

# APPLICATION FOR USE OF MARGATE CRA PROPERTY FOR SPECIAL EVENTS

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

Event Name: Broward County Fair

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

Organization Name: Broward County Fair Inc.

Organization Address: P.O. Box 50332 Lighthouse Point, FL 33074

Organization Contact Person

Name: Joshua Rydell

Phone Number: 954-779-1711

Email Address: jr@jrydell.com

## Event Information

Location (circle one):

*Refer to Event Policy for usage fees.*

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.

Dates that property will be utilized

Event set-up: From 11-8-2021 To 11-18-2021 (maximum of 3 days per City ordinance)

Event operation: From 11-18-2021 To 12-5-2021

Event take down: From 12-6-2021 To 12-10-2021 (maximum of 3 days per City ordinance)

Hours that event will operate (if hours vary according to the day of the week, please specify):

Monday - Thursday 5pm - midnight; Friday 5pm - 1am; Saturday 1pm - 1am; Sunday 1pm - midnight

Estimated Attendance: 40,000 to 60,000

Description of Event: The event will have the finest family entertainment and will be supporting local charities and businesses. There will be a wide variety of rides, games and food.

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

☒ Food Vendors  
☒ Arts & Crafts Vendors  
☒ Other Product Vendors  
☐ Alcoholic Beverages  
☒ Live Entertainment  
☐ Car Show

☒ Amusement Park Rides  
☒ Kiddie Rides  
☒ Bounce House  
☒ Inflatables  
☐ Rock Climbing Wall  
☐ Motorized Sports

☐ Fireworks  
☐ Religious Event  
☐ Circus  
☒ Other: Games/Midway  
☒ Other: Livestock  
☐ 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 is ONE power source 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: Permission to hold event and secure all necessary permits required by the City of Margate and MCRA. Our request includes parcels owned by the MCRA for parking.

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

## **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

Event sponsors must provide insurance certifications AND associated endorsement pages to the MCRA at least 7 days prior to the first date of property usage. The insurance certificate(s) must name the Margate Community Redevelopment Agency, the City of Margate, and Advanced Asset Management as Additionally Insured.

A **Temporary Use Agreement** must be completed and signed by the event sponsors and organizers. The form must be submitted when application is approved, and requires approval by the MCRA board. (A sample form is attached).

[Signature]

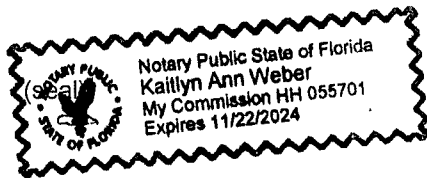
Sponsor (signature of authorized representative)

Joshua Rydell counselor  
Print name and title Broward County  
Fair, FL

STATE OF FLORIDA  
COUNTY OF BROWARD

Before me, the undersigned authority, this 2 day of September, 2021, 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 \_\_\_\_\_



[Signature]  
Notary Public, State of Florida  
Kaitlyn Weber  
Print Name

\*\*\*\*\*

APPROVED BY \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED BY \_\_\_\_\_ DATE: \_\_\_\_\_

THE LAW OFFICE OF  
**JOSHUA D. RYDELL, P.A.**  
Attorneys At Law

**POWER OF ATTORNEY TO SIGN ANY PAPER ON BEHALF OF THE BROWARD COUNTY  
FAIR INC. DEALING WITH THE CITY OF MARGATE AND CRA**

Know by all these present that: The undersigned has made, constituted an appointed, and by these present does hereby make, constitute and appoint **Joshua D. Rydell, Esq.** and any of its duly authorized agents and employees as and to be the undersigned's true and lawful attorney for and in the undersigned's name, place and stead to endorse, execute, submit applications on behalf of the undersigned or to the undersigned and **THE LAW OFFICE OF JOSHUA D. RYDELL, P.A.**


The undersigned by these presents does give and grant the said **JOSHUA D. RYDELL, ESQ.** as attorney the full power and authority to do and perform all and every act whatsoever requisite and necessary to be done in and about the premises as fully to all intents and purposes as the undersigned might or could do to personally present insofar as executing agreements for the Broward County Fair.

A photocopy of this document shall be as binding as an original signature page.

**FURTHER AFFIANT SAYETH NAUGHT.**

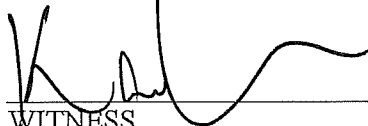
**HARLAN BAST**

Harlan Bast for the Broward  
County Fair Inc. (Printed)

  
Harlan Bast (Aug 27, 2021 14:10 CDT)

Harlan Bast for the Broward County  
Fair Inc. (signed)

  
WITNESS **Matthew Moran**

  
WITNESS **Kaitlyn Weser**

**I HEREBY CERTIFY** that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared **Harlan Bast** to me known to be the person described in and who executed the foregoing instrument and who acknowledged before me that she executed the same freely, voluntarily and with personal knowledge.

**WITNESS** my hand and official seal in the County and State last aforesaid this 27th

day of August 2021.

  
(Signature of Notary Public she State of California)  
**LISA HIRSCHENSON**  
(Print, Type, or Stamp Commissioned Name of Notary Public)

COMMISSION NUMBER

MY COMMISSION EXPIRES:

(☒) Personally Known or ( ) Produced Identification

Type of Identification Produced: \_\_\_\_\_

