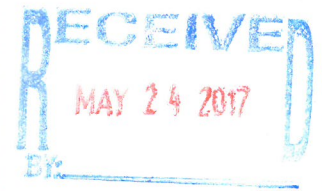




City of Margate  
DEVELOPMENT REVIEW COMMITTEE  
Application for Outdoor Event

5790 Margate Blvd., Margate, FL 33063  
954-972-6454

DR 6/27  
Submittal Date (official use):



Project Name SPARKLERS TENT SALE		
Address 2020 N. STATE RD 7 ST.		DRC # 06-17-03
Acreage	Folio Number 8230-01-0090	Paid: 250.00
Existing Use BRUNSWICK MARGATE LANE PARKING LOT		
Legal Description INSTALL A TEMP. TENT 30'x50' FOR THE SPARKLERS EVENT		

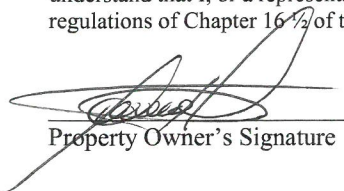
☐ Check this box if you would like to rent the City's portable stage for your promotional event.

Petitioners interested in renting the City's portable stage for their promotional event shall be charged \$50/hr with a minimum rental of four hours for the use of the stage, plus labor costs of \$75/hr. Rentals shall be subject to availability. Official rental forms and agreements are available from, and are to be filed with, the Parks and Recreation Department.

Agent/Contact Name MIA CHARITIES & PROMOTIONS	
Address 17400 NW 68 AVE # 315 HIALEAH, FL 33015	
Phone Number 786-487-8718	Fax Number 786-420-2563
Email Address VAUCAMINERO@hotmail.com	

Property Owner Name AMF BOWLMOR	
Address 2020 N. STATE RD 7 ST. MARGATE, FL	
Phone Number 212-777-2214	Fax Number
Email Address	

OWNER'S AFFIDAVIT: I certify that I am the owner of record for the above referenced property and give authorization to file this petition. I understand that I, or a representative on my behalf, must be present at the DRC meeting. I further understand that my petition will be subject to the regulations of Chapter 16-1/2 of the Margate City Code.

  
Property Owner's Signature

05/22/17  
Date

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

Batch ID: RR0DI      5/22/17 00      Receipt no: 124740

Type	SvcCd	Description	Amount
EN		ECDV PROMOTIONAL EVENT	
Qty		1.00	\$250.00

MIA CHARITIES & PROM  
 17400 NW 68TH AVE., UNIT 315  
 HIALEAH, FL 33015-4074  
 786-487-8718  
 DRC# 06-17-03 OUTDOOR EVENT  
 SPARKLERS TENT SALE  
 2020 N STATE ROAD 7  
 BY MIA CHARITIES & PROMOTIONS  
 SAME ADDRESS AS ABOVE  
 RAUL CAMINERO  
 786-487-8718  
 RAULCAMINERO@HOTMAIL.COM

Tender detail  
 CK Ref#: 1640      \$250.00  
 Total tendered: \$250.00  
 Total payment: \$250.00

Trans date: 5/25/17      Time: 16:23:07

HAVE A GREAT DAY!



June 13, 2017

Re: Letter of Authorization

Brunswick Margate Lanes, 2020 N. State Road 7, Margate, FL

To Whom It May Concern:

This letter will serve as formal authorization for MIA Charities & Promotions, Inc., to set up and operate a retail fireworks facility upon a portion of the parking lot of Brunswick property located at 2020 North State Road 7, Margate, Florida commencing June 27, 2017 and ending July 5, 2017.

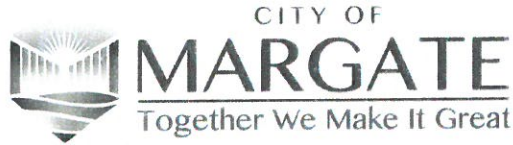
Please feel free to contact me at (212) 777-2214 ext 5270 if you have any questions with regards to the foregoing.

Sincerely,

A handwritten signature in black ink, appearing to read "K. Smart".

Katrina Smart  
Real Estate Manager

CITY OF MARGATE



HOLD-HARMLESS AGREEMENT

RE: OUTDOOR EVENT

Event Name/Description: SPARKLES TENT SALE  
Event Location: 2020 N. STATE RD 7  
Date(s) Of Event: FROM JUNE 28 TO JULY 05, 2017  
Property Legal Description: BRUNSWICK MARGATE LANE  
PARKING LOT

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: [Signature]  
Petitioner's Printed Name: RAUL CAMINERO  
Petitioner's Official Title: PRESIDENT  
Organization/Corporation: MIA CHARITIES & PROMOTIONS

Subscribed and sworn to before me this 9th day of JUNE  
20 17.

[Signature]  
Signature of Notary



Notary's Seal

☒ Personally known to me.  
☐ Produced identification: \_\_\_\_\_





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/05/2017

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 have ADDITIONAL INSURED provisions or 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).

<b>PRODUCER</b>  <b>Finney Insurance Corporation</b> <b>5601 Sheridan Street</b> <b>Hollywood, FL 33021</b>	<b>CONTACT NAME:</b> Monica Mendez	<b>FAX (A/C, No):</b> 954-989-8208	
	<b>PHONE (A/C, No, Ext):</b> 954-966-5533	<b>E-MAIL ADDRESS:</b> johnf@finneyinsurancecorp.com	
<b>INSURED</b>  <b>MIA Charities &amp; Promotions Inc</b> <b>17400 NW 68 Ave #315</b> <b>Hialeah, FL 33015</b>	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A:</b> Western World Insurance Company		
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
<b>INSURER F:</b>			

**COVERAGES****CERTIFICATE NUMBER: 00000000-68268****REVISION NUMBER: 6**

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		NPP8327253	05/26/2017	05/26/2018	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>100,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>Excluded</b> Deductible \$ <b>250</b>
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional Insured: City of Margate

Event Dates: From June 28 to July 5, 2017 @ 2020 State Rd 7, Margate FL 33063

**CERTIFICATE HOLDER****CANCELLATION**

<b>City of Margate</b> <b>5790 Margate Blvd.</b> <b>Margate, FL 33063</b>	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  (MIM)

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Jeff Atwater  
CHIEF FINANCIAL OFFICER

Julius Halas  
DIVISION DIRECTOR



Casia Sinco  
BUREAU CHIEF

Keith McCarthy  
SAFETY PROGRAM MANAGER

**FLORIDA DEPARTMENT OF FINANCIAL SERVICES**  
**DIVISION OF STATE FIRE MARSHAL**  
200 East Gaines Street - Tallahassee, Florida 32399-0342  
Tel. 850-413-3644 Fax. 850-410-2467

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**CERTIFICATE OF REGISTRATION**  
**SEASONAL RETAILER**  
**OFFICIAL COPY**

THIS CERTIFIES THAT: MIA Charities & Promotions Inc  
17400 NW 68 AVE, UNIT 315  
Hialeah Fl 33015

Has registered pursuant to the provisions of Florida Statutes to engage in the business of selling sparklers at retail, from June 20 through July 5 and December 10 through January 2 at the following location:

2020 N State Rd 7 Margate Fl 33063 Broward

Issue Date: 05/18/2017  
Type: 07  
Class: 63  
County: Dade  
License/Permit #: SR17-000313  
Expiration Date: 01/31/2018



  
Chief Financial Officer

REGISTERED  
FABRIC  
NUMBER

F-140.01

# Certificate of Flame Resistance

ISSUED BY

***Elite Tent Co.***

2375 S.W. 58TH Avenue, Hollywood, FL 33023

Date of Manufacture:

04/15/2014

**This is to certify that the product herein have been manufactured from material inherently flame retardant as here after specified by the material supplier.**

NAME: Elite Tent Co.  
CITY: Hollywood STATE: FL

**Certification is hereby made that:**

The articles described on this certificate have been manufactured with an approved flame retardant chemical in compliance with California State Fire Marshall Code, NFPA-701, Underwriters Laboratory of Canada and have been tested in accordance with the Federal Test Method Specifications and meet or exceed the Military Flame Specifications of MIL-C-43006G.

**Type, Color and weight of material:** PRV, White, 16 oz.

**Description of item certified:** 30'X50' Frame Tent White

**Flame Retardant Process Used Will Not Be Removed By Washing  
And Is Effective For The Life of The Fabric**

**Snyder Manufacturing, Inc.**

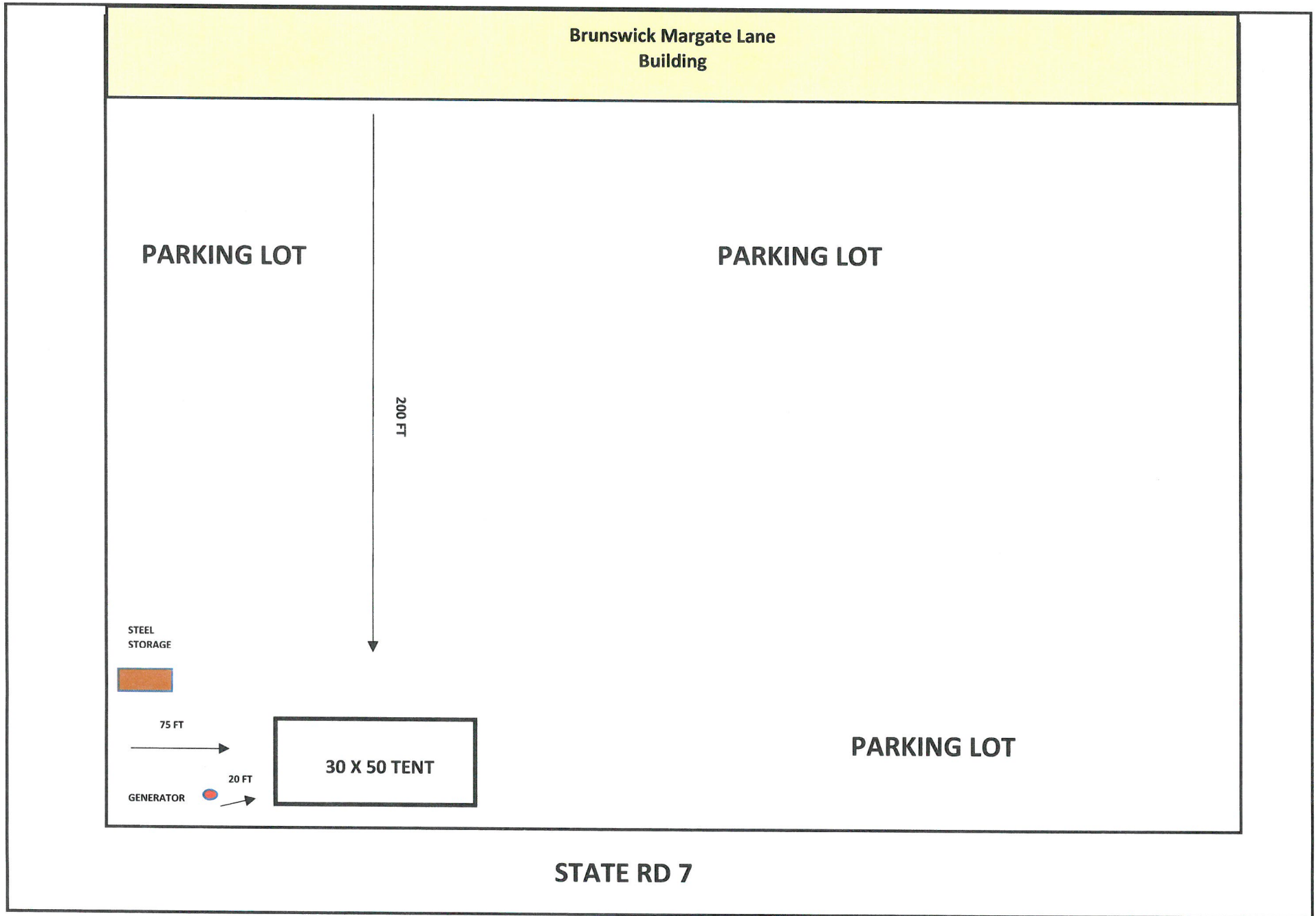
Manufacturing of Flame Retardant Vinyl Laminates

**David Csuzdi**

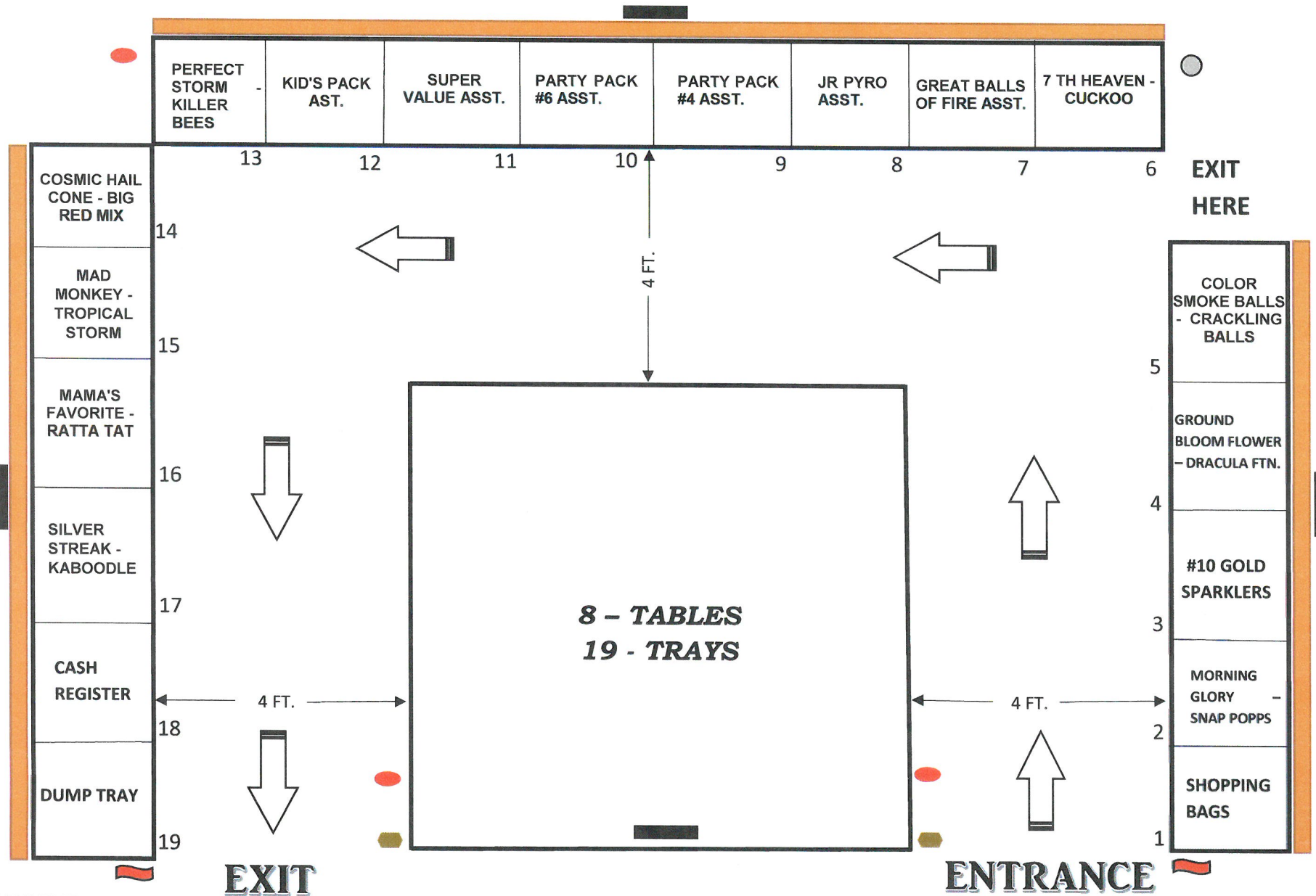
Tent Department  
David Csuzdi, President

# SITE PLAN







BRUNSWICK MARGATE LANE  
2020 N. STATE RD 7  
MARGATE, FL 3063







**LEGEND:**

-  No Smoking
-  Fire Extinguisher ( Red )
-  Fire Extinguisher ( Silver Water )
-  Sand Buckets
-  Exit Signs
-  Tables

G. P.

## ***PRODUCT LIST***

<b><i>DESCRIPTION :</i></b>	<b><i>UNIT SOLD AS:</i></b>
SUPER LOUD SNAPP POPPS	BOX OF 50
CRACKLING BALLS	PACK OF 6
CUCKOO	EACH
COLOR SMOKE BALLS	PACK OF 6
GROUND BLOOM FLOWER	PACK OF 6
ASSORTED FOUNTAIN 9"	EACH
MORNING GLORY	EACH
#10 GOLD SHOWTIME	EACH
7TH HEAVEN	EACH
MAMA'S FAVORITE	EACH
COSMIC HAIL CONE	EACH
SUPER VALUE TRAY	EACH
ECONOMY ASSORTMENT S/S	EACH
JUMBO VALUE FTN ASST	EACH
CITY NIGHT BAG ASST	EACH
PARTY PACK #6 S&S	EACH
PARTY PACK #4 S&S	EACH
JR PYRO S&S	EACH
GREAT BALLS OF FIRE ASST	EACH
KID'S PACK S&S	EACH
BIG RED MIX	EACH
RATTA TAT TAT FTN	EACH
BC SILVER STREAK	EACH
BC KABOODLE	EACH
TROPICAL STORM	EACH
LARGE FOUNTAIN FINALE	EACH
PERFECT STORM	EACH
DRACULA FOUNTAIN	EACH
KILLER BEES	EACH
PUNK	N/A

***NOTE: ALL PRODUCTS ARE SAFE & SANE ITEMS AND APPROVED BY STATE FIRE MARSHAL***

This list is strictly used as guide to help place products on the tables,.  
Actual placement of product may depending on location and operator,

# M I A Charities & Promotions, Inc.

P.O. BOX 524466 – Miami, FL 33172

PH: 786-487-8718

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## HOURS OF OPERATION

Friday June 30	10:00am to 10:00pm
Saturday July 1	10:00am to 10:00pm
Sunday July 2	10:00am to 10:00pm
Monday July 3	10:00am to 10:00pm
Tuesday July 4	10:00am to 10:00pm