



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: A-CURE M.L.K. PARADE
2. Address: PO Box 495 PS FL 32402
3. Telephone Number Day: _____ Evening: 850-624-6977
4. Name, Address, Telephone Number of Organization:
A-CURE P.O. Box
PANAMA CITY, FL
5. Authorized Head of Organization: MYRON K. HINES
6. Chairperson's Name: SAME AS ABOVE
Address: P.O. Box, PANAMA CITY, FL
7. Name of Event: ACURE M.L.K. PARADE
8. Purpose of Event: to bring the community together
9. Date(s) of Event: 18 JAN 2020
10. Event Times: Assembly: 10:30 Start: 12:00 End: 15:00
11. Assembly Location: PANAMA CITY CROSBY HALL
12. If more than one day, list other dates/times: N/A

13. Approximate number of persons, vehicles, animals, type of animals, description of vehicles: 200 SOME VANS PICKUPS AND MAYBE SOME SMALL ANIMALS
14. Approximate number of spectators expected: 150
15. Description of activities (Music group, political speaker, food, etc): M.L.K. MARCH OR PARADE SOME RADIO PLAY FROM VEHICLES, SOME SINGING BY LEADERS, SOME SPEAKERS, NO FOOD.
16. Description of public facilities to be used: County Court hall steps.
17. Route (COPY OF MAP MUST BE ATTACHED): _____
18. Will the parade occupy all or part of the street? PART
19. Length of parade or run in miles: 3.2 MILES
20. Interval to be maintained between units in feet: 15 ft.
21. Description of recording equipment, sound amplification devices, banners, signs, or attention getting devices: GROUPS BANNERS OF DIFF. SIZES, MEGAPHONES.
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: N/A Wine: _____ Liquor: _____

Time Start: 11:00 AM Time End: 2:00 PM

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

24. Grey water plan: N/A

25. Clean up plan: N/A

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. _____ 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. JA 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). JA 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: _____
Leisure Services: _____
Public Works: _____
Marina: _____
Fire Department: _____
Police Department: _____

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 21 day of Oct 2019

Signed, sealed and delivered
in the presence of

Missy Baywell
Print Name of Witness

Brent Dillard
Print Name of Witness

GEORGE H. HINES JR. ACURE
Print Name of Organization or
Individual

George H. Hines Jr.
Signature

GEORGE H. HINES JR
(Print Name)

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

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 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 Under-

IN WITNESS WHEREOF, the Undersigned has hereunto set its hand and seal, this 1 21 day of 10, 2019

Signed, sealed and delivered in the presence of

1 [Signature]
1 Miss Bayne
(Print Name of Witness)
1 Brent Dillard
1 Brent Dillard
(Print Name of Witness)

1 GEORGE H. HINES JR.
Print Name of Organization or Individual

[Signature]
Signature

1 GEORGE H. HINES JR.
(Print Name)
Title: 1 PARADE CHAIR

Print Name and Title if Acting on Behalf of Above Organization

APRIL LEE MILLER
Notary Public - State of Florida
My Commission Expires Aug. 5, 2021
Commission No. GG 124048

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

N/A

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.

10-21-19
Date

A-CURE
Company Name

GEORGE HINES PARADE CHAIR
Printed Name & Title

P.O. Box P.C., FL. (495)
Address

[Signature]
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: A-CURE
2. Address: _____
3. Telephone Number Day: 850-624-6977 Evening: 850 624-6977
4. Name, Address, Telephone Number of Organization: _____

5. Authorized Head of Organization: MYRON K. HINES
6. Chairperson's Name: SAME AS ABOVE
Address: _____
7. Date(s) of Event: 1-18-2020
8. Name of Event: M.L.K. PARADE
9. Purpose of Event: to bring the community together!
10. Route (COPY OF MAP MUST BE
1

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

200 to 350 people + some animals and some vehicles

12. Date & Time of Event: Assembly 1030 Start: 1200 End: 1500
If more than one day, list other dates/times: N/A
13. Will the parade occupy all or part of the street? All: _____ Part
14. Length of parade or run in miles: 3.2 miles
15. Assembly area/route: Bay County Court house

16. Interval to be maintained between units in feet: 10 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: _____ Date paid: _____, 20____

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)

Capt JIS 200
Command Member

11/5/17
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: Detail callwork

Plan of Action / After Action Required

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

Approved _____

Disapproved _____

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
TEMPORARY CLOSING OF STATE ROAD PERMIT

Date: 10-21-19

Permit No. _____

Governmental Entity

Approving Local Government Panama City PD Contact Person Sgt TAYLOR

Telephone 972-3100 Email CTAYLOR@PCgov.org

Organization Requesting Special Event

Name of Organization A-CURE Contact Person GEORGE HINES

Telephone 250-674-6977 Email _____

Description of Special Event

Event Title M.L.K. PARADE Date of Event 1-18-2020

Start Time 1200 End Time 1500

Event Route (attach map) SEE MAP

Detour Route (attach map) N/A

Law Enforcement Agency Responsible for Traffic Control

Name of Agency _____

US Coast Guard Approval for Controlling Movable Bridge

Not Applicable

Copy of USCG Approval Letter Attached

Bridge Location _____

The Permittee will assume all risk of and indemnify, defend and save harmless the State of Florida and the FDOT from and against any and all loss, damage, cost or expense arising in any manner on account of the exercise of this event.

The Permittee shall be responsible to maintain the portion of the state road it occupies for the duration of this event, free of litter and providing a safe environment to the public.

Signatures of Authorization

Event Coordinator GEORGE H. HINES JR. Signature _____ Date 1-18-2020

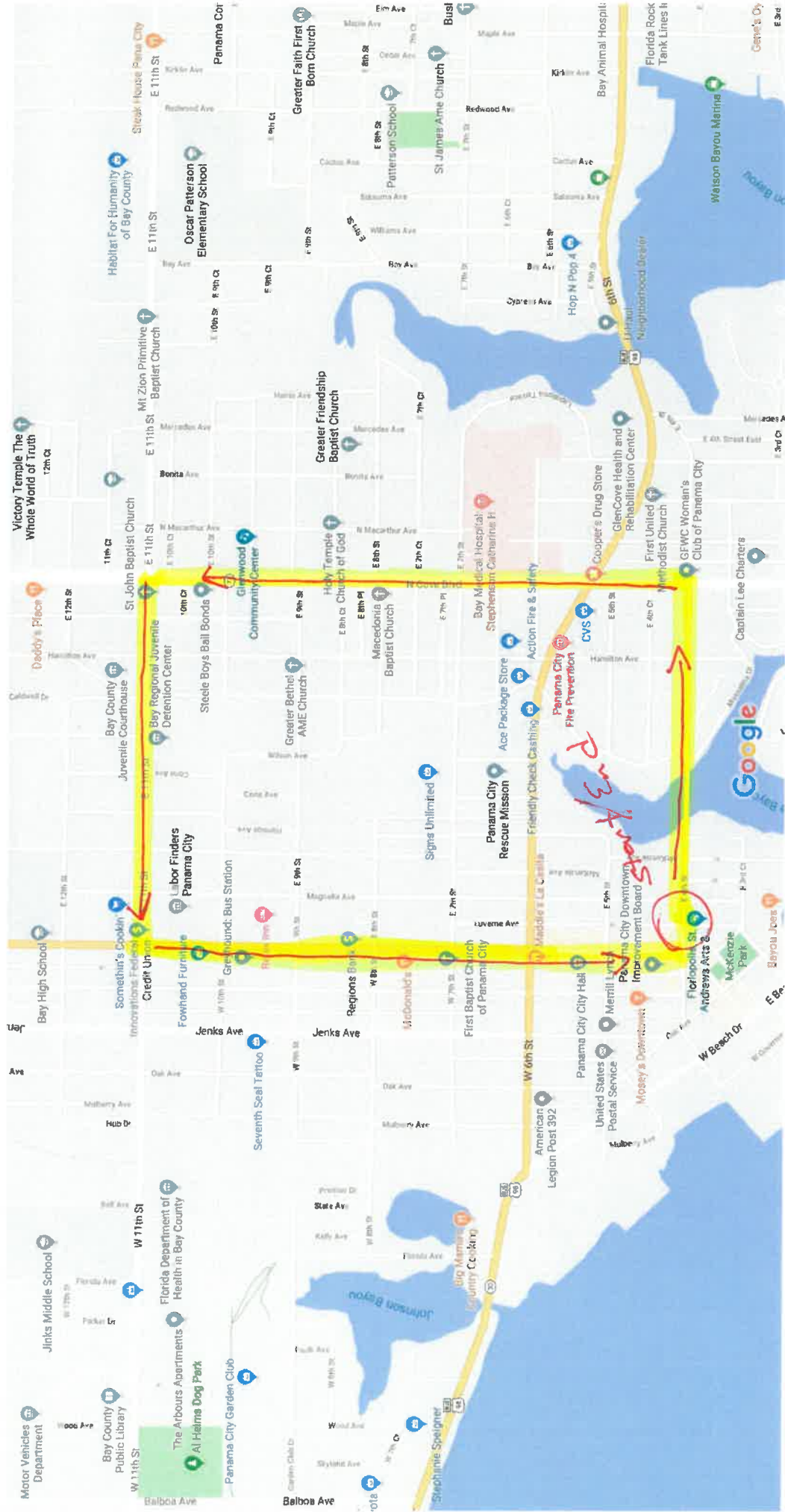
Law Enforcement Name/Title K. Scott ENGLISH JR. LEADER Signature _____ Date 10-5-19

Government Official Name/Title _____ Signature _____ Date _____

FDOT Special Conditions

FDOT Authorization

Name/Title _____ Signature _____ Date _____



Memo

To: Chief Scott Ervin
Chief of Police

VIA Chain of Command

From: Missy Bagwell 850 691-4607

Date: 10/29/19

Re: ACURE M.L.K. Parade 1/18/20

Attached is a special event application for the ACURE M.L.K. Parade January 18, 2020 12-3pm. The group will assemble at the Courthouse, proceed east on 4th St to MLK Blvd, north on MLK to 11th St, east on 11th St to Harrison Ave, south on Harrison Ave to 4th St and end at the Courthouse. They are requesting multiple street closures.

THIS EVENT WILL REQUIRE
10 OFFICERS AND A DOT
ROAD CLOSURE PERMIT


CT3305
11/5/19

Permit Fees Remittance Sheet

<input type="checkbox"/> Permit Application Fee	\$ _____
<input type="checkbox"/> Block Party	\$ _____
<input type="checkbox"/> Security Deposit	\$ _____
<input checked="" type="checkbox"/> Police / Security <i>10 officers</i>	\$ <u>560.00</u>
<input type="checkbox"/> Public works - Electrical Connections	\$ _____
<input type="checkbox"/> Public Works - Trash Carts	\$ _____
<input type="checkbox"/> Utilities - Water	\$ _____
Total	\$ _____

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 _____
Witness Signature	Date <u>10-29-19</u>