

TAB 4



SPECIAL FUNCTION PERMIT APPLICATION

SAT 12/4/2010

EVENT NAME: TOUR of HOMES
APPLICANT: PALMETTO RIVERSIDE B & B
ADDRESS: 1102 RIVERSIDE DR
CONTACT: Wim Lippens

EVENT DATE: SUN 12/5/2010
EVENT TIME: 11.00 AM - 6.00 PM
PHONE: 941-981-5331
PHONE: _____

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: "Entre Nous" TOUR of HOMES

ANTICIPATED ATTENDANCE: 2 x 800 guests

CITY SERVICES REQUIRED:

POLICE: Streets Blocked: Traffic Control: _____ Security: _____ Other: _____
PUBLIC WORKS: Barricades: _____ 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: Town of Homes

SAT 12/4/2010
Event Date: SUN 12/5/2010

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


Permittee

CITY APPROVAL:

Public Works Director 

Date 11-10-10

Risk Management _____

Date _____

Parks Department _____

Date _____

Police Department _____

Date _____

North River Fire 

Date 10/19/10

APPROVED BY COMMISSION: _____

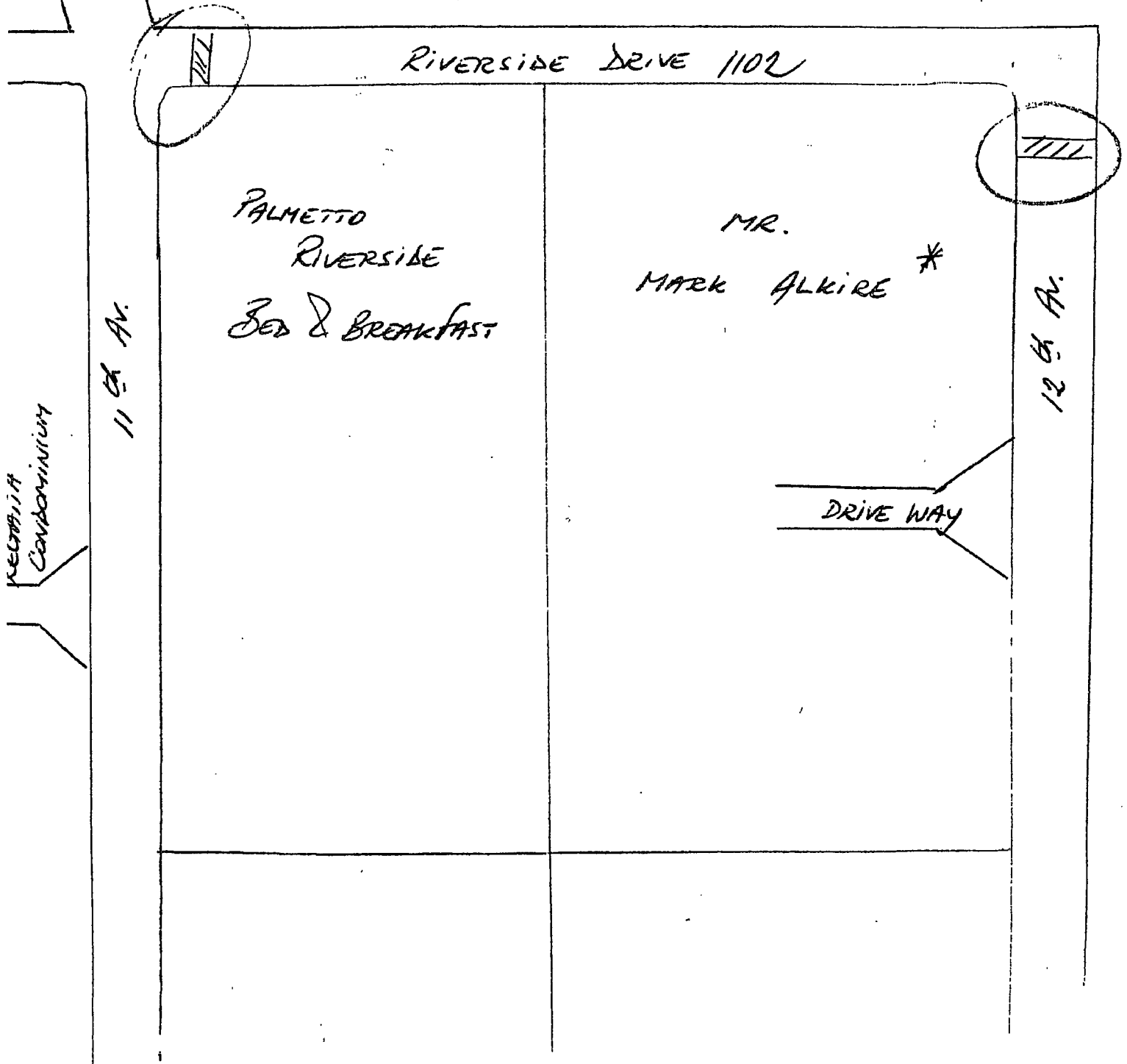
Date _____

Internal use only
Date Received: _____

ENTRE NOUS = TOUR OF HOMES

DEC. 4 & 5, 2010

11:00 AM - 6:00 PM



* Homeowner contacted AND AGREED with proposed road closure for entire duration of the event.



SPECIAL FUNCTION PERMIT APPLICATION

EVENT NAME: De Soto Heritage Festival Children's Parade

EVENT DATE: April 22, 2011

APPLICANT: Hernando de Soto Historical Society, Inc.

EVENT TIME: 10:00 am - 3:00 pm

ADDRESS: 910 Third Avenue West, Bradenton, FL 34205

PHONE: 941-747-1998

CONTACT: Sharon McGlynn, Executive Director

PHONE: 941-747-1998

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: Use of Sutton and Lamb Parks
for Children's activities. Use of gazebo and no parking signs on 10th Avenue. Parade route is
attached.

ANTICIPATED ATTENDANCE: _____

CITY SERVICES REQUIRED:

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

See attached parade route of streets blocked.

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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Special Function Permit Application
Page 2

EVENT: De Soto Heritage Festival Children's Parade

Event Date: April 22, 2011

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



Permittee Gus Sokos, President 10/13/10

CITY APPROVAL:

Public Works Director 

Date 11-10-10

Police Department _____

Date _____

North River Fire 

Date 10/19/10

APPROVED BY COMMISSION: _____

Date _____

Internal use only
Date Received: _____

To: City Commission
Thru: Diane Ponders, Assistant City Clerk
From: Geoff Seger, Parks Director
Subject: Desoto Children's Parade
Date of event: April 22, 2011

Desoto Children's Parade

Parade and event held at Sutton and Lamb Parks. The Parks Department will be responsible for the closing of roads along the parade route, detouring traffic around the parade route and reopening after the event is over. During the event the staff is responsible for debris removal and clean up when the event is over.

Labor: 6 hrs.

Bobby Jackson -----	\$71.91
Victor Pompey -----	\$74.61

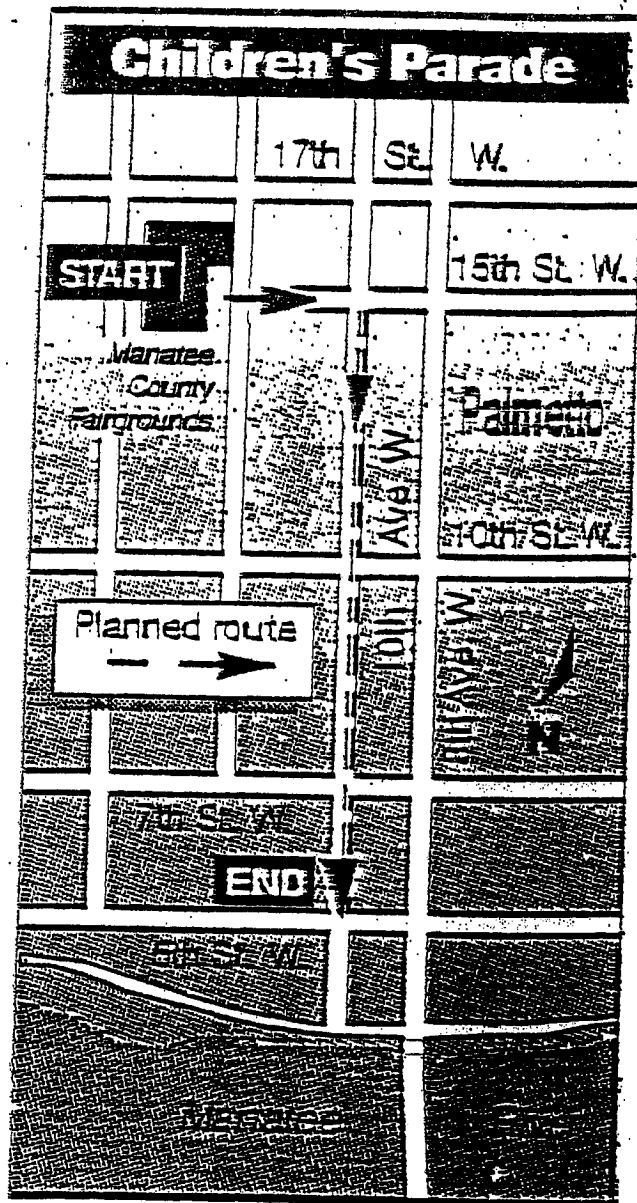
Equipment used:

3 – Public Works trucks @ \$7.50 per hour -----	\$67.50
150 Safety Cones, 35 directional signs	

Rental Fee for Sutton Park -10:00 a.m. – 3:00 p.m. -----	\$105.00
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Total cost -----	\$319.02
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De Soto Heritage Festival Children's Parade Route





SPECIAL FUNCTION PERMIT APPLICATION

EVENT NAME: De Soto Heritage Festival Grand Parade
APPLICANT: Hernando de Soto Historical Society, Inc.
ADDRESS: 910 Third Avenue West, Bradenton, FL 34205
CONTACT: Sharon McGlynn, Executive Director

EVENT DATE: Saturday, April 30, 2011
EVENT TIME: 6:15 pm - 11:00 pm
PHONE: 941-747-1998
PHONE: 941-747-1998

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: Starts at Hawkins Stadium, proceeds east on Manatee Avenue, ends at 9th Street. Disperses on Manatee Avenue between 9th St. and 1st St. See attached map of the Parade route.

ANTICIPATED ATTENDANCE: _____

CITY SERVICES REQUIRED:

POLICE: Streets Blocked: _____ Traffic Control: X Security: _____ Other: _____
PUBLIC WORKS: Barricades: _____ 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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Special Function Permit Application
Page 2

EVENT: De Soto Heritage Festival Grand Parade

Event Date: Saturday, April 30, 2011

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



Permittee Gus Sokos, President 10/14/10

CITY APPROVAL:

Public Works Director 

Date 11-10-10

Police Department 

Date _____

North River Fire 

Date 10/19/10

APPROVED BY COMMISSION: _____

Date _____

Internal use only
Date Received: _____

To: City Commission
Thru: Diane Ponders, Assistant City Clerk
From: Geoff Seger, Parks Director
Re: De Soto Heritage Parade
Date of Event: April 30, 2011

De Soto Heritage Festival Grand Parade

The Parks Department will be responsible for the closing of the Green Bridge and for the safe detouring of north and south bound traffic for the duration of the parade. The associated costs are as follows.

In Kind

19 – 48” traffic signs – see map for locations

25 – 36” safety cones (FDOT approved) to close the Green Bridge, PPD to monitor.

Labor/Equipment – 3 Hours

Jim Michener _____	\$90.81
Bobby Jackson _____	\$71.91
City Truck _____	\$22.50
Total _____	\$185.22

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/03/2010

PRODUCER Haas & Wilkerson Insurance 4300 Shawnee Mission Parkway Fairway, KS 66205 913 432-4400	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.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Hernando de Soto Historical Society, Inc. dba De Soto Heritage Festival 910 Third Ave W Bradenton, FL 34205	INSURER A: ACE American Insurance Co	22667
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

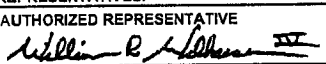
COVERAGES

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 ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	X	GENERAL LIABILITY <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 type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	G20661902	01/30/10	01/30/11	EACH OCCURRENCE	\$1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$500,000
						MED EXP (Any one person)	\$EXCLUDED
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$5,000,000
						PRODUCTS - COMP/OP AGG	\$5,000,000
		AUTOMOBILE LIABILITY <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)	\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN EA ACC	\$
						AUTO ONLY: AGG	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS	OTH-ER
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$
		OTHER					

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

Governmental Entity (Form CG2026/LD-22318)
 The certificate holder is named as an additional insured on the general
 (See Attached Descriptions)

CERTIFICATE HOLDER City of Palmetto 516 8th Ave. W. Palmetto, FL 34221	CANCELLATION 10 Days for Non-Payment
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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 

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

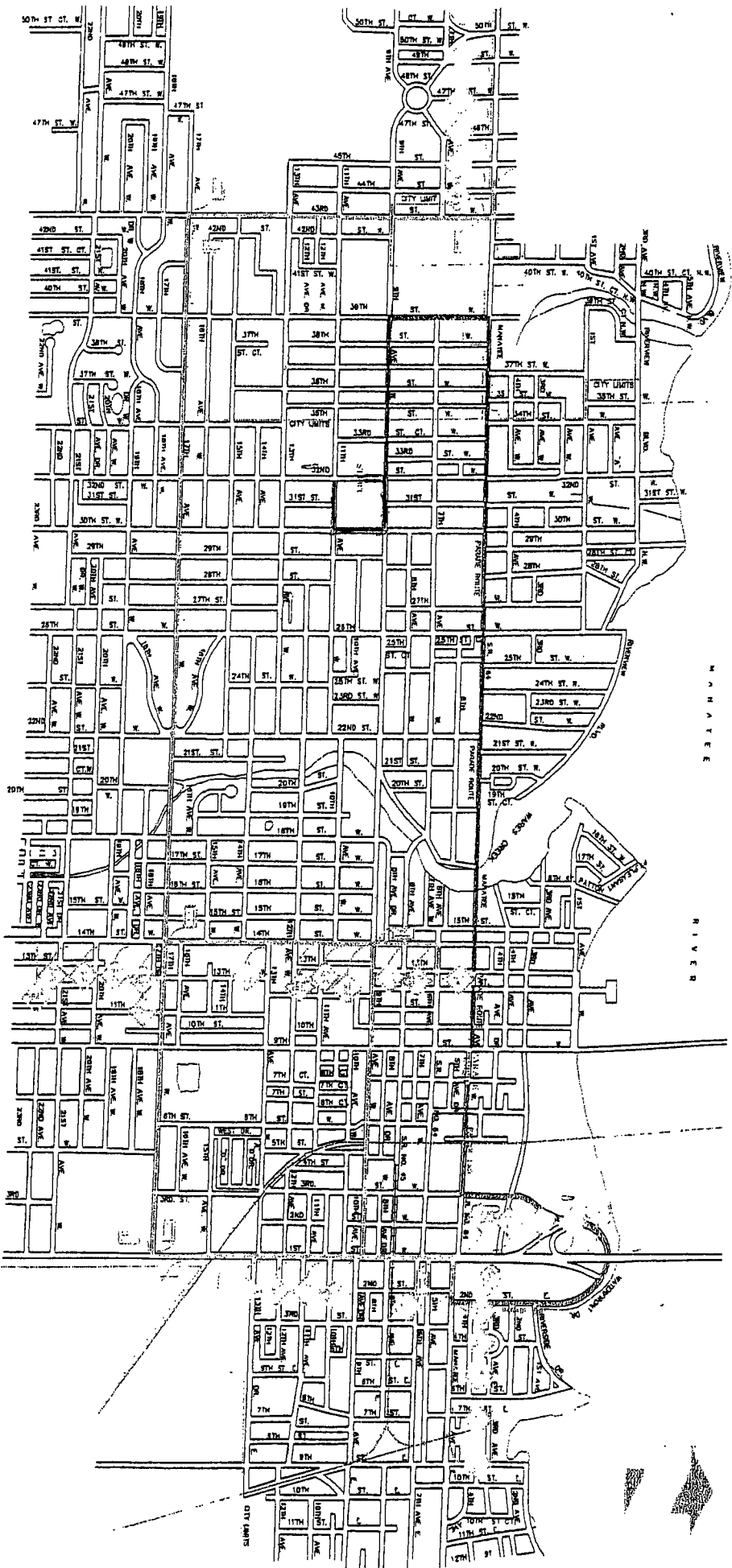
DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

DESCRIPTIONS (Continued from Page 1)













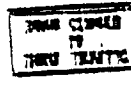

liability policy but only with respect to liability arising out of the named insured's operations or premises owned by or rented to the named insured per form CG2026/LD-22318.

CITY OF BRADENTON
HERITAGE PARADE DETOUR MAP
BRADENTON, FLORIDA
ENGINEERING DEPARTMENT
MARCH, 2010

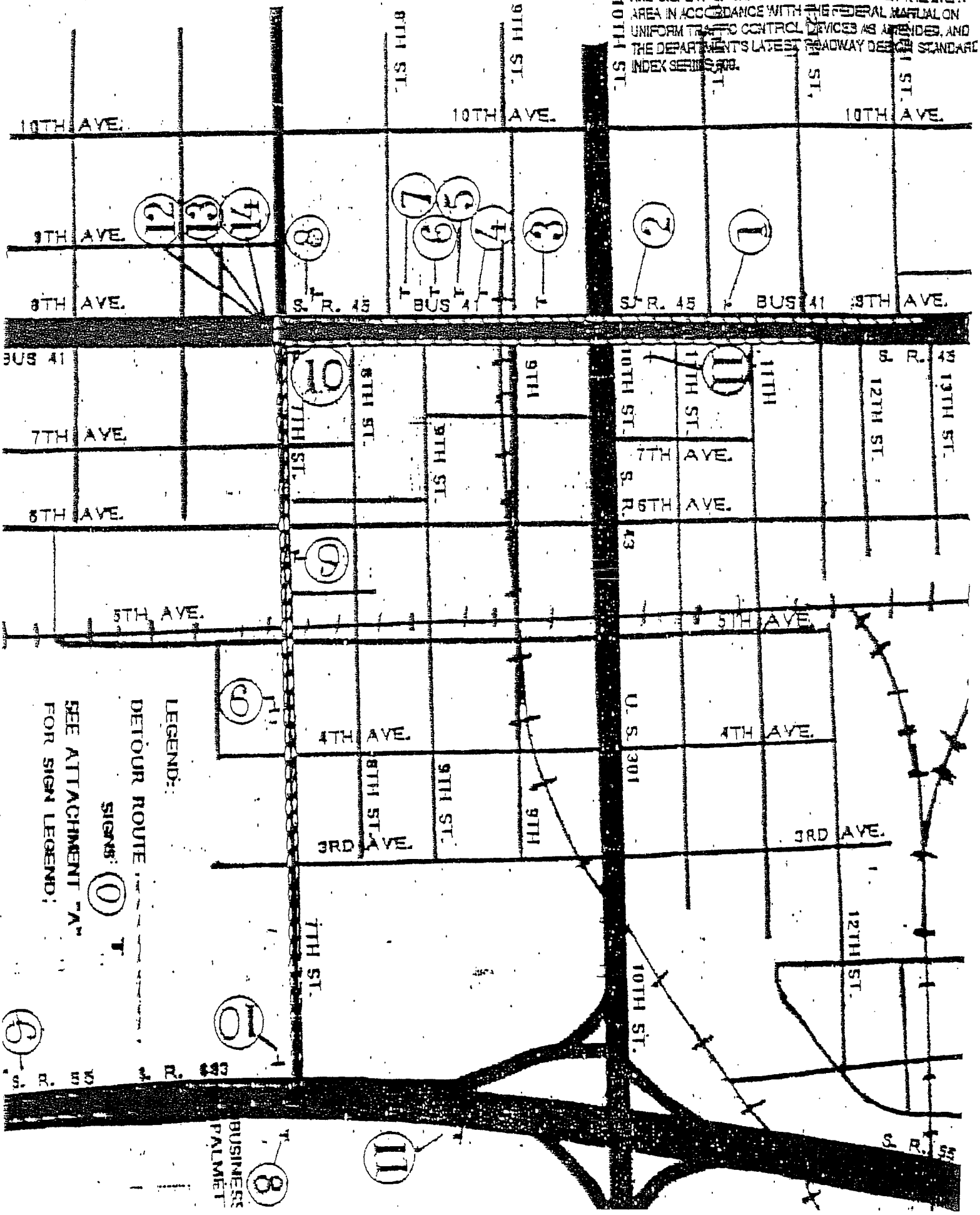


ATTACHMENT "A"

SIGN LEGEND:

1.  1 SIGN ^{DETOUR} ~~ROAD~~ CLOSED 1500'
2.  1 SIGN Detour 1000'
3.  1 SIGN RIGHT LANE CLOSED AHEAD
4.  1 SIGN BRIDGE CLOSED AHEAD
5.  1 SIGN MERGE LEFT
6.  2 SIGNS Detour 500'
7.  1 SIGN Detour Ahead
8.  2 SIGNS LEFT Detour
9.  2 SIGNS DETOUR
10.  2 SIGNS RIGHT DETOUR
11.  2 SIGNS — END DETOUR
12.  1 SIGN TYPE III BARRICADE
13.  1 SIGN Road Closed to this traffic
 DETOUR ←

THE PERMITTEE IS RESPONSIBLE FOR THE PLACEMENT AND DISPLAY OF SAFETY DEVICES THROUGH THE EVENT AREA IN ACCORDANCE WITH THE FEDERAL MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES AS AMENDED, AND THE DEPARTMENT'S LATEST ROADWAY DESIGN STANDARD INDEX SERIES 100.



LEGEND:

DETOUR ROUTE

SIGNS: ○ T

SEE ATTACHMENT "A" FOR SIGN LEGEND:

○ 5

○ 10

○ 8

○ 11

BUSINESS PALMETT

BUS 41

S. R. 45

U.S. 301

S. R. 45

S. R. 55