



City of New Port Richey
Parks and Recreation Department
Special Event Application

*All applications must be submitted at least 45 days prior to the event, but no more than 12 months before the event.

* Do not advertise our event until you receive an approved event permit.

Submit original signed and notarized application along with \$100 application fee to the following:

City of New Port Richey
Parks and Recreation Department
6630 Van Buren Street
New Port Richey, FL 34653

APPLICANT

Name of Applicant: Tinamarie Farrell

Title (if applicable): Event Coordinator

Name of Organization: Farrell Cares, Inc.

Is your organization tax exempt? Yes No If yes, please attach documentation. ✓

Is your organization a non-profit? Yes No If yes, please attach documentation. ✓

Mailing Address: 6835 Commerce Ave
Street Address

Port Richey City FL State 34668 Zip Code

Phone: 727-845-7663 Daytime Phone 727-809-6807 Cell Phone

Email: tina@goteamfarrell.com

EVENT

Name of Event: 2018 Cotee River Bike Fest

Description of Event (Include purpose):

3 day motorcycle event featuring live music, live entertainment, bike shows, and vendors.

Location of Event: Sims Park and Downtown New Port Richy

Event/Organization Web Address: www.coteeriverbikefest.org

Event Date(s) & Time(s):

Date	Day of the Week	Start Time	End Time
<u>10/12/18</u>	<u>Friday</u>	<u>5:00pm</u>	<u>11:00pm</u>
<u>10/13/18</u>	<u>saturday</u>	<u>9:00am</u>	<u>11:00pm</u>
<u>10/14/18</u>	<u>Sunday</u>	<u>9:00am</u>	<u>5:00pm</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Setup Date(s): 10/11/2018

Setup Time(s): 3:00pm to 9:00pm

Cleanup Date(s): 10/15/18

Cleanup Time(s): 9:00am to 5:00pm

Will this be an annual event? Yes No If yes, next year's date(s) Oct 11-13, 2019

EVENT LOGISTICS

1. Estimated Attendance (Includes event crew, participants, and spectators):

45,000 This Year 45,000 Last year

Maximum number at peak time: 6,000

2. Will alcohol be served or sold? Served Sold No Alcohol

3. Approximate number of food vendors: 10-15

*Event promoter is responsible for obtaining copies of all licenses and insurance from each vendor and providing the same to the City. All vendors must be listed on the site plan.

4. Approximate number of all other vendors along with type i.e. crafts, sponsors, informational

*May need to provide copy of certificate of insurance in a form acceptable to the City for each vendor:

35-45

5. Will electricity be required?: Yes No Source _____

Location of electricity Sims Park

*City electric is available around the Sims Park Circle, panel box near the river, and the North and South side of Orange Lake. If an event requires additional locations, the event must provide an alternative.

6. List event equipment (Include things such as seating, tents, booths, and trucks. These should all be listed on site map as well.) tents, canopies, seating, booths,

trucks.

7. List entertainment type (bands, DJ, dancers, clowns, etc.): Bands, Acw wrestling

bikini contest - Bike Show

8. List dates and times of music and/or amplified sound: Oct 12th 5:00pm-11:00pm,

Oct 14th - 12:00pm - 11:00pm

Oct 15th - 1:00pm - 5:00pm

9. Will private security be provided? Yes No

If yes, list organization: Steve Lukhart

10. Will portable restrooms be used? Yes No

If yes answer the following and list on site plan:

How many: 22 Installation Date: 10/11/18 Removal Date: 10/15/18

11. Event holders are responsible for trash removal, and must provide their own dumpsters.

Please list your plan. Dumpsters on property
provided by: Republic Services

Will dumpsters be used? Yes No

If yes please include on site plan and answer the following:

How many: 2 Sizes: 30 yard

Installation Date: 10/11/18 Removal Date: 10/15/18

12. Please list any admission charges, donations, parking, registration or other fee and how much.

N/A

13. Does the event require street closures? Yes No

If yes complete the following:

Date(s) of street closure: Begin 10/12/18 End 10/14/18

Time of street closure: Begin 2pm End 9pm

List street(s) to be closed: main st - Grand Blvd
- Bank st -

*A letter must be delivered to all residents that will be directly impacted by a road closure. Attach letter along with addresses to this application.

14. Will there be a parade? Yes No

If yes complete the following:

Street(s) that will be utilized for parade route: N/A

Time assembly to begin: N/A

Time parade starts: N/A

Total number of units in parade: N/A

Number of people in the parade: N/A

Number of vehicles in the parade: N/A

Number of animals in parade: N/A

Number of floats: N/A

Number of bands: N/A

*Attach parade route map to application.

15. Will there be a running/walking/biking/water event? Yes No

If yes answer the following:

Time assembly to begin: N/A

Time event starts: N/A

Estimated ending time: N/A

Event will be conducted on Streets Sidewalks Body of water

*Attach route map to application

16. Will a City dock be used for the event? Yes No

If yes, hours of use: N/A

Location of dock: N/A

List vendors who will use the dock: N/A

*Any dock used for the event will need to remain open to the public during the event.

17. Please check the additional facilities you plan on using.

- Pavillion(s)
- Gazebo
- Amphitheatre (requires an additional rental fee)
- Peace Hall (requires an additional rental fee)

As the applicant, I hereby accept and understand the responsibility to oversee all contractors, vendors, or parties affiliated with the event and to insure compliance with the event policy and procedure manual, the resolution and City ordinance pertaining to Special Events, the event rules, guidelines, requirements, for tents and all policies, rules, regulations, and code provisions of the City of New Port Richey. I understand that any violations may result in immediate cancellation and revocation of the Event Permit. I further certify that all facts contained in this request are accurate.

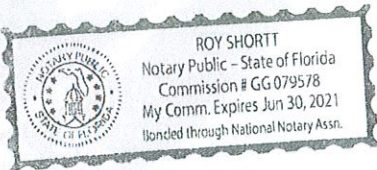
For events on public property, I agree to obtain and furnish the City of New Port Richey with a certificate of general liability insurance in the amount of \$1,000,000.00 or greater as deemed by the City Risk Manager. The insurance must name the City of New Port Richey as an additional insured.

I understand incomplete applications or any outstanding financial obligations with any department within the City of New Port Richey may result in a denial of my request.

Print Name of Applicant or Authorized Representative: Tinamarie Farrell
Signature of Applicant or Authorized Representative: [Handwritten Signature]
Date: 4/17/18

Subscribed and sworn to before me this 1st day of May, 2018
Who is personally known to me and/or produced _____ as
identification.

STATE OF FLORIDA, COUNTY OF PASCO
Notary Public: [Handwritten Signature: Roy Shortt]



My Commission expires: June 30th 2021

Authorization for Applicant's Representative(s)

N/A

I _____, applicant, hereby authorize _____ to act as my representative(s) in all matters pertaining to the processing and approval of this application, including modifying the project. I agree to be bound by all representatives and agreements made by the designated representative.

Signature of Applicant(s): _____

Date: _____

Subscribed and sworn to before me this _____ day of _____, 20 _____
Who is personally known to me and/or produced _____ as
identification.

STATE OF FLORIDA, PASCO COUNTY

Notary Public: _____

My Commission expires: _____

Hold Harmless Agreement

I FARRELL CARES, INC., agree to protect the City of New Port Richey, Florida against all losses arising out of claims, in connection with the 2018 COhee RIVER BIKE FEST.

Without limiting the generality of the foregoing, and all workmanship, actual or alleged infringement of any patent, trademark, copyright (or application for any thereof) or of any other violation of any applicable statute, ordinance, administrative order, rule or regulation, or decree of any court, shall be included in the indemnity hereunder. The FARRELL CARES, INC. Further agrees to investigate, handle, respond to, provide defend any such claims, etc., at its sole expense and agrees to bear all other costs and expenses related thereto, even if it (claims etc.) is groundless, false or fraudulent.

In any case in which such indemnification would violate any applicable legal prohibition, the foregoing provisions concerning indemnification shall not be construed to indemnify the City for damage arising out of bodily injury to persons or damage to property caused by or resulting from the sole negligence of the City or its employees.

Certification:

I Tinamarie Farrell do certify that I am VP

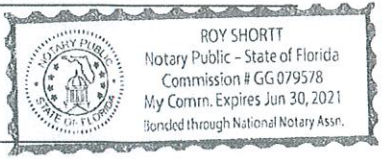
of FARRELL CARES, INC., and that I am authorized to issue this hold harmless agreement; and that this hold harmless agreement is defined as an insured contract under a commercial general liability insurance policy currently in effect for the entity/organization.

Signature of applicant: [Handwritten Signature]

Date: 5-1-18

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public Ray Shortt



My Commission Expires: June 30th 2021