



CITY OF CORAL GABLES SPECIAL EVENTS APPLICATION & PERMIT

Permit #	·

	Legal Name of the Permit Applic Kiwanis Club of Little Havana	Today's Date: 11/3/15					
Applicant	Contact Person for this Permit Application:						
Information	Thomas Falcon	PP					
1110(11164011	Contact Person Phone: 305-644-8888	Contact Person Fax 305-644-8693	:		Contact Person Email: tfalcon@waltonlantaff.com		
	Permit Applicant Address:	L	City:		State:	Zip:	
	1400 S.W. 1st St.		Miami		Florida	33135	
55.00	Permit Applicant Phone:	Permit Applicant F	ax:		plicant Ema		
				/altonlantaff.	com		
	Is the Contact Person an Office	er of the Legal Enti	ty?	YES*	NO**		
	*If YES, attach verification from	Sunhiz.org				'	
	**If NO, go to next question						
	Is the Contact Person an Author	orized Agent of App	licant?	YES*	□ NO		
	*If YES, Contact Person (Author	inal Asset must nec	wide the City	, with a Lim	ited Power o	f Attorney	
	evidencing that they are authorize	ized Agenty must pro	inding contr	acts on beh	alf of the per	mit applicant.	
	Name of Event	a to excepte 195am, o		E	vent Date(s)		
	Carnaval on the Mile (COM)					further details	
	Hours of Event	Set-up Ti	me	T	ake Down T	ime	
Event	see below	see below	<u> </u>		e below		
Information	Location of Event				Location Re		
	Harnett Ponce Circle Park and M						
	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						
	application including a sample of your staff, monitors and voluntee	the badge or unique	name tag tha	eneral publi	ic at the ever	it identitying	
	your starr, monitors and voluntee	is itom the participat	its and/or g	cuciai puoi			
A	1						
34 at 34 at 3							
	ł						
	Anticipated Attendance			I A	dmission Fe	es	
	100,000			1 -	ne		
	# of year's event has been in exis		Location(s)?		ast Attendan	ce	
	18	Only Cora			0,000	<u> </u>	
	Event Description: (Provide an at	tachment if additiona	al space is ne	eaca.)	armouel on t	ha Mila 🙉	
	Kick-off Concert @ Hartnett Pend Miracle Mile- Douglas Road/LeJe	e Circle Park (Frida) June Avenue (Saturd	y March 4/2	dav. March	5. 2016 and	ile wille @ I March 6. 2016).	
	Time Douglas Hoad/Look		,		v = 1 = -/-	-, = ··-,·	
	The event hours: 3/4/16 (Concer	t)7:00 p.m. to midnig	ht and Car	naval on th	e Mile 3/5/16	3 10:00 a.m. to	
	midnight and 3/6/16 10:00 a.m. to	o 10:00 p.m.					
	Set up times: 3/4/16 beginning at	noon at Hartnett Po	nce Circle a	nd for CON	1 beginning a	at 11:00 p.m.	
	Take down times; (Concert) 3/5/1	6 at 12:01; COM 3/6	6/16 at 10:10	to be com	pleted by 3/6	3/16 at 5:00 p.m.	
111.1	The event is a family oriented music and art festival.						

Event Information (Continued from page 1)	List all vehicles associated with this event: (if applicable) (Provide an attachment if additional space is needed.) To be determined.					
	nditions of the event be communicated e is needed.) ub of Little Havana office, staff and vo					
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.) Yes. Live music of varying types.						
	Number, type and location of all loud speakers and amplifying devices. (I'his information can be provided on a map as an attachment to this application.) 5 Stages: Douglas, LeJeune, Ponce South, Ponce North and Salzedo North. Mayhe 3 instead > Lyeune, Asuglas, Ponce North					
	Number of Food Vendors	Vendors list provided to the City	P N.			
		☐ Yes	☑ No			
Vendor	Food vendors have all permits/licenses. Number of Other Vendors	✓ Yes Vendor list provided to the City				
Information	150 art/craft vendors	□ 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? Kiwanis of	Little Havona			
	Have you completed the City application	? ☑ Yes	□ No			
	Have you completed the State application		■ No			
	If you checked yes to any of the que Gables Licensing, Tax, & Utility S	estions above, you must contact ervice office at (305) 460-5607.	the City of Coral			

City of Coral Gables Special Events Application & Permit Page 2 of 8 Revised - 10/2014

•THIS COVE	ER SHEET MUST BE PROVIDED WITH ALL INSURANCE DOCUMENTS.
	Legal Name of Permit Applicant (Individual or Company): Kiwanis Club of Little Havana
Special Events Permit	Insurance is being submitted for an ongoing Special Event (circle one): YES or NO (circle one): Will liquor be served at the Special Event (circle one): YES or NO (circle one): YES or NO
Cover Sheet For Evidencing Insurance to the City of Coral Gables	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.
Insurance Requirements	Companies are required to evidence the following Insurance to the City; Insurance Coverage Type Commercial General Liability 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
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. 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 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; 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.
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

City of Coral Gables Special Events Application & Permit Page 3 of 8 Revised - 10/2014

4 0 4 9	Police	# of Office	rs Dat	e(s) Requ	ired		rs Needed (i.e. 8 a.m5 p.m.) E DETERMINED BY CGPD
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 Form received: Yes No					□ No	
	Fire/Medical	On Call On Site					
			Coral Gab	les Fire D			ion Division for questions or
	City Facilities	Clearance F	orm receiv	ed: [Yes If using a park.	do voi	☑ No I need the restrooms opened?
	Ony Facilities	200112011			☐ Yes	,	☑ No
	Electrical Requirements	amperage n electricity (i	eeded, the i	number o /stem, po	f outlets and the poorn machine, e	typ e o tc.):	of electricity (i.e. 110V), f equipment needing the
							Hours per day needed EVENT HOURS
	Trash	Who will be responsible for trash pick-up during the event? SFM Per Contact					
	City Equipment	Contact Juan Rivero to reserve equipment or receive a fee schedule at (305) 460-5173.					
	Signs/Banners	anners Please list any requests for use of City signs and/or location of signs NONE					ation of signs:
	Other	Please list a	ny other re	quests for	City services (be	speci	fic):
	All booths, stand For additional in	ds, signs/ba	anners mu call Code	ist be re Enforce	moved immed ement at (305)	iately 460-5	following the event. 266.
	☐ Temporary Fend	ing	☑ Inflata	ble - K	ids Sections		Music (Recorded)
Additional	☑ Signs/Banners		☑ Open	Flames	salzedo		Music (Live)
Event	☑ Port-A-Johns ✓		☐ Firewo	orks			Amplifying Devices
Features	☑ Tents or Canopi	es 20120	☐ Carni	val/Amus	sement Rides	,	Or Loud Speakers
(Applicants	Barricades	_			ces/Generators		
must check all	Company Name: K						
that apply)	Contact: JAIME MC	NSERRAT		Phone N	umber: 305-525	-6208	
	If any of the follo shall be provided					of e	ach additional feature

X 3 X 40 00 00 00 00 00 00 00 00 00 00 00 00		Does this event p	ropose closure or u	se of any street(s)?				
		☑ Yes □ No						
	City	If yes, please fill in information below: PER EVENT DESCRIPTION						
Closure of	Streets			Date(s)	Time(s)			
Streets		Street Name	From/To	Date(s)	Time(s)			
Or City		Does this event	propose closure or t	seof any sidewalks	5?			
Right-of- Way	City Sidewalks	☐ Yes ☑ No						
		If yes, please fill in information below:						
		Sidewalk	From/To	Date(s)	Time(s)			
		Location						
-		Does this event	propose closure or t	use of any alleys?				
	City		☐ Yes		☑ No			
	Alleys		- 100		48 - 3			
	•	If yes, please fill	in information belo	w:				
		Alley Location	From/To	Date(s)	Time(s)			
-		Does this event propose closure or use of any parking lot?						
	Public	☐ Yes ☑ No						
	Parking Lot			4				
	_	If yes, please fill	in information belo	w:				
		Parking Lot	From/To	Date(s)	Timc(s)			
		Location						
-		Does this event propose closure or use of any City right-of-way?						
1.00	City	☐ Yes ☑ No						
	Right-Of-Way			3	HELE TO THE			
		If yes, please fill in information below:						
		Right-of-way	From/To	Date(s)	Time(s)			
		location						
-		Does this event	propose closure or	use of any street(s))			
	Parade		☐ Yes		☑ No			
	Route	d res						
		If yes, please fill	in information belo	w:				
		Parade Route	From/To	Date(s)	Time(s)			
_	CONTRACTOR OF STREET	CHAIN THE PROPERTY OF A STATE OF	Com Self-companies	a Process Profession				
]	If you checked yes to	any of the above	a site plan showi	ng all of the abov	e requests must be			
1	provided and a stree	t closure permit m	ay be needed. Ple	ase Call (305)460-	500 / 101 More			
	If you checked yes to provided and a stree information.	any of the above	a site plan showi	ng all of the abov	e reque			

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 10K	\$309.00	\$500.00
Parades	\$309.00	\$500.00
Single day event, projected to be than 2,500 persons	se less \$309.00	\$500.00
Multi-day event or event project attended by 2,500 or more personal transfer or the state of the		\$1,000.00
Multi-Day Event (not to exceed	13 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 \$	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.

For and in consideration of Assembly (as defined by Ci	the City of Coral Gables consent to a ty Ordinance) within the limits of t	llow the Applicant to hold a Special Event, Parade or Public the City of Coral Gables, the Applicant agrees as follows:
officers, agents, affiliates, emactions, claims, costs, expensesulting from death, personal fees, costs and appeals, arising on the part of the Permit Approvision shall survive the tercontract, however, terminated section 440.11, Florida Statute	ployees, the administration and electers or demands (including, without linjury and property damage) or expension resulting in whole or in part, as a repplicant or any of the participants of mination of this contract and shall be. This indemnification provision including	emnify and defend the City of Coral Gables, its representatives, and appointed officials from and against all liability, suits, imitation, suits, actions, claims, costs, expenses or demands ses of every kind and character, including reasonable attorney's esult of any tort, intentional action, negligent acts or omissions the Event outlined in this application. This indemnification in full force and effect beyond the term or termination of this ides claims made by the entitlement, if any, to immunity under construed as a waiver of any immunity or limitation of liability on §768.28, Florida Statutes.
1. 1		
Jums Lo	<i></i>	11/3/15 Date
Signature of Authorized A	gent or Applicant	
Thomas E. Falcon		Chairperson Carnaval on the Mile Title
Print Name		¥
1400 S.W. 1st St.	Miami, Florida 33135	305-644-8888
Address Subscribed and sworn to bef	City/State/Zip Code fore me, this <u>3 PO</u> day of <u>NOV</u>	Phone SHARON SEIPP Commission # FF 166026 Expires February 6, 2019 Decided the Tray Fair Insurance 200-385-7019
		tary Public State of Florida at Large
Approval Signatures Require Fred Couce Parks and Gilbert He Fire Division	eyro Recention Director # 10/35 rnander G. Davio Venez	Brian Lawrence Police Major OR William Ortiz Code Enforcement Director
Application, performance b	oond(s), comprehensive site plans, eve	ent publications, flyers, and insurance must accompany this
	application and must	be submitted to:
	Norma-Milena Special Events/ Fil Parks and Recreat 405 Univers Coral Gables Phone: (305) 460-5607 • E-mail: ngavarrete@	m Subdivision ion Division sity Drive , FL 33134 Fax: (305) 460-5639
Internal Use only:	Approved	l 🗆 Yes 🗆 No Permit #
Date Received:	Presentation Date:	
Application Fee:	Performance Bond(s):	
Initials: Police:	Fire: Code Enfor	rcement: Risk Management:
	<u> </u>	

Indemnification:

Additional Conditions or changes to application:				
Event Name:	Event Date			
Divine Transfer				