# City of Key West Special Event Permit Application

For assistance in filling out this application, please contact the City at (305) 809-3881 or via email at: event request@cityofkeywest-fl.gov Hours of Operation: 4:00 pm &:00 fm Date(s): \_\_10|20|75 Monday Number of Expected Attendees: 400 Break Down Date: 10/70/25 Is the Event open to the Public? Yes Description: Provide a narrative description of the full scope of your event with as much detail as possible in the box below. If this event has multiple sub events, specify date and time range of each. The Fahotosy Fost 5 K is an annual fund roices for Roef Relief. race start: 6:00 pm **EVENT ORGANIZER INFORMATION** Company or Organization Name Mile O Every? Jeff Graves \_\_\_\_\_\_Phone number\_ 317.294.3622 Mailing Address\_ 179 Golf Club Drive city Key West State PL zip 33040 Email\_ Jeffe Mile Devents. com Tax ID/EIN# \_ @8 · 35 19923 SECONDARY CONTACT INFORMATION \_\_\_\_\_Phone number \_\_ 208 - 346 - 4837 Name Keith Hughes Company or Organization Name\_ Mile O events Email Keith e mile Devents SPECIAL APPROVAL REQUIREMENTS (IF APPLICABLE) No Noise Exemption Required: Yes Complete Supplement A Non-Profit Applicant or Benefit: Yes Complete Supplement B Alcoholic Beverages Sold/Served at Event: Yes Needs City Commission Approval Applicant(s) wishing to sell/consume alcoholic beverages on City property must have approval by the City Commission through Resolution and must hire an extra-duty police officer(s) for crowd control and safety as determined by the Key West Police Department or City Manager's Office. Applicant must have a liquor license and provide liquor liability insurance.

STREET	CONTRACTOR	CIR	100	STREET,	SEB
100			(E)(6	1011	RED

INITIALS RE	QUIRED		
Event Name:	FF5K	Event Date:	10/20/25
	provided to you by the Office o	t(s) must fill out the City of Key West f the City Manager. All applications ar and/or City Commission and must in t yent.  Signature:	e subject to approval at the
	of insurance during the Special	s) will be required to maintain the follon Event. All insurance coverages must be act business within the State of Florid	pe provided by insurance
	Commercial General Liability w Business Automobile Liability w Statutory Workers' Compensat Employers Liability with minim - \$1,000,000 injury by accident - \$1,000,000 Policy Limits – Eac	um limits:	
	admittance fee and alcoholic be Full Liquor Liability coverage w will not be acceptable. If the pe	I at the event or if the event's attende everages will be served, the permittee ith minimum limits to \$1,000,000. Ho rmittee will use the services of a cater pholic beverages, the City will honor e net.	will be required to maintain t Liquor Liability coverage er and the caterer will be
	general liability policy.	amed as an "Additional Insured" on the	
	claims, damages, liabilities, and claimed against the City by any corporation, or entity which are activities or which damages/inju	shall indemnify and hold the City to leave the series which maybe incurred by the person, firm to the person or property consequent or arise from the activition or arise from person or project or arise from person, statutes, ordinances and regulations	he City or which may be yf any person, firm, es of the permit holder mit holders failure to

Applicant Printed Name:

4.	<b>ADA:</b> All special events are required to comply with the Federal Americans with Disabilities Act which requires access to all areas in services provided by the special events. Organizers must ensure that all aspects of their event meet the requirements.
	Applicant Printed Name: Kell Auhr Signature: Kh Hyhr
5.	Notifying: 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.  Applicant Printed Name: Reflection of the city commission decision. Signature: Reflection of the city commission decision.
6.	City Services Pricing: The organizer or sponsor of any special event which requires the provision of additional extraordinary support services by police, fire, and administration or other city department shall pay to the city the cost of such services. A nonrefundable down payment of 10% of all cost, as estimated by the city manager, shall be made to the city either by certified check or credit card at least 10 days prior to the special event.  Applicant Printed Name: Signature: Signature: Signature:
7-	Payment Terms: 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 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 (1.5%) per month.  Applicant Printed Name:   Applicant Printed Name:   Signature:   Signa

# **Event Screening Questionnaire**

Event Name: #F 5K	Event Date:	10/20/2
The following questions will determine the correct application permit or license may be revoked if there has been misreprese to the nature and location of the activity. If you answer "Yes" to the submitted with this application.	entation in the permit or license application wi	th respect
VENDOR SALES		
1. Will ANY alcoholic beverage be sold or served?	Yes Needs City Commission Approval	No
2. Will ANY food be prepared or served?	Yes Complete Supplement C	No 🔼
	COMPLETE REQUIRED FORMS	
3. Will your event involve ANY of the following? Cooking Onsite, Compressed Gases or Flammable Liquid (used or stored), Fog Machine/Smoke Machine/Bubble Machine, Generators, Open Flame (fire juggling, bonfire, etc.) Pyrotechnics/Special Effects, Lasers, Confetti, Vehicle or Motorcycles	Yes Complete Supplement C	No 🖺
<ol> <li>Will your event involve ANY of the following tents or structures?</li> <li>Tents, Booths, Canopies or Podiums, Viewing Stands and Bracing, Stages, Risers or Air Support Structures</li> </ol>	Yes Complete Supplement D	No 🔽
STREETS & SIDEWALKS IF Y	YES, COMPLETE REQUIRED FORMS	
5. Will your event require a stationary street closure (Block Party, etc.) or block sidewalk?	Yes Complete Supplement E	No 📙
6. Will your event require a moving street closure (e.g. Race, Bike Rally, Parade)?	Yes Complete Supplement E	No 📙
7. Will your event require parking restrictions (i.e. clearing cars for parade)?	Yes Complete Supplement E	No 🔽
	V	
8. Will your event take place in a City-owned Park,	Yes Complete Supplement F	No
Recreation Center or Truman Waterfront?		
The applicant does acknowledge and hereby affirms that any and all accurate to the best of their knowledge. The applicant(s)/permittee indemnify and hold the City of Key West harmless from and against injury to any person or damages to any property of the parties heret whatsoever or in any way connected with the holding of said event event and its operation irrespective of negligence, actual or claimed,  By checking "I agree", you agree and acknowledge same force as a handwritten signature.  Date	agrees to assume full responsibility and liability for all liability, claims for damages, and suits for or by I o or of the third persons for any and all cause or cau or any act or omission or thing in any manner relate , upon the part of the City their agents or employee	and reason for an uses d to said es.

# Required - Recycling Plan

Event Name:	FF5K	Event Date:	10/20/25

The City of Key West is committed to increasing the collection of recycled materials and needs your help to accomplish this. As the Event Organizer, you need to encourage your vendors to participate in the separation of solid waste and recyclable items by providing the adequate number and type of collection receptacles.

### RECYCLING POINT OF CONTACT

Name Keith Hugher

Phone Number <u>708 348 4877</u>

Email Keil a Wile Oeve As an Number of people dedicated to recycling 2

### INITIALSREQUIRED



- 1. NON- ACCEPTABLE WASTE: No Plastic Bags, plastic cutlery, plastic straws, plastic cups, or polystyrene are allowed at events.
- 2. **RECYCLING FEE**: The Fee (see Fee Schedule) must be submitted prior to the event. You can earn all or part of this fee back by participating in the City Recycling Program.



3. ACCEPTABLE RECYCLABLES: The primary items will be Aluminum Cans, Plastic Bottles, Cardboard, and Glass Bottles. But additional items can include Food and Beverage Cartons, Regular paper, Magazines and Program Handouts.



4. **CONTAMINATION**: I understand that recycle bins with contamination above 15% will result in not being able to earn back all or part of the Recycling Fee.

### **RECYCLING TIMELINE**

Two Weeks (Self filling)

### **BEFORE EVENT:**

- 1. Arrange Trash/Recycling through Community Services (305-809-3759).
- 2. Get approval for educational signage needed to inform customers/event goers of recycling and garbage rules/locations during the event. Request standard signage or submit unique designs for approval through recycle@cityofkeywest-fl.gov

### DAY OF EVENT:

Due Date (Self filling)

- 1. Place Recycling/Garbage containers in pairs throughout venue, at approximately every 30 feet throughout the event.
- During the event ensure that recycle bins are free from contamination. Pull full bags, replace with a new liner, and stage full bags only at pre-arranged sites.
- 3. At end of event, remove all signage, and return if borrowed from City. Place all trash/recycling containers pre-arranged pick-up location.

Due Date (Self filling)

### TRASH/RECYCLING REPORT:

- 1. City Community Services will supply a report detailing the amount of materials collected for recycling by weight, volume, or count and report on contamination levels.
- 2. After the report is generated, the results will be shared with the event organizer and event vendors, or by contacting <a href="mailto:recycle@cityofkeywest-fl.gov">recycle@cityofkeywest-fl.gov</a>.

# Required – Event Transportation Planning

Event Name:	FFSK	Event Date: 10/20/2
	11 31	- 1 1
Parking and traf planners in traff	fic congestion are consistently a concern of Key Wic reduction as well as management. For more info	est residents. It is the City's goal to involve all event rmation consult the Special Events Guide.
INITIALS REC	UIRED	
8	Communications: Every event is required to	provide communications about modes of
*	transportation that will reduce vehicle traffic	
	1. Website(s)	3. Ticketholders
	2. Email	4. Social Media
1	Opportunities: Large Events are required to congestions and parking issues. Your event vertransportation or utilize transit friendly altern	vill be more successful by encouraging alternate
	Encourage Walking	Partner with Transit System/Buses
	Encourage Biking	Partner with Transit Friendly Hotels
	Providing Bike Security with Valet	Partner with Restaurants/Bars
	Include Ride Service with VIP Passes	Partner with Rideshare/Taxi Companies
	Provide Pre-Sale parking only	Implement Shuttles
	Premium parking prices	Other:
If Event Organ	izers or Vendors desire to utilize metered park	ring spaces or lots, payment will need to be made

If Event Organizers or Vendors desire to utilize metered parking spaces or lots, payment will need to be made to the City. The following fees apply for events that wish to use or reserve parking areas. All existing parking ordinances apply to special events.

Parking Type	Fees and Rules*	No. of Parking Spots Requested	No. of Days Needed	Total Parking Cost
Residential Permit Spaces	Not allowed			
Unmetered Street Parking	No Cost			
Park N Ride Garage	\$48/day			
Metered Street Parking	\$20/day			
Truman Waterfront Park	\$20/day			
Smathers Beach	\$20/day			
Angela Firehouse Parking Lot	\$20/day			
Simonton Beach Parking Lot	\$20/day			
Ferry Terminal Parking Lot	\$20/day			
Historic Bight Parking Lots	\$48/day			
Mallory Square Parking Lot	\$48/day			

Total Parking Cost shall be calculated using this table and accounted for in the Event Fee Schedule. For more information, contact John Wilkins, Parking Director at (305) 809-3855.

# Required: Event Site Map / Layout

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1	OF L

Using the legend below, please illustrate your event to the best of your ability.

If it is a single site event only one site layout is needed. If the event includes multiple streets, a second map showing the Impacted Streets for the entire area is needed.

# INITIALS REQUIRED

Attach Site Map Layout

Attach Impacted Streets Map

### Event Site Map Layout Legend:

- A. Food/Bev. Vendor Tents\*
- B. Merchandise Vendor Tents\*
- C. Seating Tents\*
- D. Toilets \*\*
- E. Amplified Music

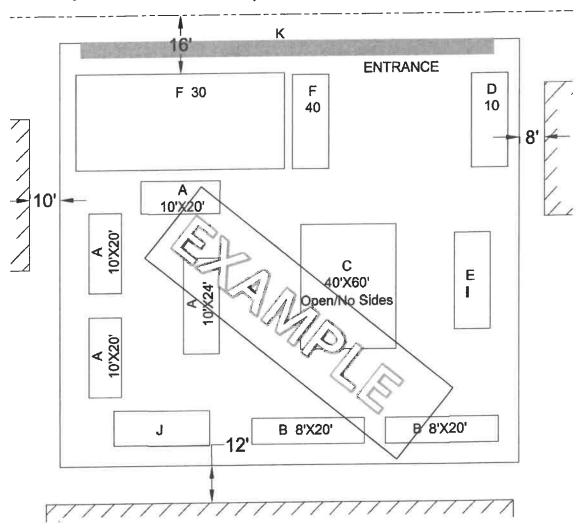
- F. Car Parking\*\*
- G. Bike Parking\*\*
- H. Roads Closed
- I. Stage Area
- J. Bounce House

- K. Podiums
- L. Fire Lane (RED LINE)
- M. Label Street(s)
- N. Other:\_\_\_
- O. Other: \_\_\_\_

### \* Indicate Tent sizes

### \*\* Indicate Quantity

### Maple Street



Supplement A - Noise

Specia	TEVELIE FEITHE Application
Event N	lame: Fortary Fest &K Event Date: 10/20/20
Excerpt f	rom City Code Sec. 26-192 Unreasonably excessive noise prohibited.
<u>Noise lim</u> levels pei	itations - Within a core commercial district as defined in this article, the maximum dBA and dBC sound rmitted on any property located therein shall be as follows:
maximur lease bou	age measurement taken between ten (10) and twenty (20) seconds shall be no greater than the In levels set out below. The measurement shall be taken from the sound source property line, or individual Indary in the case of property which has been subdivided by the execution of individual leases, of the noise Ing property at a location that is closest to the complainant's property line:
a 5	. Eighty-five (85) dBA or ninety-four (94) dBC between the hours of 11:00 a.m. and 2:59 a.m. b. eventy-five (75) dBA or eighty-four (84) dBC between the hours of 3:00 a.m. and 10:59 a.m.
unreasor be made excessive	sidential or commercial district as defined in this article, a decibel meter shall be used for a complaint of nable noise made at or within 100 feet of the property line of the sound source. The decibel reading shall at the location of the complaint. The investigating officer shall issue a citation for unreasonably a noise, unless in his judgment a warning is sufficient to cease the violation. There shall be no more than fone warning per offending person or establishment.
Commiss	hat expect to exceed decibel levels set for their area must get a Noise Exemption from the City sion. Noise Exemptions cannot be issued for the same location within 60 days of the last noise
	the Potential Noise Sources: <u>Smell PA System</u>
	ish to apply for a Noise Exemption? Yes Need City Commission Approval No
TNITTAL	SREQUIRED
CH.	<ol> <li>Applicant(s) has reviewed the City Code regarding Noise limitations and understands that an exemption from the noise control ordinance requires approval from the City Commission. Applications for noise exemptions must be received 30 days before the event</li> </ol>
KIL	2. The processing fee for the application is \$93.88, due upon submission of application. Include this fee in the Special Event Fee Schedule.
KIT	3. Notice of the City Commission's proposed action on a Noise Exemption shall be published in a newspaper of general circulation at least five days prior to the date of the Commission meeting, as well as mailed to all property owners and occupants located within a 100-foot radius of the

For more information on Noise and Noise Exemptions, consult the Special Event Guide and read the <u>City</u> <u>Code Section 26-192</u>

proposed event. The applicant is required to pay for the newspaper advertisement.

# $Supplement\,B-Non-Profit\,Verification$

Event Name:	FF5K	Event Date:	10/20/35
Non Profit Or	ganization Name Reel Rel	of	
	Panracent	ative Jeff Grave	J
Tax ID/EIN#_	A SA Chi a la	dive Ally Order	I M CEILE DANIGH
Purpose of Or	ganization Provide Education	- 00 0 1 1 0 CGI	// Car INC ENVIEW
Phone <u>3/7</u>	194 3677 Email J	at 6 Mile Opver	ac, com
How will the n	onprofit proceeds/donations, after payment	s of direct necessary expens	ses be used?
C	canow of Education	! moterral	
INITIALS REC	QUIRED		
ta v	Services Waived: The first \$1,000.00 of costs Ordinances may be waived for any Event Org ax-exempt Non-profit organization according vaiver by such Event Organizer or Sponsor or accommodation subject to Human Rights pro	anizer or Sponsor organizat g to State or Federal law.  Ac ganization shall render the !	ion which qualifies as a cceptance of this
2. A	Approval: Supplement B must be reviewed ar Neither Completion nor Submission of this fo	nd approved for Non-profit v rm guarantees a waiver will	vaivers to be granted. be granted.
<i>E-#</i> to	Monies Received: Within 30 days of the even o the City Commission a letter from the Non he amount of monetary donation received fr	-profit Organization receivir	anizer agrees to submit ng the waiver stating
0	Accounting: Within 90 days following the Spe organization will ensure that the Non-profit o Commission an accounting of expenses and re	rganization receiving the wa	aiver submits to the City
SIGNATURE	AND ATTACHMENT REQUIRED	<b>以</b> 以京都市外公司至	
educational, che exemption stardescribed and	y that the above-named Non-profit organization haritable, fraternal, or religious organization unders the Internal Revenue Service; that the that all the proceeds from the event, after necharitable or religious purpose.	nder the laws of the State of I organization is the actual sp	Florida or with proper tax onsor of the event
and belief. I als	y that the answers to the above questions are so understand that any organizations who fracenalties provided for in Florida Statutes.	correct and complete to the udulently seek exemption sh	best of my knowledge all be subjected to civil
Provide a copy	of your organization letter issued by the I.R.S	. or Secretary of State verifying	ng tax exempt status.
By check	king "I agree", you agree and acknowledge y a handwritten signature.	our electronic signature is v	alid and bonding in the

# Supplement C – Food & Safety

Event Name:	FANLLY	Fox SK	Event Date:	10/20/	25
				, , , , , , , , , , , , , , , , , , ,	

This section will be reviewed by the Key West Fire and Police Departments to determine what safety checks and security needs may be required at the Special Event. The Fee Schedule may be revised based on requirements that may be deemed necessary.

Please contact the following City representatives before completing your application:

Fire Department and EMS – Chief Alan Averette (305) 809-3938 Police Department – LT Joseph Tripp (305) 809-1027

More information on Safety requirements can be found in the Special Event Guide.

EVENT ACTIVITIES - Check all that ap	ply to the Special Event			
Cooking:	Electrical Power	Other		
Deep Frying / Open Flame	Generator	Road Closure		
Charcoal Grill Gas Grill Food Warming Only Catered Food	DC Power Structures:	Fog/Smoke MachineBubble MachinePyrotechnicsSpecial Effects		
Alcohol To be Served By	Stages / Risers / CanopiesViewing Stands / Bracing	Open Flame Lasers		
Existing Licensed Establishment Commercial Licensed Vendors Non-profit Licensed Vendors	Seating Air Supported Bounce House Tents Greater than 200 SF	Confetti Vehicle/Motorcycle Demo		
INITIALS REQUIRED				
1. Alcohol: Applicant(s) wishing to sell/consume alcoholic beverages on City property must have approval by the City Commission by Resolution and must hire an extra-duty police officer(s) for crowd control and safety as determined by the Key West Police Department or City Manager. Applicant must have a <u>liquor license</u> and provide liquor liability insurance.				
2. Cooking Safety: If cooking minimum rating of 3A40B	2. Cooking Safety: If cooking, a KWFD Fire Watch must be provided and fire extinguisher(s) with a minimum rating of 3A4oBC shall be provided near cooking equipment.			
3. Sidewalks: Structures must Special Event Site Plan must	3. Sidewalks: Structures must not interfere with pedestrian movement on the sidewalk. The Special Event Site Plan must show a minimum setback of six (6) feet from the property lines.			
be located. The layout must a	4. Special Event Site Map: Indicate where structures, tents, stages, cooking equipment, etc. will be located. The layout must also identify distances to the nearest buildings and property line. If seating will be provided, show seating/chair arrangement.			
	5. Cooking Oil: Cooking oil must be disposed of properly. Vendors found dumping cooking oil improperly will result in forfeiture of a portion of the Event deposit.			

# Supplement D – Tents & Structures

Event Name: FF 5K Event Date: 10/20/27
This section will be reviewed by the Key West Fire and Police Departments to determine what safety checks and security needs may be required at the Special Event. The Fee Schedule may be revised based on requirements that may be deemed necessary.
Please contact the following City representatives before completing your application:
Fire Department and EMS – Chief Alan Averette (305) 809-3938 Police Department – LT Joseph Tripp (305) 809-1027
Provide copy of Event Site Map/Layout Yes No No
TENTS
Total Number of Food/Beverage Vendor Tents:
Total Number of Merchandise Vendor Tents:
Total:
Tent Supplier NameContact Number
Size & Type of Tents:
Provide Certificate of Flame Resistance/Retardant for Tent Fabric.  Will there be any combustibles or flammable liquids under the tent?  Will the sides of the tent be used?  Yes*  No  *Exit plans must be indicated on Site Map Layout.
STRUCTURES
What structures will be erected?
Will structures be erected on any part of a street or sidewalk? Yes No V  For each structure, note number of footings, weight and dimensions (L/W/H) below:

# ${\sf Supplement}\, E-{\sf Street}\, {\sf Closure}$

Event Name: FF 5K			Event	Date:	10/201	125
STREET CLOSURE INFORMATION		To a large		NA V		
Street(s) to be closed		Blc	ock/Address Nur	nber(s) _	200	block
Cross-Streets: between <u>Greene</u>			and CAro			
Closure Date(s) 10 70 25	_Time _	4	AM/ළ/	no_	8	AMPM
INITIALS REQUIRED						
1. Non-Profit Inclusion: Application City street must make an application Organizer proposes a Special right-of-way, the Event Organizer revenues or \$1000.00, which Organizer must designate the named Non-profit organizate the Event Organizer.  2. Consent: The Event Organizate to the street closure. A templication of the street closure within the of those facilities within the of those facilities, whichever disability.  4. Insurance: Typical insurance off private property and in the require insurance in the amount of the street closure. The closure in the street closure of the street closure of the street closure. A templication of the street closure of the street closure of the street closure of the street closure. A templication of the street closure of the s	plication just leaver is greated when the end of the en	jointly with at will call st donate eater, to a cofit organ provide the eave neighbors form torganizight-of-weater nummay noting may noting the of-weater stroadway the eater stroadway th	th a Non-profit of use the closing of at least 25% of at least one Non-nization(s) on the he City Manager hoboring business can be found in er of a Special Evay, at least five provide coveraging. Events taking ty and \$2M – agreess to the closed will immediate	organization a city of a city of a city of the Even profit of a city of the Spenders of the Sp	tion. When street or of ant Organization for the etter of again a petition of the etter of the e	an Event ther public er's gross n. The Event he event. Each reement with of no objection Guide. corary cilities or one with physical t may occur Right-of-Way
emergency vehicles and vehi	iicies with	iiii the cio	ase block.	The state of the s		
SIGNATURE REQUIRED		100			STABLE ST	
We the undersigned, agree to save and ho person and/or property which is caused by above street for the purpose of this Specia	any activ	ess, the Ci vity, cond	ty of Key West fi ition, or event ar	rom all c ising ou	ost and da t of tempo	mage to any rary use of the
By checking "I agree", you agree and same force as a handwritten signature.	d acknow	ledge you Date	ur electronic sign	nature is	valid and	bonding in the

# Supplement F – City Property

Event Nar	me: _	FF SK	Event Date:/C/70/7T
Event Guid	e.		heir amenities and Use Fees are listed in the Special
Which City	Prope	rty do you wish to use?	
Which Area	a(s) of t	the City Property do you wish to use? _	Pothway & Bike Loves
Will Utilitie	s be re	quired (Water and/or Electricity)? Yes	□ No □
INITIALS	REQUI	RED	
K#	1.	The City makes no guarantees that the the dates requested. Submitting this	e requested City Property and Area will be available on application acts as a request, not a guarantee.
K#	2.	Events taking place on City Property \$2M – aggregate.	require insurance in the amount of \$1M – liability and
KH	3.	by the City Commission via Resolutio control and safety as determined by t	coholic beverages on City property must have approval a and must hire an extra-duty police officer(s) for crowd he Key West Police Department or City Manager. Event quor license and liquor liability insurance.
K#	4.	nonrefundable payment for use of the This payment shall be delivered to the	the applicant must provide a refundable deposit and a ne City Property, as determined by the Fee Schedule. City Manager's Office at 1300 White St., Key West, FL as shall be made payable to City of Key West.
K#	5.	support the activity will be at the sole	rough City of Key West. Any modification to utilities to cost of the Event Organizer and must meet City Codes. ill be charged at current rates or agreed upon method.
LH.	6.	Ingress/egress by the Event Organizer	shall be coordinated with the City of Key West.
	7.	The City property used must be mai West may request Event Organizer to become unacceptable.	ntained in an orderly and neat condition. City of Key improve conditions of site within reason if conditions
<u> </u>	8.	No trash may be left on site. Use or prior approval is obtained from the Cit	City of Key West dumpsters is not authorized unless y Manager.
KH	9.	No alcoholic beverages/non-prescrip Truman Waterfront without prior app	tion drugs or food may be brought onto or sold on oval from the City Commission.
KH	10.	No hazardous material or waste shall a Hazardous Waste Handling and Spill	be used or stored on the premises without submitting Plan to the City of Key West.





11. Event Organizer is responsible for any and all environmental cleanup, restoration, fees, fines, etc. associated with the activity and shall put in place any and all measures to eliminate environmental contamination to the City Property that may be caused by the Event activity.

12. All trash (including waste oil) and equipment including portable toilets and trailers shall be removed no later than close of business of the last day of the event. Event Organizer should plan accordingly. City of Key West may impose additional fees for use of City Property beyond usage dates.

### INITIALS REQUIRED for Truman Waterfront Property

For Use of Truman Waterfront, the Event Organizer is subject to the following additional provisions:



13. Event Organizer is responsible for obtaining necessary permits required by any other agencies pertaining to this Special Event such as Federal, State, Local, Coast Guard, Navy, Marine Sanctuary, etc. and is responsible for providing proof of permit prior to entering into an agreement with the City of Key West.



14. Event Organizer must take part in pre- and post-activity walk-through inspections with the City of Key West point of contact, or designee.



15. Event Organizer must provide the City of Key West with a detailed schedule for activities.



16. City of Key West personnel shall be always allowed access to the site.



17. Event Organizer shall provide sufficient personnel to ensure proper and safe operation of the activity.



18. Event Organizer may not stay overnight on Truman Waterfront without prior approval from the City of Key West.



19. Any use of NOAA property or seawall must be coordinated with directly with NOAA.



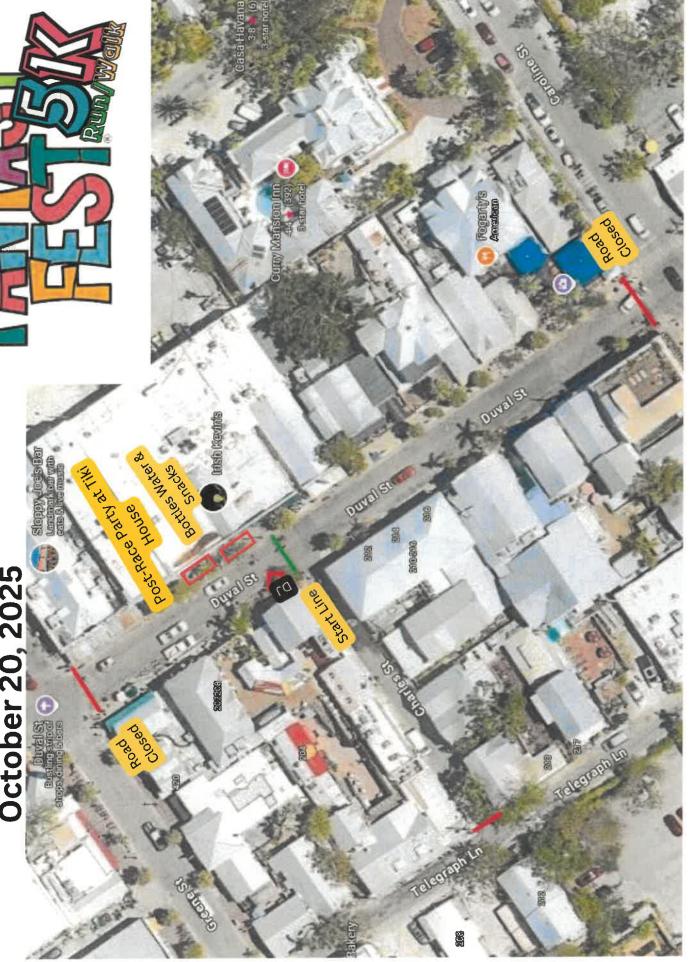
20. Unfettered access to Navy, NOAA and State Park property must be maintained at all time



21. Use of the inner basin for any activities is not authorized.



# 2025 Start Line Map





Post Office Box 430, Key West, Fl. 33041 • reefrellef@gmail.com www.reefrellef.org

Reef Relief Headquarters & Environmental Center 631 Greene Street, Key West, Florida • Tel: 305-294-3100 • Fax: 305-293-9515

04/07/2025

To: The City of Key West

Reef Relief is thrilled to be partnering with Mile 0 Events again in 2025 as the official charity partner for their events. Our partnership over the years has been very beneficial to Reef Relief and the programs we provide. The financial contributions have been huge in helping support Reef Relief's dedication to improving and protecting our coral reef ecosystem. Beside the financial contributions the marketing exposure we receive has be wonderful. In 2025 Reef Relief will be the Official Charity partner for Parrots and Margaritas 5K, Fantasy Fest 5K, Southernmost Turkey Trot and the Running of the Elves.

With best regards, Mill McCleary Executive Director



Department of State / Division of Corporations / Search Records / Search by Entity Name /

### **Detail by Entity Name**

Florida Not For Profit Corporation

REEF RELIEF, INC.

Filing Information

**Document Number** 

N15762

**FEI/EIN Number** 

59-2696402

**Date Filed** 

07/09/1986

State

FL

**Status** 

**ACTIVE** 

**Last Event** 

**AMENDMENT** 

**Event Date Filed** 

10/28/2011

**Event Effective Date** 

NONE

**Principal Address** 

**631 GREENE STREET** KEY WEST, FL 33040

Changed: 01/05/2011

**Mailing Address** 

P.O. BOX 430

KEY WEST, FL 33041

Changed: 04/07/2000

Registered Agent Name & Address

McCleary, Millard 631 Greene Street KEY WEST, FL 33040

Name Changed: 01/08/2018

Address Changed: 08/12/2014

Officer/Director Detail Name & Address

**Title Director** 

Cardenas, Bob 49 Seaside Court KEY WEST, FL 33040

Title Secretary

Stafford, Mimi 352 Old Boca Chica Road Key West, FL 33040

**Title Director** 

Russo, Ed 1130 Duval Street Key West, FL 33040

**Title Director** 

Keeley, Kevin 260 Newbury PL, North St. Petersburg, FL 33716

Title President

Coyne, Tricia 6 Havana Lane Key West, FL 33040

**Title Director** 

Rice, Patrick, Dr. 61 Palm Drive Key West, FL 33040

Title VP

Shabo, Carly 3603 State St Apt #2 San Diego, CA 92103

**Title Director** 

Howes, Maggie 164 Calle Tiburon Urb. Solimar S-2 Patillas, PR, OC 00723

Title Treasurer

Risius, Alexandra 5857 Upper Straits Blvd West Bloomfield, MI 48324

**Title Director** 

Graves, Jeff 17401 Tiller Ct., Suite A Westfield, IN 46074

### **Annual Reports**

Report Year	Filed Date
2023	02/01/2023
2024	01/05/2024
2025	01/07/2025

### **Document Images**

Document images	
01/07/2025 ANNUAL REPORT	View image in PDF format
01/05/2024 ANNUAL REPORT	View image in PDF format
02/01/2023 ANNUAL REPORT	View image in PDF format
01/21/2022 ANNUAL REPORT	View image in PDF format
01/27/2021 ANNUAL REPORT	View image in PDF format
01/15/2020 ANNUAL REPORT	View image in PDF format
01/30/2019 ANNUAL REPORT	View image in PDF format
01/08/2018 ANNUAL REPORT	View image in PDF format
01/03/2017 ANNUAL REPORT	View image in PDF format
02/17/2016 ANNUAL REPORT	View image in PDF format
02/24/2015 ANNUAL REPORT	View image in PDF format
08/12/2014 AMENDED ANNUAL REPO	ORT View image in PDF format
03/03/2014 ANNUAL REPORT	View image in PDF format
02/06/2013 ANNUAL REPORT	View image in PDF format
03/21/2012 ANNUAL REPORT	View image in PDF format
10/28/2011 Amendment	View image in PDF format
01/05/2011 ANNUAL REPORT	View image in PDF format
03/17/2010 ANNUAL REPORT	View image in PDF format
02/11/2010 ANNUAL REPORT	View image in PDF format
09/01/2009 ANNUAL REPORT	View image in PDF format
08/11/2009 ANNUAL REPORT	View image in PDF format
07/14/2009 ANNUAL REPORT	View image in PDF format
01/16/2009 ANNUAL REPORT	View image in PDF format
03/19/2008 ANNUAL REPORT	View image in PDF format
01/30/2007 ANNUAL REPORT	View image in PDF format
01/18/2006 ANNUAL REPORT	View image in PDF format
03/11/2005 ANNUAL REPORT	View image in PDF format
02/09/2004 ANNUAL REPORT	View image in PDF format
04/23/2003 ANNUAL REPORT	View image in PDF format

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02/07/2002 ANNUAL REPORT	View image in PDF format
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04/07/2000 ANNUAL REPORT	View image in PDF format
03/06/1999 ANNUAL REPORT	View image in PDF format
02/03/1998 ANNUAL REPORT	View image in PDF format
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07/11/1996 ANNUAL REPORT	View image in PDF format
05/01/1995 ANNUAL REPORT	View image in PDF format
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### Kelli Funkhouser

From:

Jeff Graves <Jeff@mile0events.com>

Sent:

Thursday, April 17, 2025 2:42 PM

To:

Kelli Funkhouser

**Subject:** 

[EXTERNAL] RE: [EXTERNAL] RE: Fantasy Fest 5K

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Yes, you can update it. Thank you so much for your help on this.

From: Kelli Funkhouser < kelli.funkhouser@cityofkeywest-fl.gov>

Sent: Thursday, April 17, 2025 2:40 PM
To: Jeff Graves <Jeff@mile0events.com>
Subject: RE: [EXTERNAL] RE: Fantasy Fest 5K

Jeff.

Because alcohol will be consumed on City property, the application needs to be updated. Can you check 'Yes' on page 1 and page 4 that alcohol will be served? Or if you don't mind me changing the application for you, I will update it and use your email reply as authorization to do so.

Thank you!

Kelli

From: Jeff Graves < Jeff@mileOevents.com > Sent: Wednesday, April 16, 2025 6:28 PM

To: Kelli Funkhouser < kelli.funkhouser@cityofkeywest-fl.gov >

Subject: [EXTERNAL] RE: Fantasy Fest 5K

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Great questions. Mary Ellens Bar will be providing a shot for all participants 21 and older who would like one in front of there bar. We are not serving the alcohol the bar is. Please let me know if we need to do something different.

From: Kelli Funkhouser < kelli.funkhouser@cityofkeywest-fl.gov>

Sent: Wednesday, April 16, 2025 3:52 PM To: Jeff Graves < Jeff@mileOevents.com>

Subject: FW: Fantasy Fest 5K

Hi Jeff,

The Assistant City Manager noticed that there is a 'shot station' on the race course, but the application is marked no for alcohol being served. What is the shot station?

You can see what we are referring to below.

Thank you,

Kelli

From: Todd C. Stoughton < tstoughton@cityofkeywest-fl.gov>

Sent: Wednesday, April 16, 2025 3:49 PM

To: Kelli Funkhouser < kelli.funkhouser@cityofkeywest-fl.gov>

**Subject:** Fantasy Fest 5K

Kelli,

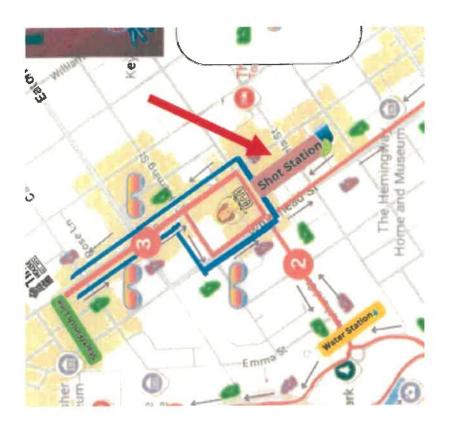
Can you please ask the applicant about the application they submitted for the FF 5K. It says 'No' to alcohol but then has a shot station on the run map. I've snipped the areas of my questions below. Thanks.

Respectfully,

Todd

Todd Stoughton
Assistant City Manager
City of Key West
1300 White Street
Key West, FL 33040
tstoughton@cityofkeywest-fl.gov

Desk: (305) 809-3811



Alcoholic Beverages Sold/Served at Event: Yes Needs City Commission Approval No Applicant(s) wishing to self/consume alcoholic beverages on City property must have approval by the city Commission through Resolution and must hire an extra-duty police officer(s) for crowd control and safety as determined by Key West Police Department or City Manager's Office. Applicant must have a liquor license and provide liquor liability insurance.

# **Department Approvals**

Event Name: Fantasy Fest 5K	Event Date: <u>10/20/2025</u>
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Department	Signature / Restrictions / Conditions
Special Events Manager	Kellí Funkhouser
Code Compliance	Jim Young
Engineering	David Allen
Fire Department	Dereck Berger emailed Conditional Memo
KW DOT	
Parking	
Police Department	Alex Gaufillet
Port & Marine Services	Steve McAlearney
Property Management	Rayder
Public Works	
Utilities	Matt Willman
Other:	







## THE CITY OF KEY WEST

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

To: Mile 0 Events (Jeff Graves)

From: Lieutenant Dereck Berger

Date: 4/8/25

Reference: Mile O Events

This office reviewed the special event application for Fantasy Fest 5K run to start/ finish at 211 Duval St. on October 20,2025 from 4:00-8:00pm.

Based on the application the following conditions apply:

All road closures need to allow an open lane minimum of 12 ft. wide open for emergency vehicle access.

There are no concerns at this time.

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

# Dereck Berger

Lieutenant/ Inspector

Key West Fire Department 1600 N. Roosevelt Blvd Key West, Fl. 33040 Office 305-809-3917

Dereck.berger@cityofkeywest-fl.gov





### THE CITY OF KEY WEST

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

RELEASE AND INDEMNIFICATION
Mile 0 Events
Fantasy Fest 5K
Monday, October 20, 2025
Duval Street

I Jeff Graves being authorized to act on behalf of and legally bind Mile O Events 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, alcoholic beverages, and dispensing of sale 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.

Signature of Witness

Signature of Applicant

Jeffrey W Grower

Print Name

4925

Date

Date