

TAB 3



SPECIAL FUNCTION PERMIT APPLICATION

EVENT NAME: St. Patrick's Day 5K
APPLICANT: Foundation for Dreams
ADDRESS: 16110 Dream Oaks Place
CONTACT: Elena Cassella

EVENT DATE: 3-17-2012
EVENT TIME: 8:00-10:30
PHONE: 941-746-5659
PHONE: 941-232-1403

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.:
See Attached Map

ANTICIPATED ATTENDANCE: 200

CITY SERVICES REQUIRED: See Attachment
POLICE: Streets Blocked: Traffic Control: Security: Other: _____
PUBLIC WORKS: Barricades: Clean-up: _____ Set-up: _____ Other: _____

Block off 10th Ave between 6th & 7th St.
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: no # of days: no
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. Insurance may also be obtained by event sponsors through personal or commercial insurance policies. If it is necessary to purchase an insurance policy for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

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).

Special Function Permit Application
Page 2

EVENT: St. Patrick's Day SK

Event Date: 3-17-2012

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

Elena Casselle
Permittee

CITY APPROVAL:

City Clerk

[Signature]

Date 1/11/12

Public Works Director

[Signature]

Date 1-11-12

Police Department

[Signature]

Date 1-11-12

North River Fire

[Signature]

Date 12/21/11

APPROVED BY COMMISSION:

Date _____

Internal use only
Date Received: _____
By: _____

REQUEST FOR TEMPORARY CLOSING/SPECIAL USE OF STATE ROAD

- Instructions: 1. Obtain signatures of local law enforcement and city/county officials.
2. This form must be submitted by the local governmental authority to FDOT to obtain written approval. Allow adequate time for the review.
3. Attach any necessary maps or supporting documents.

NAME OF ORGANIZATION Foundation for Dreams		PERSON IN CHARGE Elena Cassella		DATE 12-20-11
ADDRESS OF ORGANIZATION 11110 Dream Oaks Camp Bradenton, FL 34212			TELEPHONE NUMBER 941-746-5659	
TITLE OF EVENT St. Patrick's Day 5K				
DATE OF EVENT 3-17-2012	STARTING TIME OF EVENT 7:00	DURATION OF EVENT (APPROX.) 3 hrs.	ACTUAL CLOSING TIME (INCLUDING SETTING UP BARRIERS, ETC.) 8:30 am. - 10:30 am	
PROPOSED ROUTE (INCLUDE STATE ROAD NUMBER, SPECIFIC LOCATION, ETC. - INCLUDE MAPS) <p style="text-align: center;">map attached</p>				
DETOUR ROUTE (INCLUDE ALTERNATE ROUTES - INCLUDE MAPS)				
NAME OF DEPT. RESPONSIBLE FOR TRAFFIC CONTROL, ETC. (CITY POLICE, SHERIFF'S DEPT., FLORIDA HWY. PATROL, ETC.) (INCLUDE PRECINCT NO.) City of Palmetto Police Department				
SPECIAL CONDITIONS				
THIS SECTION IS TO BE COMPLETED WHEN PERMITTING SPECIAL USE OF A STATE ROAD FOR FILMING				
LICENSED PYROTECHNICS OPERATOR _____ LICENSE NO. _____				
APPROVAL OF LOCAL FIRE DEPARTMENT _____				
LIABILITY INSURANCE CARRIER _____ POLICY EFFECTIVE DATE _____				
COVERAGE AMOUNT _____ (\$1,000,000 MINIMUM)				
LENGTH OF COVERAGE _____ DAYS				
FEDERAL AVIATION ADMINISTRATION APPROVAL FOR LOW FLYING FILMING _____				
ADDITIONAL LIABILITY INSURANCE AMOUNT _____ (\$5,000,000 MINIMUM)				
TYPED NAME AND TITLE (INCLUDE BADGE NO. IF APPROPRIATE)		SIGNATURE OF CHIEF OF LAW ENFORCEMENT AGENCY		DATE SIGNED
TYPED NAME AND TITLE OF CITY/COUNTY OFFICIAL		SIGNATURE OF CITY/COUNTY OFFICIAL		DATE SIGNED

The Permittee, shall indemnify, defend, and hold harmless the Department and all of its officers, agents, and employees from any claim, loss, damage, cost, charge, or expense arising out of any acts, actions, neglect, or omission by the Permittee, its agents, employees, or subcontractors during the performance of the Contract, whether direct or indirect, and whether to any person or property to which the Department or said parties may be subject, except that neither the Permittee nor any of its subcontractors will be liable under this Article for damages arising out of the injury or damage to persons or property directly caused or resulting from the SOLE negligence of the Department or any of its officers, agents or employees.

Contractor's obligation to indemnify, defend, and pay for the defense or at the Department's option, to participate and associate with the Department in the defense and trial of any damage claim or suit and any related settlement negotiations, shall be triggered by the Department's notice of claim for indemnification to Contractor. Contractor's inability to evaluate liability or its evaluation of liability shall not excuse Contractor's duty to defend and indemnify within seven days after such notice by the Department is given by registered mail. Only an adjudication or judgment after highest appeal is exhausted specifically finding the Department SOLELY negligent shall excuse performance of this provision by Contractor. Contractor shall pay all costs and fees related to this obligation and its enforcement by the Department. Department's failure to notify Contractor of a claim shall not release Contractor of the above duty to defend.

It is understood and agreed that the rights and privileges herein set out are granted only to the extent of the State's right, title, and interest in the land to be entered upon and used by the Permittee, and the Permittee will, at all times, assume all risk of and indemnify, defend and save harmless the State of Florida and the Department from and against any and all loss, damage, cost, or expense arising in any manner on account of the exercise or attempted exercises by said Permittee of the aforesaid rights and privileges.

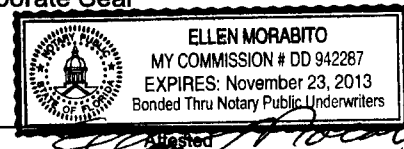
During the event, all safety regulations of the Department shall be observed and the holder must take measures, including placing and display of safety devices, that may be necessary in order to safely conduct the public through the project area in accordance with the Federal Manual on Uniform Traffic Control Devices (MUTCD), as amended, and the Department's latest Roadway and Traffic Design Standards.

In case of non-compliance with the Department's requirements in effect as of the approved date of this permit, this permit is void and the facility will have to be brought into compliance or removed from the R/W at no cost to the Department.

Submitted by: Elena Cassella
Permittee

Place Corporate Seal

Jodi Shankle, EXEC. DIRECTOR
Signature and Title



Witnessed
12/20/11

Department of Transportation Approval: This Request is Hereby Approved

Recommended for approval _____ Title _____ Date _____

Approved by: _____ Date _____
District Secretary or Designee

DISTRIBUTION: Original – Permittee
1st copy – District Maintenance Office
2nd copy – Local Maintenance Engineer

Foundation For Dreams 2012 St Patrick's Day 5K Sutton Park in Palmetto

The Walk route starts at Sutton Park in Palmetto

South on 10th Ave to Riverside Dr

East on Riverside Dr to 8th Ave

South on 8th Ave across Green Bridge to 3rd Ave.

West on 3rd Ave to 10th St.

North on 10th St to Barcarrota Blvd.

West on Barcarrota to 12th St

South on 12th St to 3rd Ave

East on 3rd to 9th St.

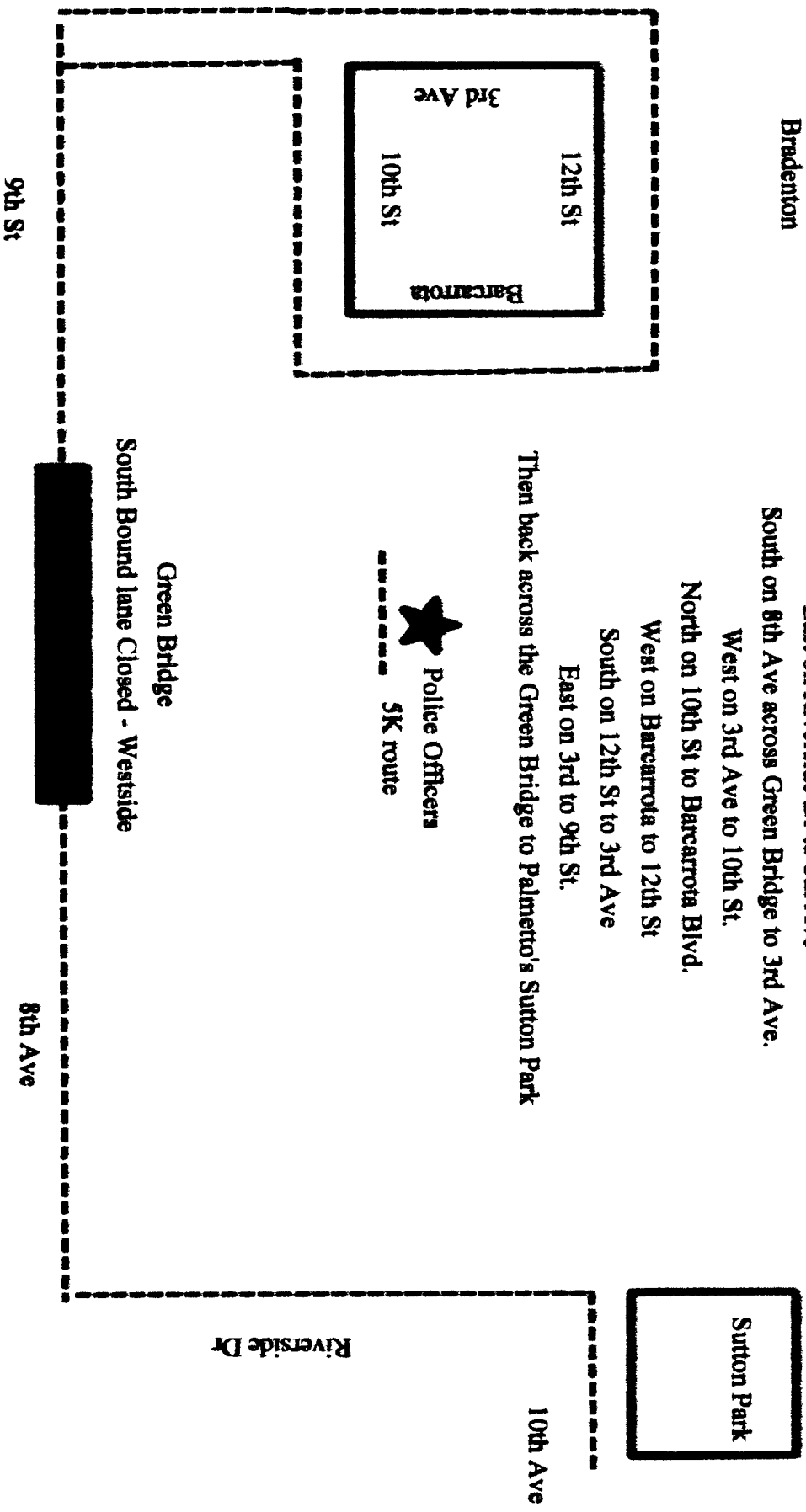
Then back across the Green Bridge to Palmetto's Sutton Park



Police Officers



5K route

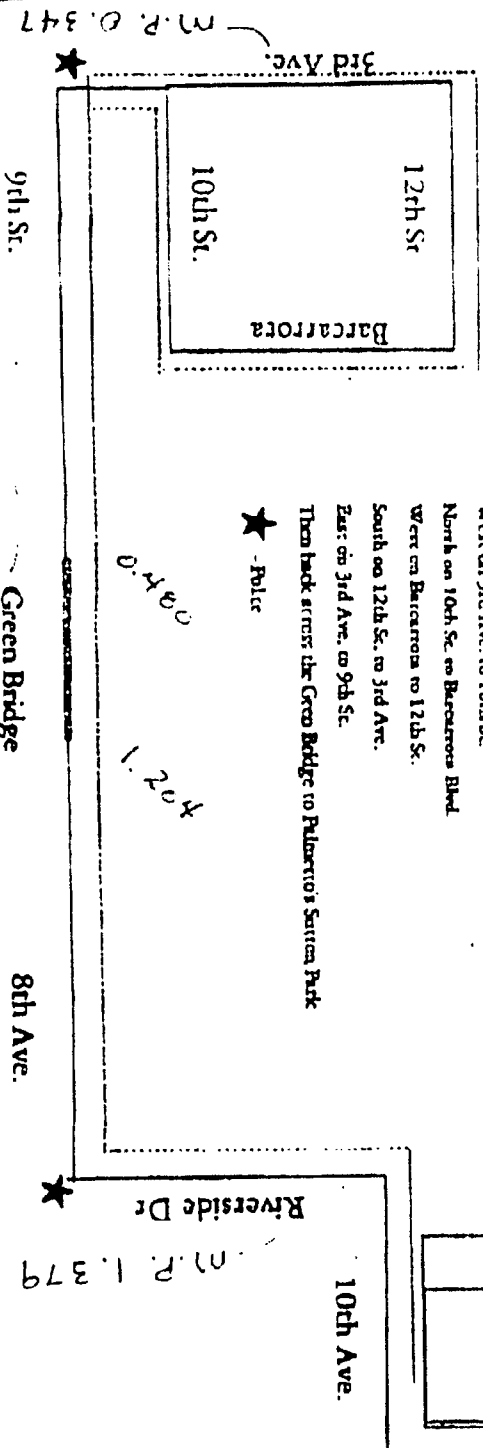


TRAFFIC CONTROL SHALL COMPLY WITH THE CONTROL DEVICES (MUTCD) AND THE CONTROL DEVICES ON SR INCLUDES 800 SIGNS.

FOUNDATION for DREAMS Walk For Life

Surtron Park in Palmetto

Bradenton



The Walk Route Starts at Surtron Park in Palmetto

South on 10th Ave. to Riverside Dr.

East on Riverside Dr. to 8th Ave.

South on 8th Ave. across Green Bridge to 3rd Ave.

West on 3rd Ave. to 10th St.

North on 10th St. to Barcarrota Blvd.

West on Barcarrota to 12th St.

South on 12th St. to 3rd Ave.

East on 3rd Ave. to 9th St.

★ - Police

Then back across the Green Bridge to Palmetto's Surtron Park

South bound lane closed - Westside
BRIDGE # 130132

13010 001
S.R. 45 / U.S. 341

M.P. 0.347

M.P. 1.379

0.260
1.204

City of Palmetto Parks & Recreation Department 600 17 th Street West Palmetto, Florida 34221	Phone: (941) 723-4580 Fax: (941) 723-4539 E-Mail: gseger@palmettofl.org
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CITY FACILITY RENTAL APPLICATION / AGREEMENT

Please complete this application with as much detail as possible. Return completed application with ALL appropriate rental fees via mail to the address above or in person at 600 17th Street West.

Name of Applicant: <i>Elena Cassella</i>	Name of Organization <i>Foundation for Dreams</i> <input type="checkbox"/> For Profit <input checked="" type="checkbox"/> Not For Profit
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Address: <i>16110 Dream Oaks Place</i>	City: <i>Bradenton</i>	Zip Code: <i>34212</i>
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Phone (daytime): <i>941-746-5659</i>	Phone (evening): <i>941-567-4417</i>	Phone (cell): <i>941-232-1403</i>	E-Mail Address: <i>ecassella@foundationfordreams.org</i>
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Contact 1 (if other than applicant):	Phone (daytime):	Phone (evening): <i>941-232-1403</i>
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Contact 2 (if other than applicant):	Phone (daytime):	Phone (evening):
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Anticipated attendance: <i>200</i>	Minimum	Maximum	<i>600</i>
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Date(s) of Use: <i>3/17/2012</i>	Day(s) of week: <i>Saturday</i>
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Start time (include decorating/setup time): <i>7:00 a.m.</i>	End time (include cleanup time): <i>10:30</i>
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Is this a fundraising event? Yes No
 Is an entry fee, ticket or registration fee required? Yes No
 Are any other fees associated with this event? Yes No
 If yes to any of the above, please explain how funds will be used.
The funds will be used to support Dream Oaks Camp, a camp for children with special needs and chronic illnesses.

Please check all that apply to this event:

Baby/Bridal Shower Birthday Party Church Function/Social Family Gathering/Reunion
 Field Use (Games or Practices) Field Use (Recreational) Meeting Picnic Clinic
 Political Function Tournament Wedding or Reception Youth League Meeting
 Electric (if available) Water (if available) Other (describe):

Building/Facilities & Rental Fees

Please check ALL facilities being requested for use and circle the application fees.

Sutton Park

- | | |
|--|---|
| <input checked="" type="checkbox"/> Pavilion | FEES: \$65.00 First 3 Hours/ \$20.00 each additional hour |
| <input type="checkbox"/> Pavilion Per Day | FEES: \$175.00 First Day/\$100.00 each additional day |
| <input type="checkbox"/> Ball Field | FEES: \$30.00 First 3 Hours/ \$ 5.00 each additional hour |
| <input type="checkbox"/> Ball Field Per Day | FEES: \$55.00 All Day/\$45.00 each additional day |
| <input type="checkbox"/> Pavilion & Ball Field per Day | FEES: \$200.00 First Day/\$100.00 each additional day |

Lamb Park

- | | |
|---|---|
| <input type="checkbox"/> Tennis Courts | FEES: \$20.00 First 3 Hours/ \$ 5.00 each additional hour |
| <input type="checkbox"/> Picnic Grounds | FEES: \$30.00 First 3 Hours/ \$ 5.00 each additional hour |
| <input type="checkbox"/> Celebration Center | FEES: \$90.00 First 3 Hours/ \$20.00 each additional hour |
| <input type="checkbox"/> Celebration Center | FEES: \$225.00 All Day/ \$150.00 each additional day |

17th Street Park

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Pavilion | FEES: \$55.00 First 3 Hours/ \$15.00 each additional hour |
| <input type="checkbox"/> Pavilion | FEES: \$150.00 All Day/\$100.00 each additional day |

Palmetto Historical Park

Carnegie Library

Basement Floor Only

FEES: \$130.00 First 3 Hours/ \$40.00 each additional hour

Basement Floor & Grounds

FEES: \$140.00 First 3 Hours/ \$45.00 each additional hour

Chapel \$100.00 Security deposit

FEES: \$50.00 an hour

Soccer Field

FEES: \$45.00 First 3 Hours/\$15.00 each additional hour

Riverside Park West

Pavilion

FEES: \$60.00 First 3 Hours/\$20.00 each additional hour

Green Bridge Fishing Pier (Tournaments)

FEES: \$150.00 Per day

FEES: \$200.00 Security deposit

NOTE: A SPECIAL FUNCTION PERMIT AND ADDITIONAL SECURITY DEPOSIT ALSO MAY BE REQUIRED PURSUANT TO CHAPTER 19, ARTICLE VI. OF THE CITY CODE OF ORDINANCES. RENTAL OF CITY FACILITIES FOR MORE THAN FIVE (5) DAYS IN ANY THIRTY (30) DAY PERIOD SHALL REQUIRE CITY COMMISSION APPROVAL. FEES FOR LONG TERM RENTAL OF CITY FACILITIES SHALL BE BASED ON THE ADDITIONAL OPERATION AND MAINTENANCE COSTS INCURRED BY THE CITY IN CONNECTION WITH SUCH LONG TERM USE.

Security Deposit: \$50.00 per facility unless a different amount is specified above. This amount is payable at time of reservation and is refundable upon the Completion of a favorable inspection. Up to 100% of the security deposit may be retained for damage and/or clean up if deemed necessary by management. In addition, the applicant shall be responsible for payment of cleaning/damage charges in excess of the security deposit.

Total Fees Enclosed: \$_____ Cash or Check #_____ for Rental Fees _____ for Deposit(s) _____
A Drivers License # is required for ALL checks for the person whose name is on the check:
State _____ # _____

Applicant fully understands that submittal of this application does not confirm my/our request and that **ALL Rental Fees and Taxes Must Be Included With This Application.** I/We further understand that ALL requests are subject to staff approval and are processed on a first come first served basis. Upon review, a designated staff member will notify me or one of my contacts regarding the status of this request and whether or not there is any additional information required, or if any rental fees and/or deposits still remain to be paid. I/We also acknowledge that I/We have received a copy, read, understand and fully agree to all of the items and terms outlined in the Facility Rental Agreement, including how to proceed in the event of any emergency needing immediate attention during the event. I/We further affirm that the information contained in this application is true and correct to the best of my/our knowledge.

Signature of Applicant: Elena Casselle Date: 12/20/2011

Please make ALL checks payable to the City of Palmetto

FOR OFFICE USE ONLY

Date Rec'd: _____ Approved or Denied _____
Fees Collected: _____ Receipt #/s: _____
Palmetto Historical Commission _____
Palmetto Parks and Recreation Department _____

**CITY OF PALMETTO
FACILITY RENTAL APPLICATION**

APPLICANT ACKNOWLEDGEMENT

The Applicant, Elena Cassella, hereby acknowledges and agrees to the following:

- All rental fees and taxes must be included with this application
- Submittal of the application does not confirm reservation dates
- Reservation requests are subject to City approval and are processed on a first come, first served basis
- Applicant has been provided with a copy of the City Facility Rental Rules and Regulations and agrees to abide by same

Applicant hereby affirms that the information contained in this application is true and correct, acknowledges receipt of a copy of the application, and agrees to all of the terms and conditions as outlined in the Facility Rental Agreement, including how to proceed in the event of an emergency during the event.

In the case of an emergency contact the Palmetto Police Department at 941-723-4587.

The applicant hereby agrees to indemnify and hold harmless the City of Palmetto ("City"), its agents and employees against any and all claims, demands, costs, expenses and liability of every kind, nature and description directly or indirectly arising from or related to the use of the City Facility permitted under this rental agreement. The undersigned applicant certifies that he or she accepts responsibility on behalf of his/her organization / group and it's guests for any damage or theft sustained by the City (premises, landscaping, equipment, furniture) because of occupancy of the City Facility by the organization. I have read and agree to comply with the rules and regulations stated in or incorporated into this rental agreement. The cost of any special cleaning or damage to the City Facility, equipment of grounds due to the scheduled activity or event will be deducted from the security deposit provided for herein. In the event that such costs exceed the amount of the security deposit, the undersigned agrees to be personally responsible for the payment to the City of any overages.

By: Elena Cassella

Print name: Elena Cassella

Date: 12/20/2011

December 19, 2011

**To: Palmetto City Commission
From: Elena Cassella, Director of Development, Foundation For Dreams
Re: St. Patrick's Day 5K**

The Foundation for Dreams is in the planning stages of the St. Patrick's Day 5K Run/Walk, the event will benefit the foundation's children and help promote awareness.

We would like to start and end our event at Palmetto's Sutton Park, since this will be the first year for this event we hope that the City will work with us to help make this event a success.

We are requesting some in-kind services from the city that will help our organization and bring another annual event to the City of Palmetto.

Requested in-kind services

**The safety cones and staff to close one lane (South bound) on the Green Bridge
2- 20'x 20' Tents
2 - 10'x 10' Tents
10 tables
25 chairs**

Thank you in advance for your consideration and assistance as we prepare for this event.

To: City Commission
Thru: Diane Ponder, Assistant City Clerk
From: Geoff Seger, Parks Director
Re: St Patrick's Day 5 K Run/1 mile fun run, Special Function Permit

Special Function Permit/Temporary Use Permit Application

Foundation For Dreams
St Patrick's Day 5K Run/ 1 Mile fun Run

Saturday, March 17, 2012

Sutton Park

Close 10th Ave between 6th and 7th Streets

Close the outside south bound lane of the Green Bridge

In Kind Services: Cones for road closures – 120
 2 – 20'x 20' tents
 2 – 10'x 10' tents
 10 Tables
 30 Chairs

Sutton Park Rental fee - \$90.00

Labor for Event:
Geoff Seger and Jim Michener – N/C
Bobby Jackson – 4.5 hours = \$70.43
Victor Pompey – 4.5 hours = \$74.61



Foundation for Dreams Presents

THE 2012

St. Patrick's Day

5K Run / 1 Mile Fun Walk

Saturday, March 17

Awards Ceremony begins at 9:15 a.m.

1st Female (3 Deep) • 1st Male (3 Deep) • 1st Family (3 Deep)
1st Team • 1st School • 1st Age 60+ (3 Deep)

Top Fundraisers: First, Second & Runner Up

Team prizes for largest team, team with highest fundraising total and individual raising the most money

High school, middle school and elementary school with the most students and faculty running/walking win the trophy to display and defend in 2013.



Fees: \$15 includes a \$5 club discount for Bradenton Runners Club, MTC, LWRR, SPRR, Suncoast Striders, IN STORES ONLY

\$20 postmarked by 2/28/2012 • **\$15** children under 12 • **\$25** postmarked by 3/11/2012 • **\$30** day of the race

Family Price: **\$50** (2 adults & up to 4 children)

For more information, please call

941-746-5659

www.foundationfordreams.org

Register on line at (Includes food, goody bag & awards) Dogs/Strollers welcome

<https://runsignup.com/Race/FL/Palmetto/StPatricksDay5KRunand1mileFunRun>

Or mail in check or credit card info to: The Foundation for Dreams • 16110 Dream Oaks Place • Bradenton, FL 34212



Registration

First name _____ Last name _____

Mailing address _____

City _____ State _____ Zip _____

Home phone _____ Work Phone _____

E-mail _____ Date of Birth _____

T-Shirt size (circle one): Youth: L XL Adult S M L XL XXL • Emergency contact # _____

Team Captain's Name _____ Employer/School/Team Name _____

I am running/walking as Company Team School Team Individual

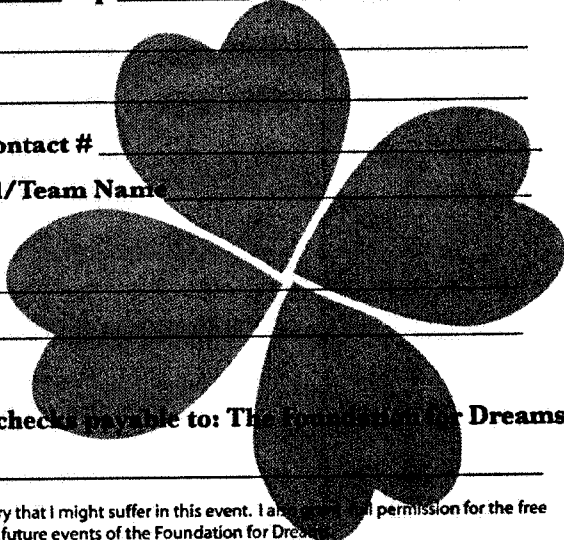
I cannot attend, but would like to sponsor a runner/walker: \$ _____

I would like to make a donation \$ _____

I am interested in receiving information about The Foundation for Dreams

Amount Enclosed: \$ _____ • check amex visa mastercard • Make checks payable to: The Foundation for Dreams

Credit Card Number: _____ Exp. date _____



Waiver: I hereby waive all claims against Foundation for Dreams, sponsors, or any event personnel, paid or volunteer, for any injury that I might suffer in this event. I also give permission for the free use of my name, picture, and voice in any broadcast, telecast, print account or any medium used in connection with this event or future events of the Foundation for Dreams.

Signature of Participant/Parent: _____

*Note: T-shirt sizes guaranteed to pre-registered runners by 3/11/12



SPECIAL FUNCTION PERMIT APPLICATION

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

EVENT DATE: April 6, 2012
EVENT TIME: 10:00 am - 3:00 pm
PHONE: 941-747-1998
PHONE: 941-747-7953

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: Use of Sutton and Lamb Parks for Children's activities. Many local non profits set up to provide info for parents & grandparents with games for the children. Use of gazebo and no parking signs on 19th Ave. 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: _____

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): _____

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Special Function Permit Application
Page 2

EVENT: De Soto Heritage Festival Children's Parade

Event Date: April 6, 2012

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

Chas Hackney

Permittee Charlie Hackney, President HDHS

CITY APPROVAL:

City Clerk

[Signature]

Date 1/12/12

Public Works Director

[Signature]

Date 1-12-12

Police Department

[Signature]

Date 1-11-12

North River Fire

[Signature]

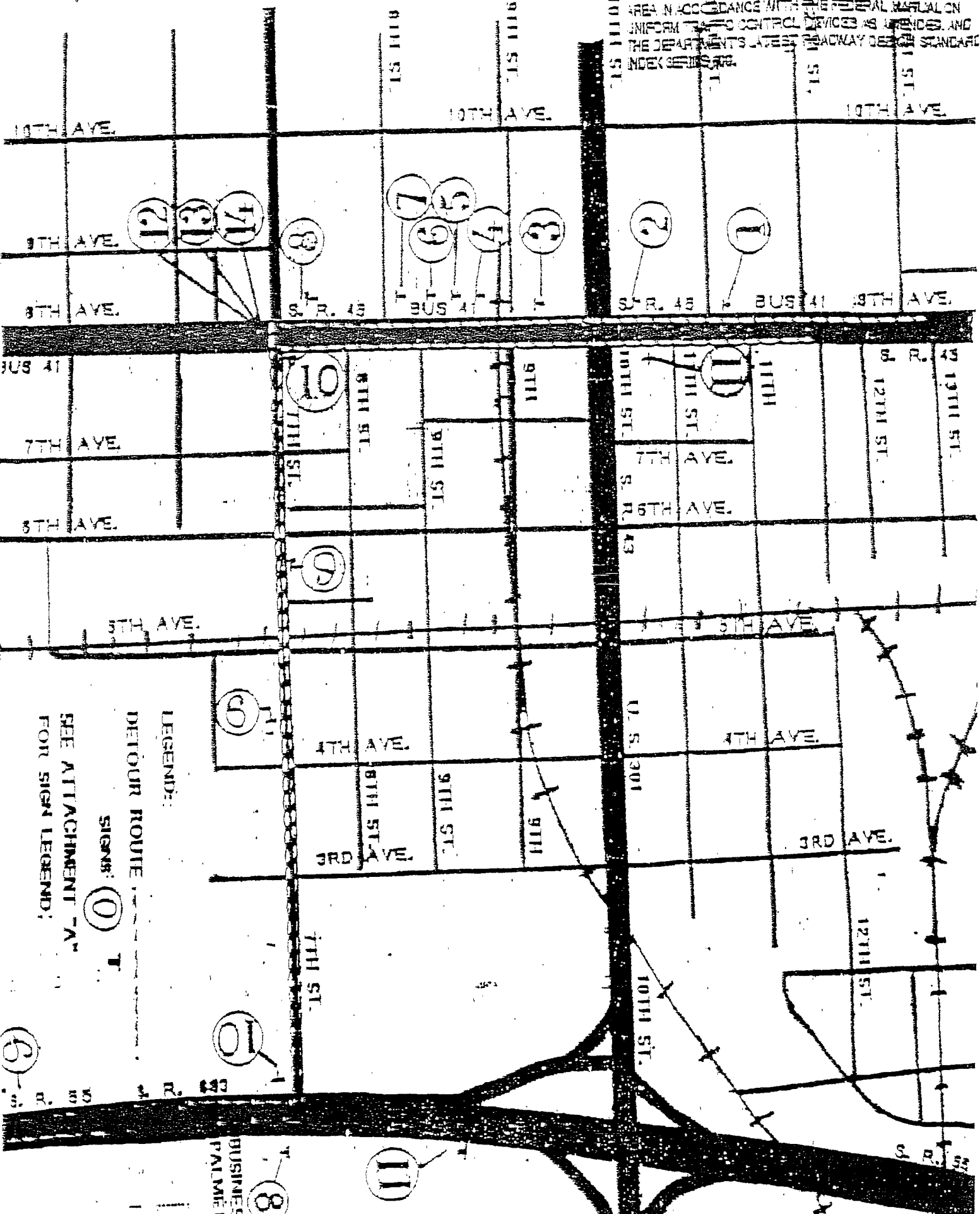
Date 12/21/11

APPROVED BY COMMISSION:

Date _____

Internal use only
Date Received: _____
By: _____

THE POINT IS RESPONSIBLE FOR THE PLACEMENT AND DISPLAY OF SAFETY DEVICES THROUGH THE EVENT AREA IN ACCORDANCE WITH THE FEDERAL NATIONAL UNIFORM TRAFFIC CONTROL DEVICES AS APPLIED AND THE DEPARTMENT'S LATEST ROADWAY DESIGN STANDARDS INDEX 1988.



LEGEND:
 DETOUR ROUTE: T
 SIGN: (1)
 SEE ATTACHMENT "A" FOR SIGN LEGEND.

BUSINESS PALMETT

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1

10TH AVE.

10TH AVE.

10TH AVE.

9TH AVE.

8TH AVE.

7TH AVE.

5TH AVE.

5TH AVE.

4TH AVE.

4TH AVE.

3RD AVE.

3RD AVE.

7TH ST.

8TH ST.

9TH ST.

9TH

10TH ST.

11TH ST.

11TH

12TH ST.

13TH ST.

7TH ST.

8TH ST.

9TH ST.

9TH

U.S. 901

10TH ST.

12TH ST.

S.R. 53

S.R. 45

BUS. 41

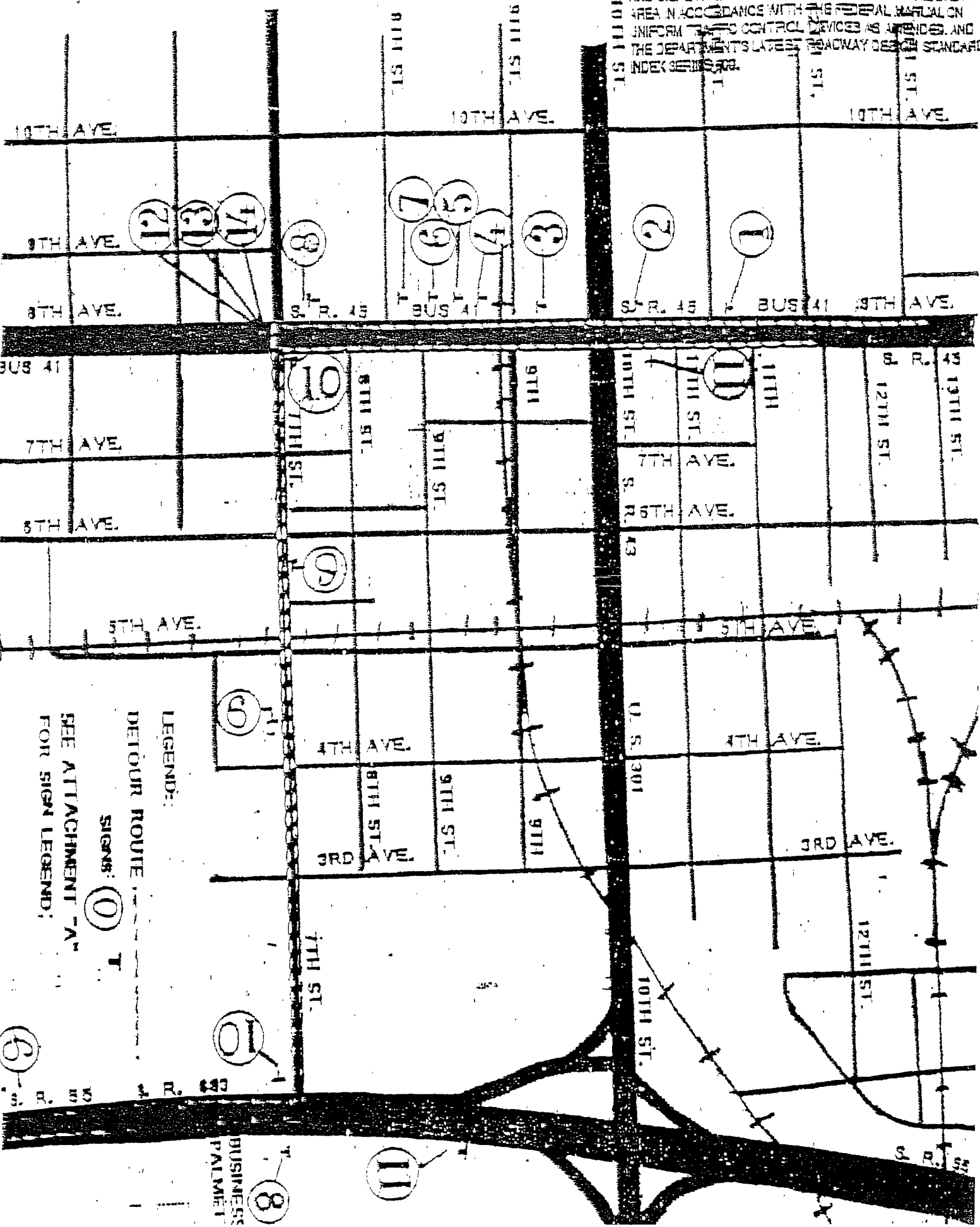
S.R. 45


BUS. 41

EVA. HBR.

BUS. 41

THE PERSON 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 80000000.



LEGEND:
 DETOUR ROUTE
 SIGNS:  T
 SEE ATTACHMENT "A"
 FOR SIGN LEGEND;

BUSINESS PALMETT

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S. R. 45

8TH ST.

9TH ST.

10TH ST.

11 ST.

12 ST.

10TH AVE.

10TH AVE.

10TH AVE.

9TH AVE.

8TH AVE.

S. R. 45

BUS 41

T

S. R. 45

BUS 41

BUS 41

BUS 41

7TH AVE.

6TH AVE.

5TH AVE.

4TH AVE.

4TH AVE.

3RD AVE.

3RD AVE.

7TH ST.

8TH ST.

9TH ST.

9TH

U. S. 301

10TH ST.

10TH ST.

11TH ST.








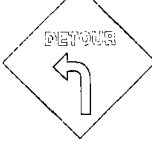
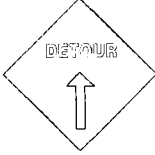
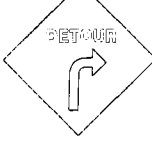
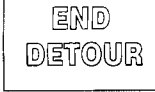
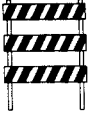
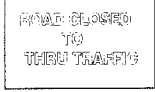
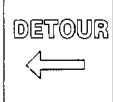
11TH

12TH ST.

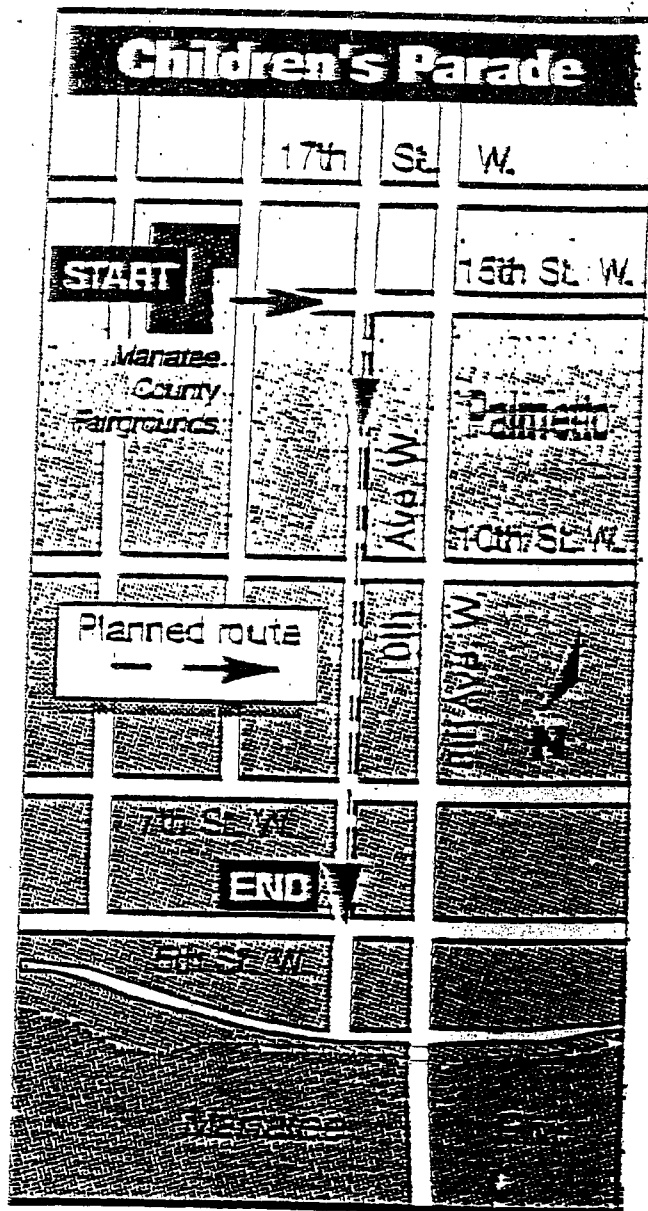
13TH ST.

S. R. 45

Attachment "A"

- | | | | |
|-----------------------------------|-------|---|---|
| 1. "DETOUR 1500' " | _____ |  | |
| 2. "DETOUR 1000' " | _____ | |  |
| 3. "RIGHT LANE CLOSED AHEAD" | _____ |  | |
| 4. "BRIDGE CLOSED AHEAD" | _____ | |  |
| 5. "MERGE LEFT" | _____ |  | |
| 6. "DETOUR 500' " | _____ | |  |
| 7. "DETOUR AHEAD" | _____ |  | |
| 8. "LEFT DETOUR" | _____ | |  |
| 9. "DETOUR" | _____ |  | |
| 10. "RIGHT DETOUR" | _____ | |  |
| 11. "END DETOUR" | _____ |  | |
| 12. TYPE III BARRICADE | _____ | |  |
| 13. "ROAD CLOSED TO THRU TRAFFIC" | _____ |  | |
| 14. "DETOUR ← " | _____ | |  |

De Soto Heritage Festival Children's Parade Route



CERTIFICATE OF LIABILITY INSURANCE

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

PRODUCER: Haas & Wilkerson Insurance, 4300 Shawnee Mission Parkway, Fairway, KS 66205, 913 432-4400. CONTACT NAME: Andrea Goodman, PHONE: 913-676-9253, FAX: 913-749-4753, E-MAIL ADDRESS: andrea.goodman@hwins.com. INSURER(S) AFFORDING COVERAGE: ACE American Insurance Company, NAIC #: 22667.

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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL SUBR INSR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include General Liability, Automobile Liability, Umbrella Liab, and Workers Compensation.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Governmental Entity (Form CG2026/LD-22318) (See Attached Descriptions)

CERTIFICATE HOLDER: City of Palmetto, 516 8th Ave. W., Palmetto, FL 34221. CANCELLATION: 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: [Signature]

DESCRIPTIONS (Continued from Page 1)

The certificate holder is named as an additional insured on the general 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.

Diane Ponder

To: Sharon McGlynn, Executive Director [SMcGlynn@desotohq.com]
Subject: FW: Children's 2011.doc

From: Geoff Seger
Sent: Thursday, January 12, 2012 2:31 PM
To: Diane Ponder
Subject: Children's 2011.doc

To: City Commission
Thru: Diane Ponders, Assistant City Clerk
From: Geoff Seger, Parks Director
Subject: Desoto Children's Parade
Date of event: April 2012

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.

Jim Michener -----	\$181.62
Bobby Jackson -----	\$143.82
Victor Pompey -----	\$149.22
Geoff Seger -----	\$281.22

Equipment used:

3 – Public Works trucks @ \$7.50 per hour ----- \$135.00
150 Safety Cones.

Rental Fee for Sutton Park -10:00 a.m. – 3:00 p.m. ----- \$105.00
Rental Fee for Lamb Park – 10:00 a.m. – 3:00 p.m. ----- \$40.00

Total cost ----- \$1,170.88



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 28, 2012
EVENT TIME: 6:15 pm - 11:00 pm
PHONE: 941-747-1998
PHONE: 941-747-7953

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 Street
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. Insurance may also be obtained by event sponsors through personal or commercial insurance policies. If it is necessary to purchase an insurance policy for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

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).

Special Function Permit Application
Page 2

EVENT: De Soto Heritage Festival Grand Parade

Event Date: Saturday, April 28, 2012

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

Chas Hackney

Permittee Charlie Hackney, President HDHS

CITY APPROVAL:

City Clerk

Jan R. [Signature]

Date 1/10/12

Public Works Director

[Signature]

Date 1-11-12

Police Department

Charles R. Wells

Date 1-11-12

North River Fire

[Signature]

Date 12/24/11

APPROVED BY COMMISSION:

Date _____

Internal use only Date Received: _____ By: _____
--

REQUEST FOR TEMPORARY CLOSING/SPECIAL USE OF STATE ROAD

- Instructions: 1. Obtain signatures of local law enforcement and city/county officials.
2. This form must be submitted by the local governmental authority to FDOT to obtain written approval. Allow adequate time for the review.
3. Attach any necessary maps or supporting documents.

NAME OF ORGANIZATION Hernando De Soto Historical Society, Inc.		PERSON IN CHARGE Charlie Hackney, President		DATE 11-22-11
ADDRESS OF ORGANIZATION 910 Third Avenue West, Bradenton, FL 34205			TELEPHONE NUMBER 941-747-1998	
TITLE OF EVENT De Soto Heritage Festival Grand Parade				
DATE OF EVENT April 28, 2012	STARTING TIME OF EVENT 6:30 p.m.	DURATION OF EVENT (APPROX.) 4-5 hours	ACTUAL CLOSING TIME (INCLUDING SETTING UP BARRIERS, ETC.) 5:00 - 11:00 p.m.	
PROPOSED ROUTE (INCLUDE STATE ROAD NUMBER, SPECIFIC LOCATION, ETC. - INCLUDE MAPS) <p style="text-align: center;">See Attached</p>				
DETOUR ROUTE (INCLUDE ALTERNATE ROUTES - INCLUDE MAPS) <p style="text-align: center;">See Attached</p>				
NAME OF DEPT. RESPONSIBLE FOR TRAFFIC CONTROL, ETC. (CITY POLICE, SHERIFF'S DEPT., FLORIDA HWY. PATROL, ETC.) (INCLUDE PRECINCT NO.) <p style="text-align: center;">City of Palmetto Police Department</p>				
SPECIAL CONDITIONS				
THIS SECTION IS TO BE COMPLETED WHEN PERMITTING SPECIAL USE OF A STATE ROAD FOR FILMING				
LICENSED PYROTECHNICS OPERATOR _____ LICENSE NO. _____				
APPROVAL OF LOCAL FIRE DEPARTMENT _____				
LIABILITY INSURANCE CARRIER _____ POLICY EFFECTIVE DATE _____				
COVERAGE AMOUNT _____ (\$1,000,000 MINIMUM)				
LENGTH OF COVERAGE _____ DAYS				
FEDERAL AVIATION ADMINISTRATION APPROVAL FOR LOW FLYING FILMING _____				
ADDITIONAL LIABILITY INSURANCE AMOUNT _____ (\$5,000,000 MINIMUM)				
TYPED NAME AND TITLE (INCLUDE BADGE NO. IF APPROPRIATE) Rick Wells, Police Chief		SIGNATURE OF CHIEF OF LAW ENFORCEMENT AGENCY <i>Rick Wells</i>		DATE SIGNED 01-11-12
TYPED NAME AND TITLE OF CITY/COUNTY OFFICIAL Shirley Groover Bryant, Mayor		SIGNATURE OF CITY/COUNTY OFFICIAL		DATE SIGNED

The Permittee, shall indemnify, defend, and hold harmless the Department and all of its officers, agents, and employees from any claim, loss, damage, cost, charge, or expense arising out of any acts, actions, neglect, or omission by the Permittee, its agents, employees, or subcontractors during the performance of the Contract, whether direct or indirect, and whether to any person or property to which the Department or said parties may be subject, except that neither the Permittee nor any of its subcontractors will be liable under this Article for damages arising out of the injury or damage to persons or property directly caused or resulting from the SOLE negligence of the Department or any of its officers, agents or employees.

Contractor's obligation to indemnify, defend, and pay for the defense or at the Department's option, to participate and associate with the Department in the defense and trial of any damage claim or suit and any related settlement negotiations, shall be triggered by the Department's notice of claim for indemnification to Contractor. Contractor's inability to evaluate liability or its evaluation of liability shall not excuse Contractor's duty to defend and indemnify within seven days after such notice by the Department is given by registered mail. Only an adjudication or judgment after highest appeal is exhausted specifically finding the Department SOLELY negligent shall excuse performance of this provision by Contractor. Contractor shall pay all costs and fees related to this obligation and its enforcement by the Department. Department's failure to notify Contractor of a claim shall not release Contractor of the above duty to defend.

It is understood and agreed that the rights and privileges herein set out are granted only to the extent of the State's right, title, and interest in the land to be entered upon and used by the Permittee, and the Permittee will, at all times, assume all risk of and indemnify, defend and save harmless the State of Florida and the Department from and against any and all loss, damage, cost, or expense arising in any manner on account of the exercise or attempted exercises by said Permittee of the aforesaid rights and privileges.

During the event, all safety regulations of the Department shall be observed and the holder must take measures, including placing and display of safety devices, that may be necessary in order to safely conduct the public through the project area in accordance with the Federal Manual on Uniform Traffic Control Devices (MUTCD), as amended, and the Department's latest Roadway and Traffic Design Standards.

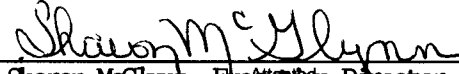
In case of non-compliance with the Department's requirements in effect as of the approved date of this permit, this permit is void and the facility will have to be brought into compliance or removed from the R/W at no cost to the Department.

Submitted by: Hernando De Soto Historical Society, Inc

Place Corporate Seal

Permittee

Charlie Hackney, President HDHS
Signature and Title


Sharon McGlynn, Executive Director
Signature and Title

Department of Transportation Approval: This Request is Hereby Approved

Recommended for approval _____ Title _____ Date _____

Approved by: _____ Date _____
District Secretary or Designee

DISTRIBUTION: Original – Permittee
1st copy – District Maintenance Office
2nd copy – Local Maintenance Engineer

REQUEST FOR TEMPORARY CLOSING/SPECIAL USE OF STATE ROAD

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THIS SECTION IS TO BE COMPLETED WHEN PERMITTING SPECIAL USE OF A STATE ROAD FOR FILMING			
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APPROVAL OF LOCAL FIRE DEPARTMENT _____			
LIABILITY INSURANCE CARRIER _____		POLICY EFFECTIVE DATE _____	
COVERAGE AMOUNT _____ (\$1,000,000 MINIMUM)			
LENGTH OF COVERAGE _____ DAYS			
FEDERAL AVIATION ADMINISTRATION APPROVAL FOR LOW FLYING FILMING _____			
ADDITIONAL LIABILITY INSURANCE AMOUNT _____ (\$5,000,000 MINIMUM)			
TYPED NAME AND TITLE (INCLUDE BADGE NO. IF APPROPRIATE) Rick Wells, Police Chief		SIGNATURE OF CHIEF OF LAW ENFORCEMENT AGENCY <i>Charlie R. Wells</i>	DATE SIGNED 01-11-12
TYPED NAME AND TITLE OF CITY/COUNTY OFFICIAL Shirley Groover Bryant, Mayor		SIGNATURE OF CITY/COUNTY OFFICIAL	DATE SIGNED

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Submitted by: Hernando De Soto Historical Society, Inc

Place Corporate Seal

Permittee

Charlie Hackney

Charlie Hackney, President HDHS

Sharon McGlynn

Sharon McGlynn, Executive Director

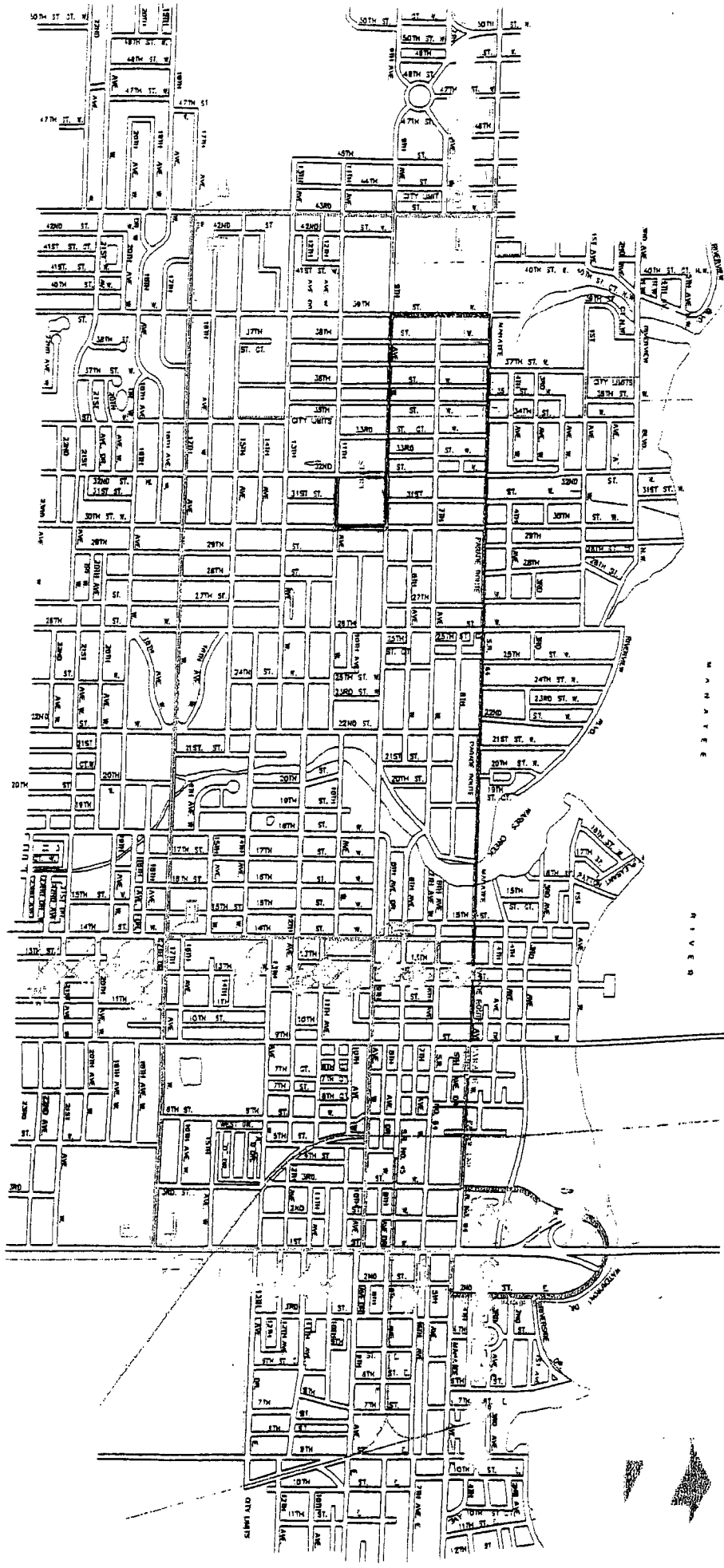
Department of Transportation Approval: This Request is Hereby Approved

Recommended for approval _____ Title _____ Date _____






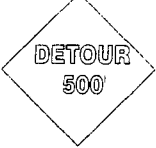

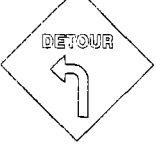
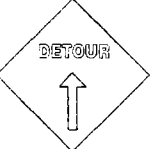
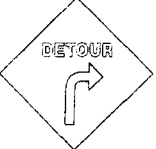
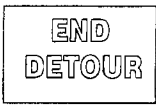
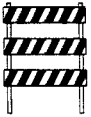
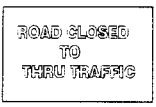
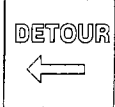
Approved by: _____ Date _____
District Secretary or Designee

DISTRIBUTION: Original - Permittee
1st copy - District Maintenance Office
2nd copy - Local Maintenance Engineer

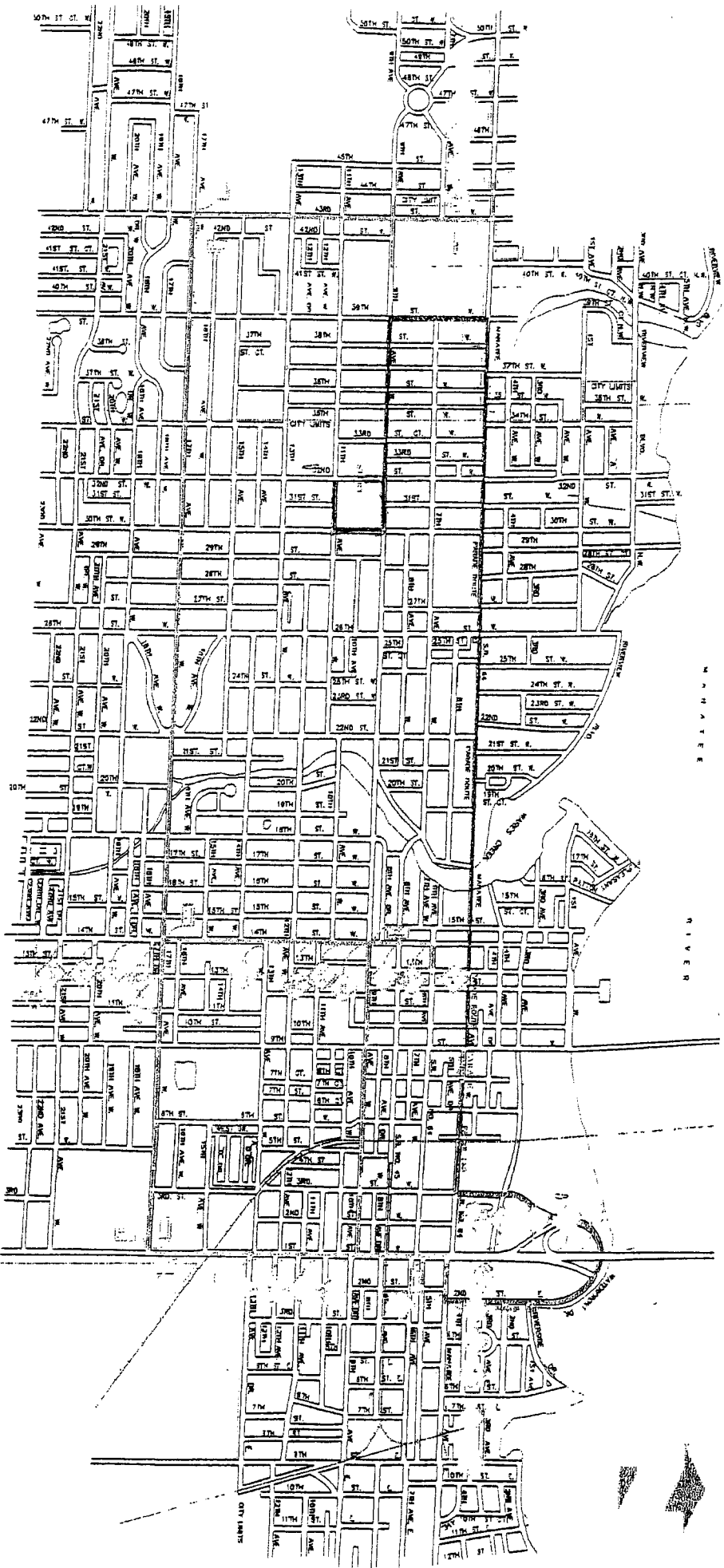
CITY OF BRADENTON
HERITAGE PARADE DETOUR MAP
ENGINEERING DEPARTMENT
MARCH, 2010



Attachment "A"

1. "DETOUR 1500' " _____ 
2. "DETOUR 1000' " _____ 
3. "RIGHT LANE CLOSED AHEAD" _____ 
4. "BRIDGE CLOSED AHEAD" _____ 
5. "MERGE LEFT" _____ 
6. "DETOUR 500' " _____ 
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11. "END DETOUR" _____ 
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13. "ROAD CLOSED TO THRU TRAFFIC" _____ 
14. "DETOUR ← " _____ 

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



Client#: 2131

HERNADES

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/01/2011

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IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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: Haas & Wilkerson Insurance, 4300 Shawnee Mission Parkway, Fairway, KS 66205, 913 432-4400. CONTACT NAME: Andrea Goodman, PHONE: 913-676-9253, FAX: 913-749-4753, E-MAIL ADDRESS: andrea.goodman@hwins.com. INSURED: Hernando De Soto Historical Society, Inc dba De Soto Heritage Festival, 910 Third Ave W, Bradenton, FL 34205. INSURER(S): ACE American Insurance Company, NAIC #: 22667.

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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DESCRIPTIONS (Continued from Page 1)

The certificate holder is named as an additional insured on the general 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.

To: City Commission
Thru: Diane Ponders, Assistant City Clerk
From: Geoff Seger, Parks Director
Re: De Soto Heritage Parade
Date of Event: April 30, 2012

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

Victor Pompey _____	\$74.61
Bobby Jackson _____	\$70.42
City Truck _____	\$22.50
 Total _____	 \$167.53