



PLANNING & ZONING DIVISION
 DEVELOPMENT SERVICES DEPARTMENT
 CITY OF RIVIERA BEACH
 600 WEST BLUE HERON BLVD.
 RIVIERA BEACH, FL 33404
 561.845.4060

SPECIAL EVENT PRE- APPLICATION MEETING Sign-In Sheet

Meeting Date/Time: Bridge the Gap 5K Run / Walk February 22, 2020
 City/CRA Staff Attendees: 4/25/19

Name	Department	Phone Number	Email Address
Abbrella Weathers	Special Event	561-845-4059	Aweathers@rivierabch.com
Bob Anderson	Special Event	561-313-6999	bub@PalmBeachTennis.org
Catherine Awasthi	Special Event	561 331 1306	cawasthi@takestockpalmbeach.org
Nancy Stellway	"	561 603 9742	nstellway@takestockpalmbeach.org
Keith Golden	Special Event	561-371-3979	KGolden@RivieraBch.com
Rhandi Wallace	"	561-729-4742	rwallace@takestockpalmbeach.org
Frank Souder	Parks + Rec	561-723-3239	fsouder@rivierabch.com

Good Afternoon,

I have attached a special Event Application @Blue Heron Bridge to Ocean Mall, Saturday February 22,2020 (Take Stock In Children 5K Run) For approximately 500 attendees.

Start Time: 6:00am- End Time 10:30am.

As projected by the applicant. Please Review this application in your area f expertise and provide comments no later than Tuesday October 1,2019.

By Replying to this email.

Thanks so much

A'bbrella Weathers

Development Services Department

City of Riviera Beach

Senior Office Assistant

Aweathers@rivierabeach.org

(561)845-4059



Weathers, Abbrella

From: Bob Anderson <bob@palmbeachmarathontraining.com>
Sent: Tuesday, April 23, 2019 12:11 PM
To: Weathers, Abbrella
Cc: Nancy Stellway
Subject: FW: Special Event Permit.
Attachments: 1.Course Map Firefighters 5K.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Good morning Ms. Weathers,

I have been contacted by a non-profit, to manage a race for them in Riviera Beach, February 2020. I have attached a map that we used for an event back in 2017. The race was a big success and was done so without any issues.

I am approaching you, as the first step knowing that there will be other people I have to contact i.e. FDOT, Mall Owner, Riviera Police and so on.

Please examine the map. Could we meet, at your convenience, this Thursday or Friday? My time is flexible so I would be able to meet your schedule.

Looking forward to your response.

Bob Anderson
Palm Beach Race Management LLC
561.313.6099
Bob@palmbeachmarathontraining.com

-----Original Message-----

From: Gagnon, Jeff <Jgagnon@Rivierabch.com>
Sent: Tuesday, April 23, 2019 11:35 AM
To: Bob Anderson <bob@palmbeachmarathontraining.com>
Cc: Weathers, Abbrella <aweathers@Rivierabch.com>
Subject: RE: Special Event Permit.

Good morning Bob,

Please reach out to Ms. Weathers at 561.845.4060.

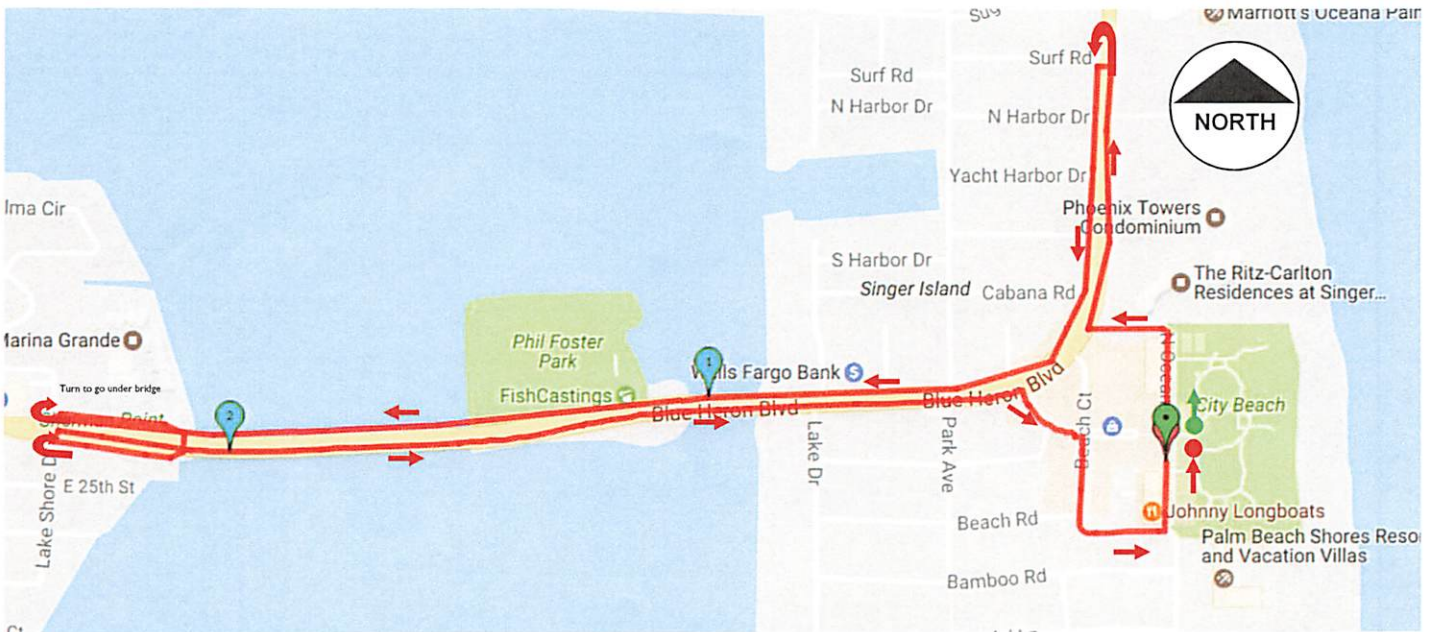
Jeff Gagnon, AICP - Acting Director of Development Services - City of Riviera Beach, FL 33404 - JGagnon@RivieraBch.com
- Phone: (561)845-4060 - Fax: (561)845-4027 - www.rivierabch.com "This message may contain confidential and/or proprietary information and is intended for the person/entity to which it was originally addressed. Any use by others is strictly prohibited."

-----Original Message-----

From: Bob Anderson [mailto:bob@palmbeachmarathontraining.com]

COURSE MAP

Stop, Drop & Run Firefighters 5K



● Start and finish by NY Bagel Shop, N. Ocean Avenue, Ocean Mall. Head north on N. Ocean Avenue. Turn right on Blue Heron Boulevard. Turn-around close to Surf Road. Run south and continue towards the bridge. Mile 1 is located close to Phil Foster Park. Cross the Blue Heron Bridge on the north side of the bridge in the lane closest to the sidewalk. Take a right to run underneath the bridge and proceed back onto the south side of the bridge in the lane closest to the sidewalk. Mile 2 is located on the south side of the bridge. Take right at Plaza Circle to Beach Court. At Beach Court take right and merge onto Beach Road. Continue on Beach Road to N. Ocean Drive. Mile 3. Turn left and run to the finish line. ●

Race: Stop, Drop & Run Firefighters 5K
Location: Start/Finish at Ocean Mall, Singer Island, FL
Date: April 1, 2017—7:30AM
Distance: 3.1 miles/5K



Race Management by: Palm Beach Marathon Training,
Bob Anderson, 561 313 6099, bob@palmbeachmarathontraining.com
Madeleine Ely, 561 222 7511, madeleine@pbrace.com

Nancy Stellway
Executive Director

office (561) 683-1704

cell (561) 603-9742

fax (561) 478-5863

nstellway@takestockpalmbeach.org

1896 Palm Beach Lakes Blvd., Ste. 103

West Palm Beach, FL 33409

www.TakeStockPalmBeach.org



Take Stock in
Children

SUPPORT
PALM BEACH COUNTY

scholarships, mentors and hope!

PALM BEACH
RACE
MANAGEMENT

Bob Anderson
PO Box 1073 West Palm Beach FL 33402
c. 561.313.6099
e. Bob@PalmBeachMarathonTraining.com
www.PalmBeachRaceManagement.com

Event Name

Date

Bridge the Gap 5K Run/Walk
February 23 2020

NOTES

4-25-19	5 bus load of kids into this event, it's a fundraiser
	east side of the mall. electric signs to say roads closed. breakfast will be served. music DJ.
	300 - 400 attendees
	start time 7:15am - 9:00am
	hard date June 3, 2019



Bob Anderson

PO Box 1073 West Palm Beach FL 33402

c. 561.313.6099

e. Bob@PalmBeachMarathonTraining.com

www.PalmBeachRaceManagement.com

Nancy Stellway
Executive Director

office (561) 683-1704
cell (561) 603-9742
fax (561) 478-5863
nstellway@takestockpalmbeach.org
1896 Palm Beach Lakes Blvd., Ste. 103
West Palm Beach, FL 33409



www.TakeStockPalmBeach.org

CITY OF RIVIERA BEACH

2019-06-11

11:05

JDRUMMOND

COLLEGE FOR KIDS INC DBA

UT6095775	AMOUNT
FMSD COLLEGE FOR KIDS INC D	50.00

PAYMENT RECEIVED	AMOUNT
CHECK: 7131	50.00
TOTAL	50.00

CITY OF RIVIERA BEACH - SPECIAL EVENT APPLICATION



- Please type information or print legibly in dark ink.
- Application must be submitted at least 30 days prior to the event date; 60 days for any proposed road closure.
- Application must be filled out completely; including a detailed map showing proposed location, structures, equipment (stage, restrooms, signage, tents, roadways, etc.).
- A nonrefundable \$50 application fee, made payable to the City of Riviera Beach, must be included when completed application is submitted for review.

Event Proposal

1. Name of event: Bridge the Gap 5K
2. Detailed description of the event: Bridge the Gap 5K is a student/community race and breakfast to raise awareness for Take Stock in Children, a College readiness, mentoring & scholarship program for low income students, and to raise money for under-served youth in PBC.
3. Requested location for the event: Ocean Mall north to surf road to Blue Heron Bridge over and back to Ocean Mall
4. List all dates/times of the event, including setup and breakdown: 2/22/2020 6:00am - 10:30am

Applicant Contact Info

Property Owner Info

Name: Nancy Stellway/Take Stock in Children Name: _____
 Address: 1896 Palm Beach Lakes Blvd Suite 103 Address: _____
 City: West Palm Beach City: _____
 State/Zip: FL 33409 State/Zip: _____
 Phone: 561-603-9742 Fax: _____ Phone: _____ Fax: _____
 Email: nstellway@takestockpalmbeach.org E-Mail: _____

Event Logistics

Will your event require road closure? No Yes
 If yes, describe requested streets and times: (Please attach map depicting the area/route.)



PARKS & RECREATION DEPT.

Does the proposed event location require fencing off areas? No Yes
 (Clearly indicate the areas to be fenced off on your map.)

Are you requesting security from the Riviera Beach Police Department? No Yes Number: 5
 (Any additional security must be coordinated through the Police Department)

Will the event require the use of electricity? No Yes
 If yes, describe location and uses:

(Electrical work must be permitted and performed by an electrician licensed in the City of Riviera Beach.)

9. The event applicant is responsible for clean-up of all event sites. The City of Riviera Beach will provide dumpsters for your event at your request; all dumping fees will be charged to the applicant by the City. If the event site is not cleaned thoroughly, a clean-up charge will be assessed depending on clean-up required.

Number of dumpsters proposed: _____ Number of city dumpsters requested: _____

(Please indicate dumpster locations on map.)

10. Number of temporary restroom facilities proposed: _____

(Please indicate restroom on map. Minimum requirement is one per 200 persons.)

11. Will music be provided? No Yes

Date 2/22/2020 Time Begin/End 7:00 - 9:30am

12. Will alcoholic beverages be served? No Yes No Alcool

(Please show locations of alcohol sales on map. Permission to sell alcohol on public property must be given by City Council.)

13. Are you requesting the use of City parking lots? No Yes

If yes, which lots? Ocean Mall

14. Are you requesting public transportation? No Yes

Please describe how transportation will be provided: _____

5. Are you proposing to place signs or banners on public property? No Yes Number: 4

6. Will temporary structures be constructed or used for the event? No Yes Number: 1

7. Will the event have any vendors, peddlers, or concession sales? No Yes Number: 10 no sales

8. Will the event include amusement rides? No Yes Number: _____

If yes, please provide name of company and type of equipment: _____

(All amusement rides must be approved by the state. Please indicate locations on map.)

Please return completed application with a non-refundable \$50.00 application fee made payable to:

The City of Riviera Beach
Parks & Recreation Department
1621 W. Blue Heron Boulevard
Riviera Beach, FL 33404

***** Departmental Approval - Staff Use Only *****

Planning and Zoning - 561-845-4060 Approved Disapproved (Sig/Date: _____)

Comments: _____

Police - 561-845-4123 Approved Disapproved (Sig/Date: _____)

Comments: _____

Public Works - 561-845-4104 Approved Disapproved (Sig/Date: _____)

Comments: _____

Parks and Recreation - 561-845-4070 Approved Disapproved (Sig/Date: _____)

Comments: _____



TAKES-1

OP ID: MH

CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
05/02/2019

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(ies) must have ADDITIONAL INSURED provisions or 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).

PRODUCER Gulfstream Insurance Group Inc P.O. Box 8908 Fort Lauderdale, FL 33310-8908 David Arch		954-561-2220	CONTACT NAME: PHONE (A/C, No, Ext): 954-561-2220 E-MAIL ADDRESS:	FAX (A/C, No): 954-566-0673
INSURED College for Kids, Inc. DBA Take Stock in Children Palm Beach 1896 Palm Beach Lakes Blvd#103 West Palm Beach, FL 33409	INSURER(S) AFFORDING COVERAGE			NAIC #
	INSURER A: Nationwide Ins Co of America			
	INSURER B: Nationwide Mutual Ins Co			
	INSURER C: Associated Industries Ins. Co.			
	INSURER D: United States Liability Ins.			
	INSURER E:			
	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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR		Y	GL00000054634Z	04/02/2019	04/02/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
B	<input checked="" type="checkbox"/> ProfLiability			PL00000054632Z	04/02/2019	04/02/2020	MED EXP (Any one person) \$ 5,000
B	<input checked="" type="checkbox"/> Abuse/Molestation			PL00000054632Z	04/02/2019	04/02/2020	PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJ. <input type="checkbox"/> LOC OTHER:							
B	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BA00000054633Z	04/02/2019	04/02/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTIONS 0			CMB00000054635Z	04/02/2019	04/02/2020	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
C	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in FL) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	AWC1128050	04/01/2019	04/01/2020	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
D	<input type="checkbox"/> D&O			NDO1572939	04/02/2019	04/02/2020	Limits \$2MIL/\$2MIL
E	<input type="checkbox"/> CRIME			106764104	04/02/2019	04/02/2020	EMPLTHEFT \$ 50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

CITYOFR

City of Riviera Beach
600 W. Blue Heron Blvd.
Riviera Beach, FL 33404

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

David Arch



Letter of Intent:

Take Stock in Children Palm Beach, a 501(c) 3, would like to host the Inaugural Bridge the Gap 5K Walk/Run to raise awareness for Take Stock in Children and raise money for college scholarships for low-income, underserved students in Palm Beach County.

We are requesting to begin setup at 6:00 am at Ocean Mall followed by packet pickup and the race to begin at 7:30am, head north on N. Ocean Avenue up to Surf Road and turn around then run south and continue up and over the Blue Heron Bridge, take a right to run underneath the bridge and proceed back onto the south side of the bridge and proceed east back over the bridge, right at Plaza Circle to Beacon Count and merge onto Beach Road, to N. Ocean Drive. 3.1 miles total distance.

Cones will be used to block off one lane in each direction and we will request police officers be present on either side of the bridge.

Upon race completion we plan to offer participants a pancake or similar type breakfast beginning at 8:00 am and completing by 9:30 am.

Music will be provided by Digital Vibez beginning at packet pickup and until breakdown at 10:00 am.

Nancy R. Stellway
Executive Director

5/2/19

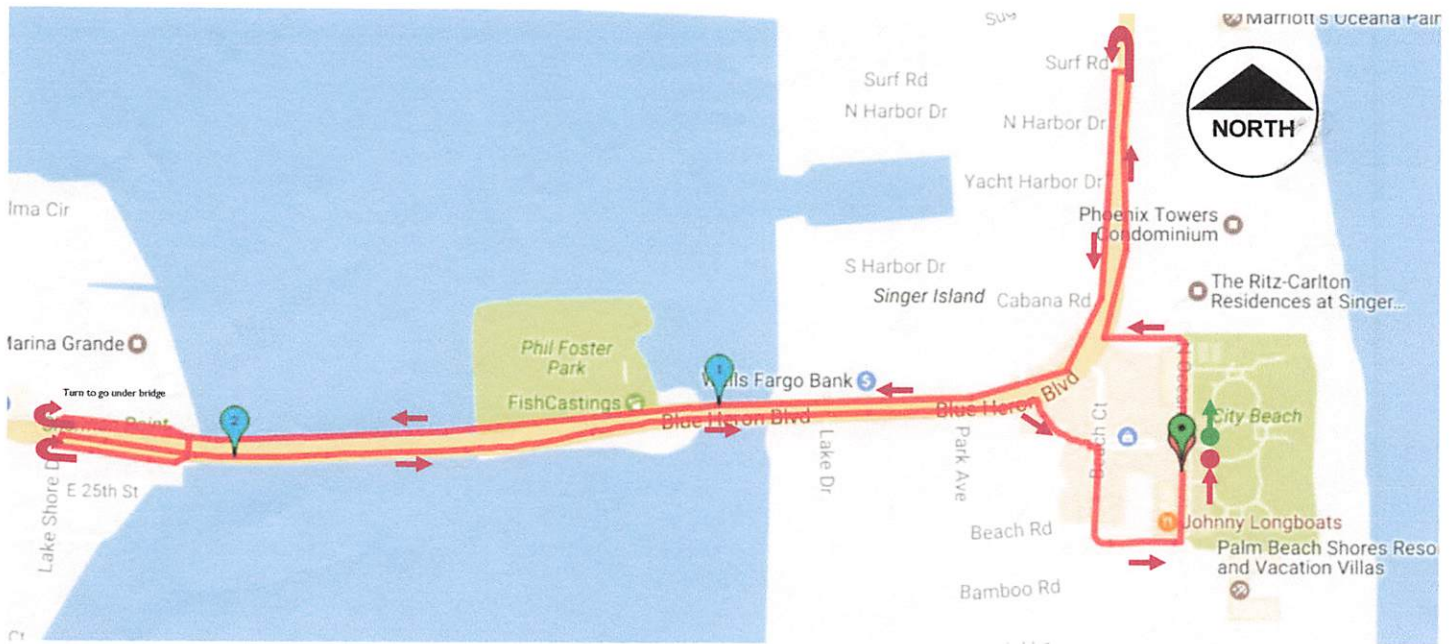
Date

Date of Event: 2/22/2020

scholarships, mentors & hope!

COURSE MAP

Stop, Drop & Run Firefighters 5K



- Start and finish by NY Bagel Shop, N. Ocean Avenue, Ocean Mall. Head north on N. Ocean Avenue. Turn right on Blue Heron Boulevard. Turn-around close to Surf Road. Run south and continue towards the bridge. Mile 1 is located close to Phil Foster Park. Cross the Blue Heron Bridge on the north side of the bridge in the lane closest to the sidewalk. Take a right to run underneath the bridge and proceed back onto the south side of the bridge in the lane closest to the sidewalk. Mile 2 is located on the south side of the bridge. Take right at Plaza Circle to Beacon Court. At Beach Court take right and merge onto Beach Road. Continue on Beach Road to N. Ocean Drive. Mile 3. Turn left and run to the finish line. ●

RACE PATH →

START ●

FINISH ●

MILE MARKER ●

Race: Stop, Drop & Run Firefighters 5K

Location: Start/Finish at Ocean Mall, Singer Island, FL

Date: April 1, 2017—7:30AM

Distance: 3.1 miles/5K

Race Management by: Palm Beach Marathon Training,

Bob Anderson, 561 313 6099, bob@palmbeachmarathontraining.com

Madeleine Ely, 561 222 7511, madeleine@pbrace.com

Stop, Drop & Run Firefighters 5K

Singer Island, FL

Start / Finish: Is the northern edge of the crosswalk between 2501 & 2419 N Ocean Ave, facing North

Turnaround: On Hwy A1A (N Ocean Drive), In the center turn lane between (North of) Sugar Sands Condo Entrance & (South of) Ocean Tree Condo Entrance. 50 Ft diagonally SW of electric pole 253207, 106 Ft. diagonally NW, of the storm sewer on the east side of the road and 48 Ft, diagonally NE, of the storm sewer on the west side of the road.

Mile 1: In front of 1146 Blue Heron Blvd (Captain Jacks) in line with the storm grate in the parking lot.

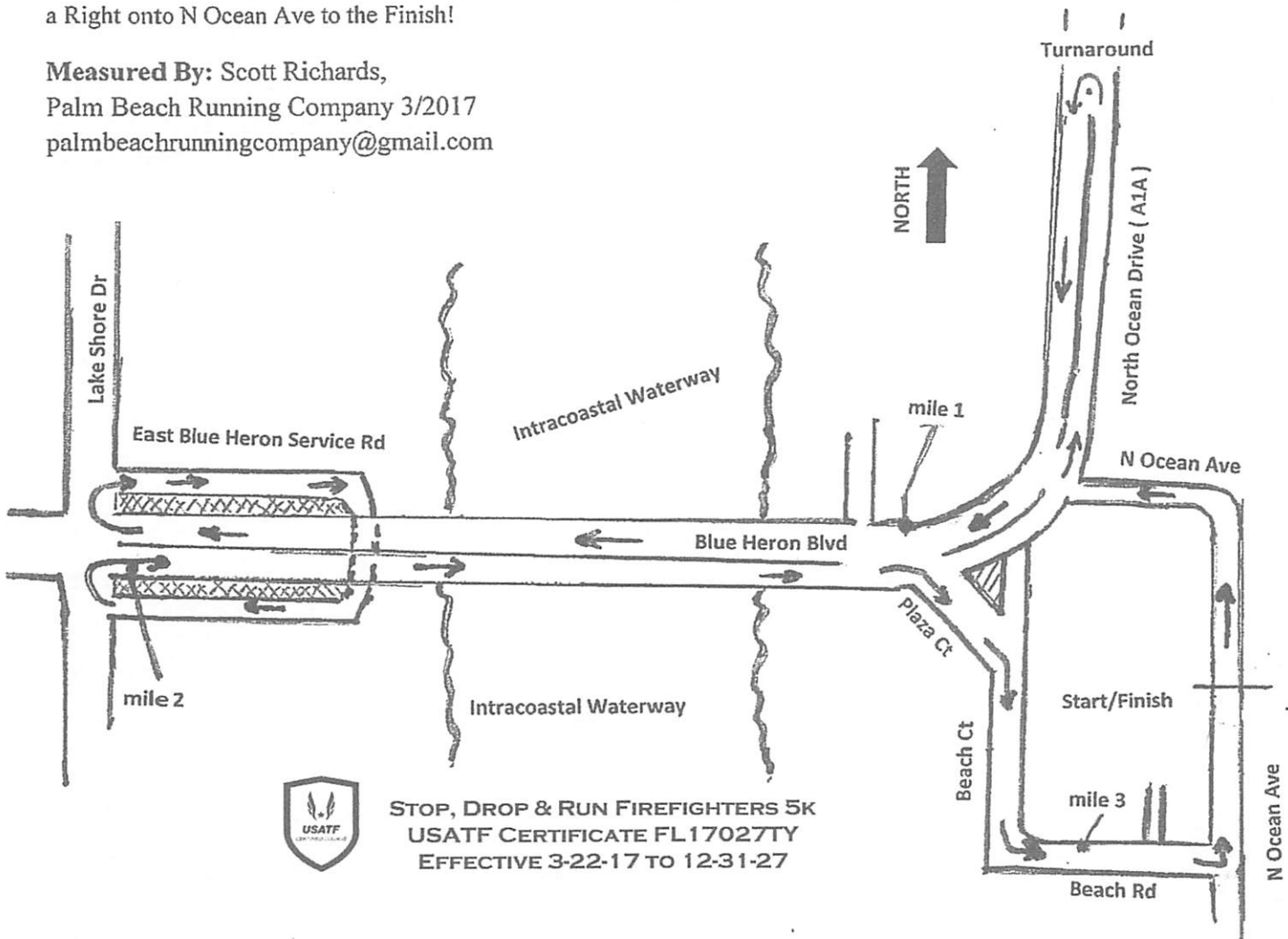
Mile 2: As you start up Blue Heron Bridge heading East, the mark is adjacent to the start of the barrier wall between the cars and the sidewalk.

Mile 3: Is on Beach Rd 65ft west of the sewer grate and 82ft from the sewer cap in the driveway that runs behind Jonny Longboats

Finish: Is at the Starting Point

Course Route: Start facing North, run north on N Ocean Ave, turn Left, proceed to N Ocean Drive, turn Right, North on N Ocean Drive (A1A) to the Turnaround. Run South, on N Ocean Drive to the curve where the road becomes Blue Heron Blvd to Mile one. Continue West over Blue Heron Bridge to the west side of the intracoastal, and take an immediate right on Lake Shore drive and another immediate right on East Blue Heron Blvd Service Rd, and run west following the road under the bridge to the south side of the bridge. Continue West to the base of the bridge turn right on Lake Shore Dr and another right on Blue Heron Blvd and head back up Blue Heron Bridge heading East. Mile two is at the start of the barrier wall. Run up and over Blue Heron Bridge to Plaza Circle, Right on Plaza Circle to Beach Ct. Right on Beach Ct and follow it around as it becomes Beach Rd. Mile 3 is on Beach Rd before the driveway that runs behind Jonny Longboats. Continue straight and take a Right onto N Ocean Ave to the Finish!

Measured By: Scott Richards,
Palm Beach Running Company 3/2017
palmbeachrunningcompany@gmail.com





RELEASE AND WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

IN CONSIDERATION for being permitted to rent or use the City's premises, the undersigned named Applicant Robert Anderson hereby agrees to RELEASE, WAIVE, DISCHARGE, INDEMNIFY AND HOLD HARMLESS the City of Riviera Beach, Florida, a municipal corporation, its officers, servants, agents, or employees (hereinafter collectively referred to as "RELEASEES") from any and all liability, claims, demands, actions and causes of action whatsoever (including attorney fees) for any loss, damage, or injury, including death, arising from any negligent acts, omissions, or wrongful conduct of – Applicant, Applicant's guests, invitees, attendees, agents or employees that may be sustained or suffered by Applicant, Applicant's guests, invitees, attendees, or employees, or by any city employee due to my rental and/or use of City Parks and Facilities.

Nothing contained herein shall be construed as a waiver of the City's sovereign immunity beyond the limits set forth in Section 768.28, Florida Statutes.

It is my express intent that this Release and Waiver of Liability and Hold Harmless Agreement shall bind the members of my family, spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE, and INDEMNIFICATION AND HOLD HARMLESS of the above-named RELEASEES.

I understand that any damage to City Park and Facilities that is caused or permitted to be caused by my guests, invitees, attendees, agents or employees may result in the loss of my security deposit, the preclusion to use City Parks and Facilities in the future, and/or monetary damages resulting from the loss, repair, and/or replacement, etc. of City Park and Facilities equipment and property.

I understand that no animals or alcoholic beverages are allowed at any City Park and Facilities property without prior written approval.

IN SIGNING THIS RELEASE AND WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have read and understand the foregoing provisions; that I sign this AGREEMENT voluntarily as my own free act and deed; no oral representations, statements, or inducement, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

Applicant's Signature

City of Riviera Beach
Parks and Facilities Rental Agreement (Page 2)

****Special accommodations: MUST BE APPROVED AND INITIALED BY P&R STAFF****

Please indicate if you are requesting any special accommodations. Any and all request for special accommodations must be approved by the Parks and Recreation Administrative Office.

of Chairs: _____ Provided by CITY OR APPLICANT

Stage: N/A Provided by CITY OR APPLICANT _____

of Tables: _____ Provided by CITY OR APPLICANT

Sound System: N/A Provided by CITY OR APPLICANT

Other: _____ Provided by CITY OR APPLICANT _____

Kitchen Use/Access: Yes or No Approved _____ (City staff initial and date)

Access prior to Event: Yes or No Time: _____:

Set-up: For special set-up and layout please attach a drawing. Submitted YES or NO _____

Fee Waiver: Approved By City Manager: Yes or No

Serving Alcohol: Approved by CM: Yes or No

Police/Security Confirmed: Yes or No Police Receipt # _____

Floor Covering: Yes or No

EMS Confirmed: Yes or No Note: _____ Other: _____

Payment Section:

Deposit: _____ Receipt No # _____
 Facility Rental Fee: _____ Receipt No # _____
 Plus 6% tax: _____ Payment Due Date: ____/____/____

TOTAL PAID: \$ _____ Vendor Fee to be paid: Yes No \$ _____

Please Review and Sign - Waiver of Liability and Hold Harmless Agreement

APPLICANT SIGNATURE: _____ DATE _____

Administrative Staff Use Only:

_____ Date: ____/____/____ Approved / Not Approved

Authorized Signature of Parks and Recreation Staff

Attach/Submit any correspondence regarding event that has been submitted to the Parks and Recreation Administrative Office (Yes / No) Notes: _____



EXTRA DUTY OFFICERS ARE REQUIRED BY THE PARKS AND RECREATION DEPARTMENT
REQUEST FOR EXTRA-DUTY

RIVIERA BEACH POLICE OFFICERS
PARKS AND RECREATION FACILITIES AND PARKS

POLICE DEPT. HOURS: 9:00A.M-11:00AM and 1:00P.M.-3:00P.M.

Location: Ocean Mall Sk up + over Blue Heron Bridge
Type of Event: Running on AIA Sk Race
Customer: Palm Beach Race Management
Contact No.: 561-313-6089

Ages: (check one) YOUTH ADULT BOTH

Event Date: Feb 27, 2020

Event Time: 7:30 AM

Officer On-site Time: 6:45 AM

Number of People: 300-400

Alcohol Present: No

Municipal Beach:

N/A (Less than 100 people OR not Special Event)

Parks and Recreation Representative: _____
(Signature)

Present this form to the Police Department Detail Coordinator located at:
600 West Blue Heron Blvd.
Riviera Beach, FL 33404
(561) 845-4182

ADMIN FEES PAID YES NO AMOUNT: _____ RECEIPT# _____ DATE: _____

***NOTE TO ALL APPLICANTS: PLEASE BE ADVISED THAT ALL EXTRA DUTY OFFICER RELATED FEES (DOES NOT INCLUDE ADMIN FEES) MUST BE PAID DAY OF& BEFORE EVENT STARTS TO THE ASSIGNED EXTRA DUTY POLICE OFFICER(S). IF FEES ARE NOT PAID EVENT WILL BE CANCELLED.

*PLEASE NOTE: Applicants are required to return within 48 hours with receipt showing payment for extra duty officer(s).

FOR POLICE USE ONLY:
Waiver of Administration Fees: Yes _____ No _____
Signature _____

City of Riviera Beach Parks and Facilities Rental Agreement

Date: 02/20/19

(Fee Schedule Attached)

Date Agreement Submitted: 02/14/19

NAME OF FACILITY RENTED: Municipal Beach FACILITY REQUEST DATE: 2/27/2020
 Type of Event: Road Race Number of Guests: 500
 (Insurance coverage for some events may apply)
 Name of Applicant: Rob Anderson Phone(H): 561-313-6099
 Chairperson of Event: _____ Phone (Alt): _____
 Contact Person: Rob Anderson City: LWPB State: FL
 Zip: 33402
 Address: 70 Box 1073
 Time: 6:00 AM/PM
 until 10:00 AM/PM
 Email Address: Bob@PalmBeachMuseum.com Access prior to event: Time: 5:00 AM/PM

The Departments of Parks and Recreation reserves the right to attach an additional fee for any and all rental events that charge admission or donations. I have reviewed and read the City Parks & Facilities Handbook.

TO REQUEST A REFUND: APPLICANT/RENTER MUST SUBMIT ORIGINAL RECEIPT OR WRITTEN REQUEST TO ADMIN OFFICE. REFUNDS WILL BE PROCESSED WITHIN 4 WEEKS. Please write your name, mailing address and phone number on the back of the original receipt.

Please select which facility. Refer to price listing. A permit or written approval is required to utilize facilities.

Park/Beach/Pavilions

- Ben Flint Park
- Cunningham Park
- George Street Park
- Good mark Park
- Lone Pine Estates Park
- Monroe Heights
- Congress Lakes Park
- Shultz Park
- Wells Park
- Timber Pine Park
- Dan Calloway Amphitheater
- Municipal Beach Park
- Farrington Park (Dan Calloway "Tate")

PAVILIONS REQUESTED: A B C D E F G H I J - (Staff to indicate)

GYMNASIUMS/COMMUNITYCTR/ EVENT HALL

- Wells Gymnasium (Floor)
- Dan Calloway Rec. /Tate Gymnasium (Floor)
- Side Room - Dan Calloway Recreation Complex
- Lindsey Davis Community Center - Large Room
- Lindsey Davis Community Center - Smaller Room
- Newcomb Hall

BALL FIELDS POOL

- Football
- Softball
- Tennis Court
- Basketball Courts
- Grill Areas (Small)
- \$30/Grill Rental Fee

AQUATICS:

- Barracuda Bay Water Park
- Municipal Beach
- Racquetball Courts
- Aqua Spray Ground
- Other _____

Outdoor Facilities Permit Rules and Regulations

- 21 1. I understand this is only a request; no event is confirmed until confirmation from a City representative is given in writing.
- 21 2. Alcohol is not allowed in any City park.
- 21 3. No animals, except service animals are allowed in City parks.
- 21 4. Vehicles are to remain in parking lot areas unless prior authorization is given.
- 21 5. Trash and event debris must be placed in proper containers. If trash cans are full please use dumpster.
- 21 6. Applicant must adhere to start and end times indicated on this permit (set-up & clean-up included).
- 21 7. Any damage to City property or excess garbage requiring City support staff may result in loss of deposit and/or additional charges to applicant.
- 21 8. Permit is only valid for the purpose and date indicated on permit application.
- 21 9. Playgrounds, green space, and walkways are not permitted for exclusive use & can't be blocked.
- 21 10. Applicant must be present at all times during reservation.
- 21 11. All pavilion payments must be made 3 weeks to 6 months prior to event date.
- 21 12. Refundable Security deposits for outdoor facilities can range from \$200.00 to \$600.00.
- 21 13. Grilling is only permitted at designated locations. You may NOT bring your own grill/barbecue unless pre-approved. No gas grills allowed.
- 21 14. All DJ's, bands or other forms of entertainment (bounce house vendors, etc.) must be preapproved and provide Cert. of Insurance (COI) naming the City as an additional insurer maybe requested 2 weeks prior to event.
- 21 15. Facility reservations are not allowed during the Department of Parks and Recreation regular programming scheduled hours or activities schedule.
- 21 16. If guidelines are violated by applicant or any persons in group, future reservations may be refused.
- 21 17. Applicant is responsible for all payments and will receive any refunds ONLY in their name.
- 21 18. Full refunds are given in the case where there is inclement weather at the reserved City location (down pour). You must however cancel your event at least four hours prior to event time.
Cancellation Policy: To receive a full refund minus a 15% or more administrative fee, cancellations must be submitted in writing or contact the Park and Recreation Office and at least 4 hours prior to event. If a cancellation notice is received (2) two days prior to the event renter will receive a full refund. The renter will receive 50% if cancellation made less than a 4-hour window of notification to City. You must confirm refund with a staff person. Refunds only payable to the applicant or renter as indicated on receipt.
- 21 19. To receive a refund, you must request deposit by submitting written request or submitting original receipt to administrative office.
- 21 20. Sports providers must include a copy of practice and/or game schedules 2 weeks prior to event.
- 21 21. Signing applicant assumes all liability for any and all damages and any fees associated with those damages.
- 21 22. Park hours are from sunrise to sunset.
- 21 23. I understand, I am responsible for providing an electrical source and a water source if not provided for that location.
- 21 24. City Manager, Director of Parks and Recreation, or Police Department has the authority to cancel or stop an event at any City location.
- 21 25. There is a two-hour group rental for aqua spray feature and water park and a four hour group reservation for park pavilions.
- 21 26. I have received, read, and understand the City's Facility Manual.

**City of Riviera Beach
Parks and Recreation Department
Outside Vendor Information Sheet**

Rental Date 2/22/2020 Name of Renter ~~Accu Chip Timing~~ Palm Beach Race Management
Name of Vendor Accu Chip Timing
Contact Name Tue Harding
Address of Vendor 3847 NW 126th Ave #12B
City Coral Springs State FL Zip 33065
Phone 954-461-6631 Email Tue@Accuchiptiming.com

Description of rented item(s) or service:

START / Finish Line Electronic Timing of Runners

Client rental time and delivery/pick-up time of rented item or service
(Please indicate a.m. or p.m.)

Rental Time 5:30 AM to 9:30 AM Delivery date/time 2/22/2020 5:30 AM

Pick-up date/time 2/22/2020 10:00 AM

Has the rental company/entertainer been contacted and informed of pertinent Recreation policies?

No _____ Yes Date: 6/1/2020

[Signature] _____
Signature of Renter* Date Signature of Vendor Date

I will not be using the services of an outside vendor. _____ (please initial)
Submit this form with rental agreement.

*Submit original form. The signature on rental agreement and this form must match.

**City of Riviera Beach
Parks and Recreation Department
Outside Vendor Information Sheet**

**Facility Rental Addendum
EMERGENCY OPERATION CENTER**

The Lindsey Davis Sr. Community Center, Wells Recreation & Community Center and Dan Calloway "Tate" Center has been designated as an essential facility during Emergency Operation Activation for the City of Riviera Beach.

In case of a disaster or major emergency, the Emergency Operation Center may be activated. This will restrict operations of any kind, other than that of the Emergency Operation Team, from meetings or holding any form of activities in the Community Center regardless of reservation time or type of function. An emergency may be identified, but not limited to: a natural disaster (hurricane, tornado, flood, etc.) or other as designated by the City. Any scheduled rentals would be notified as soon as possible but no time frame for notification can be guaranteed.

In addition to my signature on the rental agreement, I further recognize, understand and agree to this addendum describing possible cancellation of my event(s) as it relates to the activities of the City's Emergency Operation Activation.

A full refund will be issued.



Signature of Renter*

6/1/2019

Date

I will not be using the services of an outside vendor. _____ (please initial)
Submit this form with rental agreement.

*Signature on rental agreement and this form must match.



CITY OF RIVIERA BEACH
 DEVELOPMENT SERVICES DEPARTMENT
 PLANNING & ZONING DIVISION
 600 WEST BLUE HERON BLVD.
 RIVIERA BEACH, FL 33404
 561.845.4060

AFFIDAVIT OF COMPLETENESS AND ACCURACY

INSTRUCTIONS: TO BE COMPLETED BY INDIVIDUAL SUBMITTING APPLICATION (PROPERTY OWNER, PETITIONER WITH CO-PETITOR, OR AUTHORIZED AGENT).

Project Name: Bridge the GapsK Submittal Date: 6/18/19

STATEMENT OF COMPLETENESS AND ACCURACY

I hereby certify all property owners have full knowledge the property they own is the subject of this application. I hereby certify that all owners and petitioners have been provided a complete copy of all material, attachments and documents submitted to the City of Riviera Beach relating to this application. I further certify the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related application material and all attachments become official records of the Development Services Department of the City of Riviera Beach, Florida, and will not be returned. I understand that any knowingly false, inaccurate or incomplete information provided by me will result in the denial, revocation or administrative withdrawal of this application, request, approval or permit. I further acknowledge that additional information may be required by the City of Riviera Beach to process this application. I further acknowledge that any plans that I have prepared or had prepared comply with the Fair Housing Standards. I further consent to the City of Riviera Beach to publish, copy or reproduce any copyrighted documents submitted as a part of this application for any third party. I further agree to all terms and conditions, which may be imposed as part of the approval of this application.

Check (X) one: I am the Property Owner Petitioner Agent.

Nancy Stellway
 (Name - type, stamp or print clearly)

[Signature]
 (Signature)

Take Stock in Children
 (Name of Firm)

1896 Palm Beach Lakes Blvd. Ste 103
 (Address, City, State, Zip) West Palm Beach, FL

NOTARY PUBLIC INFORMATION:

STATE OF FLORIDA
 COUNTY OF PALM BEACH

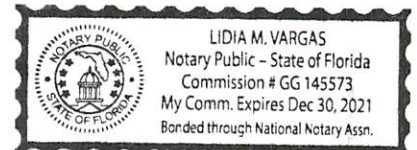
The foregoing instrument was acknowledged before me this 18 day of June, 2019 by Nancy Stellway (name of person acknowledging). He/she is personally known to me or has produced DL (type of identification) as identification and did/did not take an oath (circle correct response).

LIDIA VARGAS
 (Name - type, stamp or print clearly)

[Signature]
 (Signature)

My Commission Expires on: 12/30/2021

NOTARY'S SEAL OR STAMP



Development Services Department | Planning & Zoning Division
 City of Riviera Beach | 600 West Blue Heron Blvd. | Riviera Beach, FL 33404

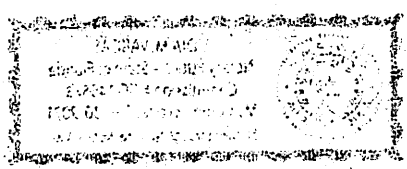
Z: Planning and Zoning/Forms_Documents_Templates/Affidavit of Completeness and Accuracy

Handwritten text at the top of the page, including a date and possibly a recipient name.

Main body of handwritten text, consisting of several lines of cursive script.

Handwritten text at the bottom of the main body, possibly a signature or closing.

Large handwritten signature or name, possibly written in ink.



Additional handwritten text or notes at the bottom of the page, below the signature.

Weathers, Abbrella

From: Bob Anderson <bob@palmbeachmarathontraining.com>
Sent: Tuesday, April 23, 2019 12:11 PM
To: Weathers, Abbrella
Cc: Nancy Stellway
Subject: FW: Special Event Permit.
Attachments: 1.Course Map Firefighters 5K.pdf

Good morning Ms. Weathers,

I have been contacted by a non-profit, to manage a race for them in Riviera Beach, February 2020. I have attached a map that we used for an event back in 2017. The race was a big success and was done so without any issues.

I am approaching you, as the first step knowing that there will be other people I have to contact i.e. FDOT, Mall Owner, Riviera Police and so on.

Please examine the map. Could we meet, at your convenience, this Thursday or Friday? My time is flexible so I would be able to meet your schedule.

Looking forward to your response.

Bob Anderson
Palm Beach Race Management LLC
561.313.6099
Bob@palmbeachmarathontraining.com

-----Original Message-----

From: Gagnon, Jeff <Jgagnon@Rivierabch.com>
Sent: Tuesday, April 23, 2019 11:35 AM
To: Bob Anderson <bob@palmbeachmarathontraining.com>
Cc: Weathers, Abbrella <aweathers@Rivierabch.com>
Subject: RE: Special Event Permit.

Good morning Bob,

Please reach out to Ms. Weathers at 561.845.4060.

Jeff Gagnon, AICP - Acting Director of Development Services - City of Riviera Beach, FL 33404 - JGagnon@RivieraBch.com
- Phone: (561)845-4060 - Fax: (561)845-4027 - www.rivierabch.com "This message may contain confidential and/or proprietary information and is intended for the person/entity to which it was originally addressed. Any use by others is strictly prohibited."

-----Original Message-----

From: Bob Anderson [mailto:bob@palmbeachmarathontraining.com]
Sent: Tuesday, April 23, 2019 10:46 AM
To: Gagnon, Jeff <Jgagnon@Rivierabch.com>
Subject: Special Event Permit.

Good morning,

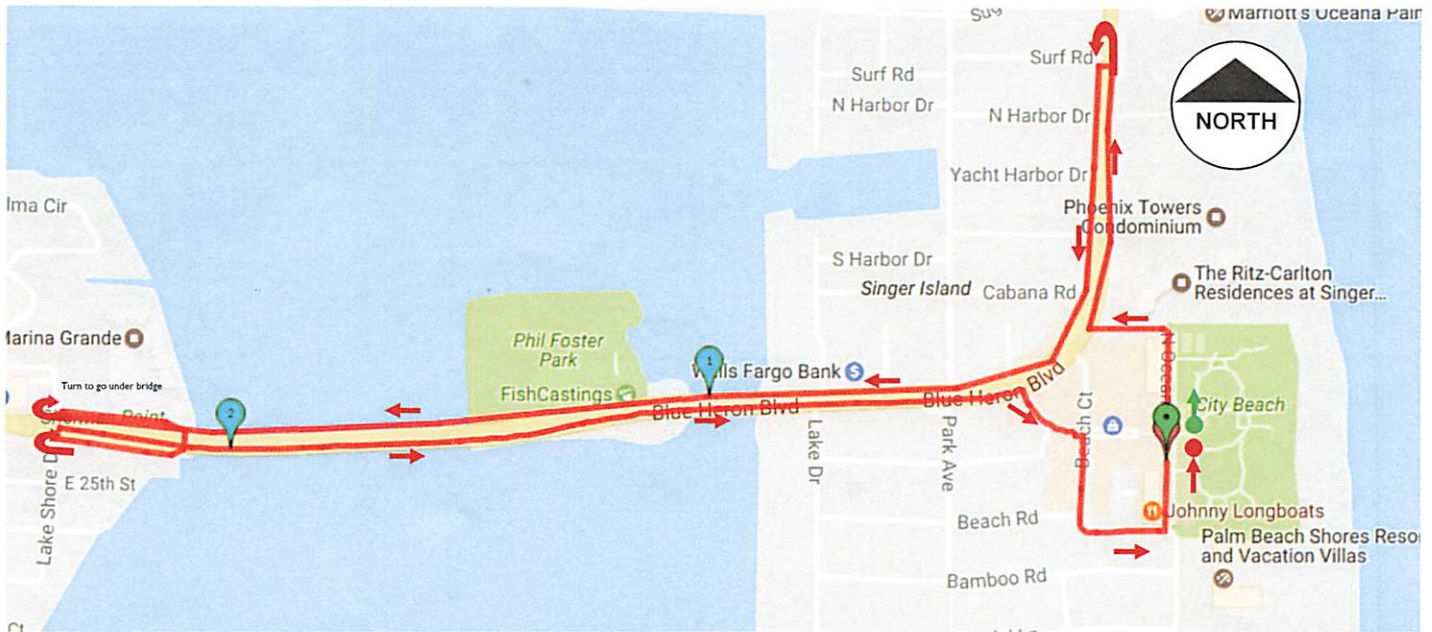
I am not sure that I am directing this e-mail to the proper party or Department but I am inquiring about a Special Event Permit.

Please lead me in the right direction

Regards.....

COURSE MAP

Stop, Drop & Run Firefighters 5K



- Start and finish by NY Bagel Shop, N. Ocean Avenue, Ocean Mall. Head north on N. Ocean Avenue. Turn right on Blue Heron Boulevard. Turn-around close to Surf Road. Run south and continue towards the bridge. Mile 1 is located close to Phil Foster Park. Cross the Blue Heron Bridge on the north side of the bridge in the lane closest to the sidewalk. Take a right to run underneath the bridge and proceed back onto the south side of the bridge in the lane closest to the sidewalk. Mile 2 is located on the south side of the bridge. Take right at Plaza Circle to Beacon Court. At Beach Court take right and merge onto Beach Road. Continue on Beach Road to N. Ocean Drive. Mile 3. Turn left and run to the finish line. ●

Race: Stop, Drop & Run Firefighters 5K
Location: Start/Finish at Ocean Mall, Singer Island, FL
Date: April 1, 2017—7:30AM
Distance: 3.1 miles/5K

RACE PATH →
START ●
FINISH ●
MILE MARKER ●

Race Management by: Palm Beach Marathon Training,
Bob Anderson, 561 313 6099, bob@palmbeachmarathontraining.com
Madeleine Ely, 561 222 7511, madeleine@pbrace.com

Check or Cash Transmittal Form

Department Receiving mail pmt: Development Services Department
 To be transmitted to (Dept.): Billing and Finance Departments

Category	Amount		Account #
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7131	\$50.00	<p>bridge the gap 5k Ocean Mall Nancy Stellway Sev -19-22 Feb,22,2020</p>	

\$ 50.00

From: Dev. Services /  June 11, 2019
 Name / Signature Date

Transmitted to:   June 11, 2019
 Accepted by: Name / Signature Date

COLLEGE FOR KIDS INC DBA**TAKE STOCK IN CHILDREN OF PBC****7131**

City of Riviera Beach					5/2/2019	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
5/2/2019	Bill		50.00	50.00		50.00
					Check Amount	50.00

PNC New Checking # Application Fee 50.00

COLLEGE FOR KIDS INC DBA**TAKE STOCK IN CHILDREN OF PBC****7131**

City of Riviera Beach					5/2/2019	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
5/2/2019	Bill		50.00	50.00		50.00
					Check Amount	50.00

PNC New Checking # Application Fee 50.00