



### Special Event Permit Application

Event	<b>Event Name:</b> Mardi Gras	<b>Event Date:</b> 02/18/2022	
	Event Venue/Location requested: Historic St. Andrews with parade staging at Oakland Terrace on 2/19		
	Organization/Applicant Name: Krewe of St. Andrews		
Applicant Information	Address: 1561 1/2 Chandlee Ave. Panama City, FL 32405		
	Contact Name: Chris Pfahl		
	Office Phone:	Cell: 850-338-4578	Email: chris@legistixsolutions.com
	Social Media/ Website:		
	Organization Classification: Private <input type="checkbox"/> Corporate <input type="checkbox"/> 501(c) <input checked="" type="checkbox"/>		
If Organization is a tax exempt, nonprofit entity, you must attach a copy of your IRS 501 (c) tax exemption letter providing proof and certifying your current tax exempt, nonprofit status.			
Is your organization requesting a waiver of application fees and/or other fees? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			

Event Description	Carnival/Fair <input type="checkbox"/> Demonstration <input type="checkbox"/> Concert/Performance <input type="checkbox"/> Festival <input checked="" type="checkbox"/> Fundraiser <input type="checkbox"/>		
	Block Party <input type="checkbox"/> Outdoor/Farmer's Market <input type="checkbox"/> Marathon/Race/Walk <input type="checkbox"/> Parade/Procession <input type="checkbox"/>		
Wedding <input type="checkbox"/> Marina <input type="checkbox"/> Other <input type="checkbox"/>			
<b>Brief Description:</b> Three day Mardi Gras festival to be held Feb 18th, 19th and 20th 2022. Kids parade Friday 2/18/22 @ 4:30 PM. Requested road closure of Beck Ave from 4:00 to 5:30 PM Main Parade Saturday 2/19/2022. Staging at Oakland Terrace Park begins at 9:00 AM with road closure of Fortune and Flower and 12th. Beck Avenue Road closure from 10:00AM to 5:00 PM.			
Estimated number of spectators: <u>25,000</u>			
Will any fees be charged to the spectators? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
If so, what fees and amount will be charged? _____			
Event Start Date/Time: February 18, 2022 10:00		Event End Date/Time: February 20, 2022 6:00 pm	
Event Set-up Date/Time: February 17, 2022 10:00		Event Breakdown Date/Time: February 20, 2022 10:00 pm	
Parking must be planned and designated depending on the type and location of your event. Please indicate the areas you plan on utilizing for participant/attendee parking: 1.) Large scale event, first come first serve parking in surrounding areas. 2.) If we acquire the City owned lot next to Los Antojitos we would use that parking.			
Do you have designated handicap parking? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
Location: _____			
Event Rain Date requested: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Date: _____			
You may request to cancel your event which may render a partial refund, up to 48 hours before the date and time of the event. Cancellation requests made within those 48 hours of the event date/time will forfeit full security deposit.			
Please indicate the types of advertising (check all that apply):			
Local Radio <input checked="" type="checkbox"/>	National Radio <input type="checkbox"/>	Local TV <input checked="" type="checkbox"/>	National TV <input type="checkbox"/> Cable TV <input type="checkbox"/> Local Newspaper <input type="checkbox"/>
National Newspaper <input type="checkbox"/>	Direct Mail/Flyers <input type="checkbox"/>	Internet Email <input type="checkbox"/>	Billboards <input type="checkbox"/> Social Media Outlet <input checked="" type="checkbox"/>



Will sound amplifying equipment be used? YES  NO  Type of equipment: PA \_\_\_\_\_

Identify the type of entertainment being requested: BAND  DISC-JOCKEY  OTHER \_\_\_\_\_

Will there be alcoholic beverages involved in this event? YES  NO   
 Will alcoholic beverages be for sale? YES  NO   
 If yes, which type of alcohol will be served? WINE  BEER  LIQUOR   
 Describe the circumstances involved with the use of alcoholic beverages for this event.  
 A Temporary Alcohol permit for the event must be provided by the applicant. City Ordinance (Chapter 3)  
 Multiple outdoor bars will be staged during the festival.

Will electricity be needed for this event? YES  NO   
 Will additional power be needed for this event? YES  NO  If yes, total number of electrical panels: 35 \_\_\_\_\_

Will Light Towers be used for this event? YES  NO  If yes, total number of Light Towers: Conting \_\_\_\_\_

Will this event require a street closure? YES  NO  If yes, Full  or Partial   
 What road you are requesting to be closed? Beck Avenue on Friday from 4:00PM to 5:30 PM \_\_\_\_\_  
 Beginning Crossroad: Same specs as used in \_\_\_\_\_ Ending Crossroad: Beck Avenue and Highway 98 \_\_\_\_\_  
 Requested time of closure from: multiple \_\_\_\_\_ to: multiple \_\_\_\_\_  
 Attach site plan detailing the area to be closed and requested barricade locations.

**All Parade/ Race/Walk routes must utilize a Commission approved route map.**  
 Parade  : \_\_\_\_\_ Run/Walk  : \_\_\_\_\_  
 What is the approximate number of persons, vehicles, animals, type of animals and description of vehicles?  
 50ish total parade entrants to include Marching Band, floats, commercial businesses, and performers.

Is there a Sanitation/Clean-up plan? YES  NO   
 Name and phone number of Company/Person responsible for Sanitation/Clean-up services:  
 Legistix Solutions \_\_\_\_\_

Will additional garbage carts be needed? YES  NO  How many? 40 \_\_\_\_\_

Will dumpsters be needed? YES  NO  How many? 2-Yard \_\_\_\_\_ 4-Yard \_\_\_\_\_ 6-Yard 2 \_\_\_\_\_ 8-Yard \_\_\_\_\_  
 Date trash will be removed from event location(s): 02/19/2022 \_\_\_\_\_

Portable Restrooms: YES  NO  Number of portable restrooms: Standard 15 \_\_\_\_\_ ADA 4 \_\_\_\_\_  
 Date/Time: Drop off 02/18/2022 \_\_\_\_\_ Pick up 02/21/2022 \_\_\_\_\_

Will there be Stages/Platforms  or Tent(s) \_\_\_\_\_  
 Size of stage/platform: 20X24 or \_\_\_\_\_ Location: Ernies or City Parking lot on Bayview \_\_\_\_\_  
 Tents: 2 \_\_\_\_\_ of 20x20 \_\_\_\_\_ ; \_\_\_\_\_ of \_\_\_\_\_  
 (Number of Tents) (Size) (Number of Tents) (Size)

Temporary Hydrant Meter requested: YES  NO  City Ordinance (Sec. 23-24, 25.)  
 IF YES, you must complete the Temporary Hydrant Meter Service Agreement Application.

Describe any additional equipment requested for placement: Equipment includes the use of a moon, bounce and or inflatable carnival type rides and activities provided by a 3rd party vendor. Proof of insurance by the vendor providing such equipment will be required prior to permit approval.  
 We will have children's vending and games. Contractor/Vendor has not been finalized yet. We have COI for all of our amusement/ride vendors available on file once contracted for Mardi Gras 2022.



Will food be distributed at this event? YES  NO

Will food vendors be utilized in this event? YES  NO

If yes, you must acknowledge and abide by the following requirement.

I understand that I am responsible for providing a list of all vendors participating in this event for the purpose of license verification, the Fats, Oil and Grease discharge plan, and any additional materials as requested by the City of Panama City Quality of Life Department or FOG Inspector. I understand that failure to supply all required information will result in the rejection of this application.

Initial CAP

Will any LP-Gas, Charcoal, Flammable or Combustible Liquids be used? YES  NO  OPEN FLAME

Safety/Security Plan: (Attach a detailed Plan of Action or briefly describe safety/security plan to include, but not limited to, COVID-19, crowd control, EMS, internal security, venue safety, traffic control and barricades beyond Panama City Police & Fire) (Barricades must be FDOT Compliant)

KOSA will utilize PCPD and other agencies hired by the City of Panama City for crowd control and management. KOSA will provide overnight security on Friday and Saturday from a private firm.

KOSA will provide 120 barricades for PCPD to disperse for parade and VIP area.

Legistix will barricade and monitor the VIP area on Beck Avenue between 11th Street and Oakes by the Bay used on Saturday from 11:00 to 4:00 PM

Covid plan follows Bay County and local government protocols.

The City of Panama City Police and Fire Chiefs will determine the number of officers and other city personnel necessary to ensure the safety of the community during the event.

Are you hiring additional security from a private security company? YES  NO

Private security is not a substitute for City of Panama City Police Department law enforcement personnel.

If yes, list the Name and Contact Number of private security company:

Legistix Solutions

Will there be fireworks or open flame? YES  NO


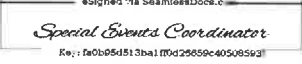
If yes, describe:

A permit for fireworks or open burn is required. City Ordinance (Sec. 12-165). The following must be submitted to the Fire Chief in order to be considered for a fireworks permit.

- City Permit
- No local or state burn ban in effect
- Arrangements made with owners of adjoining properties
- Proof of Liability Insurance
- FAA Notification
- Coast Guard Notification
- ATF Notification
- Current permit/license to discharge fireworks
- Site plans including aerial maps, proposed shell count and size paperwork
- Safety arrangements (water supply and/or fire extinguishers)
- All following guidelines are met:
  - NFPA-1123 – Fireworks Display,
  - NFPA 1124 – Manufacture, Transportation, Storage and Retail Sales of Fireworks & Pyrotechnic Articles
  - NFPA 1126 – Use of Pyrotechnics Before a Proximate Audience
  - NFPA 1127 – High Power Rocketry

\*A permit is not required to discharge fireworks on New Year's Eve, New Year's Day or July 4<sup>th</sup>.



<b>Affidavit</b>	To the best of my knowledge, this special event permit application form is correct and complete. If additional materials are determined to be necessary, I understand that I am responsible for filing additional materials as specified by the City of Panama City, Quality of Life Department. I understand that failure to supply all required information per the relevant Applicant Checklists and Requirements will result in the rejection of this application.	
Applicant's Name: <b>Chris A Pfahl</b>		
Applicant's Signature: 		Date: 12/15/2021
Event Coordinator print name: <b>Special Events Coordinator</b>		12/16/2021
Event Coordinator Signature: 		

<b>Approvals / Internal Use Only</b>	City Sponsored <input type="checkbox"/> City Partnered <input type="checkbox"/> CRA <input type="checkbox"/>
	QOL Department Director's Approval: YES <input checked="" type="radio"/> NO <input type="radio"/> Yes, with conditions listed below <input type="checkbox"/>
	Conditions:
	QOL Department Director Signature & Date: 
	Panama City Police Department Approval: YES <input type="checkbox"/> NO <input type="checkbox"/> Yes, with conditions listed below <input checked="" type="radio"/>
	Conditions: Law enforcement services to be calculated.
	Panama City PD Professional Services Signature & Date: 
	Panama City Police Department Chief Signature & Date: 
	Panama City Fire Department Approval: YES <input checked="" type="radio"/> NO <input type="radio"/> Yes, with conditions listed below <input type="checkbox"/>
	Conditions:
	Panama City Fire Department Chief Signature & Date: 
	Application Ready for Commission:
	City Commission consideration and action: Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Date: _____

<b>Permit Fees / Internal Use Only</b>	<b>Fees (check paid fees)</b>	
	<input type="checkbox"/> Application Fee	\$ _____
	<input type="checkbox"/> Security Deposit	\$ _____
	<input type="checkbox"/> Solid Waste – Garbage Carts/Dumpsters	\$ _____
	<input type="checkbox"/> Logistics – Electrical Connections	\$ _____
	<input type="checkbox"/> Utilities – Water Meter	\$ _____
	<input type="checkbox"/> Police / Security	\$ _____
	<input type="checkbox"/> Block Party	\$ _____
	<input type="checkbox"/> Fire / EMT	\$ _____
	<input type="checkbox"/> Other	\$ _____
	<b>Total Fees Due</b>	\$ _____



# INDEMNITY AND HOLD HARMLESS AGREEMENT

**IN CONSIDERATION** of the City of Panama City, Florida ("City") approving the use of the City's streets and other City properties by the Undersigned, the Undersigned agrees to indemnify and hold harmless the City, its agents, employees and assigns, from any and all claims, demands, damages, actions, causes of actions, or suits for injury or death to any person and damages to property of others, including the property of the City, arising out of or from the use of the City's streets and properties or from the sale, consumption or possession of alcoholic beverages by those attending or participating in the activities sponsored by the Undersigned, as well as any injury resulting from the previous negligence of the City regarding the construction and maintenance of its properties.

The Undersigned represents that (1) the Undersigned has read and understands the terms of the foregoing Indemnity and Hold Harmless Agreement, (2) that the Undersigned's execution of this instrument constitutes its free and voluntary act, (3) that the execution hereof is made without any representations of inducement or otherwise by those indemnified hereby; (4) that this Agreement has been properly approved by the Undersigned and if applicable in accordance with its organizational structure, and (5) that no other signature other than the one affixed to this document is necessary to make this indemnity and hold harmless agreement binding on the Undersigned or its organization.

**IN WITNESS WHEREOF**, the Undersigned has hereunto set its hand and seal,  
this 15 day of December 2021

Signed, sealed and delivered  
in the presence of

Richard Capobianco                      RC  
\_\_\_\_\_  
Print Name of Witness

Richard Capobianco  
\_\_\_\_\_  
Print Name of Witness

Krewe of St. Andrews  
\_\_\_\_\_  
Print Name of Organization or  
Individual

eSigned via SeamanDocs.com  
*Chris A Pfahl*  
Key: 6a5cbe0737736ce91cd7277ba92c7a8  
\_\_\_\_\_  
Signature

Chris A Pfahl  
\_\_\_\_\_  
(Print Name)

Title: Chris Pfahl  
\_\_\_\_\_  
Print Name and Title if acting on Behalf of  
Above Organization

# TEMPORARY CLOSING OF STATE ROAD PERMIT

Date: 01/05/2022

Permit No. \_\_\_\_\_

### Governmental Entity

Approving Local Government	<u>City of Panama City</u>	Contact Person	<u>Missy Bagwell</u>
Address	<u>501 Harrison, Panama City, FL 32401</u>		
Telephone	<u>850 704-6959</u>	Email	<u>mbagwell@pcgov.org</u>

### Organization Requesting Special Event

Name of Organization	<u>Krewe of St Andrews</u>	Contact Person	<u>CHRIS PTAHL</u>
Address	<u>1561 1/2 Chandlee Ave, Panama City, FL 32405</u>		
Telephone	<u>850 338-4578</u>	Email	<u>chris@legistixsolutions.com</u>

### Description of Special Event

Event Title	<u>KOSA Kids Parade</u>	Date of Event	<u>February 18, 2022</u>
Start Time	<u>4pm</u>	End Time	<u>5:30pm</u>
Event Route (attach map)	<u>Beck Ave from 15th St south to 11th St</u>		
Detour Route (attach map)	<u>See attached</u>		

### Law Enforcement Agency Responsible for Traffic Control

Name of Agency	<u>Panama City Police Department</u>
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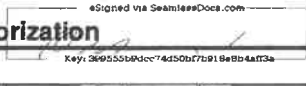

### US Coast Guard Approval for Controlling Movable Bridge

Not Applicable	<input checked="" type="checkbox"/>
Copy of USCG Approval Letter Attached	<input type="checkbox"/>
Bridge Location	_____

The Permittee will assume all risk of and indemnify, defend and save harmless the State of Florida and the FDOT from and against any and all loss, damage, cost or expense arising in any manner on account of the exercise of this event.

The Permittee shall be responsible to maintain the portion of the state road it occupies for the duration of this event, free of litter and providing a safe environment to the public.

### Signatures of Authorization

Event Coordinator	<u>Chris A Ptahl</u>	Signature		Date	<u>01/05/2022</u>
Law Enforcement Name/Title	<u>Mark Smith</u>	Signature		Date	<u>01/05/2022</u>
Government Official Name/Title	_____	Signature	_____	Date	_____

### FDOT Special Conditions


### FDOT Authorization

Name/Title	_____	Signature	_____	Date	_____
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# 2022 KOSA Kids Parade Route



-  Parade Stage & Begin
-  Parade End
-  Parade Route
-  Traffic Route
-  Barricades

# TEMPORARY CLOSING OF STATE ROAD PERMIT

Date: 01/05/2022

Permit No. \_\_\_\_\_

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Address	<u>501 Harrison, Panama City, FL 32401</u>		
Telephone	<u>850 704-6959</u>	Email	<u>mbagwell@pcgov.org</u>

### Organization Requesting Special Event

Name of Organization	<u>Krewe of St Andrews</u>	Contact Person	<u>Chris Pfahl</u>
Address	<u>1561 Chandlee Ave, Panama City, FL 32405</u>		
Telephone	<u>850 338-4578</u>	Email	<u>chris@legistixsolutions.com</u>

### Description of Special Event

Event Title	<u>Mardi Gras Parade</u>	Date of Event	<u>February 19, 2022</u>
Start Time	<u>10am</u>	End Time	<u>5pm</u>
Event Route (attach map)	<u>St. Andrews Parade Route</u>		
Detour Route (attach map)	<u>See Attached</u>		

### Law Enforcement Agency Responsible for Traffic Control

Name of Agency	<u>Panama City Police Department</u>
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### US Coast Guard Approval for Controlling Movable Bridge

Not Applicable	<input checked="" type="checkbox"/>
Copy of USCG Approval Letter Attached	<input type="checkbox"/>
Bridge Location	_____

The Permittee will assume all risk of and indemnify, defend and save harmless the State of Florida and the FDOT from and against any and all loss, damage, cost or expense arising in any manner on account of the exercise of this event.

The Permittee shall be responsible to maintain the portion of the state road it occupies for the duration of this event, free of litter and providing a safe environment to the public.

### Signatures of Authorization

Event Coordinator	<u>Chris A Pfahl</u>	Signature		Date	<u>01/05/2022</u>
Law Enforcement Name/Title	_____	Signature	_____	Date	_____
Government Official Name/Title	_____	Signature	_____	Date	_____

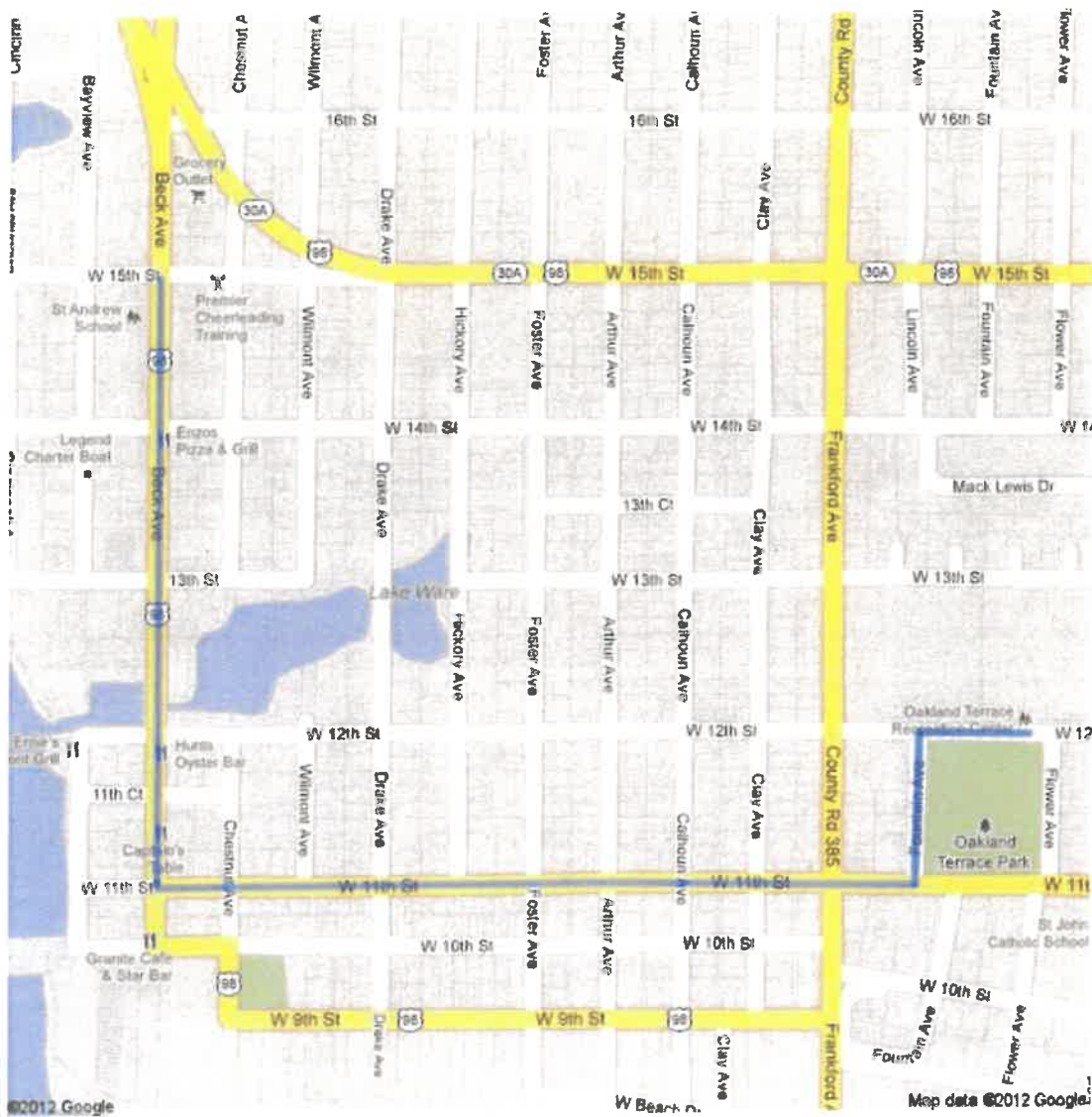
### FDOT Special Conditions


### FDOT Authorization

Name/Title	_____	Signature	_____	Date	_____
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# St Andrews Parade Route



**Route One:**

- Assemble at Oakland Terrace Recreation Center
- Travel West on 12<sup>th</sup> Street to Fountain Ave
- Travel South on Fountain Ave to 11<sup>th</sup> Street
- Travel West on 11<sup>th</sup> Street to Beck Ave
- Travel North on Beck Ave to 15<sup>th</sup> Street

**DOT PERMIT REQUIRED**

**Route Two:**

- Assemble at 15<sup>th</sup> Street and Beck Ave
- Travel South on Beck Ave to 11<sup>th</sup> Street
- Travel East on 11<sup>th</sup> Street to Fountain Ave
- Travel North on Fountain Ave to 12<sup>th</sup> Street
- Travel East on 12<sup>th</sup> Street to Oakland Terrace Recreation Center.



KREWOF5-01

OWITTELSBERGER

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/7/2021

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).

PRODUCER <b>Maury, Donnelly &amp; Parr</b> 24 Commerce St. Baltimore, MD 21202	CONTACT NAME:	
	PHONE (A/C, No, Ext): <b>(410) 685-4625</b>	FAX (A/C, No): <b>(410) 685-3071</b>
INSURED  <b>The Krewe of St. Andrews</b> P.O. Box 16791 Panama City, FL 32406	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A : <b>National Union Fire Insurance</b>	
	INSURER B :	
	INSURER C :	
	INSURER D :	
INSURER E :		
INSURER F :		
		NAIC # <b>19445</b>

### 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.

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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/>		4025932845	7/1/2021	7/1/2022	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY		<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> HIRED AUTOS ONLY		<input type="checkbox"/> NON-OWNED AUTOS ONLY				BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b>		<input type="checkbox"/> OCCUR				EACH OCCURRENCE	\$
	<input type="checkbox"/> <b>EXCESS LIAB</b>		<input type="checkbox"/> CLAIMS-MADE				AGGREGATE	\$
	<input type="checkbox"/> DED		<input type="checkbox"/> RETENTION \$					\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						PER STATUTE	OTH-ER
	<input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		<input type="checkbox"/> Y / N	N / A			E.L. EACH ACCIDENT	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below						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)  
The City of Panama City is an Additional Insured.

### CERTIFICATE HOLDER

### CANCELLATION

<b>City of Panama City</b> 9 Harrison Avenue Panama City, FL 32401	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 