



501 Harrison Avenue • Panama City, Florida 32401 • (850) 872-3199 • www.dcregov.org

Special Event Permit Application

Event	Event Name: Bay Pride		Event Date: 06/11/2022	
	Event Venue/Location requested: McKenzie Park			
	Organization/Applicant Name: LGBTQ Center of Bay County			
Applicant Information	Address: 1608 Baker Ct, Rm 6, Panama City, FL 32401			
	Contact Name: Arlene Garner			
	Office Phone:	Cell: 850 238-6923	Email: arlenegarner1@aol.com	
	Social Media/ Website: LGBTQ Center of Bay County (Facebook)			
	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 checked="" type="checkbox"/> NO <input 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"/>				
Brief Description: Festival				

Estimated number of spectators: 500
 Will any fees be charged to the spectators? YES NO
 If so, what fees and amount will be charged? _____

Event Start Date/Time: June 11, 2022 1 pm Event End Date/Time: June 11, 2022 7 pm

Event Set-up Date/Time: June 11, 2022 8 am Event Breakdown Date/Time: June 11, 2022 9 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:
 Public Parking

Do you have designated handicap parking? YES NO
 Location: Public Parking

Event Rain Date requested: YES NO 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 National Radio Local TV National TV Cable TV Local Newspaper
 National Newspaper Direct Mail/Flyers Internet Email Billboards Social Media Outlet



Will sound amplifying equipment be used? YES NO Type of equipment: Stage Equipment

Identify the type of entertainment being requested: BAND DISC-JOCKEY OTHER Disc-Jockey

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)

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: 2

Will Light Towers be used for this event? YES NO If yes, total number of Light Towers: 2

Will this event require a street closure? YES NO If yes, Full or Partial
 What road you are requesting to be closed? Park Ave, Oak to 3rd Ct; 3rd, Park to Luverne
 Beginning Crossroad: _____ Ending Crossroad: _____
 Requested time of closure from: 8am to: 9pm
 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?

Is there a Sanitation/Clean-up plan? YES NO
 Name and phone number of Company/Person responsible for Sanitation/Clean-up services:
 Event Organizers _____

Will additional garbage carts be needed? YES NO How many? 10
 Will dumpsters be needed? YES NO How many? 2-Yard 4-Yard 6-Yard 8-Yard
 Date trash will be removed from event location(s): 06/13/2022

Portable Restrooms: YES NO Number of portable restrooms: Standard 1 ADA 1
 Date/Time: Drop off 06/10/2022 Pick up 06/11/2022

Will there be Stages/Platforms _____ or Tent(s)
 Size of stage/platform: _____ Location: _____
 Tents: 50 of 10x10; _____ 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.



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 AG

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)

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:

Will there be fireworks or open flame? YES NO

If yes, describe:


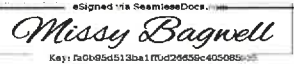
A permit for fireworks or open burn is required. City Ordinance (Sec. 12-165). The following must be submitted to the Fire Chief in order to be considered for a fireworks permit.




- 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 4th.



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Affidavit	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: Arlene Garner	
	Applicant's Signature:  <small>eSigned via SeamllessDocs.com Key: 6e5cbe6737735ca6fed1727ba027a5</small>	Date: 03/08/2022
	Event Coordinator print name: Missy Bagwell	03/08/2022
Event Coordinator Signature:  <small>eSigned via SeamllessDocs.com Key: fa0b95d513ba1f0d29658c405085a05</small>		

Approvals / Internal Use Only	City Sponsored <input type="checkbox"/> City Partnered <input type="checkbox"/> CRA <input type="checkbox"/>
	QOL Department Director's Approval: YES <input type="checkbox"/> NO <input type="checkbox"/> Yes, with conditions listed below <input checked="" type="radio"/>
	Conditions: Ensure coordination with Downtown Farmer's Market as they function to 12pm with breakdown until 1pm.
	QOL Department Director Signature & Date:  <small>eSigned via SeamllessDocs.com Key: 4b47037596c2b0147bb55d8f3d07e8f</small>
	Panama City Police Department Approval: YES <input checked="" type="radio"/> NO <input type="checkbox"/> Yes, with conditions listed below <input type="checkbox"/>
	Conditions: Two officers will be required for this event
	Panama City PD Professional Services Signature & Date:  <small>eSigned via SeamllessDocs.com Key: eeb1c7bb3c363f17370d220caebdfe5</small>
	Panama City Police Department Chief Signature & Date:  <small>eSigned via SeamllessDocs.com Key: 3ad7c378d7c2179c58a5fb810e2a2f5</small>
Panama City Fire Department Approval: YES <input type="checkbox"/> NO <input type="checkbox"/> 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: _____	

Permit Fees / Internal Use Only	<u>Fees (check paid fees)</u>	
	<input type="checkbox"/> Application Fee	\$ <u>100</u>
	<input type="checkbox"/> Security Deposit	\$ <u>250</u>
	<input type="checkbox"/> Solid Waste – Garbage Carts/Dumpsters	\$ <u>100</u>
	<input type="checkbox"/> Logistics – Electrical Connections	\$ <u>120</u>
	<input type="checkbox"/> Utilities – Water Meter	\$ _____
	<input type="checkbox"/> Police / Security	\$ <u>735</u>
	<input type="checkbox"/> Block Party	\$ _____
	<input type="checkbox"/> Fire / EMT	\$ _____
	<input type="checkbox"/> Other	\$ _____
Total Fees Due	\$ <u>1305.</u>	



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 8th day of March 2022

Signed, sealed and delivered
in the presence of

Missy Bagwell MB
Print Name of Witness

Missy Bagwell
Print Name of Witness

LGBTQ CENTER OF BAY COUNTY
Print Name of Organization or
Individual

eSigned via SeamlessDocs.com
Arlene Garner
Key: 0e5cb06737730c60fcd7277ba927a8

Signature

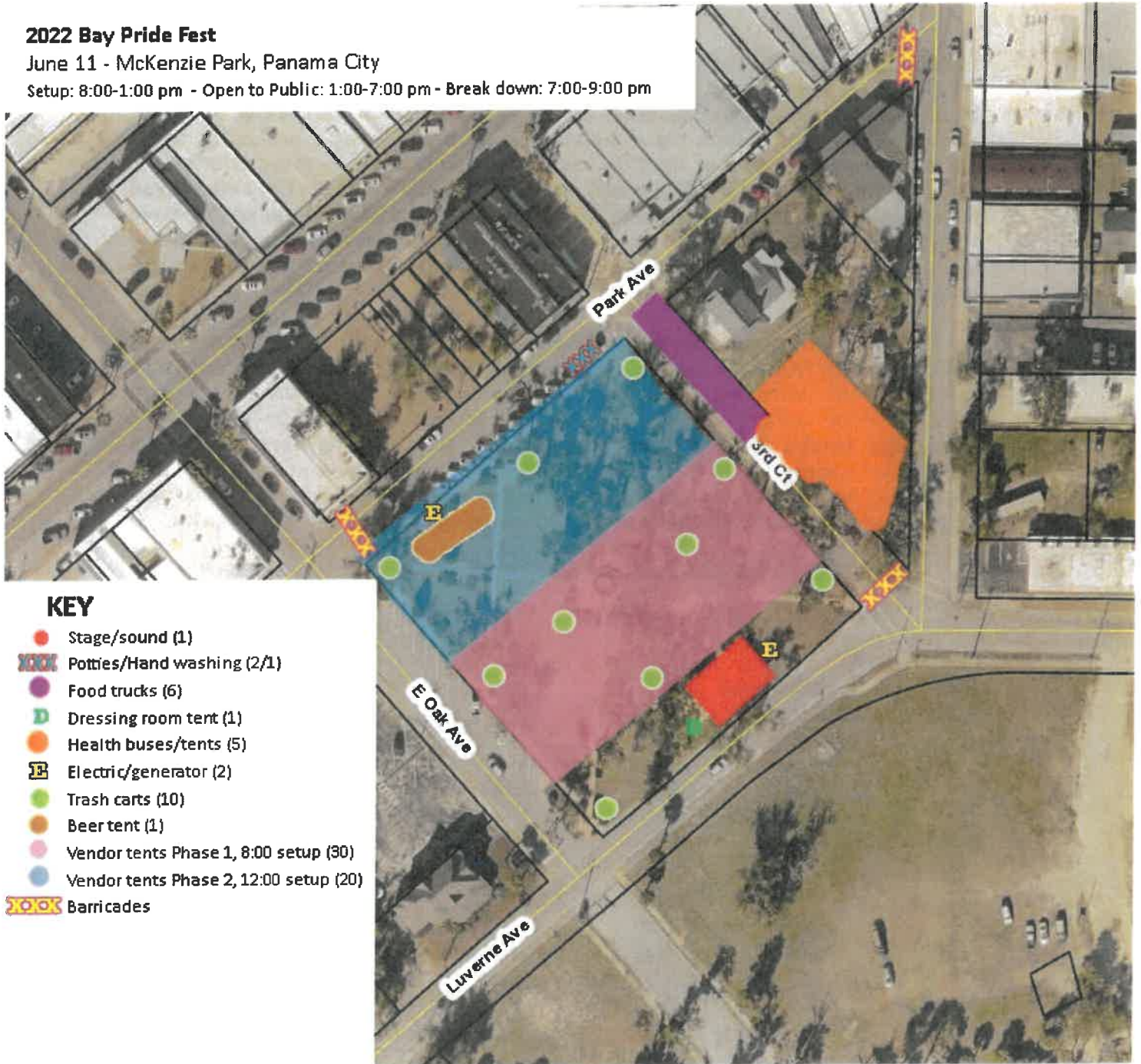
Arlene Garner
(Print Name)

Title: EVENT CO ODINATOR
Print Name and Title if acting on Behalf of
Above Organization

2022 Bay Pride Fest

June 11 - McKenzie Park, Panama City

Setup: 8:00-1:00 pm - Open to Public: 1:00-7:00 pm - Break down: 7:00-9:00 pm



KEY

- Stage/sound (1)
- XXX Potties/Hand washing (2/1)
- Food trucks (6)
- D Dressing room tent (1)
- Health buses/tents (5)
- E Electric/generator (2)
- Trash carts (10)
- Beer tent (1)
- Vendor tents Phase 1, 8:00 setup (30)
- Vendor tents Phase 2, 12:00 setup (20)
- XXX Barricades

To: LGBTQ CENTER OF BAY COUNTY INC

*** BINDER ***
 03/21/2022

From: Maria Wilson
 maria.wilson@pfinsurance.com

Renewal Of: NEW

Insured: **LGBTQ CENTER OF BAY COUNTY INC**

Thank you for your order to bind. We appreciate your business! We have bound the below coverage. Policy to Follow Shortly

POLICY INFORMATION

COMMERCIAL LIABILITY POLICY	
Policy Number:	SE 2009948
Policy Period:	06/11/2022 to 06/13/2022
Carrier:	Mount Vernon Fire Insurance Company
Status:	Non-Admitted
A.M. Best Rating:	A++ (Superior) - XII
COVERAGE PART	PREMIUM
Commercial Liability	\$550.00
Each Occurrence Limit	\$1,000,000
Personal & Advertising Injury Limit (Any One Person/Organization)	\$1,000,000
Medical Expense Limit (Any One Person)	\$1,000
Damages To Premises Rented To You (Any One Premises)	\$100,000
Products/Completed Operations Aggregate Limit	See L-535
General Aggregate Limit	\$2,000,000
Liquor Liability	\$550.00
Each Common Cause Limit	\$1,000,000
Aggregate Limit	\$2,000,000
POLICY PREMIUM	\$1,100.00
ADDITIONAL COSTS	
Broker Fee	\$35.00
Service Fee	\$0.68
Surplus Lines Tax	\$56.07
TOTAL	\$1,191.75

Location of All Covered Special Event(s)

1 - Mckenzie Park, Panama City, FL 32401

APPLICABLE FORMS & ENDORSEMENTS

The following forms apply to multiple coverage parts

2110 04/15	Service Of Suit	CG0220 03/12	Florida Changes - Cancellation And Nonrenewal
IL0017 11/98	Common Policy Conditions	IL0021 09/08	Nuclear Energy Liability Exclusion Endorsement
Jacket 07/19	Policy Jacket	L-206 04/15	Fully Earned Premium Endorsement
L-224 12/17	Punitive or Exemplary Damages Exclusion	L-526 01/15	Absolute War Or Terrorism Exclusion
L-610 11/04	Expanded Definition Of Bodily Injury	L-656 02/06	Extension Of Coverage - Committee Members
L-816 11/18	Amendments of Conditions - Limits of Insurance Under Multiple Coverage Parts	L-820 12/18	Special Events Blanket Additional Insured Endorsement
LLQ 102 02/15	Event Vendor, Exhibitor And Contractor Exclusion	LLQ100 04/15	Who Is An Insured Clarification Endorsement
LLQ101 08/06	Expanded Definition Of Employee	LLQ368 04/15	Separation Of Insureds Clarification Endorsement
SPE 312 03/15	Who Is An Insured	TRIADN 12/20	Disclosure Notice of Terrorism Insurance Coverage

The following forms apply to the Commercial Liability coverage part

CG0001 12/07	Commercial General Liability Coverage Form	CG0068 05/09	Recording And Distribution Of Material Or Information In Violation Of Law Exclusion
CG2107 05/14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included	CG2109 06/15	Exclusion - Unmanned Aircraft
CG2136 03/05	Exclusion - New Entities	CG2139 10/93	Contractual Liability Limitation
CG2144 07/98	Limitation Of Coverage To Designated Premises Or Project	CG2147 12/07	Employment-Related Practices Exclusion
L 427 01/20	Exclusion for Fireworks and Other Pyrotechnic Devices	L 428 FL 06/16	Firearms Exclusion
L 535 03/15	Exclusion - Products-Completed Operations Hazard Other Than Food Or Beverage Products	L-206 04/15	Fully Earned Premium Endorsement
L-224 12/17	Punitive or Exemplary Damages Exclusion	L-387 12/19	Exclusion - Mechanical Riding Devices and Mechanical Amusement Devices
L-423 04/15	Exclusion For Structure Collapse	L-461 04/15	Assault Or Battery Exclusion
L-526 01/15	Absolute War Or Terrorism Exclusion	L-536 04/15	Exclusion - Participation In Athletic Activity, Physical Activity Or Sports
L-599 04/15	Absolute Exclusion For Pollution, Organic Pathogen, Silica, Asbestos And Lead With A Hostile Fire Exception	L-606 04/15	Exclusion For Injury To Performers, Entertainers And Participants
L-607 10/16	Exclusion for Climbing, Rebounding and Interactive Games and Devices	L-609 04/15	Animal Exclusion
L-686 04/15	Absolute Exclusion For Liquor And Other Related Liability	L-816 11/18	Amendments of Conditions - Limits of Insurance Under Multiple Coverage Parts
L-820 12/18	Special Events Blanket Additional Insured Endorsement	LLQ 102 02/15	Event Vendor, Exhibitor And Contractor Exclusion
LLQ100 04/15	Who Is An Insured Clarification Endorsement	LLQ368 04/15	Separation Of Insureds Clarification Endorsement
SPE 300 05/09	Special Events Property Damage Amendment	SPE 312 03/15	Who Is An Insured

The following forms apply to the Liquor Liability coverage part

CG0033 12/07	Liquor Liability Coverage Form	CG2406 04/13	Liquor Liability - Bring Your Own Alcohol Establishments
L 657 10/16	Absolute Pollution Exclusion - Liability	L-206 04/15	Fully Earned Premium Endorsement
L-224 12/17	Punitive or Exemplary Damages Exclusion	L-816 11/18	Amendments of Conditions - Limits of Insurance Under Multiple Coverage Parts
L-820 12/18	Special Events Blanket Additional Insured Endorsement	LLQ 102 02/15	Event Vendor, Exhibitor And Contractor Exclusion
LLQ100 04/15	Who Is An Insured Clarification Endorsement	LLQ368 04/15	Separation Of Insureds Clarification Endorsement
LQ 352 01/16	Event Vendor - Other Insurance	LQ 354 10/16	Limitation of Coverage to Insured Premises
LQ-202 04/15	Assault Or Battery Exclusion	LQ-428 10/16	Absolute Firearms Exclusion
SPE 312 03/15	Who Is An Insured		

Consumer's Certificate of Exemption

DR-14 R. 01/18

FLORIDA

Issued Pursuant to Chapter 212, Florida Statutes

85-8017766195C-9	03/29/2019	03/31/2024	501 ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

LGBTQ CENTER OF BAY COUNTY INC
 1608 BAKER CT RM 5
 PANAMA FL 32401-1900

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.

Important Information for Exempt OrganizationsDR-14
R. 01/18

FLORIDA

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. see Rule 12A-1.038, Florida Administrative Code (F.A.C.).
2. Your Consumer's Certificate of Exemption is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
6. If you have questions about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

INTERNAL REVENUE SERVICE

P. O. BOX 2508 CINCINNATI, OH
45201

