



SANTA ROSA COUNTY TOURIST DEVELOPMENT OFFICE

JULIE MORGAN
Tourist Development Director
julie@santarosa.fl.gov

8543 Navarre Parkway | Navarre, Florida 32566

MEMORANDUM

TO: Board of County Commissioners

FROM: Julie Morgan, Tourist Development Director

DATE: August 8, 2016

SUBJECT: Special Event Application resubmission for the 3rd Annual Dead Pirate 5K Run/Walk – Color Run

RECOMMENDATION

Discussion that the Board of County Commissioners considers and approves the color run aspect of the Special Event Application resubmission from the Krewe of Karibbean to host the 3rd Annual Dead Pirate Color Run 5K Run/Walk on October 22, 2016. The event location is on Navarre Beach and will utilize Gulf Blvd, Indiana St, White Sands Blvd and Arkansas St.

- The event will be using environment friendly safe color powder made from cornstarch.
- This event was approved on June 23, 2016 by the Board of County Commissioners as a 5K run/walk on Navarre Beach.

BACKGROUND

The event is sponsored by the non-profit group Krewe of Karibbean. The purpose of the event is to increase Breast Cancer Awareness in the community.

NEXT STEPS

If approved by the Board of County Commissioners, staff will work with the applicant to finalize arrangements for the event.

July 26, 2016

Julie Morgan
Tourist Development Director
Navarre, Florida

Dear Julie

As requested we are resubmitting this letter of request to hold the Dead Pirate 5K as a "Color Run." It was accidently not written in on our request when it was submitted to the board for approval. We had initially sent in the paperwork to hold a bigger event and it was stated as a color run on the first draft and when it was written up the second time to just be the run, it was not written out on the second set of paperwork. Please accept our apologies for the omission.

In this event we will be using environment friendly safe color powder made from cornstarch. I have included a statement of safety from the supplier company for your review.

This event was "safe and fun" for our community last year and we had a lot of fun with it. We hope you will join our charitable efforts in helping other organizations achieve their goals.

Your support and approval is greatly appreciated.

Sincerely,

Tina Hernandez
Krewe of Karibbean

Material Safety Data Sheet

CORNSTARCH

PRODUCT DESCRIPTION

Product Name: Cornstarch
Synonyms: Argo, Kingsford, and Maizena Edible Cornstarch
Number: N/A
Trade Name: N/A
Manufacturer: Carolina Biological Supply Company
2700 York Road
Burlington, NC 27215
Technical Emergency Information:
800-227-1150 (8am-5pm [ET] M-F)
Address (Transportation Spill Response 24 hours):
800-424-9300

COMPOSITION/INFORMATION ON INGREDIENTS

Principal Hazardous Component: Starch (CAS #5005-25-8)
Use: This product is a food-grade product and is intended for edible uses.
OSHA PEL (mg/m³):
TWA 10 mg/m³ (TWA)
HA-PEL 15 mg/m³ (Total Dust); 5 mg/m³ (respirable fraction)

HAZARD IDENTIFICATION

Agency Overview: N/A
Acute Health Effects:
The product is non-irritating. Contact with the eyes may induce temporary discomfort due to the presence of foreign objects.
The product is not a skin irritant nor is it known to be mutagenic.
Chronic Health Effects: The product is non-irritating. Ingestion of large quantities may cause temporary discomfort in the mouth and upper gastrointestinal tract.

Chronic Health Effects: Inhalation of high concentrations of starch may induce transient irritation to the nose, throat, and upper respiratory tract. There are no known chronic toxic effects.

FIRST AID MEASURES

Eye Contact: Flush with water for at least 15 minutes. Get medical attention if required.
Inhalation: Thoroughly wash exposed area for at least 5 minutes. Get medical attention if irritation persists.
Ingestion: Treat symptomatically. Seek medical assistance if required.

Inhalation: Remove to fresh air. Give oxygen if breathing is difficult. Give artificial respiration if breathing has stopped. Keep person warm, quiet, and get medical attention.

5. FIREFIGHTING PROCEDURES

Flash Point (Method Used): N/A
NFPA Rating: N/A
Extinguisher Media: Water, carbon dioxide, dry chemical, or foam.
Flammable Limits in Air % by Volume: N/A
Autoignition Temperature: N/A
Special Firefighting Procedures: None applicable.
Unusual Fire and Explosion Hazards: At high concentrations, starch dust is explosive. The minimum explosive concentration is ca. 40 gm/m³ (0.04 oz/ft³). There is no defined maximum explosive concentration. The minimum electrical energy required to initiate an explosion is ca. 40 millijoules.

6. SPILL OR LEAK PROCEDURES

Sweep up product and/or flush with water. Use only explosion-proof vacuum cleaners and avoid creating high concentrations of airborne dust. If using dry methods, eliminate sources of ignition and static discharge.

7. SPECIAL PRECAUTIONS

Store containers in a dry place away from flames and incompatible materials (see Section 6).

8. SPECIAL PROTECTION INFORMATION

Respiratory Protection: Respiratory protection is not normally required. If product is used in a manner that generates airborne dust not controlled by ventilation, wear a NIOSH-approved respirator with filters for protection against dust and mist (type N95 minimum). For guidance on the selection and use of respiratory protection, consult American National Standard Z88.2-1992 (ANSI, New York, NY 10036 USA).

Ventilation: Use local exhaust ventilation if necessary to maintain airborne concentrations to within the appropriate exposure limit. Electrical connections for ventilation systems must be designed to prevent electrical or static discharges.

Skin Protection: Skin protection is not normally required.

Eye Protection: Eye protection is not required under normal conditions of use. If eye contact is likely, wear eye protection.

PurColour

12150 West 44th Ave, Unit 104 & 105
Wheat Ridge, CO 80033
303-704-2901
Fax 303.942.7278
nfo@PurColour.com

SAFETY DATA SHEET

1 Product Identification

- 1.1 **Product Name:** PurColour Celebration Powder™
- 1.2 **Product Number:** Blue, Pink, Yellow, Orange, Green, Purple, Red, Black and Mid-Night Blue
- 1.3 **Company Name:** PurColour
- 1.4 **Company Address:** 12150 West 44th Ave, Unit 104 & 105, Wheat Ridge, CO 80033
- 1.5 **Telephone Number:** 720-287-0057
- 1.6 **Date Issued:** 01/29/2016 **Supersedes:** n/a
- 1.7 **Recommended Use/Restrictions:** This product is not recommended for indoor usage. Recommended Outdoor usage in well ventilated open space. Those who have compromised respiratory, asthma or are allergic to any of the ingredients, should avoid usage. Product is not intended for food or human consumption.

2 Hazard(s) Identification

It is our opinion that the above named product does not meet the definition of a "Hazardous Chemical" as defined in the 21 CFR 1910.1200. This SDS is provided as general information for health and safety reasons.

2.1 Hazardous Components: Nuisance Dust

- 2.1.1 Component: Corn Starch CASRN 9005-25-8
- 2.1.2 Component: Calcium Carbonate CASRN 471-34-1
- 2.1.3 Component: Sodium Bicarbonate CASRN 144-55-8

3 Composition/Ingredient Information

Specific formulation is withheld as a trade secret pursuant of 21 CFR 20.61. The characteristics principle and/or components are approved in compliance with 21 CFR 73. None of the ingredients are carcinogenic by FDA, OSHA, or are on the California Proposition 65 chemical list.

- 3.1 **Ingredient Statement:** Corn Starch, Calcium Carbonate, Sodium Bicarbonate Food Grade TFF, and one or more of the following colorants; FD&C Blue #1 Lake, FD&C Blue #2, FD&C Red #40 Lake, D&C Red #7 Calcium Lake, FD&C Yellow #5 Lake, FD&C Yellow #6, Ultra Marine Blue and Iron Oxide.

Ingredient	E Number	Color Index No.	CAS NO	EINECS
Comstarch	N/A	n/a	9005-25-8	232-679-6
Calcium Carbonate Food Grade	E170	CI 77220	471-34-1	207-439-9
Sodium Bicarbonate – Food Grade TFF	E500(ii)	n/a	144-55-8	205-633-8

Color	USA	Color Index No	CAS NO	EINCES
Blue	FD&C Blue #1 Lake	CI 42090	68921-42 6	220-168 0
Pink	D&C Red # 7 Calcium Lake	C 15850 (3)	5858-81 1	227-497 9
Yellow	FD&C Yellow #5 Lake	C 19140:1	12225-21 7	235-428 9
Orange	FD&C Yellow #6 Lake	CI 15985	15790 07 5/2783 94 0	220-491 7
Green	FD&C Yellow #5 Lake, FD&C Blue #1 Lake	C 19140:1/C I 42090	12225 21 7/68921-42 6	235-428 9/220 168 0
Purple	Ultra Marine Blue, D&C Red # 7 Calcium Lake	CI 77007/ C 15850 (3)	57455-37 5 67053 79 6	309-928 3 235 811 0 215 111 1
Red	FD&C Red # 40 Lake	C 16035	25956-17 6	247 368 0
Black	Iron Oxide	C 77489	1309 37 1	215 168 2
Mid Night Blue	FD&C Blue #2 Lake	CI 73015	16521 38 3	240 589 3

2.3 **Description of Product:** A free-flowing powder that is soluble in water and designed for entertainment and celebration functions. Product is not intended for food or human consumption.

4 First-Aid Measures

- 4.1 **Eye Contact:** Remove contact lenses and flush eyes with copious amount of water for at least fifteen minutes. Contact physician if irritation persists.
- 4.2 **Skin Contact:** No significant health hazard. Wash exposed skin with soap and water for at least fifteen minutes. If irritation persists, consult a physician.
- 4.3 **Ingestion:** Drink plenty of water and seek medical attention if it seems advisable. Product is NOT intended for human consumption.
- 4.4 **Inhalation:** Transport individual to fresh air. NEVER LEAVE A PERSON SUFFERING FROM DIFFICULT BREATHING ALONE. If respiration remains difficult after a few minutes, contact a physician or 911.

5 Fire Fighting Measures

5.1	Flash Point (Method Used):	Not applicable.		
5.2	Flammable Limits:	Not determined.		
5.3	Unusual Fire & Explosion Hazard: (
	The product is nonflammable as a dust layer. The product contains			
	natural organic fire retardant material and natural non-flammable inert material in a proprietary blend that dramatically reduces the risk of an explosion in a dust cloud at certain concentrations.			
	The product has been manufactured to meet VDI 2263 Dust Fires and Dust Explosions Hazards			
	— Assessment — Protective Measures Test Methods for the Determination of the Safety			
	Characteristic of Dusts meaning the powder has been manufactured and tested to be non-			
	explosive under certain test conditions and concentrations required by the standard, containing			
	ingredients for explosion prevention and protection. "No" (no dust explosibility) is a very far			
	reaching statement which can only be made if either no exothermic reaction is possible owing to			
	the chemistry of the substance or if exhaustive tests on fine dust in a closed apparatus have not			
	shown any characteristic pressure build up.			
Published: 01/29/2016		Page 2 of 4		

Prudent usage indicates avoidance of open lights, flames, smoking materials, hot coals of any type or welding in area of product. Not recommended for indoor usage. Outdoor usage in well ventilated open space.

- 5.4 Extinguishing Media:** Dry chemical, foam and water spray. Use of water jet may cause explosive dust conditions. CO₂ is not a good outdoor fire extinguisher because it is easily dispersed by the wind. CO₂ fire extinguishers may be ineffective at extinguishing outdoor dust fires because they may not be able to displace enough oxygen to successfully put the fire out. Class A fires (consist of ordinary combustibles materials) may also smolder and re-ignite.

6 Accidental Spill, Leak and Waste Disposal

Wash area with soap and water. Area may be slippery; take precautions. PurColour Celebration Powder is biodegradable and non-toxic.

7 Handling and Storage

Store in a cool dry area. The wearing of rubber gloves and safety glasses to prevent skin and eye contact is recommended. Store in tightly closed containers in a well-ventilated area.

8 Exposure Protection

- 8.1 **Respiratory:** No special equipment under normal conditions of use.
- 8.2 **Skin:** Long sleeves and gloves may be worn.
- 8.3 **Eye:** Safety glasses may be worn.
- 8.4 **Hand:** Suitable gloves may be worn.
- 8.5 **Other:** Slip proof shoes may be worn where spills may occur.
- 8.6 **Work/Hygiene Practice:** Normal work and hygiene practices for handling non-hazardous powdered material.

9 Physical / Chemical Characteristics

- 9.1 **Appearance:** Powder
- 9.2 **Odor:** Characteristic, Starch-like.
- 9.3 **Color:** Blue, Red, Pink, Yellow, Orange, Green, Purple, Red, Black and Midnight Blue.
- 9.4 **Boiling Point:** Not established.
- 9.5 **Vapor Point:** Not established.
- 9.6 **Specific Gravity:** To be established.
- 9.7 **Solubility in Water:** Negligible.

10 Stability and Reactivity

- 10.1 **Stability:** Stable.
- 10.2 **Conditions to Avoid:** Practices which produce dust.
- 10.3 **Incompatibility:** Avoid strong oxidizing agents.

- 10.4 **Hazardous Decomposition:** N/A.
- 10.5 **Hazardous Polymerization:** Will Not Occur.

11 Toxicological Health Hazards

- 11.1 **Signs and Symptoms of Exposure:** Dust may be irritating to eyes and nose.
- 11.2 **Toxicity Data:** Non Toxic.
- 11.3 **Medical Conditions:** Generally aggravated by exposure. Persons with respiratory conditions maybe at increased risk.
- 11.4 **Carcinogenicity:** No.
- 11.5 **Reproductive Toxicity:** No.

12 Ecological Effects

No ecological hazards are associated with this product.

13 Disposal Considerations

Incineration: Observe local, State and Federal regulations concerning health and the environment. Do not incinerate in sealed containers.

14 Transport Information

N/A

15 Regulatory Information

The information contained herein is based upon data considered accurate and reliable. Nevertheless, and independent investigation and verification of this information should be made by the user. No warranty is made, expressed or implied, regarding the accuracy or correctness of these data. The use of this information and this product are beyond the control of PurColour. Therefore, it is the sole responsibility of the user to determine the conditions necessary for the use this product.

No component of this color blend has been determined to be carcinogenic by FDA, OSHA, or California Proposition 65.



Santa Rosa County Board of County Commissioners • Tourism Development Office

8543 Navarre Parkway • Navarre, FL 32566
Phone: (850) 981-8900 Fax: (850) 981-8903

tdo@santarosa.fl.gov

Special Event Permit Application

Instructions: To process an application, all pages must be filled out completely and submitted with payment. You may obtain department approvals by phone, email, or in person. For questions about requirements, fees, or the application process contact the Tourism Development Office.

EVENT INFORMATION (PLEASE CHECK ALL THAT APPLY)

- CONCERT
- PARK FESTIVAL
- SALE/MARKET
- RUN/WALK
- FUNDRAISER
- PARADE/PROCESSION
- SPORTS EVENT
- FISHING EVENT
- PRIVATE EVENT
- PUBLIC EVENT
- OTHER _____

Event Name: 3rd Annual Dead Pirate 5K Run / Walk

Event Location: _____ Date(s) of Event: Oct. 22 to _____

Time of Event: Day 1 8am to 11am Day 2 _____ to _____ Day 3 _____ to _____

Set Up Date: Oct. 22 Set Up Time: 6am Breakdown Date: Oct 22 Breakdown Time: 11:30 am

Will an admission fee be charged? YES NO Admission Fee: _____

Estimated Attendance: 250 /per day

Brief description of event: 3rd annual Dead Pirate 5K Run / Walk

APPLICANT & EVENT ORGANIZER INFORMATION

- INDIVIDUAL
- NOT-FOR PROFIT
- FOR PROFIT
- CHARITY
- CHURCH
- OTHER

Name of Organization: Krewe of Karibbean

Address: 8185 Country Bay Blvd. Navarre State: FL Zip: 32566

Phone: 218-8487 Email: tinahernandez45@gmail.com

Point of Contact: Tina Hernandez or Patrick Fitzgerald
748-9696

Special Event Questions

Below are questions about the event. Please answer all questions and attach additional documents, if necessary, to the application.

Note: If your event will attract less than 1,000 people per day, will not require reservation of county property other than a pavilion, community center, or auditorium, and will not involve the sale or consumption of alcohol, this Special Events Permit is not required. Applications to reserve the facilities described above can be found online at www.santarosa.fl.gov.

Do any of the following apply to your event? Check all that apply.

- Attendance of 1000+ people per day on public or private property? *Agritourism events on private property do not require this application.*
- Event located on public property or a county park?
- Alcohol use on county property?
- Alcohol use on public or private property at times or locations not otherwise allowed by county ordinance?

If the answer to any of the above is yes, your application must be approved by the Board of County Commissioners at a public meeting.

Does your event require the use of:

- County park pavilion?
- County-owned community center?
- County Auditorium?

Will restroom facilities be available on site?

YES NO

If yes, describe: _____

Will there be amplified sound?

YES NO

If yes, times requested 9am to 11am

Will food or non/alcoholic beverages be sold or given away?

YES NO

Will food be cooked at the event?

YES NO

Will an admission fee be charged?

YES NO

Will alcohol be sold or given away?

YES NO

If yes, attach liquor liability insurance.

Will there be fireworks?

YES NO

If yes, a pyrotechnics plan must be attached.

Will unimproved or off-site lots be used for parking?

YES NO

If yes, a parking plan must be attached.

Will a county park be utilized?

YES NO

If yes, attach park rental agreement.

Will vendors be selling merchandise, food, or wares?

YES NO

If yes, attach vendor information form.

Will tents larger than 400 sq. ft. or multiple tents be erected?

YES NO

If yes, attach tent permit.

Will an EMT be on site?

YES NO

Will stages be erected?

YES NO

Will your event be using state roads?

YES NO

If yes, an MOT is required 60 days prior to your event.

Will you be submitting a local event/marketing grant application for your event?

YES NO

If so, contact Nicole Dees at NicoleD@santarosa.fl.gov.

Additional Required Documents

Below are documents that are required to be submitted with the application. Applications will be considered incomplete without these documents. For additional information about these documents please contact the special event office.

Event Site Map or Race Route Map: Event organizers must provide a site map with vendor locations, porta potties, run/walk route, etc.

- Insurance Certificate
- FL Division of Corp Annual Report
- Tent Permit
- Tax Exempt Certificate and/or 501(c)3 Documentation if the entity is claiming tax exempt and/or non-profit status.

County Approval Form

Event organizers must receive approval from applicable departments below. Read the field of expertise to determine which applies to the event. When emailing staff please copy the special events coordinator assigned to the event.

<u>Department & Representative</u>	<u>Contact Information</u>	<u>Field of Expertise</u>	<u>Contact Method</u>	<u>Approval Received</u>
Sheriff's Office Sergeant Rich Aloy RAloy@SRSO.net Cell <u>(850)-485-7084</u>	5755 East Milton Rd Milton, FL 32583 Office 850-983-1225	Street Closures; Traffic & Safety Plans; Event Site Maps; Parade Routes; Run/Walk/Bicycle Routes; Security	<input type="checkbox"/> EMAIL <input type="checkbox"/> PHONE <input type="checkbox"/> IN PERSON	_____/_____ Month Day
Emergency Management Tom Lloyd, Operations Chief TomL@santarosa.fl.gov Cell 850-698-7401	4499 Pine Forest Rd Milton, FL 32583 Office 850-983-4608	Fire Lane; Fire Truck; Outdoor Cooking / Grilling; Flame Activities; EMT Requirements	<input type="checkbox"/> EMAIL <input type="checkbox"/> PHONE <input type="checkbox"/> IN PERSON	_____/_____ Month Day
Tourist Development Office Nicole Dees NicoleD@santarosa.fl.gov	8543 Navarre Pkwy. Navarre, FL 32566 Office 850-981-8900 Fax 850-981-8903	Tourism promotion	<input type="checkbox"/> EMAIL <input type="checkbox"/> PHONE <input type="checkbox"/> IN PERSON	_____/_____ Month Day
Risk Management Melissa Lloyd, Risk Manager melissal@santarosa.fl.gov	6495 Caroline Street, Suite I Milton, FL 32570 Office 850-983-1863	Insurance Requirements; Alcohol Insurance; Live Animal Insurance; Liability Risks	<input type="checkbox"/> EMAIL <input type="checkbox"/> PHONE <input type="checkbox"/> IN PERSON	_____/_____ Month Day
Development Services Tambre Lee or Amber Aaron tambrel@santarosa.fl.gov ambera@santarosa.fl.gov	6051 Old Bagdad Hwy. Milton, FL 32583 Office 850-981-7000	Permits for Large Tents, Stages & Platforms	<input type="checkbox"/> EMAIL <input type="checkbox"/> PHONE <input type="checkbox"/> IN PERSON	_____/_____ Month Day
Parks Tammy Simmons tammys@santarosa.fl.gov	6075 Old Bagdad Hwy. Milton, FL 32583 850-983-1858 Phone 850-623-1331 Fax	Park Rentals	<input type="checkbox"/> EMAIL <input type="checkbox"/> PHONE <input type="checkbox"/> IN PERSON	_____/_____ Month Day
Navarre Beach Sonja Lusk SonjaL@santarosa.fl.gov	1411 Utility Dr. Navarre, FL 32561 850-981-8888	Navarre Beach pavillion rentals	<input type="checkbox"/> EMAIL <input type="checkbox"/> PHONE <input type="checkbox"/> IN PERSON	_____/_____ Month Day
Health Department Herman Davies, Environmental Supervisor II herman.davies@flhealth.gov	P.O. Box 929 Milton, FL 32570 850-983-5200 x318 Fax: 850-983-5278	Portable toilet requirements	<input type="checkbox"/> EMAIL <input type="checkbox"/> PHONE <input type="checkbox"/> IN PERSON	_____/_____ Month Day

I am aware of the rules and regulations as they pertain to special events and agree to abide by these rules and regulations. I understand that the event must adhere to all Santa Rosa County ordinances. I am duly authorized by the organization to submit this application on its behalf and agree to be financially responsible for any fees and costs that may be incurred by or on behalf of the event in Santa Rosa County. I certify that the information that I have provided on this application is true and to best of my knowledge. If the event details change, I agree to submit a revised application or provide additional information in writing at least 10 days prior to the event.

Name (please print): _____

Signature: _____ Date: _____

HOLD HARMLESS AGREEMENT

For and in consideration of having been granted permission by Santa Rosa County to hold a Special Event within the Santa Rosa County limits, the undersigned hereby agrees on behalf of the organization, to indemnify and hold harmless the county of Santa Rosa, its subsidiaries or affiliates, elected and appointed officials, employees, volunteers, representatives and agents from any and all claims, suits, actions, damages, liability and expenses in conjunction with loss of life, bodily injury or personal injury, or property damage, including loss of use thereof, directly or indirectly caused by, resulting from, arising out of or occurring in connection with this permitted activity.

The undersigned also agrees to protect and hold harmless the county of Santa Rosa, its subsidiaries or affiliates, elected and appointed officials, employees, volunteers, representatives and agents from any and all claims, suits, actions, damages, liability and expenses, present, past or future which may be asserted by this organization, or any member of this organization, or any participant of third party arising out of or occurring in connection with this permitted event.

By the signature to this document the undersigned acknowledges that it understands the contents of this document and is voluntarily agreeing to its terms.

In witness whereof I have here unto set my hand and seal this 17 day of May in 2016.

Name of Special Event 3rd Annual Dead Pirate 5K Run / Walk

Date(s) of Special Event Oct. 22. 2016

Pamela D. Nobles
Notary Signature

Krewe of Karibbean
Name of Organization

Tina Hernandez
Printed Name



PAMELA D NOBLES
MY COMMISSION #FF147515
EXPIRES: AUGUST 27, 2018
Bonded Thru Old Republic

Tina Hernandez
Signature of Legally Authorized Representative
President / Captain
Title

(STAMP)

OUTDOOR CLEAN-UP FORM

It is understood that clean-up will be performed immediately following the event. Clean-up includes but is not limited to the removal of all garbage, signs, banners, tents, and traffic control devices (i.e. cones, barrels, signs, barricades, and changeable message signs) from the event area, public right-of-way, and/or county property.

Event Name: 3rd Annual Dead Pirate 5K Run / Walk

Date(s) of Event: Oct. 22, 2016

Event Location: _____

Method of Clean Up: Self Clean Up Volunteers (describe)

If performing self clean up or using volunteers contact information must be provided for the person in charge of overseeing the clean up.

Contact Name: Tina Hernandez

Contact Phone Number: 218-8487

Tina Hernandez

Printed Name

May 17, 2016

Date

Tina Hernandez

Signature—Responsible Party

Please Read and Initial Below - Park Rental Rules and Guidelines

Initial _____

_____ User agrees to provide full cleanup and accomplish reasonable cleanup of the rented park area utilized. This cleanup operation shall be completed by 12:00 noon on the day following the event unless another event is scheduled in the park (then cleanup must be completed directly following User's event). If trash receptacles provided by the county are full, User agrees to dispose of refuse/trash. If the User fails to remove all trash/refuse from the event site, the User will be billed for all fees incurred Santa Rosa County to remove said trash/refuse from the site.

_____ User shall be liable for any and all damage done to the property covered by this agreement located in and on the rented park area, regardless of who causes such damage or how such damage is caused, during the period of use contained in this agreement. Further, User shall agree to defend, indemnify and hold-harmless the county, its officials, employees, and representatives for any and all claims caused by or arising out of, in whole or in part, the activities permitted by this agreement.

_____ I hereby attest that the information contained in this contract is true and correct. I agree: (1) if any of the information contained in the contract is found to be false; or (2) should my conduct, or the conduct of any participants or guests not be described in the contract; or (3) should any applicable county, state or federal rules, regulations, codes or laws be violated, this contract shall automatically become null and void and any activity associated with this reservation will immediately cease. If the event has not taken place, the contract will be cancelled.

Print Name	
Sign Name	
Date	

Additional Documents from Applicant

If this park is being rented by a tax exempt or non-profit organizations the following documents must be submitted with this application.

501(c)3 Documentation YES NO - Tax Exempt Certificate YES NO

Questions

Will tents larger than 400 sq. ft. or multiple tents be erected at event? YES NO - Will stages be erected at event? YES NO - Will animals/pets be allowed at event? YES NO - Will alcoholic beverages be sold or given away at event? YES NO - Will food or beverages be sold or given away at event? YES NO - Will there be amplified sound? YES NO - Will food be cooked at the event? YES NO - Will you require use of utilities on-site (water, electricity)? YES NO - Which? WATER ELECTRICITY

Provide additional information for all YES answers marked on this agreement.

OFFICE USE ONLY

Agreement Received - Date: _____

Fee Paid - YES NO CASH CHECK CHARGE Amount: _____ Receipt #: _____

Additional Documents Received (if applicable) 501(C)3 TAX EXEMPT CERTIFICATE INSURANCE CERTIFICATE TENT PERMIT SPECIAL EVENT PERMIT APPLICATION OFFSITE PARKING PLAN

County Representative Signature: _____ Date: _____



VARIANCE REQUESTED INFORMATION

It is understood that by requesting this variance of the special regulation(s) in regards to the county parks and/or County Code, the above named person(s)/organization has assured Santa Rosa County that if by receiving approval of the variance any and all damage that may occur as a result of this request will be repaired and invoiced to the Organizer of the activity held in the county park. This repair must be paid prior to any future approved park rentals. An inspection will be performed immediately following the event to determine if the variance approval that has been granted created the opportunity for damage and if any damage to any county property has occurred.

Variance Requested: _____

OFFICE USE ONLY

Variance Approved YES NO

To Be Used with Special Event Permit: _____

Signature: _____

Date: _____

RULES AND REGULATIONS

Application Due Dates

- A completed Special Events permit application is due to the Special Events office at a minimum of 60 days prior to the event date. Applications submitted after the deadline may be subject to denial of permit.
-

Cancellation Policy

- No permit fees will be refunded if the event is cancelled before or after the scheduled event date.
 - Although permit fees are non-refundable, if an event is cancelled due to inclement weather, the permit fee can be credited towards an alternate date. Event organizers must be in touch with the Special Event Office before the scheduled event date or no more than three business days following the scheduled event date to reschedule. The alternate date must be within eight months of the original scheduled event date.
-

ADA Accessibility Guidelines

- Event Organizers must make the event accessible to people with disabilities to the greatest extent possible in compliance with the requirements of the Americans with Disabilities Act (ADA). If the event calls for portable restroom facilities, 5% of the total number of portable restroom units and at least one in each grouping of units must be accessible to persons with disabilities.
 - Accessible parking must be provided for persons with disabilities. Depending on the location, county-designated accessible parking lots must be utilized for accessible parking for the event. Information regarding accessible parking locations should be included as part of the event advertising and clearly marked at the event site. At a minimum, all event personnel and volunteers should be aware of the locations of accessible parking to direct persons with disabilities and handicap tags to the appropriate parking areas.
-

Use of State Roads

- Any event that requires the use of a state road must complete the appropriate paperwork and submit it to the Special Events office at a minimum of thirty (30) days prior to the event date.

INSURANCE REQUIREMENTS

In General:

The Event Organizer/Applicant is required to provide liability insurance with coverage limits that depend upon the size, scope and location of the event. The insurance policy must include coverage for all Event Organizer/Applicant approved event activities, including those activities being provided by third party vendors. The policy must be for the dates of the event, including set-up and take-down days. Liquor Liability Insurance (if alcohol is sold) or Host Liquor Liability Insurance (if alcohol is given away) must be provided if alcohol is to be present at the event.

Insurance Requirements:

No proof of insurance will be required for a group or organization using a Santa Rosa County facility for a meeting if all of the following criteria is met:

- There is no charge to attend or participate
- There are no sales or solicitation for sales
- There are no display booths
- No alcohol is served
- No animals (livestock, reptiles, etc.) are present
- No large or dangerous equipment is present or used

Insurance Limits:

Minimum limits for event liability insurance are \$300,000 per occurrence and in the aggregate. However, most events will require minimum limits of \$1,000,000 per occurrence and in the aggregate depending upon the scope of the event. The minimum limit for Liquor or Host Liquor Liability Insurance is \$1,000,000 each common cause and in the aggregate.

Additional Insured Status:

Santa Rosa County must be listed as an additional insured on all insurance coverage. Other additional insured entities may be required, depending on the scope or location of the event.

Certificate of Insurance:

A certificate of insurance evidencing the required insurance should be sent a minimum of 10 days prior to the event.

The certificate may emailed to melissal@santarosa.fl.gov.

The certificate holder should read:

Santa Rosa County
Risk Management
6495 Caroline Street, Suite 1
Milton, FL 32570

County Code

In the event of any conflict between any provision of this summary document and County Code, the County Code takes precedence.

Pet Friendly Events, Large Banners, Stages, etc.

Coverage must be provided for all activities associated with the event.

Questions?

Please contact Santa Rosa County Risk Management at 850-983-1863 with any questions. Feel free to have your insurance company contact Risk Management directly regarding your event if you prefer.



Event General Liability Insurance Proposal & Application

Payment Outstanding: [Click here to make payment](#)

PROPOSAL NUMBER 966157
PREPARED ON 04/26/2016
PROPOSAL VALID UNTIL 05/03/2016 (7 days)

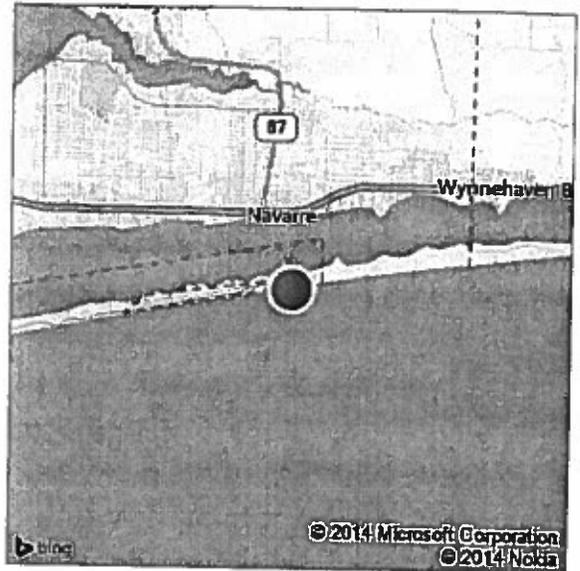
PREPARED FOR Krewe of Karibbean Tina Hernandez 8185 Country Bay Blvd, Navarre, FL 32566 Phone: 8502188487 Email: tinahernandez45@gmail.com	LICENSED AGENT (ALL 50 STATES) East Main Street Insurance Services, Inc. Will Maddux PO Box 1298 Grass Valley, CA 95945																				
PROPOSAL CREATED BY www.TheEventHelper.com Inc. Direct Sale 1020 McCourtney Rd. Suite B, Grass Valley, CA 95949 Phone: (530) 477-6521 Email: info@eventhelper.com	INSURED BY Essex Insurance Company NAIC: 39020 Rating: A.M. BEST A(Excellent) XIV																				
COVERAGE LIMITS <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Each Occurrence (Includes Bodily Injury and Property Damage)</td> <td style="width: 10%; text-align: right;">\$1,000,000</td> </tr> <tr> <td>Personal & Advertising Injury</td> <td style="text-align: right;">\$1,000,000</td> </tr> <tr> <td>Products / Completed Operations Aggregate</td> <td style="text-align: right;">\$1,000,000</td> </tr> <tr> <td>General Aggregate</td> <td style="text-align: right;">\$2,000,000</td> </tr> <tr> <td>Medical Payments</td> <td style="text-align: right;">\$5,000</td> </tr> <tr> <td>Deductible</td> <td style="text-align: right;">\$1,000</td> </tr> <tr> <td>Liquor Liability</td> <td style="text-align: right;">Host Included</td> </tr> <tr> <td>Waiver of Subrogation</td> <td style="text-align: right;">Not Included</td> </tr> <tr> <td>Additional Insured(s)</td> <td style="text-align: right;">Included</td> </tr> <tr> <td>Hired & Non-Owned Auto</td> <td style="text-align: right;">Not Included</td> </tr> </table>	Each Occurrence (Includes Bodily Injury and Property Damage)	\$1,000,000	Personal & Advertising Injury	\$1,000,000	Products / Completed Operations Aggregate	\$1,000,000	General Aggregate	\$2,000,000	Medical Payments	\$5,000	Deductible	\$1,000	Liquor Liability	Host Included	Waiver of Subrogation	Not Included	Additional Insured(s)	Included	Hired & Non-Owned Auto	Not Included	POLICY COVERAGE INTENT This is just an brief overview, see policy for exact coverage. Property Damage Coverage for your rented Event Locations. Bodily Injury Coverage for your Event Attendees. Protection from Property Damage & Bodily Injury Lawsuits. Liquor Liability coverage included to over-served attendees.
Each Occurrence (Includes Bodily Injury and Property Damage)	\$1,000,000																				
Personal & Advertising Injury	\$1,000,000																				
Products / Completed Operations Aggregate	\$1,000,000																				
General Aggregate	\$2,000,000																				
Medical Payments	\$5,000																				
Deductible	\$1,000																				
Liquor Liability	Host Included																				
Waiver of Subrogation	Not Included																				
Additional Insured(s)	Included																				
Hired & Non-Owned Auto	Not Included																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">COST BREAKDOWN</td> </tr> <tr> <td style="width: 80%;">Premium</td> <td style="width: 20%; text-align: right;">\$175.00</td> </tr> <tr> <td>Stamping Fees</td> <td style="text-align: right;">\$0.26</td> </tr> <tr> <td>Tax</td> <td style="text-align: right;">\$11.94</td> </tr> <tr> <td>Policy Fee</td> <td style="text-align: right;">\$35.00</td> </tr> <tr> <td>Risk Purchasing Group Membership Cost</td> <td style="text-align: right;">\$28.89</td> </tr> <tr> <td>Outstanding Policy Cost</td> <td style="text-align: right;">\$251.09</td> </tr> </table>	COST BREAKDOWN		Premium	\$175.00	Stamping Fees	\$0.26	Tax	\$11.94	Policy Fee	\$35.00	Risk Purchasing Group Membership Cost	\$28.89	Outstanding Policy Cost	\$251.09	UNDERWRITING QUESTIONS <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Are there amusement devices, inflatables, rides or animals?</td> <td style="width: 20%; text-align: right;">No</td> </tr> <tr> <td>Are there water activities?</td> <td style="text-align: right;">No</td> </tr> <tr> <td>Is there camping, sleeping overnight or events past 2am?</td> <td style="text-align: right;">No</td> </tr> </table>	Are there amusement devices, inflatables, rides or animals?	No	Are there water activities?	No	Is there camping, sleeping overnight or events past 2am?	No
COST BREAKDOWN																					
Premium	\$175.00																				
Stamping Fees	\$0.26																				
Tax	\$11.94																				
Policy Fee	\$35.00																				
Risk Purchasing Group Membership Cost	\$28.89																				
Outstanding Policy Cost	\$251.09																				
Are there amusement devices, inflatables, rides or animals?	No																				
Are there water activities?	No																				
Is there camping, sleeping overnight or events past 2am?	No																				
EVENT DETAILS <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Where is your event?</td> <td style="width: 10%; text-align: right;">FL</td> <td style="width: 40%;">Are there amusement devices, inflatables, rides or animals?</td> <td style="width: 10%; text-align: right;">No</td> </tr> <tr> <td>Total days of coverage you need?</td> <td style="text-align: right;">1</td> <td>Are there water activities?</td> <td style="text-align: right;">No</td> </tr> <tr> <td>Estimated total attendance?</td> <td style="text-align: right;">250</td> <td>Is there camping, sleeping overnight or events past 2am?</td> <td style="text-align: right;">No</td> </tr> </table> 5 K Run	Where is your event?	FL	Are there amusement devices, inflatables, rides or animals?	No	Total days of coverage you need?	1	Are there water activities?	No	Estimated total attendance?	250	Is there camping, sleeping overnight or events past 2am?	No	EVENT DESCRIPTION 3rd annual dead pirate 5K run/walk								
Where is your event?	FL	Are there amusement devices, inflatables, rides or animals?	No																		
Total days of coverage you need?	1	Are there water activities?	No																		
Estimated total attendance?	250	Is there camping, sleeping overnight or events past 2am?	No																		
COVERAGE TERM Dates of Coverage: 10/22/2016	ADDITIONAL INSURED (SHOWING 1 OF 1) Santa Rosa County Risk Management 6495 Caroline Street Suite I Milton, FL 32570																				

bing Maps

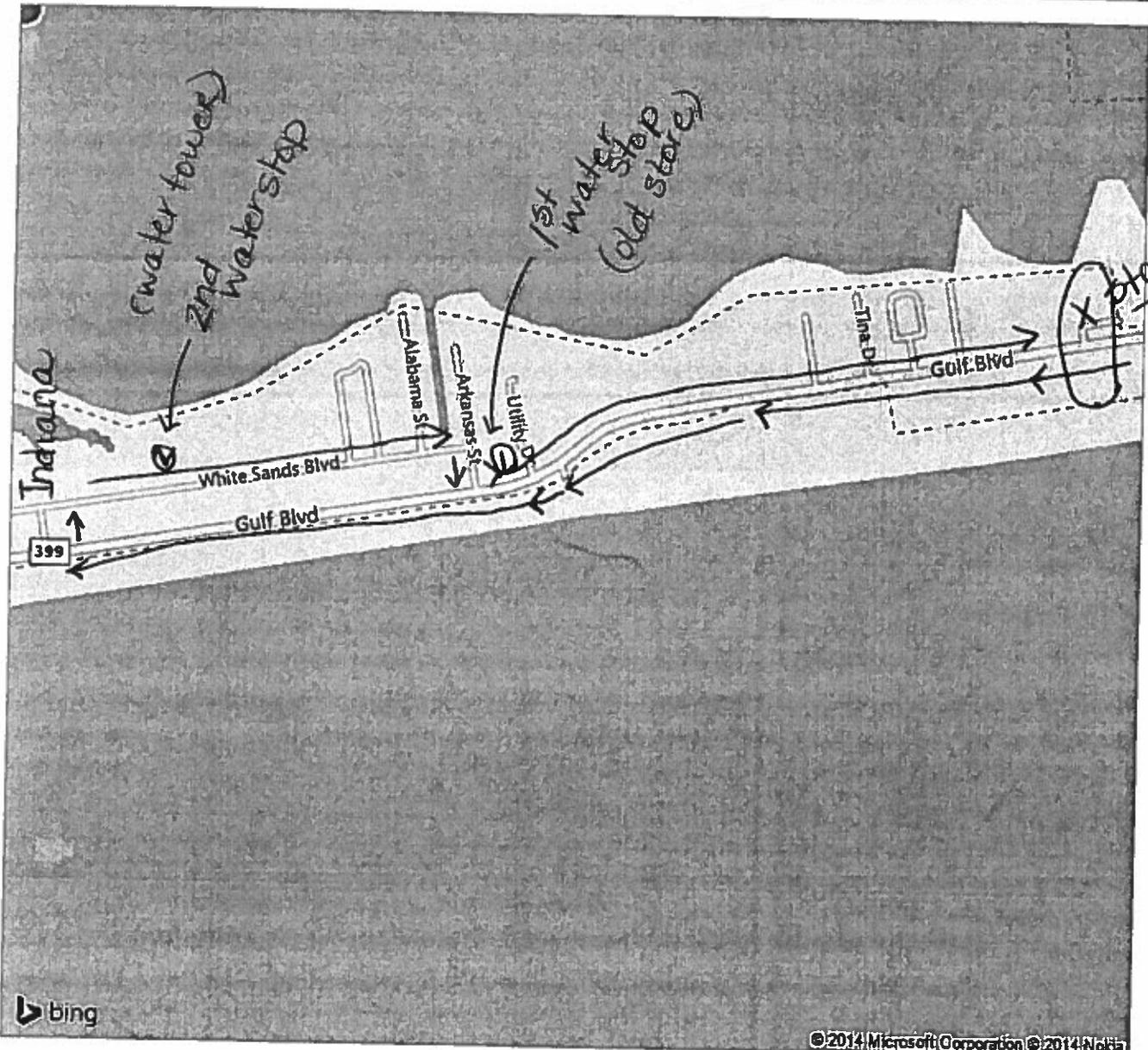
Navarre Beach, FL

My Notes

On the go? Use m.bing.com to find maps, directions, businesses, and more



©2014 Microsoft Corporation ©2014 Nokia



bing

©2014 Microsoft Corporation ©2014 Nokia