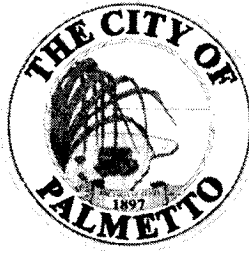


**TAB 2**



APPLICATION FOR SPECIAL PERMIT EXCEPTION  
TO THE CITY'S NOISE ORDINANCE

APPLICATION MUST BE FILED NO LESS THAN THIRTY (30) DAYS PRIOR TO  
THE DATE OF EVENT OR OCCURRENCE.

PALMETTO ART CENTER      NOV. 20<sup>th</sup> 2010  
Applicant's Name      Event Date

907 5<sup>th</sup> STREET WEST

PALMETTO, FL 34221      (941) 518-2109  
Address      Telephone

GRETCHEN LECLEZIO  
Applicant's Authorized Representative

The Applicant hereby applies for a Special Permit Exception (SPE) to certain provisions of the City of Palmetto's Code regarding the prohibition of and abatement of noise disturbances on private and public properties. The SPE is sought for:

1. DESCRIPTION OF ACTIVITY/EVENT FOR WHICH SPE IS REQUESTED:

PALMETTO ART CENTER'S FALL SHOW  
ART MEETS AGRICULTURE,  
BLUEGRASS BAND TO PLAY ON SIDE  
STAGE FROM 6-8 PM.

2. ESTIMATED ATTENDANCE: 100

3. PROPOSED HOURS FOR NOISE EXCEPTION PERMIT:

From 5 To 9 PM

4. STATEMENT OF GENERAL COMMUNITY IMPORTANCE OR BENEFIT:

PALMETTO ART SHOWS ARE FREE TO THE  
COMMUNITY. SHOWS ARE FAMILY FRIENDLY  
AND PROMOTE APPRECIATION OF VISUAL  
AND MUSICAL ARTS.

5. IDENTIFY PROPOSED EFFECTIVE MITIGATION MECHANISMS:

Placement of speakers will lessen impact  
of music.

6. ANY ALTERNATIVE LOCATIONS FOR EVENT/ACTIVITY:

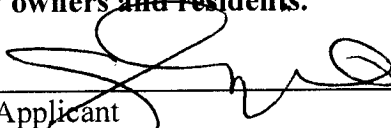
IF IT RAINS, WE WILL MOVE BAND  
INSIDE.

7. NAME AND NUMBER OF RESPONSIBLE PARTY TO BE CONTACTED DURING EVENT/ACTIVITY:

GRETCHEN LECLEZIO (941) 518-2109

I AM AWARE THAT in determining whether or not an SPE shall be issued, the City Commission shall, at a minimum, consider the nature of the event; its possible adverse effects; its importance to the general community and potential benefit the event may have upon the City and the general public; the number of participants at the event; the time of the event; proposed effective mitigation mechanisms; and the availability of alternative locations. Review of a denial of an SPE shall be to the Circuit Court in and for Manatee County and must be filed within thirty (30) days of the date of the City Commission decision relating to the SPE. Review shall be based solely upon the record generated before the City Commission. The burden is upon the applicant to establish by substantial, competent evidence that the activity for which the SPE is sought has the means to effectively mitigate potential adverse effects and impacts upon surrounding property owners and residents.

Internal Use Only  
Date Received:  
\_\_\_\_\_

  
Applicant

CITY COMMISSION APPROVAL: \_\_\_\_\_



**SPECIAL FUNCTION PERMIT APPLICATION**

EVENT NAME: FALL SHOW: ART MEETS ~~AGRICULTURE~~ AGRICULTURE EVENT DATE: NOV. 20, 2010  
APPLICANT: PALMETTO ART CENTER EVENT TIME: 5-9 PM  
ADDRESS: 907 5TH ST. WEST PHONE: (941) 518-2109  
CONTACT: GRETCHEN UCCLEZIO PHONE: \_\_\_\_\_

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: ART SHOW  
WITH MUSIC ON SIDE STREET  
(PLEASE SEE ATTACHED SHEET FOR BAND LOCATION)

ANTICIPATED ATTENDANCE: 100

**CITY SERVICES REQUIRED:**

② POLICE: Streets Blocked: \_\_\_\_\_ Traffic Control: \_\_\_\_\_ Security: \_\_\_\_\_ Other: \_\_\_\_\_  
PUBLIC WORKS: Barricades: X Clean-up: \_\_\_\_\_ Set-up: \_\_\_\_\_ Other: \_\_\_\_\_

*If a temporary restroom is utilized for a period greater than five (5) days, a Temporary Use Permit is required. Application is available at City Hall.*

**TEMPORARY RESTROOM FACILITIES:** # of units: \_\_\_\_\_ # of days: \_\_\_\_\_  
Proposed location(s): \_\_\_\_\_

**INSURANCE REQUIREMENT:** Insurance naming the City of Palmetto as an "Additional Insured" must be provided to the City Clerk ten (10) days prior to any event that is part of the Special Function Permit.

Please review Exhibit A for insurance coverage requirements. To purchase insurance policies of appropriate coverage through the City, please complete and submit the Special Events Application Quote Form (Exhibit B).

The Special Function Permit Application must be submitted to City Clerk's office at least 30 days prior to the event.

**Sale or consumption of alcoholic beverages on City property is strictly prohibited.**

If your event will include the use of loudspeakers, you may be required to apply for a Special Permit Exception to the City's Noise Ordinance (See Chapter 5-Amusements, of the City of Palmetto Code of Ordinances).

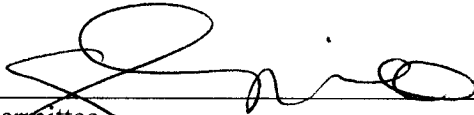
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PLEASE CONTINUE TO PAGE 2.**

**Special Function Permit Application**

**Page 2**

EVENT: FALL SHOW: ART MEETS AGRICULTURE Event Date: NOV. 26<sup>th</sup>, 2010

I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL FUNCTION PERMIT APPLICATION CONDITIONS.

  
\_\_\_\_\_  
Permittee

---

**CITY APPROVAL:**

Public Works Director \_\_\_\_\_ Date \_\_\_\_\_

Police Department \_\_\_\_\_ Date \_\_\_\_\_

North River Fire \_\_\_\_\_ Date \_\_\_\_\_

APPROVED BY COMMISSION: \_\_\_\_\_ Date \_\_\_\_\_

Internal use only Date Received: _____
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# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
09/22/2010

<b>PRODUCER</b> IDEAL INSURANCE, INC 6245C CLARK CENTER AVE SARASOTA, FL 34238	941-921-2102	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
<b>INSURED</b> PALMETTO ART CENTER INC 722 11TH AVE WEST PALMETTO, FL 34221	<b>INSURERS AFFORDING COVERAGE</b> INSURER A: SAFECO INSURANCE CO INSURER B: INSURER C: INSURER D: INSURER E:	<b>NAIC #</b>

## COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADDL LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	01-CI-12903-2	01/27/2010	01/27/2011	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 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> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	<b>OTHER</b>				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

RE: ONE DAY EVENT 11/20/2010  
 CERTIFICATE HOLDER IS NAMED AS ADDITIONAL INSURED

### CERTIFICATE HOLDER

CITY OF PALMETTO  
 600 17TH ST WEST  
 PALMETTO, FL 34221

### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*[Signature]*



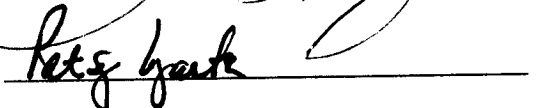
September 22<sup>nd</sup>, 2010

This letter states that the below property owners are aware that there will be a musical band (bluegrass band) on the side stage between the hours of 5PM – 9PM on the date of November 20<sup>th</sup>, 2010 for PAC's **FALLSHOW**: ART meet Agriculture : A Celebration of Farm City Week.

Yes, I am aware that the Palmetto Art Center will be having music on the exterior side stage of their property on November 20<sup>th</sup>, 2010.

Donny Thomas, Palmetto Plumbing: 

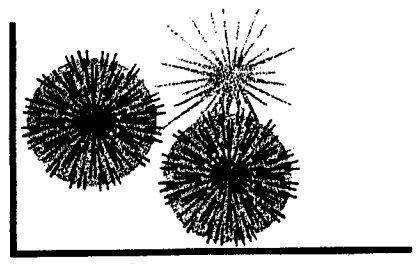
Trisha Fritz, Grower's Hardware: 

Patsy Ugarte, Ugarte Architects: 

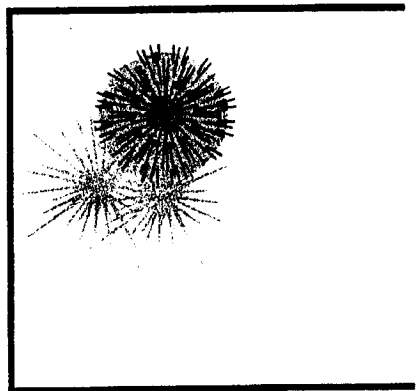
Krisitn Biggins, North River Assisted Living: 



North



9th Ave.



8th Ave.

Barricades

5th Street



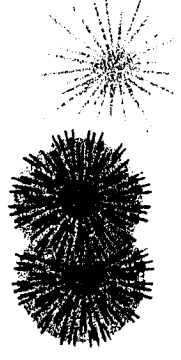
Art Center



Palmetto Plumbing



Ugarte



Stage

Barricades

