

CITY OF KEY WEST

APPLICATION FOR A SPECIAL EVENT PERMIT

Name of Applicant(s) QUEPASA JW Inc - Nancy D'AMATO
 Address of Applicant(s) 1107 Key Plaza #438 Email: QUEPASAKYWEST@hotmail
 Phone Number of Applicant(s) and emergency number 305 304-1026

Name of Non-Profit(s) LOWER KEYS FRIENDS OF ANIMALS
 Address of Non-Profit(s) PO Box 1043 / 2508 SENDENBERG AVE
 Phone Number of Non-Profit(s) Vickie Snow 305 360-1412

Amount or Percentage of Revenue Non-Profit(s) anticipates receiving \$4,000+

Date(s) of Event Weeks Oct. 24, 2018

Hours of Operation 4:00 p - 9:00 p

Estimated/anticipated number of persons per day 750

Location of Event Amplification

Street Closed none

Detailed Description of Event: ANNUAL PET MASSAGE -

Contest w/ 4 categories. Senior, Most Exotic, Pet/Junior /
Best Home.
BENEFITS the LKFOA

List of Businesses that will participate in Alcohol Exemption:

Noise exemption required: Yes No

Alcoholic beverages sold/served at event: Yes No

Recycle Deposit \$1000.00 Yes No

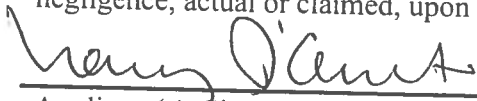
Cooking oil recycled Yes No

Recycled containers Yes No

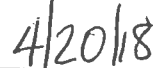
Accounting of items recycled

* Measures

The applicant does ac knowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge. The applicant(s)/permitee agrees to assume full responsibility and liability for and indemnify, and suits for or by reason of any injury to any person or damages to any property of the parties hereto or of the third persons for any and all cause or causes whatsoever or in any way connected with the holding of said event or any act or omission or thing in any manner related to said event and its operation irrespective of negligence, actual or claimed, upon the part of the City, their agents or employees.



Applicant(s) Signature



Date

ORDINANCE NO. 02-09

AN ORDINANCE OF THE CITY OF KEY WEST, FLORIDA, AMENDING CHAPTER 6 OF THE CODE OF ORDINANCES ENTITLED "AMUSEMENTS AND ENTERTAINMENT" BY AMENDING ARTICLE II PERTAINING TO SPECIAL EVENTS; AMENDING SECTION 6-26 TO REQUIRE A DOWN PAYMENT ON THE COST OF CITY SERVICES, TO ALLOW FOR INTEREST ON LATE PAYMENTS, AND TO INCREASE THE COST WAIVER TO \$1,000.00; ADDING SECTION 6-27 TO RESTRICT PLACEMENT OF FOOD, BEVERAGE AND MERCHANDISE BOOTHS; AMENDING SECTION 6-56 TO REQUIRE THE APPLICATION TO LIST AN EMERGENCY CONTACT PERSON; AMENDING SECTION 6-57 TO ESTABLISH A MINIMUM NON-PROFIT SHARE FOR SPECIAL EVENTS IN WHICH A STREET IS CLOSED; AMENDING SECTION 6-58 TO PROVIDE THAT MAJOR FESTIVAL SPONSORS MAKE APPLICATION SIX MONTHS IN ADVANCE AND APPROVE CERTAIN SALES OF ALCOHOLIC BEVERAGES; ADDING SECTION 6-61 PERTAINING TO HANDICAP-ACCESSIBLE BATHROOM FACILITIES; PROVIDING FOR SEVERABILITY; PROVIDING FOR REPEAL OF INCONSISTENT PROVISIONS; PROVIDING FOR AN EFFECTIVE DATE

WHEREAS, The City Commission finds that a revision to the regulations governing special events and street closures would promote the health, safety and welfare of the citizens of Key West.

NOW, THEREFORE, BE IT ORDAINED BY THE CITY OF KEY WEST, FLORIDA:

Section 1: That section 6-26 of the Code of Ordinances is hereby amended as follows*:

Sec. 6-26. Payment for city services.

- (a) The organizer or sponsor of any festival, street fair, fair, carnival, athletic event, contest, competition, parade, fundraiser, rally, boat or car race or other special event which requires city authorization, whether by administrative permit or city commission approval, and which requires the provisions of additional or extraordinary support services by police, fire, administrative, or other city departments in order to maintain order or safety or to escort participants shall pay to the city the cost of such services. A down payment of ten percent (10%) of the costs, as estimated by the city manager, shall be made to the city either by certified check or credit card at least ten (10) days prior to the event.
- (b) The city manager shall establish a cost schedule for additional or extraordinary support services for the events referred to in subsection (a) of this section, which schedule shall be subject to approval of the city commission. The city manager is authorized to provide reasonable terms for time and manner of payment. If the event sponsor fails to pay the full costs at the time determined by the city manager or, if no such deadline is established, then within thirty (30) days after the event the city may impose an interest charge on the amount due at the rate of one and one half percent (1½%) per month.
- (c) The city commission may grant special exceptions to this section for cause shown upon the public record.
- (d) The first ~~\$500.00~~ \$1,000.00 of costs as specified in subsection (a) of this section may be waived for any organizer or sponsor which has qualified as a tax-exempt nonprofit organization according to state or federal law. Acceptance of this waiver by such sponsor shall render the event a public accommodation subject to the human rights provision of the section 38-225.
- (e) Any nonprofit organization accepting the waiver provided for by subsection (d) of this section shall, within 90 days following the special event, submit to the city commission an accounting of expenses and revenues incurred and generated during the event.

* (Coding: Added language is underlined; deleted language is ~~struck through~~.)

Section 2.

That section 6-27 is hereby added to the Code of Ordinances as follows:

Sec. 6-27. Food, beverage and merchandise booths.

No booth or stall set up for a special event and serving any amount or type of food and/or beverage, or selling merchandise, shall be placed directly in front of, or within five (5) feet of the property line of, a restaurant or a bar or a retail store (selling primarily the same or similar merchandise), unless the owner of the restaurant, the bar or the store consents. This section shall not apply to major festivals as defined in section 6-58.

Section 3.

That section 6-56 of the Code of Ordinances is hereby amended as follows:

Sec. 6-56. Application.

(a) Except as provided in section 6-58, At least 60 days prior to a proposed special event that will result in the closing of a public street, the sponsor shall submit an application to the city manager. An application may be made either by a tax-exempt nonprofit organization (nonprofit) or jointly by a nonprofit and a private or business entity.

(b) If the city manager approves the application, he shall then schedule it for consideration by the city commission. However, if the special event proposes to close only one block, is intended to end prior to 9:00 p.m. on any day of the year, and does not seek either a fee cost waiver or a noise exemption, the city manager may give final approval to the application.

(c) Each application shall include the name of a sponsor's contact person and that person's 24-hour telephone number(s), in case of emergency.

Section 4.

That section 6-57 of the Code of Ordinances is hereby amended as follows:

Sec. 6-57. Donation of percentage of revenue to nonprofit organization.

(a) A major festival is a special event of regional impact. Major festivals are: ~~Faney~~Fantasy Fest, Hemingway Days, Goombay Festival, Conch Republic Celebration, the Poker Run, the Valentine's Day event for Wesley House, the Red Ribbon event at ~~Mango's~~ Mangoes, and such other special events as may be added or subtracted by resolution of the city commission. Private persons or business entities who sponsor major festivals are not required to provide funds to a non-profit organization per section 6-57. An application for a major festival must be received in the city manager's office at least six (6) months in advance of the scheduled event. ~~Have a non-profit coapplicant or to provide a percentage of revenues to a charitable cause.~~

(b) A business that seeks to sell alcoholic beverages at a major festival pursuant to an APS state license, and which is not a bar or restaurant or other concern that sells alcoholic beverages in the ordinary course of its business, must obtain the written approval of the major festival sponsor and provide such approval to the city of key west.

Section 6

That section 6-61 is hereby added to the Code of Ordinances as follows:

Sec. 6-61. Temporary bathroom facilities.

Whenever the sponsor of a special event provides temporary bathroom facilities on the public right-of-way, at least five percent (5%) of those facilities or one of those facilities, whichever is the greater number, shall be accessible to persons which physical disability.

Section 7.

If any section, provision, clause, phrase, or application of this Ordinance is held invalid or unconstitutional for any reason by any court of competent jurisdiction, the remaining provisions of this Ordinance shall be deemed severable therefore and shall be construed as reasonable and necessary to achieve the lawful purposes of this ordinance.

Section 8. All Ordinances or parts of Ordinances of said City in conflict with the provisions of this Ordinance are hereby superseded to the extent of such conflict.

Section 9. This Ordinance shall go into effect on January 1, 2003.


Read and passed on first reading at a regular meeting held this 16th day of October, 2002.

Read and passed on second reading at a regular meeting held this 6th day of November, 2002.

Read and passed on final reading at a regular meeting held this 19th day of November, 2002.

Authenticated by the presiding officer and Clerk of the Commission on 21st day of November, 2002.

Filed with the Clerk November 21, 2002.

Sponsor's Signature 

RULES AND REGULATIONS FOR USE OF CITY OF KEY WEST PROPERTY FOR SPECIAL EVENTS

1. All Applicant(s) must fill out a City of Key West (City) application form provided to you by the Office of the City Manager.
2. Application(s) for special event(s) must be in the Office of the City Manager 60 days prior to the event.
3. The Permittee will be required to maintain the following types and amounts of insurance during the Special Event. All insurance coverages must be provided by insurance companies authorized to transact business within the State of Florida and must maintain an A.M. Best rating of A- or better.

Commercial General Liability with minimum limits of \$1,000,000

Business Automobile Liability with minimum limits of 1,000,000

Statutory Worker's Compensation Coverage

Employers Liability with minimum limits of \$1,000,000 injury by Accident

\$1,000,000 injury by Disease

Policy Limits and \$1,000,000 injury by Disease – Each Employee

If Alcohol beverages will be sold at the event or if the event's attendees will be required to pay an admittance fee and alcoholic beverages will be served, the Permittee will be required to maintain Full Liquor Liability coverage with minimum limits to \$1,000,000. Host Liquor Liability coverage will not be acceptable. If the Permittee will use the services of a caterer and the caterer will be providing and servicing the alcoholic beverages, the City will honor evidence from the caterer that this requirement is being met.

The City of Key West shall be named as an "Additional Insured" on the Permittees' Commercial General Liability policy.

Sponsor's Signature

4. The applicant shall indemnify and hold the City harmless from all losses, claims, damages, liabilities, and expenses which may be incurred by the City or which may be claimed against the City by any person, firm to the person or property of any person, firm, corporation, or entity which are consequent or arise from the activities of the permit holder or its equipment, employees, agents, guests, licensees, or invitees for the permit holder activities or which damages/injuries are consequent or arise from permit holders failure to comply with all applicable laws, statutes, ordinances and regulations.

Sponsor's Signature

5. Applicant(s) who are businesses or private persons who wish to close a City street must make an application jointly with a non-profit entity. When a sponsor proposes a special event that will cause the closing of a city street or other public right-of-way, the sponsor must donate at least 25% of the sponsor's gross revenues or \$1000.00, whichever is greater, to at least one nonprofit organization. The sponsor must designate the nonprofit organization(s) on the application for the event. Each named nonprofit organization must provide the city manger with a letter of assent. Applicant(s) must also hire an off-duty

police officer(s) for crowd control and safety as determined by the Key West Police Department or the City Manager's Office. Applicant(s) must have neighboring businesses sign a petition of no objection to the street closure.

Sponsor's Signature WD

6. *Within 30 days of the events completion the City Commission will receive a letter from the not for profit organization stating the amount of the monetary donation received from the event.*

Sponsor's Signature WD

7. Applicant(s) wishing to sell/consume alcoholic beverages on City property must have approval by the City Commission via Resolution and must hire an off-duty police officer(s) for crowd control and safety as determined by the Key West Police Department or City Manager's Office. Applicant must provide liquor liability insurance.

Sponsor's Signature WD

8. Applicant(s) wishing to have an exemption from the noise control ordinance must fill out an application thirty days before the event. Processing fee for the application is \$50.00.

Sponsor's Signature WD

9. All applications are subject to approval at the discretion of the City Manager and/or City Commission.

Sponsor's Signature WD

10. Notice of the city commission's proposed action on an application for a special event permit shall be mailed prior to the meeting at which the matter is to be considered to all property owners and occupants of property located within a 100-foot radius of the proposed special event. Notice of such proposed action also shall be published in a newspaper of general circulation in the city at least five days prior to the date of the city commission decision. The notice shall identify a contact person and phone number for complaints. The applicant shall pay for the newspaper advertisement.

Sponsor's Signature WD

11. The organizer or sponsor of any special event, which requires the provision of additional or extraordinary support services by police, fire, administration, or other city departments shall pay to the city the cost of such services. A down payment of 10 percent of the costs, as estimated by the city manager, shall be made to the city either by certified check or credit card at least ten days prior to the special event.

Sponsor's Signature WD

12. The first \$1000.00 of costs as specified in subsection (a) of the ordinance may be waived for any organizer or sponsor, which qualified as a tax-exempt nonprofit organization according to state or federal law. Acceptance of this waiver by such sponsor shall render the special event a public accommodation subject to the human rights provision of the section 38-225.

Sponsor's Signature WD

13. Any nonprofit organization accepting the waiver provided for by subsection (d) of the ordinance shall, within 90 days following the special event, submitted to the city commission an accounting of expenses and revenues incurred and generated during

the special event.

Sponsor's Signature JD

14. Whenever the sponsor of a special event provides temporary bathroom facilities on the public right-of-way, at least five percent of those facilities or one of those facilities, whichever is the greater number, shall be accessible to persons with physical disability.

Sponsor's Signature JD

15. Where a person has not applied for a special event permit and an event at it's location spills into a street, causing the police department to close all or a portion of the street, the person sponsoring the event shall pay all such extraordinary service costs incurred by the city. On each anniversary of this occurrence, if the person can reasonably anticipate an overflow of people into the street, a special event permit must be applied for consistent with this division. A violation of this section may be grounds for revocation of an occupation license.

Sponsor's Signature JD

16. Special events may use fog, smoke and bubble machines or any device that emits a mist or spray contingent on Key West Fire Department approval. Approval must be obtained a minimum of 48 hours prior to the event. The use of confetti or confetti machines is strictly forbidden.

Sponsor's Signature ND

17. Special Events organizers must submit a adequate recycle plan for the size of the event being requested. Helpful hints and recycling requirements for special events can be found on the city's website. This will help you develop your plan.

Sponsor's Signature ND.

18. All special events are required to comply with the Federal Americans with Disability's Act which requires access to all areas and services provided by the special events. Organizers must insure that all aspects of their event meet the requirements.

Sponsor's Signature ND.

Complete Checklist for Event Recycling City of Key West

- Identify contact person at the festival responsible for working with recycling.
Name of person: Mary D'Amato Phone number: 305 304-1026
- Identify the recyclable commodities that will be used by the public and behind-the-scenes.
Aluminum Glass #1 Plastic #2 Plastic Steel
Corrugated Cardboard Other:
- Define the amount of recycling containers needed for the festival grounds (based on commodities used at the event and where they will be used and discarded. When recyclables are used throughout event, 1 recycling container for every 1 trash barrels will be used).
Amount of recycling and garbage containers needed:
- Arrange for recycling containers for the grounds and a large container (roll-off or festival box) and coordinate delivery and removal arrangements. Recycling containers may be ordered from Waste Management. 305 296-2825.
Arrangements made:
- Capacity of containers on grounds:
Contact person for containers: Phone #:
- Order signs to inform customers of recycling. Signs are needed for point-of-purchase locations and recycling containers.
- Acquire liner bags for the recycling containers to be placed on the grounds. Ensure that the capacity of the bags is equal to or greater than that of the recycling containers on the grounds.
- Arrange for emptying of recycling containers during the event - from the containers on the grounds to the large container.
Arrangements made:
- Arrange for pick-up of the recyclables. The agency providing containers will often take the materials for recycling. In other cases, arrange for the materials to be taken to a recycling facility.
Arrangements made:
- Meet with vendors and tell them to ask customers to recycle the appropriate materials. Make sure vendors know what will be recycled. Inform them that signs will be posted in their areas.
- Oversee the delivery of containers and placement of signs.
- Place recycling containers next to trash cans on the grounds and insert liner bags. All recycling

containers must be adjacent to trash barrels in order to reduce contamination problems

○ Monitor recycling containers for correct usage during the event and take actions to solve problems
Problems: _____
Actions taken: _____

○ View trash barrels and note any recyclables in the trash. Take actions to solve problems.
Problems: _____
Actions taken: _____

○ Take photos of event recycling, record data on volumes of recyclables and trash, and ask vendors and event organizers for comments about the program
Comments: _____

○ Ensure that recyclables are removed and taken to the large container when bins are full and that liner bags are replaced.

○ At the end of the event, remove signs and arrange for their return to owners.

○ Place recycling containers in the pick-up location, as arranged with the providers of the containers.

○ Ask the recycling facility to appraise the amount of material collected for recycling by weight, volume, or counts and report on contamination levels.
Amount of material: _____
Contamination: _____

○ Prepare a report on the program including strategies used, amount of material diverted, comments and suggestions from participants and future recommendations.

○ Share the results with event organizers.

○ Security deposit of \$1000.00 must be submitted prior to the event.

○ Security deposit returned: _____

For more information about event recycling and waste reduction, contact Waste Management at 305 296-2825



THE CITY OF KEY WEST

Pursuant to my request to conduct a special event requiring authorization by the City Commission, I agree that throughout the event I will keep the premises clear of accumulated recyclables, trash and debris. This includes emptying trash and recycle cans on a regular basis for the duration of the event.

Nancy D. [Signature]



Event General Liability Insurance Proposal & Application

PROPOSAL NUMBER 1043040
PREPARED ON 04/20/2018
PRICING VALID UNTIL 04/27/2018 (7 days)

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

PREPARED FOR QuePasa KW, Inc NANCY DAMATO 1107 Key Plaza #438, KEY WEST, FL 33040 Phone: 3053041026 Email:	LICENSED AGENT (ALL 50 STATES) East Main Street Insurance Services, Inc. Will Maddux PO Box 1298 Grass Valley, CA 95945																														
quepasakeywest@petmasquerade.com 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 Evanston Insurance Company NAIC: 35378 Rating: A.M. BEST A(Excellent) XV																														
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: 20%; text-align: right;">\$1,000,000</td> <td style="width: 40%;"></td> </tr> <tr> <td>Personal & Advertising Injury</td> <td style="text-align: right;">\$1,000,000</td> <td></td> </tr> <tr> <td>Products / Completed Operations Aggregate</td> <td style="text-align: right;">\$1,000,000</td> <td></td> </tr> <tr> <td>General Aggregate</td> <td style="text-align: right;">\$2,000,000</td> <td></td> </tr> <tr> <td>Medical Payments</td> <td style="text-align: right;">\$5,000</td> <td></td> </tr> <tr> <td>Liquor Liability</td> <td style="text-align: right;">Host Included</td> <td></td> </tr> <tr> <td>Waiver of Subrogation</td> <td style="text-align: right;">Not Included</td> <td></td> </tr> <tr> <td>Additional Insured(s)</td> <td style="text-align: right;">Included</td> <td></td> </tr> <tr> <td>Hired & Non-Owned Auto</td> <td style="text-align: right;">Not Included</td> <td></td> </tr> <tr> <td>Deductible</td> <td style="text-align: right;">\$1,000</td> <td></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		Liquor Liability	Host Included		Waiver of Subrogation	Not Included		Additional Insured(s)	Included		Hired & Non-Owned Auto	Not Included		Deductible	\$1,000		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.
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Deductible	\$1,000																														
	COST BREAKDOWN <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Premium</td> <td style="width: 20%; text-align: right;">\$145.00</td> </tr> <tr> <td>Stamping Fees</td> <td style="text-align: right;">\$0.15</td> </tr> <tr> <td>Tax</td> <td style="text-align: right;">\$10.07</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;">\$21.39</td> </tr> </table>	Premium	\$145.00	Stamping Fees	\$0.15	Tax	\$10.07	Policy Fee	\$35.00	Risk Purchasing Group Membership Cost	\$21.39																				
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	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Outstanding Policy Cost</td> <td style="width: 20%; text-align: right;">\$211.61</td> </tr> </table>	Outstanding Policy Cost	\$211.61																												
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EVENT DETAILS Where is your event? FL Total days of coverage you need? 1 Estimated total attendance? 750 Domesticated Animal Event	UNDERWRITING QUESTIONS Are there amusement devices, inflatables, rides or animals? Yes I understand there is no coverage for the above. Yes Are there water activities?																														
COVERAGE TERM Dates of Coverage: 10/24/2018																															
ADDITIONAL INSUREDS (SHOWING 1 OF 1) City Of Key West White st Key West, FL 33040																															



CASA MARINA

A WALDORF ASTORIA RESORT

proudly present the

PET MASQUERADE Official Entry Form

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

CELL #(PRESS PURPOSES ONLY) _____

PET'S
NAME(S) _____ TYPE _____

_____ TYPE _____

DESCRIPTION _____

COSTUME CATEGORIES

JUNIOR DIVISION _____ BEST THEME ADAPTATION _____

MOST EXOTIC _____ PET/OWNER LOOKALIKE _____

YOU MUST READ AND SIGN BACK OF ENTRY FORM – ENTRY FEE IS \$25.00

ENTRY LIMITED TO DOMESTICATED ANIMALS ONLY!

ATTENTION CONTESTANTS: No Backdrops will be allowed on stage. No additional lighting will be allowed. Each Contestant is limited to 2 minutes on stage. This event is to benefit Lower Keys Friends of Animals, Inc. Their representatives, and / or DVM, may refuse entry to any competitor whose pet is determined to be under any stress to costuming, the weather, surroundings other entries, or any circumstances whatsoever pertinent to this event.



CASA MARINA

A WALDORF ASTORIA RESORT



AMERICAN DOG

outfitters
& Kitties TOO!



proudly present the
PET MASQUERADE
Official Release Form

FOR AND IN CONSIDERATION OF BEING ALLOWED TO PARTICIPATE OR BE ON THE GROUNDS WITH AN ANIMAL IN /FOR THE PET MASQUERADE , THE BELOW SIGNED DOES HEREBY VOLUNTARILY ASSUME THE RISK OF ANY POSSIBLE MISHAP OR ACCIDENT WHICH MAY OCCUR IN CONNECTION WITH SAID EVENT AND DOES HEREBY RELEASE AND HOLD HARMLESS AND FOREVER DISCHARGE PET MASQUERADE & PARADE,ITS SERVANTS, AGENTS, AND EMPLOYEES; THE CASA MARINA RESORT & BEACH CLUB, ITS SERVANTS, AGENTS, AND EMPLOYEES; QUEPASA KW,INC, TALENT , AGENTS OR AGENCIES; AND ALL OTHER PET MASQUERADE SPONSORS AND ASSOCIATED PARTIES FROM ANY AND ALL INJURY AND PROPERTY DAMAGE ARISING OUT OF ANY EVENTS CONNECTED WITH SAID EVENT.

THE BELOW SIGNED GRANTS FULL PERMISSION AND AUTHORITY TO USE, BROADCAST, PUBLISH, AND DISPLAY THEIR NAME, OR LIKENESS, AND RELEASES ALL AGENTS, SPONSORS, AND ASSOCIATES OF PET MASQUERADE & PARADE FROM ANY AND ALL CLAIMS RESULTING FROM THE USE OF ANY PHOTOGRAPH, MOTION PICTURE, VIDEO, AND / OR AUDIO RECORDING OR ANY INTERVIEWS IN WHICH THE BELOW SIGNED ARE INVOLVED AND FOREGO ANY RENUMERATION FROM USE OF SAME.

DATE _____

signature _____

print name _____

signature of parent or guardian (if minor child



NexGard™
(afoxolaner) Chewables

LOWER KEYS FRIENDS OF ANIMALS

Founded in 1981



Mission:

Lower Keys Friends of Animals, is a local non-profit all volunteer organization that prevents suffering in animals through free or low-cost spaying and neutering. We are primarily a TNR(Trap/Neuter/Release) organization which provides medical care for stray cats. LKFOA also provides financial assistance in animal emergencies on a case by case basis FROM KEY WEST TO MARATHON.

We want to recognize Vickie Snow and all of the volunteers



Consumer's Certificate of Exemption

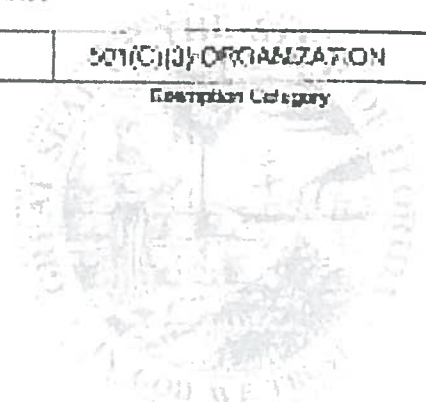
DR-14
R. 04/11

Issued Pursuant to Chapter 212, Florida Statutes

85-80125204740-7	01/10/2015	01/31/2020	501(C)(3)-ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that:

LOWER KEYS FRIENDS OF ANIMALS INC
2000 SE DENBERG AVE
KEY WEST FL 33040-3847



is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



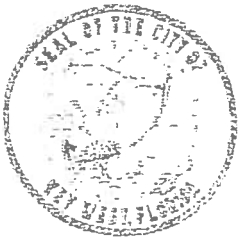
Important Information for Exempt Organizations

DR-14
R. 04/11

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.008, Florida Administrative Code (F.A.C.).
2. Your Consumer's Certificate of Exemption is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.009, F.A.C.).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration Information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6490, Tallahassee, FL 32314-6490.

Pet Masquerade

Oct 24, 2018



THE CITY OF KEY WEST

Parking Division

1370 White Street
Key West, FL 33741

Parking Requests or Special Events

Please indicate the Special Event Parking requests below:

WJA

Mallory Square Rates: \$4.00 per hour or \$32.00 per day per space

Key West Bight Rates: \$3.50 per hour or \$20.00 per day per space

On-Street Meter Rates: \$3.00 per hour or \$20.00 per day per space.

Modification of rates can only be approved by Commission.

If you have any questions, please contact John Wilkins, Parking Director at (305) 809-3855 or email jwilkins@cityofkeywest-fl.gov

INCOME**LKFOA**

0000004/27/2018

	REVENUE	OCT 2017	TOTAL
	donations	Pet Masquerade	\$1,375.00
	t-shirts		\$837.00
	registrations		\$814.00
	swag bags		\$489.00
	VIP Seating		\$445.00
0			
revenue down because of Irma			0
			\$3,960.00

INCOME**PET MASQUERADE 2017**

paid	ACCOUNT NAME	NTR		TOTAL
	lower keys animal		x	0
1500	american dog	1500	x	1500
				0
400	kw butterfly	400	x	400
	waste mgt		x	0
	LA Te Da		x	0
			x	0
1000	keyscu	1000	x	1000
	WEST MARINE	trade	x	0
	merial-frontline			0
				0
				0
			x	0
2900		2900		0
		owed		0
				2900
	EXPENSE			
	staff	250		250
	STAGE SOUND LIGHTS	1200		1200
	TROPHIES	524		524
	TALENT	350		350
	insurance	300		300
	PHOTOGRAPHER	75		75
	posters	50		50
				0
				0
				2749
				0
				0
			TOTAL	151
	lost 4 sponsors due to Irma	-\$4,500.00		



KEY WEST FIRE DEPARTMENT
FIRE MARSHAL'S OFFICE

Please Check All That Apply To This Event

Cooking

- Deep Frying/Open Flame
- Charcoal Grill
- Gas Grill
- Food Warming Only
- Catered Food
- Plan for Cooking Oil Disposal
- No Cooking on Site

Electrical Power

- Generator
- 110 AC with Extension Cords
- DC Power

Road Closure

- Map of Closed Road with Fire Lane & Vendor Booth(s) Locations

Tents (More Than 200 SqFt.)

- Flame Resistance Certificate
- Size, Type, Location of Tent(s)

Food Booths

- Food Booths - Total # _____
- Vendor Booths - Total # _____
- Total Number of Booths - _____

Parade

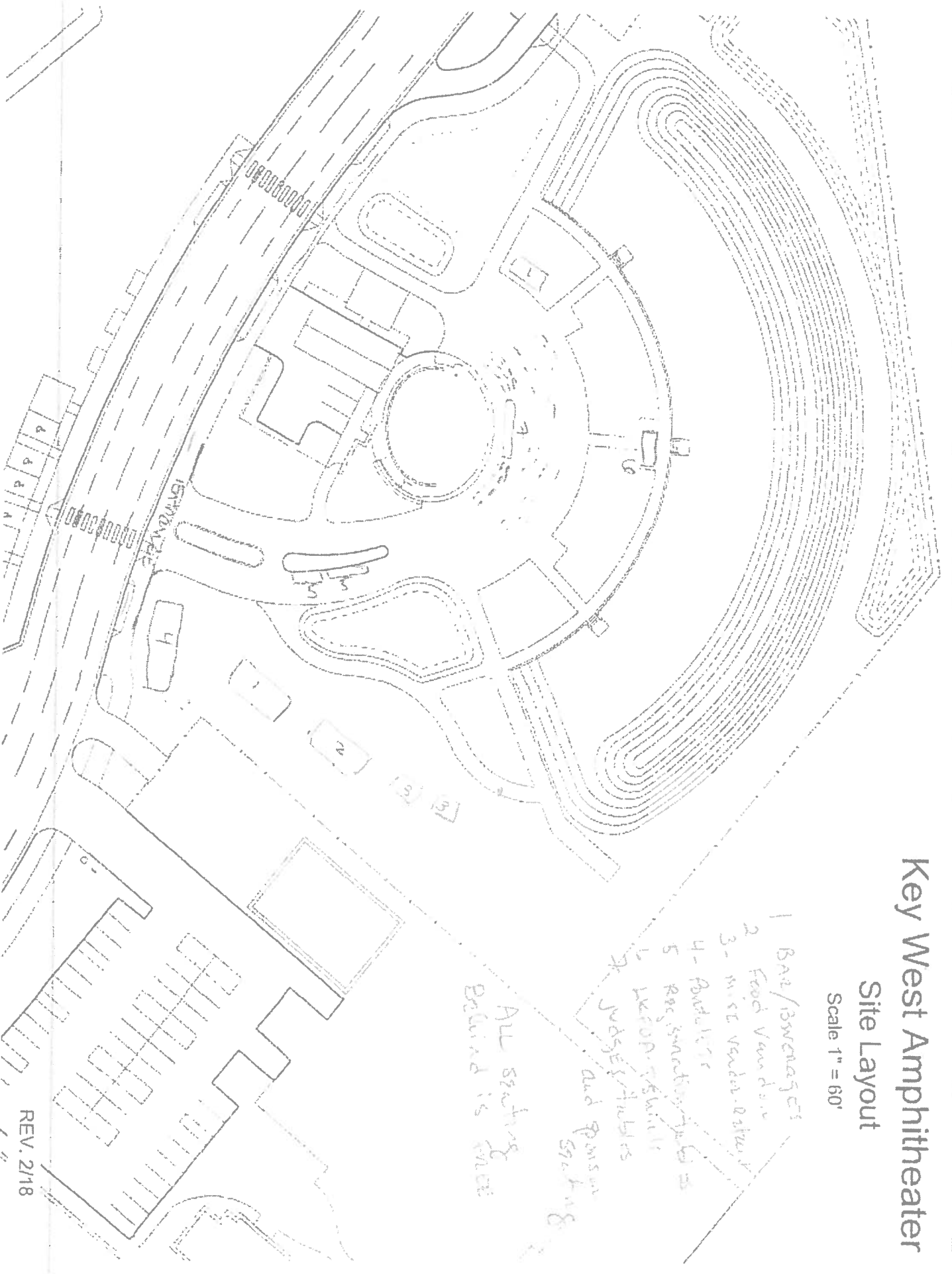
- Floats - Total # N/A

A CATERED AFFAIR
786 828-5220
FOOD & BEVERAGE

Key West Amphitheater

Site Layout

Scale 1" = 60'



- 1 Bar/Issemerage
 - 2 Food Vendor
 - 3 - Music Vendor/Setup
 - 4 - Band/Act
 - 5 Reg. Sanitation/Trash
 - 6 - LEAD. TRAIL
 - 7 - Judges/Tables
- and PAVILION
SEATING

ALL Seating
Behind is FREE



THE CITY OF KEY WEST

P.O. BOX 1409
KEY WEST, FL 33041-1409

RELEASE AND INDEMNIFICATION

QuePasa KW, Inc

Pet Masquerade

October 24, 2018

I **Nancy D'Amato** being authorized to act on behalf of and legally bind **QuePasa KW, Inc.** doing business as the legal entity or association on whose behalf this application is made, do hereby release the City of Key West, its officers, agents and employees from any and all liability for damages arising out of, or related to the activities for which application for leave to use City property has been submitted; and do hereby further agree, on behalf of said entity or association to indemnify, and hold harmless the City of Key West, its officers, agents, and employees from and against any and all damages to personnel or property of the City, and against all claims for damages or injuries to other persons or property of any nature whatsoever, and for defense costs, including attorneys' fees at both trial and appellate levels, arising from the actions or omissions of the person(s) or legal entity(ies) on whose behalf the application is submitted, including, but not limited to, the sale and dispensing of alcoholic beverages, or otherwise arising from the actions of their members, licensees, customers, guests, invitees, or participants in the related activities permitted. The foregoing Release and Indemnification agreement does not apply to those claims for damages or injuries which result from the negligent actions or omissions of the City of Key West, its officers, agents, and employees.

Maria Ratu

Signature of Witness

Maria Ratu

Print Name

4/20/18

Date

Nancy D'Amato

Signature of Applicant

Nancy D'Amato

Print Name

4/20/18

Date

Detail by Entity Name

Florida Profit Corporation
 QUEPASA KW, INC

Filing Information

Document Number P10000067103
FEI/EIN Number 27-3265850
Date Filed 08/16/2010
State FL
Status ACTIVE

Principal Address

2927 STAPLES AVE.
 KEY WEST, FL 33040

Mailing Address

2927 STAPLES AVE.
 KEY WEST, FL 33040

Registered Agent Name & Address

D'AMATO, NANCY J
 2927 STAPLES AVE.
 KEY WEST, FL 33040

Officer/Director Detail**Name & Address**

Title President

D'AMATO, NANCY J
 2927 STAPLES AVE.
 KEY WEST, FL 33040

Annual Reports

Report Year	Filed Date
2016	03/31/2016
2017	02/13/2017
2018	02/02/2018

Document Images

02/02/2018 -- ANNUAL REPORT	View image in PDF format
02/13/2017 -- ANNUAL REPORT	View image in PDF format
03/31/2016 -- ANNUAL REPORT	View image in PDF format
03/08/2015 -- ANNUAL REPORT	View image in PDF format
01/30/2014 -- ANNUAL REPORT	View image in PDF format
02/22/2013 -- ANNUAL REPORT	View image in PDF format
02/20/2012 -- ANNUAL REPORT	View image in PDF format
04/07/2011 -- ANNUAL REPORT	View image in PDF format
08/16/2010 -- Domestic Profil	View image in PDF format



CITY OF KEY WEST SPECIAL EVENTS DEPARTMENT APPROVALS

EVENT: Pet Masquerade
 DATES: Oct 24/2018

DEPARTMENTS

COMMENTS

EVENTS (INITIAL SIGNOFF)

Manu Ratush

SIGNATURE

DATE

✓ COMMUNITY SERVICES

SIGNATURE

DATE

✓ POLICE DEPARTMENT

SIGNATURE

DATE

✓ FIRE DEPARTMENT

SIGNATURE

DATE

✓ KWDOT

N/A

SIGNATURE

DATE

✓ PORT AND MARINE SERVICES

SIGNATURE

DATE

✓ CODE COMPLIANCE

SIGNATURE

DATE

ENGINEERING

SIGNATURE

DATE

UTILITIES

SIGNATURE

DATE

SPECIAL EVENT PERMIT HAS BEEN APPROVED DENIED

Pet Masquerade at the Amphitheatre

CITY OF KEY WEST SPECIAL EVENTS DEPARTMENT APPROVALS

EVENT (INITIAL SIGNOFF):

CONDITIONS/RESTRUCTIONS

SIGNATURE DATE

PUBLIC WORKS

SIGNATURE DATE

POLICE

SIGNATURE DATE

FIRE DEPARTMENT

SEE ATTACHED MEMO

Alan Averette 04/27/2018

SIGNATURE DATE

PORT/KEY WEST DOT

SIGNATURE DATE

CODE COMPLIANCE

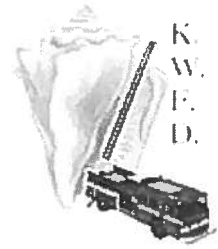
SIGNATURE DATE

KEY WEST PROPERTY
MANAGEMENT

SIGNATURE DATE

PARKING DEPARTMENT

SIGNATURE DATE



THE CITY OF KEY WEST

Post Office Box 1409 Key West, FL 33041-1409 (305) 809-3933

To: Nancy D'Amato

From: Division Chief/Fire Marshal Alan Averette

Date: April 2, 2018

Reference: Pet Masquerade at the Amphitheatre

This office reviewed the special event application for the Pet Masquerade at the Amphitheatre Oct.24, 2018. The following conditions apply:

No Fire Concerns at this time.

If I can be of any further assistance please contact me.

Alan Averette, Fire Marshal
Key West Fire Department
1600 N. Roosevelt Boulevard
Key West, Florida 33040
305-809-3933 Office
aaverett@cityofkeywest-fl.gov.

326E LSSM 132



CITY OF ELY WEST SPECIAL EVENTS DEPARTMENT
APPROVALS

EVENT: Pet Masquerade
DATES: Oct 24 2018

DEPARTMENTS	EVENTS (INITIAL SIGNOFF)	COMMENTS
	<u>Maria Ratuski</u> SIGNATURE DATE	
COMMUNITY SERVICES	SIGNATURE DATE	
POLICE DEPARTMENT	SIGNATURE DATE	
FIRE DEPARTMENT	SIGNATURE DATE	
KWDOI	SIGNATURE DATE	
PORT AND MARINE SERVICES	SIGNATURE DATE	
CODE COMPLIANCE	<u>J. Young</u> <u>27 Apr 18</u> SIGNATURE DATE	
ENGINEERING	SIGNATURE DATE	
UTILITIES	SIGNATURE DATE	
	SIGNATURE DATE	

SPECIAL EVENT PERMIT HAS BEEN APPROVED DENIED

CITY OF LITTLE ROCK SPECIAL EVENTS DEPARTMENT

APPROVAL

EVENT: Pet Masquerade

DATE: Oct 24, 2018

DEPARTMENTS

COMMENTS

EVE INITIAL SIGNOFF
Maria Rarue
SIGNATURE

COMMUNITY SERVICES

[Signature]
DATE

POLICE DEPARTMENT

[Signature]
DATE

TRUCK DEPARTMENT

[Signature]
DATE

EMERGENCY

[Signature]
DATE

PORT AUTHORITY SERVICES

[Signature]
DATE

PLANNING

[Signature]
DATE

ENGINEERING

[Signature]
DATE

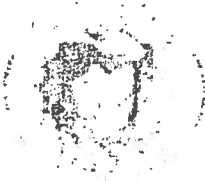
UTILITY

[Signature]
DATE

STREET

A

DENIED



CITY OF KEY WEST SPECIAL EVENTS DEPARTMENT APPROVALS

EVENT: Pet Masquerade
 DATES: Oct 24/2018

DEPARTMENTS

COMMENTS

EVENTS (INITIAL SIGNOFF)

Maria Ratuski

SIGNATURE

DATE

[Empty comment box]

✓ COMMUNITY SERVICES

SIGNATURE

DATE

[Empty comment box]

POLICE DEPARTMENT

Steve Torrence

5/15/18

SIGNATURE

DATE

Requires ABT Permit
Requires Extra Duty Officers

✓ FIRE DEPARTMENT

SIGNATURE

DATE

[Empty comment box]

✓ KWDOT

SIGNATURE

DATE

N/A

✓ PORT AND MARINE SERVICES

SIGNATURE

DATE

[Empty comment box]

✓ CODE COMPLIANCE

SIGNATURE

DATE

[Empty comment box]

ENGINEERING

SIGNATURE

DATE

[Empty comment box]

UTILITIES

SIGNATURE

DATE

[Empty comment box]

SPECIAL EVENT PERMIT HAS BEEN

APPROVED

DENIED

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

1 Name (as shown on your income tax return. If none is required on this line, do not leave this line blank.)
Lower Keys Friends of Animals, Inc.

2 Business name/disregarded entity name, if different from above

3 Check appropriate law for federal tax classification; check only one of the following power bases:
 Individual sole proprietor or single-member LLC
 C Corporation
 S Corporation
 Partnership
 Trust/estate
 Limited liability company. Enter the tax classification (C-Corporation, S-S Corporation, P-Partnership) C
 Note: For a single-member LLC that is disregarded, do not check LLC, check the appropriate box in the line above for the tax classification of the single-member owner.
 Other (see instructions) ▶

4 Exemption codes (check only if certain criteria, not individuals, see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____

5 Address number, street, and apt. or suite no.)
P.O. Box 1043

6 City, state, and ZIP code
Key West FL 33041

7 List address restrictions here (optional)

Requester's name and address (optional)

Print or type
See specific instructions on page 2.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

--	--	--	--	--	--	--	--	--	--

Note: If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

or

Employer identification number

59	-	22	75034
----	---	----	-------

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am acting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA codes entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ *Fred Snow* Date ▶ Oct 10, 2017

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
 Future developments: Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/efile.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC various types of income, prizes, awards, or gross proceeds
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (Formal mortgage interest); 1098-E (student loan interest); 1098-T (tuition)
- Form 1099-C (cancelled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien) to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

- By signing the filed out form, you:
- Certify that the TIN you are giving is correct (or you are acting for a number to be issued).
 - Certify that you are not subject to backup withholding, or
 - Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income; and
 - Certify that FATCA codes entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return. Name is required on this line; do not leave this line blank.)
QuePasa KW, Inc

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Other (see instructions) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3)
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Indicate multiple exemptions by the U.S.I.)

5 Address (number, street, and apt. or suite no.) See instructions.
1107 KEY PLAZA #438

6 City, state, and ZIP code
KEY WEST, FL 33040

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

--	--	--	--	--	--	--	--	--	--

Or

Employer identification number

2	7	-	3	2	6	5	8	5	0
---	---	---	---	---	---	---	---	---	---

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ *Nancy D'Amico* Date ▶ *3/7/18*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

Event Name: PET MASQUERADE

Special Event Checklist

Everything must be checked off before submitting the special event application

X	TITLE	COMMENTS
X	Special Event Application	
X	Noise Exemption (If applicable)	N/A
X	\$50.00 for Noise	N/A
X	Ordinance initialed	
X	Recycling checklist completed	
X	Recycling deposit: \$1,000.00	
X	Recycling Plan	Working w/ WM
X	Authorization Letter for continuous cleaning of recycled area	
X	Signatures of No Objection of Street closure (If applicable)	N/A
X	Insurance naming the City as additional insured	Will purchase after approval
X	Financial of previous event (If applicable)	
X	Release & Idemnification Form	
X	Site Map (where barricades, stages, etc are to go)	
X	Letter from non profit that states they will be receiving the funds	