

SPECIAL EVENTS APPLICATION



Set up Date(s): 5/14/2022

Date(s) of Event: 5/14/2022

Date of Approval: _____

Name of Event: PRIDE | Be Fabulous Estimated Attendance: 2500

Event Location: Blvd of the Arts Set Up Hours: 7am To: 2p

Operating Event Times: 2:30p To: 11p Tear Down Times: 11 To: 1am

Street to be closed: Blvd of the Arts Hours of Closure: 6am To: 1am

From: Cross Street: Central Ave. To: Cross Street: Florida Ave.

Street to be closed: _____ Hours of Closure: _____ To: _____

From: Cross Street: _____ To: Cross Street: _____

NOTE: If additional streets are requested to be closed submit an attachment to this application

Sponsor Name: Harvey Milk Festival DBA Fabulous Arts Foundation Phone Number: 941-228-4872

Sponsor Address: 1342 17th Street Sarasota, FL 34234 Email Address: shai@harveymilkfestival.org

On-Site Contact: Shannon Fortner On-Site Cell Num: 941-228-4872

Type of Event: Art/Food Festival Block Party Celebration Concert Fireworks Parade
Private Event Rally Sporting Event Walk/Run Other: _____

Description of Event:

This event has been known as the Harvey Milk Festival for 12 years in our community and now is PRIDE | Be Fabulous Music & Arts Festival. We continue to create safe spaces in our community to amplify LGBTQ+ artists and voices as a platform to inspire our community.

Are you serving/selling food at your event? NO YES If yes, how many expected vendors? 2 food

Are you serving/selling alcohol at your event? NO YES If yes, how many expected serving locations?
2

Are you selling merchandise at your event? NO YES If yes, how many expected vendors? 40

Will there be tents? NO YES If yes, what's the size? 10x10, 2- 20x40

Will there be a stage? NO YES If yes, what's the size? 32'x16' w/stairs

Will bleachers be set up for the event? NO YES

Will there be a pyrotechnic display? NO YES If yes, notification to SRQ/Manatee airport is required by sponsor

Will amplified sound, music, or a public-address system be used? NO YES If yes, please complete a **sound permit**.

Will there be a fee to enter the event? NO YES

Will there be a private security for the event? NO YES

Will there be animals at the event? NO YES If yes, what type of animal*? _____

Depending on the animal, additional insurance might be required

Will the following be dispensed/activities take place?

	<u>Yes</u>	<u>No</u>		<u>Yes</u>	<u>No</u>		<u>Yes</u>	<u>No</u>
Street Closure * with M.O.T.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	City Electricity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EMS (Paramedics)**	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Traffic Restriction (Walks/Runs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Generators**	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fire Protection (Truck)**	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sidewalk / Other R.O.W.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cooking Equipment **	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Port-O-Lets** • If no, will rest rooms be provided?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Barricades**	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Traffic Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water/Sewer	<input type="checkbox"/>	<input checked="" type="checkbox"/>
City Trash Containers If yes, how many? _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Crowd Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Valet Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Signs, Posters, Banners	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Public Parking Lot	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

**NOT PROVIDED BY THE CITY

If fair or carnival rides present at event, please provide following information:

Carnival Operator: _____ On-Site Contact Name: _____

On-Site Phone Number: _____ Email Address: _____

Business Address: _____ State: _____ Zip Code: _____

License of operation information: _____

If a promoter, event organizer or subcontractor is responsible for managing the event, please provide following information:

Promoter Name: _____ On-Site Contact Name: _____


On-Site Phone Number: _____ Email Address: _____


Business Address: _____


AGREEMENT

The undersigned, in consideration of being granted this Special Event Request, hereby covenants and agrees to indemnify and hold harmless the City of Sarasota and all of its Officers and Agents from any and all liabilities, claims, actions, suits or demands by any person, firm, or corporation for injuries, death, or property damage arising out of or in connection with this special event. Exhibit A is attached hereto, if applicable, and incorporated herein by reference. Map/diagram is attached hereto and incorporated herein by reference. The undersigned shall satisfy all governmental requirements for this event; shall be responsible for obtaining any and all necessary permits for this event from City, County, State, or Federal departments and shall make all arrangements directly with such departments; shall pay any fees or charges in connection with this special event; shall remove all structures, trash, or other evidence of the event when this permit expires; must provide name(s) of contractor(s) and telephone number(s) in writing for all contracted services prior to approval; and further agrees that such event and actions (s) of the event sponsor, including not limited to promoters, agents, subcontractors, and organizers engaged by and in partnership with the event sponsor, shall be in accordance with all City or County ordinances and State or Federal statutes including but not limited to, Title VII of the Civil Rights Act of 1964; the Florida Civil Rights Act; The American with Disabilities Act (ADA) of 1990 and the ADA Amendments Act of 2008.

Sponsor: Harvey Milk Festival | Fabulous Arts Foundation

By:  President 2/21/22
Authorized Signature Title Date

Insurance Policy Holder: _____
**If other than sponsor*
 _____
Authorized Signature Title Date

Event Promoter: _____
**If other than sponsor*
 _____
Authorized Signature Title Date

NOTE: *NOTE: The following must be provided at least 60 days prior to the event: Certificate of Insurance and Insurance Policy Declaration page (or equivalent documentation) listing the "City of Sarasota", 1565 1st Street, Sarasota, FL 34236, as "Certificate Holder" and "Additional Insured", including the name and date(s) of the event and its location. The minimum insurance coverage required is as follows:

	Public Liability	Each occurrence / \$2,000,000 general aggregate
	Property Damage	\$ 1,000,000 (required)
	Liquor Liability	\$ 100,000 per occurrence (required)
	Pyrotechnic Liability	\$ 1,000,000 per occurrence (if applicable)
Please return this form to:	Special Events Office	\$ 1,000,000 per occurrence (if applicable)
	801 N. Tamiami Trail	\$ 1,000,000 per occurrence (if applicable)
	Sarasota, Florida 34236	

Approved: Denied:

DocuSigned by: James Wormley 06 May 2022
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DocuSigned by: Stevie Freeman-Montes 09 May 2022
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Department Head Date