



**CITY OF PANAMA CITY
SPECIAL EVENTS PERMIT APPLICATION**

Check all that apply:

Parks: Parade: Marina: Festival:

Run/Walk: Block Party: Group Feeding:

1. Applicant's Name: Millville Community Alliance

2. Address: 329 N East Ave

3. Telephone Number Day: 850 396 8297 Evening: same

4. Name, Address, Telephone Number of Organization:
Frances King, see above

5. Authorized Head of Organization: Frances King

6. Chairperson's Name: "

Address: _____

7. Name of Event: 2019 Millville Children's Christmas Parade

8. Purpose of Event _____

9. Date(s) of Event: December 13, 2019 (Friday)

10. Event Times: Assembly: 8:00 Start: 9:30 End: _____

11. Assembly Location: Millville Waterfront Park

12. If more than one day, list other dates/times: _____

13. Approximate number of persons, vehicles, animals, type of animals, description of vehicles:

6000 - participants bands, civic clubs
school s.

14. Approximate number of spectators expected: 6000

15. Description of activities (Music group, political speaker, food, etc):

Parade

16. Description of public facilities to be used:

Daffin Park
used by some school for restroom facilities
and picnics

17. Route (COPY OF MAP MUST BE ATTACHED):

Begin at
Waterfront Park end at Daffin Park

18. Will the parade occupy all or part of the street?

yes

19. Length of parade or run in miles:

1 mile

20. Interval to be maintained between units in feet:

30-40 ft

21. Description of recording equipment, sound amplification devices, banners, signs, or attention getting devices:

22. Will the event involve open flame, incendiary devices, or pyrotechnics? If yes, explain. (The Fire Department must be consulted)

No

23. Will alcoholic beverages be sold or served:

No

(Map must clearly indicate egress from alcohol consumption area)

Type of alcohol served: Beer: _____ Wine: _____ Liquor: _____

Time Start: _____ Time End: _____

**** NOTE: Organizer is responsible for obtaining any applicable State Alcohol, Beverage, Tobacco (ABT) licenses.**

24. Grey water plan: _____

25. Clean up plan: _____

26. I have read and agree to comply with the conditions set forth in the City of Panama City Special Events Handbook in accordance with Chapter 17 of the City of Panama City Municipal Code. fsk Initials

27. Organizer assumes all responsibility for any and all damages sustained to park site and will reimburse City for any and all damages, including labor costs. I understand that I must abide by the Regulations as set forth in City of Panama City Ordinance 22.31-22.42 and the rules of the Department of Leisure Services. _____ Initials
(Park Reservations ONLY!)

28. I understand that this application is not approved until it is signed off by the appropriate departments and is approved by the City Commission (if required). _____ Initials

29. Permit fee: _____ Date paid: _____

Application shall be filed not less than sixty (60) days nor more than one hundred eighty (180) days before the date on which the event is to be conducted.

REQUIRED SIGNATURES

Applicant:

Blanca Sking

Leisure Services:

Public Works:

Marina:

Fire Department:

Police Department:

[Signature] #1199

INDEMNITY AND HOLD HARMLESS AGREEMENT

IN CONSIDERATION of the City of Panama City, Florida ("City") approving the use of the City's streets and other City properties by the Undersigned, the Undersigned agrees to indemnify and hold harmless the City, its agents, employees and assigns, from any and all claims, demands, damages, actions, causes of actions, or suits for injury or death to any person and damages to property of others, including the property of the City, arising out of or from the use of the City's streets and properties or from the sale, consumption or possession of alcoholic beverages by those attending or participating in the activities sponsored by the Undersigned, as well as any injury resulting from the previous negligence of the City regarding the construction and maintenance of its properties.

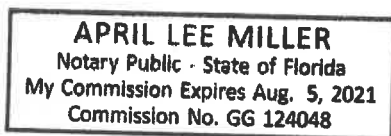
The Undersigned represents that (1) the Undersigned has read and understands the terms of the foregoing Indemnity and Hold Harmless Agreement, (2) that the Undersigned's execution of this instrument constitutes its free and voluntary act, (3) that the execution hereof is made without any representations of inducement or otherwise by those indemnified hereby; (4) that this Agreement has been properly approved by the Undersigned and if applicable in accordance with its organizational structure, and (5) that no other signature other than the one affixed to this document is necessary to make this indemnity and hold harmless agreement binding on the Undersigned or its organization.

IN WITNESS WHEREOF, the Undersigned has hereunto set its hand and seal,
this 30th day of September 2019

Signed, sealed and delivered
in the presence of

Missy Bagwell
Print Name of Witness

Brent Dillard
Print Name of Witness



Millville Comm Alliance
Print Name of Organization or
Individual

Frances Sking
Signature

Frances Sking
(Print Name)

Title: Chairman
Print Name and Title if acting on Behalf of
Above Organization

**CITY OF PANAMA CITY, FLORIDA
TEMPORARY HYDRANT METER
SERVICE AGREEMENT**

The undersigned requests and acknowledges receipt of a fire hydrant meter to be set at _____
for a period not to exceed _____ days. (180 day maximum)

The undersigned accepts full responsibility of said meter and agrees to adhere to all rules and procedures set forth herein, including but not limited to the following:

- ◆ Hydrant meters shall be furnished, installed, relocated, and removed by Utilities Department personnel only. The meter shall remain the property of the City and shall be subject to the exclusive control of the Utilities Department. The City reserves the right to deny use of temporary hydrant meters, when in the sole judgment of the Utilities Department, such use is inconsistent with City policy or with the public health and welfare. Privately owned hydrant meters may be used only with prior approval of the Utilities Department and shall be subject to all other provisions of this agreement.
- ◆ Customers shall be supplied with temporary water service at regular commercial consumption rates upon written application by such customers, agents, or other responsible parties and upon payment of a required service deposit and a non-refundable connection fee. The deposit shall be held by the City as a guarantee for the loss or damage of its equipment and the payment for water used. Upon final determination of all applicable charges and the discontinuance of service, such charges shall be deducted from the deposit and the balance, if any, returned to the customer.
- ◆ All hydrant meters shall be read on a monthly basis by Utilities Department personnel. Service agreements shall be paid in full not less than every 30 days. Failure to comply with any provision of this service agreement shall result in the immediate termination of service and removal of the temporary meter. Disputed charges shall be subject to resolution through the same departmental policies /procedures as other permanent meter services.

- ◆ Customers shall be liable for all damages, repairs or replacements of the hydrant meter, meter assembly, fire hydrant, hydrant assembly, connections and other appurtenances, including the City water distribution system, normal wear and tear excepted.
- ◆ Upon the failure of a customer to pay all such applicable costs, the City shall assess such additional fees, penalties, or other remedies as may be provided according to the Code of Ordinances of the City.
- ◆ Customers shall install City approved backflow prevention devices at each hydrant meter connection as may be reasonably required to protect the public drinking water supply from cross-connections or contamination. The customer shall be responsible for the periodic inspection and testing of such backflow device to ensure that such device is in good working order.
- ◆ Customers shall abide by all applicable provisions of Chapter 24 of the Code or Ordinances of the City of Panama City entitled "Utilities" and such other rules and policies as may be required by the Utilities Department or the City to enforce such provisions.

Date	Company Name
Printed Name & Title	Address
Signature	Telephone #

For Office Use Only: Service Deposit: \$450.00 Connection Fee \$90.00

Work Order # _____ Meter No. _____ Beginning reading _____

Location _____ Hydrant # _____

Final reading _____ Date removed _____

This application was submitted to the City Commission for consideration and the following action was taken:

Approved

Disapproved

Date of Action by Commission

PARADE PERMIT/STREET CLOSURE APPLICATION

NOTE: No devices to create holes in the sidewalks or asphalt roadways are allowed. Any markings made on pavement, sidewalks, or roadways shall be made with chalk.

- 1. Applicant's Name: 1 Millville Christmas Parade
- 2. Address: 1 329 East Ave
- 3. Telephone Number Day: 1 850 896-8297 Evening: 1 Same
- 4. Name, Address, Telephone Number of Organization:
1

- 5. Authorized Head of Organization: 1 Frances King
- 6. Chairperson's Name: 1
Address: 1 329 East Ave
- 7. Date(s) of Event: 1 Dec 13, 2019
- 8. Name of Event: 1 2019 Millville Children's Parade
- 9. Purpose of Event: 1 Celebrate Christmas
- 10. Route (COPY OF MAP MUST BE
1

- 11. Approximate number of persons, vehicles, animals, type of animals, description of vehicles:
1

- 12. Date & Time of Event: Assembly 1 800 Start: 1 9:30 End: 1
If more than one day, list other dates/times: 1 1 1
- 13. Will the parade occupy all or part of the street? All 1 yes Part 1
- 14. Length of parade or run in miles: 1 1 mile
- 15. Assembly area/route: 1 Millville Waterboat Park
1

- 16. Interval to be maintained between units in feet: 1 30 to 40 ft
- 17. If parade/street closure is to be held by someone other than the applicant, applicant shall file a letter with the Chief of Police from the person proposing authorization in order for the applicant to apply for a permit.
Permit fee: 1 Date paid: 1, 201

Application shall be filed not less than sixty (60) days nor more than ninety (90) days before the date on which the event is to be conducted.

Parade Permit/Street Closure Application (Continued)

1 Capt ALS 800
Command Member

1 10/1/19
Date Received

APPLICANT PLEASE NOTE: All barricades required for the function to be supplied by the Applicant. Event sponsors should contact the Public Works Department at 872-3005 to coordinate assistance they may need with electrical hookups, refuse containers, etc.

Field Services Captain's Comments:

Assigned to: 1 B platoon LT.

Plan of Action / After Action Required

1

The above application was submitted to the City Commission for consideration and the following action was taken:

Approved 1

Disapproved 1

BUSINESS / ORGANIZATION EXTRA DUTY REQUEST

Date of Request 9-23-19

Name of Business / Organization Millville Community Alliance

Address 329 East Ave

Phone 896-8297 Fax _____

Contact Person Sean King

Dates and times needed 12-13-19 8:00 am.

Type of event Parade

Nature of duties to be performed by officers _____

Expected attendance 6000

Anticipated problems traffic

Number of officers requested _____

Will officers be needed on a recurring basis? () Yes () No

Method of Payment _____

I understand that officers shall receive a minimum hourly fee of \$25.00 and will be paid for a minimum of 4 hours regardless of the length of the detail.

Signature Sean King Date 9-23-19
Business/Organization Representative

To Be Completed By Department Personnel

Uniform presence: () Uniformed () Alternative Uniform () Plain Clothes

Signature _____ Date _____ Approved () Disapproved ()
Supervisor of Extra Duty

Signature _____ Date _____ Approved () Disapproved ()
Chief of Police / Designee

N/C

Permit Fees Remittance Sheet

<input type="checkbox"/> Permit Application Fee	\$ <u>0</u>
<input type="checkbox"/> Block Party	\$ <u>0</u>
<input type="checkbox"/> Security Deposit	\$ <u>0</u>
<input type="checkbox"/> Police / Security	\$ <u>0</u>
<input type="checkbox"/> Public works - Electrical Connections	\$ <u>0</u>
<input type="checkbox"/> Public Works - Trash Carts	\$ <u>0</u>
<input type="checkbox"/> Utilities - Water	\$ <u>0</u>
Total	\$ <u>0</u>

Proof of Liability Insurance received Date _____

DOT Permit (if required) Date _____

Panama City Fire Dept. Authorization Sheet (if required) Date _____

Payment received:

Organizer Signature _____

Date _____

M. Bayardo
Witness Signature

Date 9-30-19