# TAB 1

MCWHIRTER



SPEC	<b>LIAL FUNCTION PERMIT</b>	T APPLICATION	
EVENT NAME: Weolding APPLICANT: Palmetto Rich ADDRESS: 1/02 Liversion CONTACT: Wen Lippe	uside BNB	EVEN	Neolnes olay T DATE: 12/5/12/ T TIME: 04.00-10.007 E: 941-981-5331 E:
DETAILS OF FUNCTION: LOC	ATION, PARADE ROUTE	, ETC.: Neo	lesling
ANTICIPATED ATTENDANCE: CITY SERVICES REQUIRED: POLICE: Streets Blocked: PUBLIC WORKS: Barricades:	Traffic Control:  Clean-up:	Security: Set-up:	Other:
If a temporary restroom is utilized f Application is available at City Hall.  FEMPORARY RESTROOM FAC Proposed location(s):		# of days	
INSURANCE REQUIREMENT: provided to the City Clerk ten (10) d	Insurance naming the City ays prior to any event that is	of Palmetto as an 's part of the Special	'Additional Insured" must be l Function Permit.

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.

Please review Exhibit A for insurance coverage requirements. Insurance may also be obtained by event

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.

EVENT: Wedding.	Event Date: /2/5//2
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.  Lemintee	AL FUNCTION PERMIT APPLICATION
City Clerk Public Works Director Police Department North River Fire APPROVED BY COMMISSION:	Date ///// 2  Date //- 7-/2  Date 11-7-13  Date /0/30//3
Internal use only Date Received: 030 2	

GREEN





SPECIAL FUNCTION PERMIT APPLICATION

APPLICANT: Lelmetto Livrisiole BNB  ADDRESS: 1/02 Principle Dr.  CONTACT: Wim Lippens	Medius day EVENT DATE: 12/12/12/ EVENT TIME: 04.00-/0,00 pr PHONE: 94/- 98/-533/
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE,	ETC.: Neolding
ANTICIPATED ATTENDANCE: 35 guists CITY SERVICES REQUIRED:	
POLICE: Streets Blocked: Traffic Control: PUBLIC WORKS: Barricades: Clean-up:	Security: Other: Other:
If a temporary restroom is utilized for a period greater than five Application is available at City Hall.	
TEMPORARY RESTROOM FACILITIES: # of units:  Proposed location(s):	
INSURANCE REQUIREMENT: Insurance naming the City of 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 sponsors through personal or commercial insurance policies. If i	s. Insurance may also be obtained by event it is necessary to purchase an insurance policy

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

for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

## SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT: Westing	Event Date: 12/12/12
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Politice Mulypja	
CITY APPROVAL:	Date 11/7/12
Public Works Director Allen Lusing	Date //-7-/2
Police Department	Date 11-7-(3
North River Fire	Date 10/30/12
APPROVED BY COMMISSION:	Date
Internal use only Date Received: 10 2012 By: A 10 22	

ZIENTARA





SPECIAL FUNCTION PERM	IT APPLICATION	
EVENT NAME: Weolding	EVENT D	OAT PATE: <u>01/12/13</u>
APPLICANT: Polmetho Prusiole BNB	EVENT T	TME: 04.00-10,00 P
ADDRESS: 102 Rivingle &	PHONE:	941-981-5331
CONTACT: Wim LISPENS		
DETAILS OF FUNCTION: LOCATION, PARADE ROUTI	E, ETC.: <u>Á leol</u>	duig.
ANTICIPATED ATTENDANCE: 120 gues	6	
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 fix $Application$ is available at City Hall.	ve (5) days, a Tempora	ry Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units: Proposed location(s):	# of days:	
INSURANCE REQUIREMENT: Insurance naming the City	of Palmetto as an "Ad	ditional Insured" must be
provided to the City Clerk ten (10) days prior to any event that i	s part of the Special Fu	nction Permit.
Please review Exhibit A for insurance coverage requirement sponsors through personal or commercial insurance policies. If for an event, please refer to Exhibit B, and follow the directions	f it is necessary to pure	hase an insurance 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.

EVENT: Neolding	Event Date:
I HAVE READ AND UNDERSTAND THE ABOVE CONDITIONS.	SPECIAL FUNCTION PERMIT APPLICATION
Permission Permission	
CITY APPROVAL:	/ /
City Clerk	Date //////
Public Works Director Allend Justine	Date //-7-/2
Police Department	Date 11・フ・ι み
North River Fire	Date 10130112
APPROVED BY COMMISSION:	Date
· · · · · · · · · · · · · · · · · · ·	
Internal use only Date Received: 10/30/12	

CLARK





GIECIAL	FUNCTION FERIM	AFFLICATION	$C_{A}$
EVENT NAME: Neololino		EVENT I	DATE: 01/19/13
APPLICANT: Tolmeto From	ole BNR		TIME: 04.00-10, 00 P
ADDRESS: 1/02 Pringiple	81.		941-981-5331
CONTACT: Wim Lippe	es .	PHONE:	
DETAILS OF FUNCTION: LOCATIO	ON, PARADE ROUTE	, etc.: <i>Weolog</i>	ling
ANTICIPATED ATTENDANCE:	120 quest.		
CITY SERVICES REQUIRED:			
POLICE: Streets Blocked: X	ffic Control:	Security:	Other:
PUBLIC WORKS: Barricades:	Clean-up:	Set-up:	Other:
If a temporary restroom is utilized for a Application is available at City Hall.	period greater than five	e (5) days, a Tempora	ry Use Permit is required.
TEMPORARY RESTROOM FACILITY Proposed location(s):	FIES: # of units:	# of days:	
INSTIDANCE DECLIDEMENT. Inc.	· · · · · · · · · · · · · · · · · · ·	CD 1	
INSURANCE REQUIREMENT: Insurprovided to the City Clerk ten (10) days p	rance naming the City orior to any event that is	of Palmetto as an "Ad part of the Special Fu	Iditional Insured" must be unction Permit.
Please review Exhibit A for insurance	coverage requirement	s. Insurance may als	so be obtained by event
sponsors through personal or commercial	insurance policies. If	it is necessary to pure	chase an insurance policy
for an event, please refer to Exhibit B, and	I tollow the directions t	o obtain a quote or pu	rchase 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.

EVENT: Weolding.	Event Date:_	01/19/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION	PERMIT APPLICATION
Permittee Plus Juga		
CITY APPROVAL:		, /
City Clerk And Sur	Da	te 11/1/12
Public Works Director Allend Lusing		te //- 7-/2
Police Department		te 11.1.13
North River Fire	•	e 10/20/12
APPROVED BY COMMISSION	Dat	7.07.
Internal use only Date Received: 10 3012 By: A 70 50		·

DELESIE





SPECIAL FUNCTION PERMIT APPLICATION

APPLICANT: Palmetto Brusioli 2008  ADDRESS: 1/02 2 versioli S.  CONTACT: 1/im Lippens	EVENT DATE: 0/26/13 EVENT TIME: 0/.00 - 10.00 P/. PHONE: 94/-95/-533/ PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE	E, ETC .: Neololing
ANTICIPATED ATTENDANCE: 140 Quests	
CITY SERVICES REQUIRED: POLICE: Streets Blocked: Traffic Control: Clean-up:	Security: Other: Other:
If a temporary restroom is utilized for a period greater than fiv Application is available at City Hall.	e (5) days, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City provided to the City Clerk ten (10) days prior to any event that is	of Palmetto as an "Additional Insured" must be spart of the Special Function Permit.
Please review Exhibit A for insurance coverage requirement sponsors through personal or commercial insurance policies. If	ts. Insurance may also be obtained by event it is necessary to purchase an insurance policy

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

for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

## SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT: Neolduig.	Event Date: 0/ 26/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Pedmin Myspe	
CITY APPROVAL:  City Clerk  Public Works Director  Police Department  North River Fire  APPROVED BY COMMISSION	Date 11/7/12  Date 11-7-12  Date 10/30/12  Date Date
Internal use only Date Received: 103012	

BACH





SPECIAL FUNCTION PERMIT A	<u>APPLICATION</u>	. ( ) , -
APPLICANT: Talmeffolkinning BNB ADDRESS: 1/02 Riversiole St. CONTACT: 1/1/2 LiPPENS		541, E: <u>02/02/13</u> E: <u>04.00-/0,00P/</u> I-981-5331
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, E	TC.: Neololi	nio
ANTICIPATED ATTENDANCE: 120 gust		
DIDITIONED TO ( ) \	Set-up:	Other:_Other:_Ot
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):		
INSURANCE REQUIREMENT: Insurance naming the City of I provided to the City Clerk ten (10) days prior to any event that is pa	Palmetto as an "Additional Palmetto as an Palmetto as an "Additional Palmetto as an additional Palmetto as a additional Palmetto as an additional Palmetto as a a	onal Insured" must be on Permit.
Please review Exhibit A for insurance coverage requirements. I sponsors through personal or commercial insurance policies. If it is	Insurance may also be is necessary to purchase	e obtained by event e an insurance policy

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

for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

## SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT: Nedaling	Event Date: 02/02//3
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Permittee Planships	
CITY APPROVAL:	
City Clerk fundam	Date ///7//2
Public Works Director Allend Justin	Date //- 7-/2
Police Department	Date 11.12
North River Fire	Date 10/30//2
APPROVED BY COMMISSION:	Date
Internal use only Date Received: 10 30 12 By: AFD 2	

CHMIELEWSKI





SPECIAL FUNCTION PERMIT APPLICATION

APPLICANT: Polmette Riceriale BNB ADDRESS: 162 Riceriale Dr. CONTACT: Win Lippens	EVENT DATE: <u>02 /09 /15</u> EVENT TIME: <u>04: 00 - /0, 00 F</u> PHONE: <u>94/- 98/-533/</u> PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE,	ETC.: Neolohing
ANTICIPATED ATTENDANCE: 120 gusto	
CITY SERVICES REQUIRED: POLICE: Streets Blocked: Traffic Control: Clean-up:	
If a temporary restroom is utilized for a period greater than five Application is available at City Hall.	(5) days, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units: Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of provided to the City Clerk ten (10) days prior to any event that is	f Palmetto as an "Additional Insured" must be part of the Special Function Permit.
Please review Exhibit A for insurance coverage requirements sponsors through personal or commercial insurance policies. If it is a coverage requirement of the coverage requirements and the coverage requirements are a specific and the coverage requirements.	s. Insurance may also be obtained by event it is necessary to purchase an insurance policy

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

for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

## SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT: Scaloling.	Event Date: 02/09//3
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Jonathy pr	
CITY APPROVAL:	/ /
City Clerk	Date ///7//2
Public Works Director Millen & Justing	Date 1/-7-12
Police Department	Date 11.7.12
North River Fire	Date /0/30//8
APPROVED BY COMMISSION	Date
Internal use only Date Received: 03012 By: A+02	

MIKESELL





STECIAL FUNCTION PERVI	ALL APPLICATION
EVENT NAME: Neololing	EVENT DATE: feb 16th
APPLICANT: Jalmetto Thrusial BNB	EVENT TIME:04.00-10, 00)
ADDRESS: 1/02 Evasiole S.	PHONE: 941-981-5331
CONTACT: Avin Lippens	PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUT	TE, ETC.: Weolding
ANTICIPATED ATTENDANCE: 1/6 quests	<u></u>
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 fi Application is available at City Hall.	five (5) days, a Temporary Use Permit is require
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
INCIIDANCE DECUMPENTENE I	
INSURANCE REQUIREMENT: Insurance naming the City provided to the City Clerk ten (10) days prior to any event that	y of Palmetto as an "Additional Insured" must be is part of the Special Function Permit.
Please review Exhibit A for insurance coverage requirement	ents. Insurance may also be obtained by ever
sponsors inrough personal or commercial insurance policies. I	If it is necessary to purchase an insurance police
for an event, please refer to Exhibit B, and follow the directions	s 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.

	EVENT:	Wed	King		Event Da	te: <u>02/</u> /	16/13
	HAVE READ CONDITIONS.	AND UN	DERSTAND	THE ABOVE SPE	CIAL FUNCTION	ON PERMIT	APPLICATION
	cruatice						
I I I	CITY APPROVA City Clerk Public Works Directory Colice Department North River Fire APPROVED BY (	ector (	ON:	Main Laung Jilos		Date	· · · · · · · · · · · · · · · · · · ·
	Internal use only Date Received:	10/30/12	<u>.                                    </u>				

GRANGER





SI BEHILF PONCTION I ERIVIT AFFI	MATION thursd.
APPLICANT: Solme Holking of BNB ADDRESS: 1/02 Prun of Dippus	EVENT DATE: 02/2//13 EVENT TIME: 04.00-10.00Pm PHONE: 94/-98/-533/ PHONE:
<b>DETAILS OF FUNCTION</b> : LOCATION, PARADE ROUTE, ETC.:	Westering
ANTICIPATED ATTENDANCE: 100 questo	
	rity:Other: np:Other: ys, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of Palmo provided to the City Clerk ten (10) days prior to any event that is part of	etto as an "Additional Insured" must be the Special Function Permit.
Please review Exhibit A for insurance coverage requirements. Insurance policies. If it is necessary to the contract of the con	ance may also be obtained by event cessary 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.

EVENT: Nedding.	Event Date: 02/2//13
I HAVE READ AND UNDERSTAND THE ABOVE SPEC CONDITIONS.	CIAL FUNCTION PERMIT APPLICATION
Permittee Marky	
CITY APPROVAL:	
City Clerk	Date ///7///
Public Works Director Allen & Jessing	Date 1/- 7-12
Police Department	Date 11.7.12
North River Fire	Date 10/30/12
APPROVED BY COMMISSION:	Date
Internal use only Date Received: 10 30 12	
By: AFD-8	

HERTZOG





STECIAL FUNCTION PERIVIT	APPLICATION 5/47
APPLICANT: Johnestof Riversich RNIS ADDRESS: 102 Livers of Contact: 1/2 Lippens	EVENT DATE: 02/23//3 EVENT TIME:04.00-/0.00/m PHONE: 94/-98/-533/ PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE,	ETC.: Neololing
ANTICIPATED ATTENDANCE: 25 quests  CITY SERVICES REQUIRED:	
POLICE: Streets Blocked: Traffic Control: PUBLIC WORKS: Barricades: Clean-up:	Security: Other: Other:
If a temporary restroom is utilized for a period greater than five Application is available at City Hall.	(5) days, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is provided to the City Clerk ten (10) days prior to any event that is prior to any event that the City Clerk ten (10) days prior to any event that the City Clerk ten (10) days prior to any event that the City Clerk ten (10) days prior to any event that the City Clerk ten (10) days prior to any event that the City Clerk ten (10) days prior to any event that the City Clerk ten (10) days prior to any event that the City Clerk ten (10) days prior to any event ten (10) days prior ten (10) days prior to any event ten (10) days prior to any event ten (10) days prior ten (10) days	f Palmetto as an "Additional Insured" must be part of the Special Function Permit.
Please review Exhibit A for insurance coverage requirements sponsors through personal or commercial insurance policies. If it for an event, please refer to Exhibit B, and follow the directions to	t is necessary to purchase an insurance 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.

EVENT:	Wedding .	Event Date: 02/23/13
I HAVE REA	D AND UNDERSTAND THE ABOVE	SPECIAL FUNCTION PERMIT APPLICATION
Committee	Typo	
CITY APPROV	'AL:	Date 11/7/12
Public Works D	irector Allen Laure	
Police Departme		Date 11.7.12
North River Fire	a la	Date 10/30/12
APPROVED BY	Y COMMISSION/	Date
	<b>Y</b>	
Internal use on Date Received	- 1 . l. <u> </u>	
Bu ALOS	- Marian	•

STRICK LAND





SIECIAL FUNCTION PER	MIT APPLICATION
EVENT NAME: Nedding	EVENT DATE: 03/02//3
APPLICANT: Polineffor wind BNR	EVENT TIME: 04.00 -10, 00 Por
ADDRESS: 1/02 Ricerson Sy.	PHONE: 941-981-5331
CONTACT: Win Lippens	PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROU	TE, ETC.: Wedding
ANTICIPATED ATTENDANCE: 146 gnes	to
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 Application is available at City Hall.	
TEMPORARY RESTROOM FACILITIES: # of units: Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the Ci	ty of Palmetto as an "Additional Insured" must be
provided to the City Clerk ten (10) days prior to any event that	t is part of the Special Function Permit.
Please review Exhibit A for insurance coverage requirem	ents. Insurance may also be obtained by event
sponsors through personal or commercial insurance policies. for an event, please refer to Exhibit B, and follow the direction	If it is necessary to purchase an insurance policy
and follow the dilection	is 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.

EVENT: Nedding	Event Date: 03/02//3
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	AL FUNCTION PERMIT APPLICATION
Designation of the second of t	
CITY ADDOXIAL.	
CITY APPROVAL:	Date 11/7/12
Public Works Director Allend Justing	Date //-7-/2
Police Department	Date 11.7.12
North River Fire	Date 10130/12
APPROVED BY COMMISSION:	Date
Internal use only Date Received: 6/36/12	
By: A Co	

PAUL





SPECIAL FUNCTION PERMIT APPLICATION	/fursa.
EVENT NAME: Weolohing EVENT	DATE: 03/07//3
APPLICANT: Talmeto Firmal BNR EVENT	TIME:04.00-10,00/
	941-981-5331
CONTACT: / Lin Lippens PHONE:	
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: Veo	loling
ANTICIPATED ATTENDANCE: 120 quests	
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 Tempor Application is available at City Hall.	ary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units: # of days:_ Proposed location(s): # of days:_	
INSURANCE REQUIREMENT: Insurance naming the City of Palmetto as an "A provided to the City Clerk ten (10) days prior to any event that is part of the Special F	dditional Insured" must be unction Permit.
Please review Exhibit A for insurance coverage requirements. Insurance may alsponsors through personal or commercial insurance policies. If it is necessary to purfor an event, please refer to Exhibit B, and follow the directions to obtain a quote or property.	rehaca an incurance notice.

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.

EVENT: Nedding	Event Date: 03 /07 //3
I HAVE READ AND UNDERSTAND THE ABOVE SPECIA CONDITIONS.	L FUNCTION PERMIT APPLICATION
Mu hym	
Permittee	
CITY APPROVAL:	. ,
City Clerk fam (	Date ///7//2
Public Works Director Allend Justine	Date 1/-7-12
Police Department	Date 11 -7 - 12
North River Fire	Date 10/30/12
APPROVED BY COMMISSION:	Date
	•
Internal use only Date Received: 102012 By: A 702	

CLAIRE





SPECIAL FUNCTION PERMIT APPLICATION

	SAT
EVENT NAME: Weolding	EVENT DATE: 03/09/13
APPLICANT: Polar Hofficerich RNR	EVENT TIME: 04.00-10,00 Por
ADDRESS: 1/62 Riveriole Dr	PHONE: 941-981-5331
CONTACT: from Lippens	PHONE:
<b>DETAILS OF FUNCTION:</b> LOCATION, PARADE ROUTE, ETC.:	Weolding
ANTICIPATED ATTENDANCE: So guists	
	rity: Other: pp: Other:
If a temporary restroom is utilized for a period greater than five (5) day Application is available at City Hall.	
TEMPORARY RESTROOM FACILITIES: # of units: Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of Palme provided to the City Clerk ten (10) days prior to any event that is part of	etto as an "Additional Insured" must be the Special Function Permit.
Please review Exhibit A for insurance coverage requirements. Insurance sponsors through personal or commercial insurance policies. If it is necessary to the contract of the Politics of the P	ance may also be obtained by event essary to purchase an insurance policy

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

for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

## SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT: Nedoling	Event Date: 03/09/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
CITY APPROVAL:	· · · · · · · · · · · · · · · · · · ·
City Clerk Public Works Director Police Department North River Fire APPROVED BY COMMISSION	Date /// 7-/2  Date //- 7-/2  Date /0/30//2  Date /0/30//2
Internal use only Date Received: 10 20 12 By: Alexander	

RicH





STECIAL FUNCTION FERNIT APPLICATION
EVENT NAME: Nedding EVENT DATE: 03/16/13
APPLICANT: John et & New ole ZWZ EVENT TIME: 04,00-10, 50 Pm
ADDRESS: 1/02 Rivindle St. PHONE: 941-981-5331
CONTACT: Nun Leppus PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: Neoling
ANTICIPATED ATTENDANCE: 46 Pusts
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:
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.

EVENT: Nedding.	Event Date: 03/16/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Den flysjon	
Control of the contro	
CITY APPROVAL:	
City Clerk	Date ///7//2
Public Works Director Allen & Justing	Date _//- 7-/ Z
Police Department Class Row Wills	Date M. 7.12
North River Fire	Date 10/30/12
APPROVED BY COMMISSION:	Date
V	
Internal use only Date Received: 10/30/12	
By: Afo	

HARTZNER





SPECIAL FUNCTION	ON PERMIT APPL	<u>ICATION</u>	54- 1
APPLICANT: Politic Redding APPLICANT: Politic Redding ADDRESS: 102 Livers of S. CONTACT: Win Lippurs	~\cdot\		TE: <u>03/23//3</u> TE: <u>04.00-10.00Pm</u> Y-981-5331
DETAILS OF FUNCTION: LOCATION, PARA	DE ROUTE, ETC.: _	Weddy	ig
ANTICIPATED ATTENDANCE: 30  CITY SERVICES REQUIRED: POLICE: Streets Blocked: Traffic Control PUBLIC WORKS: Barricades: Clean-	l: Secur	-	Other:
If a temporary restroom is utilized for a period great Application is available at City Hall.	•		Other:
TEMPORARY RESTROOM FACILITIES: # of Proposed location(s):	`units:	# of days:	
INSURANCE REQUIREMENT: Insurance naming provided to the City Clerk ten (10) days prior to any	ng the City of Palmet event that is part of the	tto as an "Addition he Special Functi	onal Insured" must be ion Permit.

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

for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

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

## SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT:	Weolship .	Event Date: 03/23/13	
I HAVE REAL CONDITIONS.	D AND UNDERSTAND THE ABOVE	E SPECIAL FUNCTION PERMIT APPLICATION	MC
Committee Ca	Appr		
CITY APPROV	'AL:		
City Clerk Public Works D	The state of the s	Date ///// Date //- 7-/2	
Police Departme	· WWW.	Date 11.7.12  Date 20/30//2	
APPROVED BY	Y COMMISSION:	Date	
Internal use onl Date Received: By:	19/0/30/12	•	



SPECIAL FUNCTION PERMIT A	<u>PPLICATION</u>	SAT.
APPLICANT: Political BNB ADDRESS: 102 Liverich SNB CONTACT: Win Lippus		E:04.00-16.00PM 1-981-5331
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ET	cc: <u>Neolol</u>	ing
ANTICIPATED ATTENDANCE: 150 Puests		
CITY SERVICES REQUIRED:  POLICE: Streets Blocked: X Traffic Control: SPUBLIC WORKS: Barricades: Clean-up: SPUBLIC WORKS:	_ <del></del>	Other:
If a temporary restroom is utilized for a period greater than five (5, Application is available at City Hall.	) days, a Temporary (	Ise Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:  Proposed location(s):	# of days:	
INSURANCE REQUIREMENT: Insurance naming the City of P	almetto as an "Additio	onal 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.

EVENT: Nedding	Event Date: 04/06/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Committee Hypps	
City Clerk Public Works Director Police Department North River Fire APPROVED BY COMMISSION:	Date ////2  Date //-2-/2  Date /// 30//  Date // 30//
Internal use only Date Received: 102012 By: A To The second secon	

HEERS





SECTION TEMPORE	AFFLICATION
EVENT NAME: Weolohing	EVENT DATE: 04/13/13
APPLICANT: Talmeto Burnole ZNR	EVENT TIME: 04. 00-10. 00 f
ADDRESS: 1/02 Rivingle	PHONE: 941-981.5331
CONTACT: Win Loppen	PHONE:
<b>DETAILS OF FUNCTION:</b> LOCATION, PARADE ROUTE, E	TC .: Neololino
ANTICIPATED ATTENDANCE: 160 Quests	
CITY SERVICES REQUIRED:	
POLICE: Streets Blocked: Traffic Control:	Security: Other:
PURIC WORKS, Daniel	Set-up: Other:
If a temporary restroom is utilized for a period greater than five (5 Application is available at City Hall.	
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of I	Palmetta og en "A dditil T 12
provided to the City Clerk ten (10) days prior to any event that is par	rt of the Special Function Permit.
Please review Exhibit A for insurance coverage requirements. I	Insurance may also be obtained by event
opositions introduct personal of confinercial insurance noticing. If it is	e necessary to much one in the state of
for an event, please refer to Exhibit B, and follow the directions to o	otam 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.

EVENT: Wedding Event Date: 04/13/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL FUNCTION PERMIT APPLICATION CONDITIONS.
John Lyspe
CITY APPROVAL:
City Clerk Sun Date 1/1/1/2
Public Works Director What Justing Date 11-7-12
Police Department Date 11.7.12
North River Fire Date 10/30//2
APPROVED BY COMMISSION: Date
Internal use only
Date Received: 03012  By: Arconic State St

HAMILTON





STECIAL FUNCTION PERMIT'A	PPLICATION SAT
APPLICANT: Salmesson Riverson RNA ADDRESS: 102 Riverson S. CONTACT: Min Lippur	EVENT DATE: 04/20/13 EVENT TIME: 04/00-/0, 00/20 PHONE: 941-98/-5331 PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ET	c: Nedsling
ANTICIPATED ATTENDANCE: 140 grusts	
	Security: Other: Other:
If a temporary restroom is utilized for a period greater than five (5) Application is available at City Hall.	) days, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of Provided to the City Clerk ten (10) days prior to any event that is par	almetto as an "Additional Insured" must be t of the Special Function Permit.
Please review Exhibit A for insurance coverage requirements. In sponsors through personal or commercial insurance policies. If it is for an event, please refer to Exhibit B, and follow the directions to obtain	necessary to purchase an insurance 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.

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ON
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FAST





SIECIAII FUNCTION FERMIT APP	LICATION
EVENT NAME: Mcololing	EVENT DATE: 04/27 /13
APPLICANT: Palmetta Riversiale Bast	EVENT TIME: 04.00 - 10.00 PM
ADDRESS: //ol Ricipiole Dr.	PHONE: 941-987-5331
CONTACT: Wim Lippans	PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.:	Weolding
ANTICIPATED ATTENDANCE: 140 Quisto	
	urity:Other: up:Other:
If a temporary restroom is utilized for a period greater than five (5) do Application is available at City Hall.	sys, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units: Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of Palm	letto og an "Additional I
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 sponsors through personal or commercial insurance policies. If it is ne for an event, please refer to Exhibit B, and follow the directions to obtain	ceccory to mysobogo an imposite 1'

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.

EVENT: Nedding	Event Date: 04/27/13
I HAVE READ AND UNDERSTAND THE ABOVE SPEC CONDITIONS.	CIAL FUNCTION PERMIT APPLICATION
Permittee Hyppin	
CITY APPROVAL:	Date 11/7/12
Public Works Director Allen Lusing	Date 11-7-12
Police Department North River Fire	Date 10/30/12
APPROVED BY COMMISSION	Date
Internal use only Date Received: 10130 12 By: 41703	

HALL





SIECIAL FUNCTION PERMIT APP	LICATION ATI.
APPLICANT: <u>Falmetholiversi oli ENR</u> ADDRESS: <u>//02 Riversi oli ENR</u> CONTACT: <u>//www.h.ppuns</u>	EVENT DATE: 05/04//3  EVENT TIME: 04,00-/0.00/0  PHONE: 94/-98/-533/  PHONE:
<b>DETAILS OF FUNCTION:</b> LOCATION, PARADE ROUTE, ETC.:	: Neololing
ANTICIPATED ATTENDANCE: 12 quists	
01101011111111111111111111111111111111	urity:Other: -up:Other: ays, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of Palm provided to the City Clerk ten (10) days prior to any event that is part of	netto as an "Additional Insured" must be f the Special Function Permit.
Please review Exhibit A for insurance coverage requirements. Insurance sponsors through personal or commercial insurance policies. If it is no	rance may also be obtained by event ecessary to purchase an insurance policy

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

for an event, please refer to Exhibit B, and follow the directions to obtain a quote or purchase a policy.

### SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT: Nedding.	Event Date: 05 /04/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIA CONDITIONS.	L FUNCTION PERMIT APPLICATION
Partition Lypp	
CITY APPROVAL:	
City Clerk Shull the	Date //////
Public Works Director Willenk Justing	Date 11-7-12
Police Department Was Lower	Date 11.7.12
North River Fire	Date /0/30//2
APPROVED BY COMMISSION:	Date
ν	
Internal use only Date Received: 10 20 12	

GREEN- MOORE





SPECIAL FUNCTION PERMIT	APPLICATION
APPLICANT: Palmette River old BMS ADDRESS: 1/02 River ele D. CONTACT: Win Lippens	EVENT DATE: <u>OS //7 //3</u> EVENT TIME: <u>OF 00 //0 00/</u> PHONE: <u>94/~ 98/~</u> 533/ PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, I	ETC.: Weolding
ANTICIPATED ATTENDANCE: 140 Questo	
CITY SERVICES REQUIRED: POLICE: Streets Blocked: Traffic Control: PUBLIC WORKS: Barricades: Clean-up:	Security: Other: Other:
If a temporary restroom is utilized for a period greater than five (Application is available at City Hall.	(5) days, a Temporary Use Permit is required.
Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of provided to the City Clerk ten (10) days prior to any event that is p	Palmetto as an "Additional Insured" must be art of the Special Function Permit.
Please review Exhibit A for insurance coverage requirements. ponsors through personal or commercial insurance policies. If it for an event, please refer to Exhibit B, and follow the directions to	19 necessary to purchase on immunes 1'

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.

EVENT: Nedding.	Event Date: 05/17//3
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Pormittee Manager	
CITY APPROVAL:	
City Clerk / Mul / Sur	Date 1//2// )
Public Works Director Allen Lessing	Date //-7-/2
Police Department	Date 11.7.12
North River Fire	Date /0/30//2
APPROVED BY COMMISSION:	Date
Internal use only Date Received: 10 30 12 By: 4 03	

approcey





SPECIAL FUNCTION PERMIT APPL	ICATION SAT
APPLICANT: Palmethologherich Baris ADDRESS: 102 Liverich Scris CONTACT: Wim L. ppur	EVENT DATE: 05 /25 //3  EVENT TIME: 04.00-/0.00/  PHONE: 841-881-533/  PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.:	Westering
ANTICIPATED ATTENDANCE: 160 pusts	
	ity: Other: p: Other:
If a temporary restroom is utilized for a period greater than five (5) day Application is available at City Hall.	s, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of Palme provided to the City Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that is part of the city Clerk ten (10) days prior to any event that the city Clerk ten (10) days prior to any event that the city Clerk ten (10) days prior to any event that the city Clerk ten (10) days prior to any event that the city Clerk ten (10) days prior to any event that the city Clerk ten (10) days prior to any event that the city Clerk ten (10) days prior to any event that the city Clerk ten (10) days prior to any event that the city Clerk ten (10) days prior to any event the city Clerk ten (10) days prior to any event the city Clerk ten (10) days prior to any event the city Clerk ten (10) days prior to any event the city Clerk ten (10) days prior to any event the city Clerk ten (10) days prior to any event ten (10) days prior ten (10) day	tto as an "Additional Insured" must be he Special Function Permit.
Please review Exhibit A for insurance coverage requirements. Insura sponsors through personal or commercial insurance policies. If it is necessary at the property of the prop	nce may also be obtained by event essary 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.

EVENT: Nedding	Event Date: 05/25//3
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Petroutes	
CITY APPROVAL:	, ,
City Clerk Mult	Date ///7//2
Public Works Director Allen & Jewanne	Date //-7-/2
Police Department White I will	Date 11.7.13
North River Fire	Date 10/30/(2)
APPROVED BY COMMISSION:	Date
Internal use only Date Received: 10 30 12 By: A 702	

BOMOIARITTO





SPECIAL FUNCTION PERMIT APPI	ICATION SAT.
APPLICANT: Palmetto Prince 2013 ADDRESS: 1/02 Rivers of S. CONTACT: Win Lippus	EVENT DATE: 06/0//3  EVENT TIME: 04.00-16.00 PM  PHONE: 94/-98/-533/  PHONE:
<b>DETAILS OF FUNCTION:</b> LOCATION, PARADE ROUTE, ETC.:	Wedding
11/	
ANTICIPATED ATTENDANCE: 40 quests	
PUBLIC WORKS: Barricades: Clean-up: Set-u	rity: Other: p: Other:
If a temporary restroom is utilized for a period greater than five (5) day Application is available at City Hall.	s, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units: Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of Palme	tto as an "Additional Ingreed" 1
provided to the City Clerk ten (10) days prior to any event that is part of	he Special Function Permit.
Please review Exhibit A for insurance coverage requirements. Insurance sponsors through personal or commercial insurance policies. If it is necessary for an event, please refer to Exhibit B, and follow the directions to obtain	eccaru ta nurahaga an ingunasa 1'

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.

EVENT: Westshing.	Event Date:
I HAVE READ AND UNDERSTAND THE ABOVE SP CONDITIONS.	ECIAL FUNCTION PERMIT APPLICATION
Pounttiee Hyspi	
CITY APPROVAL: City Clerk	n. 11/2/12
Public Works Director Allen L. Lusine	Date //- 7-12
Police Department	Date 11.7.12
North River Fire	Date 10/30/12
APPROVED BY COMMISSION:	Date
V	
Internal use only	

MILLER





SPECIAL FUNCTION PERM	<u>UT APPLICATION</u>
APPLICANT: Palnethologiusial RNB ADDRESS: 1/02 Ricerial Dr. CONTACT: Win L. ppens	EVENT DATE: 06 68/3  EVENT TIME: 0400 - 10. 00 for  PHONE: 941-987-537)  PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTI	E, ETC .: Nedding
ANTICIPATED ATTENDANCE: 140 questo	)
CITY SERVICES REQUIRED: POLICE: Streets Blocked: Traffic Control: PUBLIC WORKS: Barricades: Clean-up:	Security: Other: Other:
If a temporary restroom is utilized for a period greater than fiv Application is available at City Hall.	ve (5) days, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
INSURANCE REQUIREMENT: Insurance naming the City provided to the City Clerk ten (10) days prior to any event that is	of Palmetto as an "Additional Insured" must be is part of the Special Function Permit.
Please review Exhibit A for insurance coverage requirement sponsors through personal or commercial insurance policies. If for an event, please refer to Exhibit B, and follow the directions	fit is necessary to purchase on income.

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.

EVENT: Wedding	Event Date: 06/08//3
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Permittee Proposition	
CITY APPROVAL:  City Clerk  Public Works Director  CITY APPROVAL:  Authorized Standard Standa	Date 11/1/12  Date 11-7-12
Police Department  North River Fire  APPROVED BY COMMISSION:	Date 11.7.12  Date 10/30//2  Date
Internal use only Date Received: 10 2012	

UTENDORF (2



SPECIAL FUNCTION PERMIT APPLICATION

1	CALION
EVENT NAME: Neolofino	EVENT DATE: 06/15/13
APPLICANT: Jalmetto Francisch BAR	EVENT TIME: 04.00-10.001
ADDRESS: 1/02 Ricisade Dr.	PHONE: 941-881-533/
CONTACT: Wim Lappens	PHONE:
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.:_	Wedding
ANTICIPATED ATTENDANCE: 125 Questo	
CITY SERVICES REQUIRED: POLICE: Streets Blocked: Traffic Control: Securi	ty:
PURITO WORKS, Daniel	: Other:
If a temporary restroom is utilized for a period greater than five (5) days Application is available at City Hall.	, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units: Proposed location(s):	# of days:
INCIDANCE DECYMPENTALIA	
INSURANCE REQUIREMENT: Insurance naming the City of Palmet provided to the City Clerk ten (10) days prior to any event that is part of the	to as an "Additional Insured" must be see Special Function Permit.
Please review Exhibit A for insurance coverage requirements. Insurar sponsors through personal or commercial insurance policies. If it is nece for an event, please refer to Exhibit B, and follow the directions to obtain a	eggry to purchase on incomes 1:
, and added to be the control of the	equote of putchase 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.

EVENT:	Wedding.	,	Event Date: 06/	15/13
I HAVE READ A	AND UNDERSTAND T	HE ABOVE SPECIAL	. FUNCTION PERMI	T APPLICATION
remarke /	- Kyspu-			
CITY APPROVAL	: A	11		1/2/12
Public Works Direc	tor Kenl	Lesing		7-12
Police Department North River Fire		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	Date 11.7	130/12
APPROVED BY CO	DMMISSION:		Date/	······································
Internal use only Date Received: K By: A	20/12			

BABECK





SPECIAL FUNCTION PERMIT APPLI	CATION
APPLICANT: Palmetho Phrisioli Swi3 ADDRESS: 102 Pirmeli Di CONTACT: Win Loppens	EVENT DATE: 06/22/13  EVENT TIME: 04.00-10.00 P.  PHONE: 941-981-5331  PHONE:
<b>DETAILS OF FUNCTION</b> : LOCATION, PARADE ROUTE, ETC.:	Wedoling
ANTICIPATED ATTENDANCE: 50 grants  CITY SERVICES REQUIRED: POLICE: Streets Blocked: Traffic Control: Securi	ty: Other:
PUBLIC WORKS: Barricades: Clean-up: Set-up  If a temporary restroom is utilized for a period greater than five (5) days	: Other:
TENADOD A DA DECEDO OLO TO COMPANION DE COMP	# of days:
INSURANCE REQUIREMENT: Insurance naming the City of Palmet provided to the City Clerk ten (10) days prior to any event that is part of the	to as an "Additional Insured" must be ne 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.

EVENT:	Wedding.		Event Date: 06/	122/13
I HAVE REA	D AND UNDERSTANI	O THE ABOVE SPEC	IAL FUNCTION PERMI	r application
Permittee	Nopo	<u>-</u>		
CITY APPROV	/AL:			. / /
City Clerk		and the	Date _//	17/12
Public Works I	NEW	uk Jusing	Date//	-7-12
Police Departm	7111	14 holls	Date <u>11 · *</u>	1.13
North River Fir	<del></del>	MA D	Date <u>/ ()</u>	50//2
APPROVED B	Y COMMISSION:		Date/	
Internal use or Date Received		·		
By: Ator				

LAHEY (28)



SIECIAL PONCTION	TERMIT APPLI	CATION	5AT. (
EVENT NAME: A rololing		EVENT DA	TE: 06/29//3
APPLICANT: John Cho Piccisi ol	<u> </u>	EVENT TI	ME: 0/100-10, 00 f
ADDRESS: 1/02 Riversion Dr.			341-9815331
CONTACT: Win Lippuno		PHONE:	
DETAILS OF FUNCTION: LOCATION, PARAD	E ROUTE, ETC.:	Wideh	ip
			<u> </u>
ANTICIPATED ATTENDANCE: 60	questo		
CITY SERVICES REQUIRED:			
PUBLIC WORKS: Barricades: Traffic Control: Clean-up		ty: :	Other:
If a temporary restroom is utilized for a period greate Application is available at City Hall.	_		
TEMPORARY RESTROOM FACILITIES: # of u Proposed location(s):	nits:	# of days:	
INCHD ANCE DECYMPERATION I			
INSURANCE REQUIREMENT: Insurance naming provided to the City Clerk ten (10) days prior to any expression of the control of the	the City of Palmet ent that is part of th	to as an "Addi e Special Func	tional Insured" must be tion Permit.
Please review Exhibit A for insurance coverage responsors through personal or commercial insurance por for an event, please refer to Exhibit B, and follow the design of the contract of the second se	licies If it is nece	ecaru to murch	100 on impressed 11

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.

EVENT: Wedoling	Event Date: 06/29/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	, FUNCTION PERMIT APPLICATION
Permittee Huppan	
CITY APPROVAL:	
City Clerk	Date /// 7// 2
Public Works Director Williams Musung	Date 1/-7-12
Police Department	Date \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
North River Fire	Date 10/3D// 1
APPROVED BY COMMISSION:	Date
Internal use only	
Date Received: 1020 12  By: A 1720	

PACE CENTER FOR GTELS (D)



SPECIAL FUNCTION PERMIT APPLICATION	RIDAY
	E: <u>05/10/13</u> E: <u>04:00-/0. co.Pn</u> 1-981-5331
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: PUDRAIS	ER
ANTICIPATED ATTENDANCE: 220 guests CITY SERVICES REQUIRED:	
POLICE: Streets Blocked: Traffic Control: Security:	Other:
If a temporary restroom is utilized for a period greater than five (5) days, a Temporary U. Application is available at City Hall.	se Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units: # of days: Proposed location(s):	
INSURANCE REQUIREMENT: Insurance naming the City of Palmetto as an "Addition provided to the City Clerk ten (10) days prior to any event that is part of the Special Function Please review Exhibit A for insurance coverage requirements. Insurance may also be	on Permit.

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

### SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT: FUNDRAISING	Event Date: 05/10/13
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Empires Proping	
CITY APPROVAL:	,
City Clerk fund	Date ///7//2
Public Works Director Sellen Lesseno	Date 11-7-12
Police Department	Date 11.7.12
North River Fire	Date 10/30//2
APPROVED BY COMMISSION:	Date
Internal use only Date Received: 10 30 12 By: A + 0 3	



#### SPECIAL FUNCTION PERMIT APPLICATION

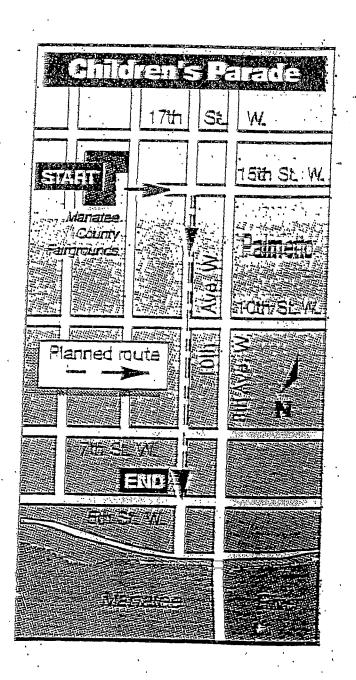
EVENT NAME De Soto Heritage Festival Children's Parade	EVENT DATEFriday, March 29, 201
APPLICANT: Hernando De Soto Historical Society, Inc.	EVENT TIME: 10:00 am - 3:00 pm
ADDRESS: Third Avenue West, Bradenton, FL 34205	PHONE: <u>941-747-1998</u>
CONTACT: Sharon McGlynn, Executive Director	PHONE: <u>9</u> 41–747–7953
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: U	of Outron and Look Dowled for
· · · · · · · · · · · · · · · · · · ·	
Children's activities. Many local non profits set up to provide info for the children. Use of gazebo and no parking signs on 19th Ave.	Tor parmets & grandparents with gales
Tor the children, use of gazeno and no parking signs on 1901 Ave.	racate Luite 15 attaches
ANTICIPATED ATTENDANCE:	
CITY SERVICES REQUIRED:	
POLICE: Streets Blocked: X Traffic Control: X Secur	ity: Other:
POLICE: Streets Blocked: X Traffic Control: X Secur PUBLIC WORKS: Barricades: X Clean-up: Set-u	p: Other:
If a temporary restroom is utilized for a period greater than five (5) day Application is available at City Hall.	rs, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:Proposed location(s):	# of days:
<b>INSURANCE REQUIREMENT:</b> Insurance naming the City of Palme provided to the City Clerk ten (10) days prior to any event that is part of	etto as an "Additional Insured" must be the Special Function Permit.
Please review Exhibit A for insurance coverage requirements. Insurance sponsors through personal or commercial insurance policies. If it is necessary for an event, please refer to Exhibit B, and follow the directions to obtain	essary to purchase an insurance 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.

EVENT: De Soto Heritage Efstival Children's Parade	Event Date: March 29, 2013
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Permittee Chris Atkinson, President HDFS	
CITY APPROVAL: June 1990 Public Works Director Allen Jusus Risk Management	11/7/12 Date 11-7-12 Date
Parks Department	Date
Police Department Alak R Wills	Date 11-6-12
North River Fire	Date 10/29/12
APPROVED BY COMMISSION:	Date
Internal use only Date Received:	

### De Soto Heritage Festival Children's Parade Route



#### Client#: 2131

#### **HERNADES**

#### ACORD.

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/18/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) 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). RONTACT Debbie Johnson
PHONE
(AUC. No. Ext): 913 432-4400
F-MAIL PRODUCER Haas & Wilkerson Insurance FAX (A/C, No): 913 749-4868 4300 Shawnee Mission Parkway E-MAIL ADDRESS: debbie.johnson@hwins.com Fairway, KS 66205 INSURER(S) AFFORDING COVERAGE NAIC# 913 432-4400 INSURER A: ACE American Insurance Company 22667 INSURED INSURER B : Hernando De Soto Historical Society, INSURER C : Inc. dba De Soto Heritage Festival INSURER D : 910 Third Ave W INSURER E : Bradenton, FL 34205 INSURER F: 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, ADDL SUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER GENERAL LIABILITY Α G20661902 01/30/2012 01/30/2013 EACH OCCURRENCE \$1,000,000 X COMMERCIAL GENERAL LIABILITY DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) **\$EXCLUDED** PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$5,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$5,000,000 PRO-JECT POLICY AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) ANY AUTO BODILY INJURY (Per person) ALL OWNED SCHEDULED BODILY INJURY (Per accident) AUTOS NON-OWNED AUTOS PROPERTY DAMAGE (Per accident) HIRED AUTOS s UMBRELLA LIAR OCCUR EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE AGGREGATE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY WC STATU-LTORY LIMITS ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$ ff yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT | \$ Liquor Liability G20661902 01/30/2012 01/30/2013 \$1,000,000 Occurrence \$1,000,000 Aggregate DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Governmental Entity (Form CG2026/LD-22318) 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.

CERTIFICATE HOLDER	CANCELLATION
City of Palmetto 516 8th Ave. W. Palmetto, FL 34221	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
·	William R. M. Solven To



#### SPECIAL FUNCTION PERMIT APPLICATION

EVENT NAME: De Soto Heritage Festival Grand Parade	EVENT DATE: Saturday, April 27, 201
APPLICANT Hernando De Soto Historical Society, Inc.	EVENT TIME: 6:15 pm - 11:60 pm
ADDRESS: 910 Third Avenue West, Bradenton, FL 34205	PHONE:941-747-1998
CONTACT: Sharon McGlynn, Executive Director	PHONE:941-747-7953
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, on Manatee Avenue, ends at 9th Street. Dispurses on Manatee Avenue at See attached map of the parade route.	venie between 9111 St. all 1st Street
ANTICIPATED ATTENDANCE:	
CITY SERVICES REQUIRED:  DOLLICE: Streets Blocked: Traffic Control: X	Security: Other:
POLICE: Streets Blocked: Traffic Control: X  PUBLIC WORKS: Barricades: Clean-up:	Set-up: Other:
If a temporary restroom is utilized for a period greater than five Application is available at City Hall.	e (5) days, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units: Proposed location(s):	# of days:
• · · · · · · · · · · · · · · · · · · ·	
<b>INSURANCE REQUIREMENT:</b> Insurance naming the City provided to the City Clerk ten (10) days prior to any event that is	of Palmetto as an "Additional Insured" must be spart of the Special Function Permit.
Please review Exhibit A for insurance coverage requirement sponsors through personal or commercial insurance policies. It for an event please refer to Exhibit B, and follow the directions	f it is necessary to purchase an insurance policy

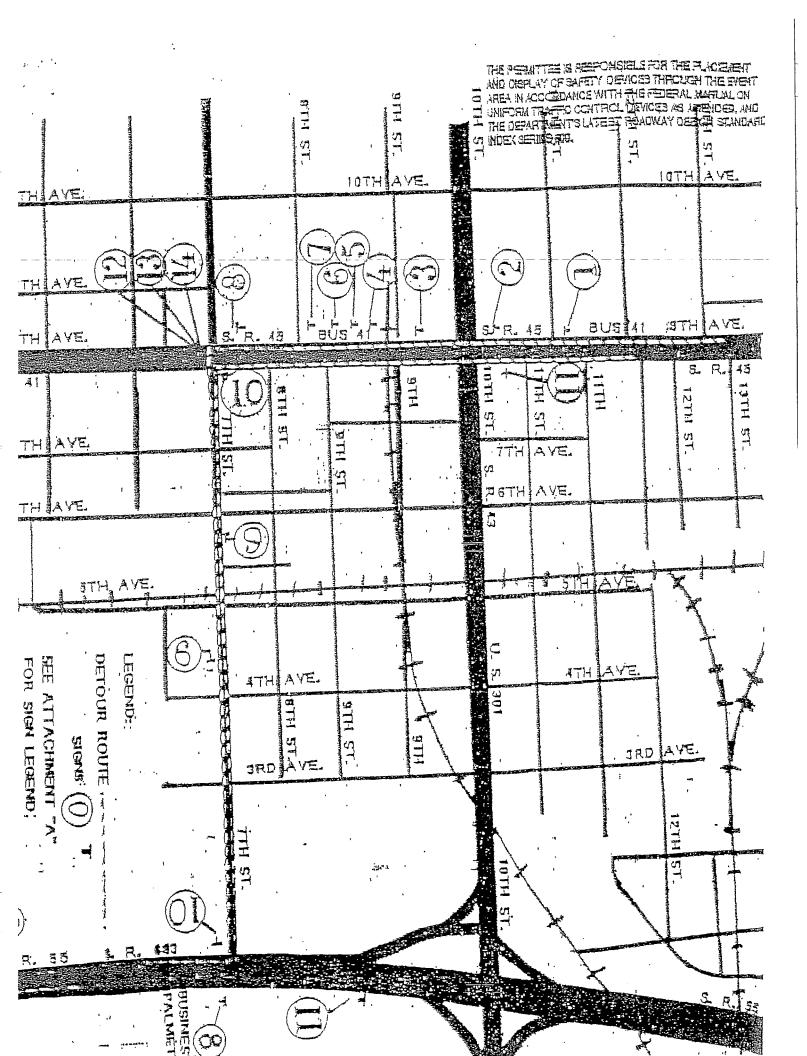
The Special Function Permit Application must be submitted to City Clerk's office at least 30 days prior to the event.

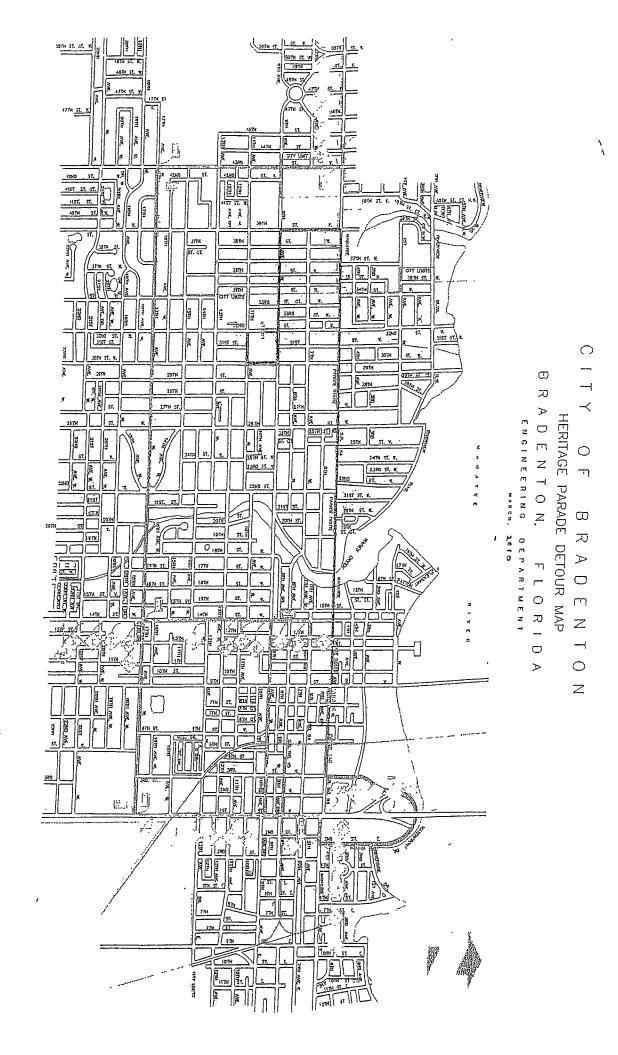
# SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS STRICTLY PROHIBITED.

EVENT: De Soto Heritage Festival Grand Parade	Event Date: Saturday, April 17, 2013
I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL CONDITIONS.	FUNCTION PERMIT APPLICATION
Permittee Chris Atkinson, President HIRS	
CITY APPROVAL: Jam Man City Cler R: Jam Man Public Works Director Menl June	11/7/12 Date 122-12
Risk Management	Date
Parks Department Police Department	Date
Police Department All Collission:	Date
Internal use only Date Received:	

#### Attachment "<u>A</u>"

1.	"DETOUR 1500' "	DETOUR 1500'	
2.	"DETOUR 1000' "		DETOUR 1000'
3.	"RIGHT LANE CLOSED AHEAD"	Might Lane Glosed Antead	
4.	"BRIDGE CLOSED AHEAD"		Bridge Glosed Ahead
5.	"MERGE LEFT"	Merge Left	ANTEAD
6.	"DETOUR 500' "		DETOUR 500
7.	"DETOUR AHEAD"	DETOUR AHEAD	
8.	"LEFT DETOUR"		DETOUR
9.	"DETOUR"	DETOUR	
10	. "RIGHT DETOUR"	Ш	DETOUR
11	. "END DETOUR"	end Detour	inni
12	TYPE III BARRICADE		
13	. "ROAD CLOSED TO THRU TRAFFIC" ———	THAN TRAFFIC	
14	. "DETOUR ← "		DETOUR





#### **HERNADES**

#### ACORD.

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MIMIDDIYYYY)

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

CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) 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). CONTACT Debbie Johnson
PHONE
(AJC, No, Ext): 913 432-4400

E-MAIL Octobre Johnson Haas & Wilkerson Insurance FAX (A/C, No): 913 749-4868 4300 Shawnee Mission Parkway E-MAIL ADDRESS: debbie.johnson@hwins.com Fairway, KS 66205 INSURER(S) AFFORDING COVERAGE NAIC# 913 432-4400 INSURER A: ACE American Insurance Company 22667 INSURED INSURER B : Hernando De Soto Historical Society, INSURER C : Inc. dba De Soto Heritage Festival INSURER D 910 Third Ave W INSURER E : Bradenton, FL 34205 INSURER F: 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. ADDL SUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER LIMITS GENERAL LIABILITY Α G20661902 01/30/2012 01/30/2013 EACH OCCURRENCE \$1,000,000 COMMERCIAL GENERAL LIABILITY DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) \$EXCLUDED PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$5,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$5,000,000 POLICY PRO-COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY BODILY INJURY (Per person) ALL OWNED SCHEDULED AUTOS NON-OWNED AUTOS BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) HIRED AUTOS UMBRELLA LIAB OCCUR EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE AGGREGATE DED RETENTION \$ WORKERS COMPENSATION WC STATU-TORY LIMITS AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE if yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT Liquor Liability G20661902 01/30/2012 01/30/2013 \$1,000,000 Occurrence \$1,000,000 Aggregate DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Governmental Entity (Form CG2026/LD-22318) 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. **CERTIFICATE HOLDER** CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE City of Palmetto THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. 516 8th Ave. W. Palmetto, FL 34221 AUTHORIZED REPRESENTATIVE William P. Stopman III

#### City of Palmetto

#### Banner Display Request Form

As of March 26, 2002, the City of Palmetto will charge for banner display in the amount of \$25.00 per banner, per week. (NOTE: Maximum banner size is 4' x 8')

The City has one location for banner display:

Riverside Park East at the foot of the Green Bridge facing north bound traffic
Name of organization or group:
Hernando De Soto Historical Society Inc.
Contact person: Sharon McGlynn, Executive Director
Phone number: 941-747-1998
Banner display dates: <u>March 22-29</u> , 2013 - Children's Parade
Cash or check:\$25.00 check #6508
Signature:
Release Signature:
Date of pick up:

#### City of Palmetto

#### Banner Display Request Form

As of March 26, 2002, the City of Palmetto will charge for banner display in the amount of \$25.00 per banner, per week. (NOTE: Maximum banner size is 4' x 8')

The City has one location for banner display:

Riverside Park East at the foot of the Green Bridge facing north bound traffic
Name of organization or group:
Hernando De Soto Historical Society Inc.
Contact person: Sharon McGlynn, Executive Director
Phone number: 941-747-1998
Banner display dates: April 1-8, 2013- SeaFood Fest
Cash or check: \$25.00 check #6508
Signature: Title: President, HDHS Date: 10-23-12 Chris Atkinson  Banners are to be picked up within seven (7) days after the end of display date.
GENERAL RELEASE: I (undersigned), release the city of Palmetto, Manatee County and all other participating organization from any an all actions, damages and/or claims of damages, arising from loss or damage to the persons or property of the undersigned and hereby agree that I have read and understand all of the rules and regulations and hereby agree to abide by them.
Release Signature:
Date of nick up:



ME	WIT APPLICATION JON 4th 2013 EVENT DATE: Dec 7th 2012
SPECIAL FUNCTION PERM	MIT APPLICATION USA
EVENTNAME: FIRST FRIDAMS	EVENT DATE: Dec 112012
APPLICANT: SUCKS GARAGE	EVENT TIME: 5:00 pm - 10:00 pm
ADDRESS: 923 5th St W	PHONE: 941 773 2895
CONTACT: SLICK	
DETAILS OF FUNCTION: LOCATION, PARADE ROU	TE, ETC .: 900 BLOCK 5th St W ADD BLOCK 10th Ave W
CAR SHOW, COMMUNITY BLOCK PARTY	
ANTICIPATED ATTENDANCE: 800 +	
CITY SERVICES REQUIRED:  POLICE: Streets Blocked: Traffic Control:  PUBLIC WORKS: Barricades; Clean-up:  We elect toward  If a temporary restroom is utilized for a period greater than Application is available at City Hall.	five (5) days, a Temporary Use Permit is required.
TEMPORARY RESTROOM FACILITIES: # of units:_ Proposed location(s):	NA # of days:
INSURANCE REQUIREMENT: Insurance naming the C provided to the City Clerk ten (10) days prior to any event the	
Please review Exhibit A for insurance coverage requires sponsors through personal or commercial insurance policies for an event, please refer to Exhibit B, and follow the direction	. If it is necessary to purchase an insurance 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.

Page 2	Application	Jan 4th 201 Event Page Dec 7th 20
event: First	FADAMS	Event Date: Dec 7/42
HAVE READ AND CONDITIONS.	UNDERSTAND THE ABOVE S	SPECIAL FUNCTION PERMIT APPLICATION
renattice of passes		•
CHITTE A DISTRICTMENT		
CITY APPROVAL:		Date
City Clerk		Date
·		
City Clerk Public Works Director	Alla	.Date
City Clerk Public Works Director Police Department	ission:	Date

.



#### SPECIAL FUNCTION PERMIT APPLICATION

EVENT DATE: 02-03-2013

EVENT NAME: VINTAGE WHEELS CAR & TRUCK SHOW

event.

STRICTLY PROHIBITED.

APPLICANT: KON SCHNEIDER PRES- EVENT TIME: OTHER OF THE
ADDRESS: 3862 CHINABERRY RD. BRADENTON PHONE: 941.749-5799
CONTACT: RON SCHNEDER OR DOWNA GREEN PHONE: 941.748-2767
DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: CAR & TRUCK SHOW AT
LAMB PARK IO AVE BLOCKED AT 60 \$ 70 STS.
ANTICIPATED ATTENDANCE: APPROX 400
CITY SERVICES REQUIRED:  POLICE: Streets Blocked: Traffic Control: Security: Other:
PUBLIC WORKS: Barricades: Clean-up: Set-up: Other: 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):
<b>INSURANCE REQUIREMENT:</b> 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

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).

SALE OR CONSUMPTION OF ALCOHOLIC BEVERAGES ON CITY PROPERTY IS

EVENT: VIUTAGE WHERES 24 TH ANNUAL CAR & TRECKEVENT Date: 02-03-2013
SHOW

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

Permittee

CITY APPROVAL:

City Clerk

**Public Works Director** 

Police Department

North River Fire

APPROVED BY COMMISSION

Date 11/13/12

Date 11/13/12

Date 11-13-12

Date ////3//

Date

Internal use only

Date Received: 118

Bu- (