

APPLICATION FOR MARGATE CRA SPECIAL EVENTS

Please review Margate Community Redevelopment Agency Event Policy prior to completion of this form (copy attached).

Event Name: South Florida Italian Festival

Sponsoring Organization (must be a business, non-profit organization or religious institution located in the City of Margate)

Organization name: Auto Buy of Margate

Organization Address: 301 N. State Rd 7, Margate, FL 33063

Event Date(s): January 30, 2016 Hours: 1100n - 8pm

Location (circle one):  
1000 N. State Road 7 (former Swap Shop) 5701 Margate Blvd. NW corner of Margate Blvd. & State Road 7 5700 Margate Blvd. SW corner of Margate Blvd. & State Road 7 Chevy Chase Shopping Ctr.

Estimated Attendance: 5,000

Description of Event: An Italian Family style festival with food and food trucks & music stages promoted on 9 iHeart radio stations! Kids are clowns, face painting, cotton candy, & 9 sports

Check all activities that apply; add any others not shown below:

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Food Vendors          | <input type="checkbox"/> Amusement Park Rides | <input type="checkbox"/> Fireworks       |
| <input type="checkbox"/> Arts & Crafts Vendors            | <input type="checkbox"/> Kiddie Rides         | <input type="checkbox"/> Religious Event |
| <input checked="" type="checkbox"/> Other Product Vendors | <input type="checkbox"/> Bounce House         | <input type="checkbox"/> Circus          |
| <input checked="" type="checkbox"/> Alcoholic Beverages   | <input type="checkbox"/> Inflatables          | <input type="checkbox"/> Other: _____    |
| <input checked="" type="checkbox"/> Live Entertainment    | <input type="checkbox"/> Rock Climbing Wall   | <input type="checkbox"/> Other: _____    |
| <input type="checkbox"/> Car Show                         | <input type="checkbox"/> Motorized Sports     | <input type="checkbox"/> Other: _____    |

Event sponsor is responsible for ensuring that food vendors meet the State licensing/permitting requirements. OK

The use of the City of Margate's mobile stage is available at a cost of \$50 per hour plus a charge of \$75 per hour for staff time (stage must be staffed at all times). Stage needed? possibly Yes ☒ No ☐

Utility Requirements: Electric and water are only available on the property at 1000 N. State Road 7. There are two power sources on the property. Arrangements for service are the responsibility of the event sponsor. Water service requires an application be made through the City of Margate at least 48 business hours prior to meter installation. Meter fees and deposits are based on size of meter needed. See attached application form for details.

Contact Waste Management at (800) 433-2300/(954) 974-7500 to arrange for trash containment/removal and port-o-lets.

Does Sponsor request sponsorship or consideration from the Margate Community Redevelopment Agency? If so, explain what's needed: Sponsorship dollars to raise funds for the construction Angels charity.

PROPOSED LAYOUT OF THE EVENT IS REQUIRED & MUST BE SUBMITTED WITH THIS FORM

INSURANCE REQUIREMENTS

Event sponsor(s) is required to provide General Liability insurance coverage as follows:

Commercial General Liability-Each Occurrence

|                       |             |
|-----------------------|-------------|
| GENERAL AGGREGATE     | \$2,000,000 |
| PRODUCTS-COMP/OP AGG  | \$1,000,000 |
| PERSONAL & ADV INJURY | \$1,000,000 |
| EACH OCCURRENCE       | \$1,000,000 |

Insurance certificate must name the Margate Community Redevelopment Agency as the Certificate Holder; the Margate Community Redevelopment Agency, the City of Margate, and Advanced Asset Management must be named as Additional Insured on the insurance certificate.

A Harmless Agreement must be completed and signed by the event sponsors and organizers. It must be submitted when application is approved. (A sample form is attached).

Contact Name: Kristi Ronyak

Contact Phone: 954-274-6633

Contact Email: KRISTI.ROMYAK@ConstructionAngels.us

[Signature] Duke Lee  
Sponsor (signature of authorized representative)

MARK A. MAIDA AutoBuy  
Print name and title

STATE OF FLORIDA  
COUNTY OF BROWARD

I, the undersigned authority, this 13 day of August, 2015, personally appeared Mark Maida and he/she freely and voluntarily executed this agreement for the purpose therein expressed.

Personally Known

Produced Identification; ID Number and Type of ID FL DL # M300 - XXV - XX - 127 - 0

(seal)



Courtney Easley  
Notary Public, State of Florida

Courtney Easley  
Print Name

WITNESSED BY \_\_\_\_\_ DATE: \_\_\_\_\_