and evidence of insurance shall be satisfactory to the CITY as shall be primary to and not contributing with any other insurance or self-insurance program maintained 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: C ty of Coral Gables Lesurance Compliance Email address: PO Box 12010 - CE Cityofcoralgables@chix.com Hemer, 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 C TY is to be given written notice of at least thirty (30) days in advance of any caocellation, non-renewal or material change of any insurance policy.
Insurance Requirements For	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
Companies	Insured on a Primary and Non-contributory basis. All insurance policies evidenced to the City shall contain A Waiver of Subrogation Endorsement favor of the City of Conal 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. 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 Fach 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.
If Applicant Does Not Have Insurance	2. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured. 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 Cocal Gables Insurance Compliance Contact Information Phone: (951) 652-2883 • Fax: (770) 325-0417 • Email: cityofcoralgables@ebix.com

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	Police	# of Officers	Date(s) I	Cequired	He	ours Needed (i.e. 8 a.m. 5 p.m
City Services	5 police	of all required pe	emits for the obtain an O	us event. Pla II-Regular-E	ables l'olice l	Police Officers required for a Department upon the approve the Coral Gables Police rvices Permit Application and
		Clearance Form		□ Yes		□ No
	Fire/Medical					D 110
			On Call	_ k a c	n Site	
		Contact the Cora	I Gables Fi	re Departru coverage at	nt Administr 305) 442-160	ation Division for questions o
	Cir. E. dici.	Clearance Form	eceived	□ Yes		□ No
	City Facilities	Location				ou need the restrooms opene
	Electrical	Discouling M. 1.	7 1	DY	23	□ No
	Requirements	ampenge needed electricity (i.e. sou	, the numbe	of outlets	kind the type i	of electricity (i.e. 110V), of equipment needing the
		Dates needed	201, 240			Hours per day needed
	Trash	Who will be respo	nsible for t	rash pick up	during the	Hours per day needed
	City Equipment	Barricades Countret Par Burns	t ter seemen			
	Signs/Banners	Please list any requ	to reserve	of City sig	receive a le	e schedule at (305) 460-5173. ation of signs:
	Other	Please list any othe	r requests	for City serv	ices (be speci	fic):
	All booths, stand For additional in	ls, signs/banners formation call Co	must be	removed i cement at	(305) 460-5	following the event. 266.
	☐ Temporary Fenci		d		1	THE PROPERTY OF THE PARTY OF TH
	Signs/Banners	_	flatable		/ /	Music (Recorded)
dditional	Port-A-Johns	31	en Flames		1	fusic (Live)
Event		22	reworks			mplifying Devices
eatures	Tents or Canopie			usement Ric		Or Loud Speakers
(Applicants	Barricades		ectrical Ser	vices/Gener	ators	
st check all hat apply)	Company Name:		Dhone	Number:		
	The second second	ving apply, a sepa	atale name	ative descr	iption of ea	ch additional feature
of Coral Gables ital Evenes Appl			-	Market and the State of the Sta		Page 4 of 8 Revised - 09/2012

	i	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 Or City		Street Name Giralda	From/To Ponce/Salzado	Date(s) 12/13 -12/14/14	Time(s) 12-10, 11-8		
Right-of- Way	City Sidewalks	Does this event propose closure or use of any sidewalks? U Yes No					
	DIGE WALKS	If you places 611	in information belo				
		Sidewalk Location	From/To	Date(s)	Time(s)		
- 0.4		Does this event	propose closure or t	se of any alleys?			
	City Alleys		☐ Yes	□ No			
			in information belo				
A		Alley Location	From/To	Date(s)	Time(s)		
		Does this event propose closure or use of any parking lot?					
	Public Parking Lot		ę	□ No			
		If yes, please fill	in information belov	v:			
1= 335		Parking Lot Location	From/To	Date(s)	Time(s)		
		Does this event	- Synus 3				
	City Right-Of-Way		☐ Yes	D No			
		If yes, please fill	in information below	v:			
		Right-of-way location	From/To	Date(s)	Time(s)		
	Parade	Does this event	propose closure or us				
\$11.11 pt.260	Route	□ Yes □ No					
5 5 8°		If yes, please fill	in information below	ow:			
		Parade Route	From/To	Date(s)	Time(s)		
8.18	If you checked yes to	any of the above.	a site plan showing	all of the above or	ducate must be		
	provided and a street information,	closure permit m	ay be needed. Pleas	c call (305)460-560	7 for more		

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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 IOK	\$309.00	\$500.00
Parades	\$309.00	\$500.00
Single day event, projected to be les than 2,500 persons	s \$309.00	\$500.00
Multi-day event or event projected to attended by 2,500 or more persons	o ba \$606,00	\$1,000.00
Multi-Day Event (not to exceed 3 da	ys) \$1,213.00	00.000,12

- * 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 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 \$ 1000.00

* 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.

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Indemolification: For and in consideration of the City of Coral Gables consent to allow the Applia Assembly (as defined by City Ordinance) within the lumits of the City of Co	cant to hold a Special Event, Parade or Public oral Gables, the Applicant agrees as follows:
The Permit Applicant jointly and severally, hereby bold harmless, indemnify and defofficers, agents, affiliates, employees, the administration and elected and appoint actions, claims, costs, expenses or demands (including, without limitation, suits resulting from death, personal injury and property damage) or expenses of every kin fees, costs and appeals, arising or resulting in whole or in part, as a result of any tor on the part of the Permit Applicant or any of the participants of the Event out provision shall survive the tennination of this contract and shall be in full force an contract, however, terminated. This indemnification provision includes claims mad section 440.11, Florida Statutes. Nothing contained herein shall be construed as a the City may have under the doctrine of sovereign immunity of section §768.28, Flori	and the City of Coral Gables, its representatives, and officials from and against all liability, suits, actions, chains, costs, expenses or demands d and character, including reasonable attorney's t, intentional action, negligent acts or omissions ined in this application. This indemnification deflect beyond the team or termination of this e by the entitlement, if any, to immunity under
Signature of Authorized Agent or Applicant	1/15/14 Date
Print Name Tide	dest
	8143 305-612-7626
Address City/State/Zip Code Subscribed and swom to before me, this 3rd day of 100 pt. 1 20	MORMA-MILENA GAVARRETE Notary Public - State of Florida My Comm. Expires Apr 20, 2016 Commission # EE 159367
Approval Signatures Required:	of Florida at dearge impour National Relaty Assn.
1-1-hr 1	Brian James
Fred Couceyre Parks and Recreation Director A Police	College Colleg
Dean James 612 1/2 Millian Fire Division Chief Code I	Ortiz IDIKINGIISVOI ILENGE
Application, performance bond(s), comprehensive site plans, event publications application and must be submitted to:	flyers, and insurance must accompany this
Norma-Milena Gavarrete Special Events/ Film Subdivision Parks and Recreation Division 405 University Drive Coral Gables, FL 33134	
Phone: (305) 460-5607 • Fax: (305) 460-5 E-mail: ngavarrete/e/coralgables com	639
[[]] [] [] [] [] [] [] [] []	
Internal Use only: Date Received: Presentation Date:	Permit #
Application Fee: Performance Bond(s): D Initials: Police: Fire: Code Enforcement:	te Insurance Approved:
Code Entorcement	NISK Management:
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Additional Conditions or changes to application:	
Event Name:	Event Date
- NIP TENT - City Parky lo - more sto VIP Tent - Pouling lot	t by the Banh
- keep noise at a vienemen for	Calles brown

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