

# City of Margate DEVELOPMENT REVIEW COMMITTEE

Submittal Date (official use): CEIVER

Together We Make it Great Application for Outdoor Event	
5790 Margate Blvd., Margate, FL 33063 954-972-6454	NOV - 4 2015
Project Name Goldon Krust (acibbergi Restourant Count Opening	à
Address 7372 W. Allattic BVD. Marcate, FL 33063	DRC# //-15-03
Acreage Folio Number	Paid: 4500. " Expedited
Existing Use Car, blean Styled Quick Sorvice Rostworn At	
Legal Description	ncturer & distributor
of Caribbon Advice and transferor of Caribbon restourants	
Check this box if you would like to rent the City's portable stage for your promo	tional event.
Petitioners interested in renting the City's portable stage for their promotional event shouth a minimum rental of four hours for the use of the stage, plus labor costs of \$75/hi to availability. Official rental forms and agreements are available from, and are to be f Recreation Department.	. Rentals shall be subject
Agent Contact Name MODA Corp Street House Street Howthern	Glenn Rodinavez
Address 7372 W. Affantic RIVO	
Mar sak . Fl 33063	*
Phone Number (754) 307 - 5065 Fax Number (354) 974 - 9	482
Email Address CKAHLastic 7372 @ Crandon Krust Sakery, Com Mour @ Gradon Krust Sakery, Com	m Daren O Gal on Kruft bolon a
Stockering Palm Lake Plaza III Co Wookright Drinksporent	Tree
Address 27 40 S.W. 19th St. Svite 801	
Born Roton, FL 33431	
Phone Number (561) 989-2240 Fax Number (561) 361-8762	
Imar@ Commkrutsky. Com 4Kot uni 7372 Oudenkind Laker (un Dien	O Golden Court Straw Com
OWNER'S AFFIDAVIT: I certify that I am the owner of record for the above referenced property and give an understand that I, or a representative on my behalf, must be present at the DRC meeting. I further understand the regulations of Chapter 16-14 of the Margate City Code.	thorization to file this petition, I hat my petition will be subject to the
10-37-15	
Property Owner's Signature Date	



Bakers of Superior Quality \* Hardo Bread \* Buns \* Patties \* Etc. 3958 PARK AVENUE, BRONX, N.Y. 10457 \* 718-655-7878 \* FAX 718-583-1883

October 21, 2015

Margate City Hall 5790 Margate Boulevard Margate, FL 33063

Re: Petitioners Request Letter

Dear Sir or Madam:

Golden Krust Caribbean Restaurant will be hosting its Grand Opening/Ribbon Cutting Ceremony on November 20<sup>th</sup>, 2015 & November 21, 2015. Please see tentative details of event below:

### Friday, November 20th, 2015 12-5PM

Live band live radio broadcast ribbon cutting ceremonies (local dignitaries, politicians, community leaders will be present) free samples prizes

#### Satuday, November 21st, 2015 12-3PM

DJ inside or outside Free samples

All guest will have access to the bathroom facilities located within restaurant (Men's Bathroom & Women's Bathroom).

Therefore, I respectfully request you to extend the approval notice for said Grand Opening.

Regards

Omar Hawthorne, CFE

Director, Franchise Development & Community Affairs GOLDEN KRUST CARIBBEAN BAKERY & GRILL

City of Margate \*\*\* CUSTOMER RECEIPT \*\*\*

Batch ID: RRODI

11/04/15 00

Receipt no: 18014

Type SvcCd Description

Amount

ECDV PROMOTIONAL EVENT

Qty

1.00

\$500.00

MODH CORP

DBA GOLDEN KRUST CARIBBEAN

15 BAYBERRY RD

ELMSFORD, NY 10523

EXPEDITED FEE FOR APPLICATION

FOR OUTDOOR EVENT

DRC-11-15-03

FOR GOLDEN CRUST CARIBBEAN

RESTAURANT GRAND OPENING

7372 W. ATLANTIC BLVD

MARGATE, FL 33063

MODH CORP

7372 W ATLANTIC BLVD

OMAR HAWTHORNE/DAREN HAWTHORNE

754-307-5065

GKATLANTIC7372@GOLDENCRUSTBAKE

Tender detail

CK Ref#:

1032

\$500.00

City of Margate
\*\*\* CUSTOMER RECEIPT \*\*\*

Batch ID: RRODI

11/04/15 00

Receipt no: 18014

Type SvcCd Description

Amount

Total tendered: Total payment: \$500.00 \$500.00

\$5

Trans date: 11/04/15

Time: 17:22:03

HAVE A GREAT DAY!



March 6, 2014

Re: Palm Lakes Plaza- Margate, Florida

To Whom It May Concern:

Please be advised that Soraya Tyriver, Executive Vice President and Jorge Morell, Vice President of Woolbright Development, Inc. have been authorized by the undersigned to execute and/or consent to the execution of application for building, signage and/or similar permits relating to the shopping center known as Palm Lakes Plaza, located at 7352 West Atlantic Boulevard, Margate, Florida.

Sincerely,

Stockbridge Palm Lakes Plaza, LLC, A Delaware limited liability company

By:\_\_\_

Name: Title:

3414 Peachtree Road, N.E., Suite 1160, Atlanta, Georgia 30326 PHONE 404.793.0390

MAKING PLACES, BETTER.

November 2, 2015

Mr. Omar Hawthorne, CFE Golden Krust Caribbean Bakery & Griil 3958 Park Avenue Bronx, NY 10457

Re: Grand Opening Event - Palm Lakes Plaza

7372 W. Atlantic. Blvd. Margate, Fl 33063

Friday & Saturday, November 20th & 21st, 2015

Dear Mr. Hawthorne:

In response to your request to use a portion of the common area at Palm Lakes Plaza for the Grand Opening Events (the "Event") to be held on November 20 and 21, 2015, Landlord grants its consent subject to the following terms and conditions:

<u>Event Area</u>. The sales and displays of Tenant may be conducted or located only in such area of the Shopping Center as is designated by Landlord (the "Event Area"), which area shall be maintained by Vendor in a neat, clean, and orderly condition throughout the Event, including the removal of all equipment, trash and debris at the conclusion of the Event. See attached Site Plan.

<u>Obstructions/Safety</u>. The Event shall not interfere with pedestrian or vehicular traffic and Vendor shall be responsible for causing the event to be held in a safe manner.

<u>Permits and Approvals</u>. Landlord makes no representations as to whether any governmental licenses, permits, or approvals are required for the Event and Vendor shall secure any such approvals and pay all costs connected therewith.

<u>insurance</u>. Tenant shall cause the insurance policies maintained by Vendor pursuant to Article 7 of the Lease to cover the Event Area and any claims and liabilities arising in connection with the use thereof; and



No Landlord Responsibility. Landlord shall have no responsibility for any occurrences in or around the Event Area. Vendor shall protect, defend, indemnify, and hold harmless Landlord, its heirs, successors, and assigns from any and all claims, demands, causes of action, judgments, costs, expenses, liabilities, and damages (including consequential and punitive damages) arising from the installation, operation, or use of the Event Area, or relating to any act or occurrence happening in or about the Event Area, however the same may be caused, including, without limitation, if caused in whole or in part by the act, omission, or active or passive negligence of Landlord, or by criminal activity of any kind.

Accordingly, by signing below, Tenant acknowledges and agrees that the Event will be conducted in accordance with the terms of this letter. Please sign this letter where indicated below. and return one (1) such original to my attention. Insurance must name the Property (Palm Lakes Plaza) Landlord (Stockbridge Palm Lakes Plaza, LLC), the Property Manager (Woolbright Development, Inc.) as additional insureds on the certificate. The Certificate of Insurance and Signed letter can be emailed to <a href="mailto:gmckim@woolbright.net">gmckim@woolbright.net</a>.

1100 yoke Redera) tout whoo AlSIC And HOOM,

Please feel free to contact me at (954) 579-0851 if you have any questions or comments.

/ Must

By: Gina Chastain-McKim Its: Property Manager

AGREED AND ACKNOWLEDGED BY:

its: Scripton

Date: 113 7015



#### **CITY OF MARGATE**



## **HOLD-HARMLESS AGREEMENT**

RE: OUTDOOR EVENT
Event Name/Description: Trans Amoning (elebration
Event Location: 7372 W. Allardic BUD, Margate, FL 33063
Date(s) Of Event: November 20-21, 2015
Property Legal Description: Avick Service Restaurant
Pursuant to the requirements set forth in Section 3.24, of Article III, of Appendix A, of the Code of the City of Margate, Florida, the petitioner(s) appearing before the Development Review Committee for the promotional outdoor event described above do(es) hereby agree to indemnify, defend, and hold the City of Margate harmless for any claim or suit arising out of the planning, organizing, or operation of this promotional outdoor event.
Petitioner's Signature:
Petitioner's Printed Name: May Hawklarne
Petitioner's Official Title: (effection)
Organization/Corporation: Golden Krust Caribban Restaurant MODA Corp.
Subscribed and sworn to before me this 244 day of October
DAREN L HAWTHORNE NOTARY PUBLIC-STATE OF NEW YORK No. 02HA6298818 Qualified in Westchester County My Commission Expires March 17, 2018
Signature of Notary's Seal
Demonally lynamy to me
Personally known to me.
Produced identification:



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/29/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s)

certificate holder in field of such endor	Seme	III(S)	•							
PRODUCER				CONTA NAME:	Riuson					
ALL YOUR NEEDS INSURANCE, INC.			PHONE (A/C, No, Ext): (954)-742-0550 FAX (A/C, No): 9					749-3457		
2104 N. UNIVERSITY DR.				E-MAIL ADDRESS: INSURE@AYNINSURANCE.COM						
					INS	SURER(S) AFFOR	RDING COVERAGE		NAIC#	
SUNRISE FL 33322			INSURER A: Mount Vernon Fire Insurance Company C/O SLB							
INSURED				INSURER B:						
MODH Corp					INSURER C:					
DBA Golden Krust Caribbean Bakery					INSURER D:					
7364 WEST ATLANTIC BLVD					INSURER E:					
MARGATE FL 33063					INSURER F:					
COVERAGES CERTIFICATE NUMBER:				REVISION NUMBER:						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.										
NSR LTR TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	Ц	MITS		
COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$ 1,00	00,000	
CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	s 100	),000	
							MED EXP (Any one person)	\$ 1,00	00	
Α	X		CL 2687583		11/20/2015	11/23/2015	PERSONAL & ADV INJURY	\$ 1,00	00,000	
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,00	00,000	
POLICY PRO- JECT LOC							PRODUCTS - COMP/OP ÀG	G S NIL		
OTHER:						NVISAN ASSESSMENT AND		s		
AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	s		
ANY AUTO				1			BODILY INJURY (Per person	n) S		
ALL OWNED SCHEDULED AUTOS				1			BODILY INJURY (Per accide	nt) S		
HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	s		
							T. St. SESSESSING	S		
UMBRELLA LIAB OCCUR							EACH OCCURRENCE	s		
EXCESS LIAB CLAIMS-MADE				-			AGGREGATE	s		
DED RETENTIONS								s		
WORKERS COMPENSATION							PER OTH			
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	s		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	D? N/A					1	E L. DISEASE - EA EMPLOY			
If yes, describe under DESCRIPTION OF OPERATIONS below							E L. DISEASE - POLICY LIMI			
DESCRIPTION OF CHARACTER AND ADDRESS OF CHARAC							E E DIOEAGE - I GEIGT EIMI	1		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORD	101. Additional Remarks Schedu	le. may be	attached if more	space is require	ed)			
				,,			,			
SPECIAL EVENT LIABILITY FOR RESTAU	JRAN"	T GR	AND OPENING							
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CERTIFICATE HOLDER LISTED AS ADDI	HONA	AL IN	SURED ON POLICY							
CERTIFICATE HOLDER				CANC	ELLATION					
CENTIFICATE HOLDEN				CANC	ELLATION					
THE E					HOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE HE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN CCORDANCE WITH THE POLICY PROVISIONS.					
5790 MARGATE BLVD										
MARGATE, FL 33063					AUTHORIZED REPRESENTATIVE					
····					© 198	8-2014 ACC	CORPORATION.	All righ	ts reserved	



