

APPLICATION FOR MARGATE CRA SPECIAL EVENTS

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

Event Name: MARGATE - COCONUT CREEK KIWANIS ANNUAL TREE SALES ^{CHRISTMAS}

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

Organization name: MARGATE - COCONUT CREEK KIWANIS (501C-3)

Organization Address: 6993 NW 5 PL - MARGATE FL 33063

Event Date(s): 11-13 TO 12-27 Hours: 9AM - 11 PM

operation Dates: 11-16 thru 11-25

Location (circle one): 1000 N. State Road 7 5701 Margate Blvd. 5700 Margate Blvd.
Refer to Event Policy for (former Swap Shop) NW corner of Margate Blvd. & SW corner of Margate Blvd. &
usage fees. State Road 7 State Road 7 Chevy Chase Shopping Ctr.
911 N. ST. RD. 7

Estimated Attendance: 2500 OVER DURATION OF EVENT

Description of Event: CHRISTMAS TREE SALES

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

- | | | |
|--|---|--|
| <input 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 type="checkbox"/> Other Product Vendors | <input type="checkbox"/> Bounce House | <input type="checkbox"/> Circus |
| <input type="checkbox"/> Alcoholic Beverages | <input type="checkbox"/> Inflatables | <input type="checkbox"/> Other: _____ |
| <input 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.

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? _____ Yes X 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: YES - WE ASK THAT THE RENTAL FEE BE WAIVED

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

(SEE REVERSE SIDE FOR ADDITIONAL INFORMATION)

INSURANCE REQUIREMENTS

The 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

*POLICIES TO BE UPDATED
PRIOR TO EVENT*

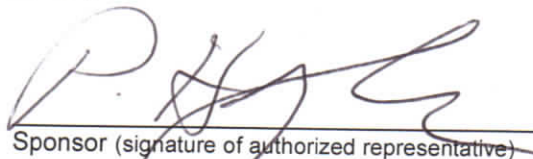
The insurance certificate must name the Margate Community Redevelopment Agency as the Certificate Holder; the Margate Community Redevelopment Agency, the City of Margate, and Advanced Asset Management must be named as Additional Insured on the insurance certificate.

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

Contact Name: PHIL HYLANDER

Contact Phone: 954-648-1896

Contact Email: PHIL HYLANDER @ GMAIL.COM


Sponsor (signature of authorized representative)

PHIL HYLANDER
Print name and title
PRESIDENT

STATE OF FLORIDA
COUNTY OF BROWARD

Before me, the undersigned authority, this 4 day of OCTOBER, 2017, personally appeared _____ who acknowledges that before me he/she freely and voluntarily executed this agreement for the purpose therein expressed.

☒ Personally Known

☐ Produced Identification; ID Number and Type of ID _____

(seal)
MICHELLE L. PROUD
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # FF127323
EXPIRES 6/10/2018
BONDED THRU 1-888-NOTARY1


Notary Public, State of Florida

Michelle L Proud
Print Name

APPROVED BY _____ DATE: _____

APPROVED BY _____ DATE: _____