# <u>City of Key West</u> <u>Special Event Permit Application</u>

For assistance in filling out this application, please contact the City at (305) 809-3881 or via email at: event\_request@cityofkeywest-fl.gov

| 3  |   |
|--|---|
| Event Name: Back in Time Fundraiser  |   |
| Location: Key West Museum of Art and History   | at the Custom House/Clinton Place   |
| Event Date(s): 1/22/26 Mursday   | Event Start Time: 6:00PM  |
| Set-Up Date:   | Set-Up Time:9:00AM  |
| Break-Down Date: 1/22/26   | Break-Down Time: 9:00PM   |
| Number of Expected Attendees: 150  | Is the Event Open to the Public: Yes No   |
| Event Description: Provide a detailed narrative of the needed. For events with multiple sub-events, please | full scope of the event in the box. Use additional sheets if specify the date and time range for each.  |
| Ticketed fundraiser benefiting Key West Muse   | eum of Art and History at the Custom House.   |
| EVENT ORGANIZER INFORMATION  |   |
| Company or Organization Name Key West Art an   | d Historical Society  |
| 0 10 10  | Phone number <u>305-295-6616, 501</u>   |
| Mailing Address 281 Front Street,  |   |
| City Key West State FL Zip 33040   | Email cconvertitofarrar@kwahs.org   |
| Tax ID / EIN# Eve  | ent Website: kwahs.org/bit  |
| SECONDARY CONTACT INFORMATION  |   |
| Name Cori Convertito   | Phone number <u>305-295-6616, 507</u>   |
| Company or Organization Name KWAHS   |   |
| Email cconvertitofarrar@kwahs.org  |   |
| SPECIAL APPROVAL REQUIREMENTS (IF APPLIC   | ABLE)   |
| Noise Exemption Required: Yes Complete S   | Supplement A No 🗸   |
| Non-Profit Applicant or Benefit: Yes Compl   | ete Supplement B No   |
| Applicant(s) wishing to sell/consume alcoholic beverages on C  | Needs City Commission Approval No ity property must have approval by the City Commission through Resolutio and safety as determined by the Key West Police Department or City ovide liquor liability insurance. |

#### **INITIALS REQUIRED**

| Event Name: | Back in Time Fundraiser | Event Date: | 1/22/26 |
|-------------|-------------------------|-------------|---------|
|             |                         |             |         |

Application Form: All Applicant(s) must fill out the City of Key West (City) application form
provided to you by the Office of the City Manager. All applications are subject to approval at the
discretion of the City Manager and/or City Commission and must in the Office of the City
Manager 60 days prior to the event.

Applicant Printed Name: Michael F. Gieda Signature: Michael F. Gieda Signature: Michael F. Gieda Objett: 2025.10.08 13:41:34 -04/07

Liability Insurance: Applicant(s) 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 Workers' Compensation Coverage Employers Liability with minimum limits:

- \$1,000,000 injury by accident
- \$1,000,000 injury by disease
- \$1,000,000 Policy Limits 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.

Applicant Printed Name: Michael F. Gieda Signature: Michael F. Gieda Signature: Michael F. Gieda Digitally signed by Michael F. Digitally signed by Michael F.

3. Indemnification: The applicant shall indemnify and hold the City to harmless from all losses, claims, damages, liabilities, and expenses which maybe incurred by the City or which may be claimed against the City by any person, firm to the person or property f any person, firm, corporation, or entity which are consequent or arise from the activities of 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.

Applicant Printed Name: Michael F. Gieda Signature: Michael F. Gieda Objekt 2025, 10.06 13:42 05 -9-100

4. ADA: 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: Michael F. Gieda Signature: Gieda

Michael F.

Digitally signed by Michael Date: 2025.10.08 13:42:17

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: Michael F. Gieda Signature: Gieda

Michael F.

Digitally signed by Michael Date: 2025,10,08 13:42:30

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: Michael F. Gieda Signature: Gieda

Michael F.

Digitally signed by Michael Date: 2025.10.08 13:42:43

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.

Michael F.

Digitally signed by Michael Date: 2025.10.08 13:42:56

Applicant Printed Name: Michael F. Gieda Signature: Gieda

## **Event Screening Questionnaire**

| Event Name: Back in Time Fundraiser  | Event Date: 1/22/26                                |         |
|--|--|---------|
| Event Name: Bask in Time Fandraise.  | Event Date.  |         |
| 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" must be submitted with this application.  | entation in the permit or license application with | respect |
| VENDOR SALES   |  |         |
| 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 🗌    |
| SAFETY IF YES,   | 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 🔳    |
| 4. Will your event involve ANY of the following tents or structures?  Tents, Booths, Canopies or Podiums, Viewing Stands and Bracing, Stages, Risers or Air Support Structures   | Yes Complete Supplement D                          | No 🔳    |
| STREETS & SIDEWALKS IF Y   | 'ES, 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 🔳    |
|  |  |         |
| 8. Will your event take place in a City-owned Park, Recreation Center or Truman Waterfront?  | Yes Yes  | No 🗸    |
|  |  |         |

The applicant does acknowledge and hereby affirms that any and all information of this application and all of its supplements are accurate to the best of their knowledge. The applicant(s)/permittee agrees to assume full responsibility and liability for and indemnify and hold the City of Key West harmless from and against all liability, claims for damages, and suits for or by reason for an 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.

By checking "I agree", you agree and acknowledge your electronic signature is valid and bonding in the same force as a handwritten signature.

Date 10/8/2025

## Required - Recycling Plan

| Event Name: | Back in Time Fundraiser | Event Date: | 1/22/26 |
|-------------|-------------------------|-------------|---------|
|             |                         |             |         |

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 Michael F. Gieda
Phone Number 305-295-6616, 501

Email mgieda@kwahs.org
Number of people dedicated to recycling 4

### **INITIALS REQUIRED**

MFG

1. NON- ACCEPTABLE WASTE: No Plastic Bags, plastic cutlery, plastic straws, plastic cups, or polystyrene are allowed at events.

MFG

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.

MFG

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.

MFG

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.
- 2. 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

|  |  | 1/22/26   |
|--|--|---|
| Event Name:                            | Back in Time Fundraiser  | Event Date: 1/22/26   |
| Parking and traf<br>planners in traffi | fic congestion are consistently a concern of Key W<br>c 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 REQ                           |  |   |
| MFG                                    | <b>Communications:</b> Every event is required to transportation that will reduce vehicle traffic.   | These actions include:  |
|  | 1. Website(s)  | 3. Ticketholders  |
|  | 2. Email   | 4. Social Media   |
| MFG_                                   | <b>Opportunities:</b> Large Events are required to econgestions and parking issues. Your event we transportation or utilize transit friendly alternative and the second | vill be more successful by encouraging alternate  |
|  | X Encourage Walking  | Partner with Transit System/Buses   |
|  | X 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 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<br>Rules*      | No. of Parking<br>Spots Requested | No. of Days<br>Needed | Total Parking<br>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                |                                   |                       |                       |
| *Modification of rates or parking wai | vers can only be approv | red by City Commission.           | Total                 | None                  |

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

Event Name: Back in Time Fundraiser Event Date: 1/22/26

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**

X Attach Site Map Layout

X 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

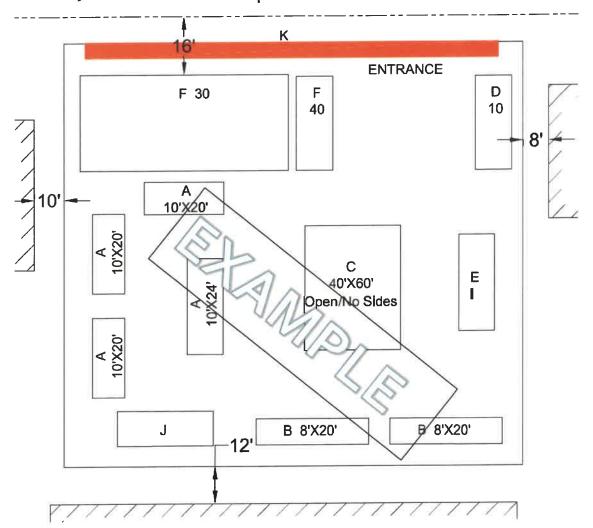
- F. Car Parking\*\*
- G. Bike Parking\*\*
- H. Roads Closed
- I. Stage Area
- J. Bounce House

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

\* Indicate Tent sizes

\*\* Indicate Quantity

## Maple Street



Code Section 26-192

| Event Name:   | Back in Time Fundraiser  | Event Date: 1/  | 22/26                                      |
|---|--|---|--|
| Excerpt from (                                      | City Code Sec. 26-192 Unreasonably excessive   | noise prohibited.   |  |
|   | o <u>ns</u> - Within a core commercial district as defined<br>ed on any property located therein shall be as fol   |   | n dBA and dBC sound                        |
| maximum leve<br>lease boundar                       | neasurement taken between ten (10) and twenty<br>els set out below. The measurement shall be take<br>y in the case of property which has been subdivic<br>operty at a location that is closest to the complai  | en from the sound source pro<br>ded by the execution of indivi    | perty line, or individua                   |
| a. Eig.<br>Sevent                                   | hty-five (85) dBA or ninety-four (94) dBC betwee<br>ty-five (75) dBA or eighty-four (84) dBC between   | n the hours of 11:00 a.m. and 1 the hours of 3:00 a.m. and 1      | nd 2:59 a.m. b.<br>0:59 a.m.               |
| unreasonable i<br>be made at the<br>excessive noise | tial or commercial district as defined in this articinoise made at or within 100 feet of the property e location of the complaint. The investigating of je, unless in his judgment a warning is sufficient twarning per offending person or establishment.   | line of the sound source. The<br>ficer shall issue a citation for | e decibel reading shall<br>unreasonably    |
| Commission.<br>exemption ap                         |  | ame location within 60 days                                       | ion from the City<br>s of the last noise   |
| Describe the F                                      | Potential Noise Sources: DJ playing music for the  | event.  |  |
| o you wish to                                       |  | ed City Commission Approv   | val No 🔳                                   |
| MFG 1. A  | applicant(s) has reviewed the City Code regardi<br>exemption from the noise control ordinance re<br>applications for noise exemptions must be rece   | quires approval from the Cit                                      | y Commission.                              |
|   | The processing fee for the application is \$93.88 ee in the Special Event Fee Schedule.  | , due upon submission of ap                                       | plication. Include this                    |
| n a   | Notice of the City Commission's proposed action<br>newspaper of general circulation at least five da<br>not some the same and occors and o | ys prior to the date of the C<br>upants located within a 100      | Commission meeting,<br>-foot radius of the |
| For more info                                       | rmation on Noise and Noise Exemptions, const   | ult the Special Event Guide                                       | and read the <u>City</u>                   |

City of Key West | 1300 White St. Key West, FL 33040 | (305)809-3881

## Supplement B – Non-Profit Verification

|         |        | a. Back in Time Fundraiser Event Date: 1/22/26   |
|---------|--------|--|
| Event N |        | e: Dack in Timo Fundaces   |
| Non-Pro | ofit C | Organization Name Key West Art and Historical Society  |
|         |        | 59-0660461 Representative Michael F. Gieda   |
| Purpose | of C   | Drganization   |
|         |        | 295-6616, 501 <sub>Email</sub> mgieda@kwahs.org  |
|         |        | nonprofit proceeds/donations, after payments of direct necessary expenses be used?   |
| Custom  | 1 Но   | use capital projects.  |
| INITIAL | LSR    | EQUIRED  |
| MFG     | 1.     | <b>Services Waived:</b> The first \$1,000.00 of costs as specified in Section 6-26 (d) of the Code of Ordinances may be waived for any Event Organizer or Sponsor organization which qualifies as a tax-exempt Non-profit organization according to State or Federal law. Acceptance of this waiver by such Event Organizer or Sponsor organization shall render the Special Event a public accommodation subject to Human Rights provision of Section 38-225. |
| MFG     | 2.     | <b>Approval</b> : Supplement B must be reviewed and approved for Non-profit waivers to be granted. Neither Completion nor Submission of this form guarantees a waiver will be granted.   |
| MFG     | 3.     | <b>Monies Received:</b> Within 30 days of the event completion the Event Organizer agrees to submit to the City Commission a letter from the Non-profit Organization receiving the waiver stating the amount of monetary donation received from the event.   |
| MFG     | 4.     | <b>Accounting</b> : Within 90 days following the Special Event, the Event Organizer or Sponsor organization will ensure that the Non-profit organization receiving the waiver submits to the City Commission an accounting of expenses and revenues incurred and generated during the event.   |

#### SIGNATURE AND ATTACHMENT REQUIRED

I hereby certify that the above-named Non-profit organization is a bona fide, in good standing, domestic civic, educational, charitable, fraternal, or religious organization under the laws of the State of Florida or with proper tax exemption status with the Internal Revenue Service; that the organization is the actual sponsor of the event described and that all the proceeds from the event, after necessary direct expenses, will be used for civic, educational, charitable or religious purpose.

I further certify that the answers to the above questions are correct and complete to the best of my knowledge and belief. I also understand that any organizations who fraudulently seek exemption shall be subjected to civil and criminal penalties provided for in Florida Statutes.

Provide a copy of your organization letter issued by the I.R.S. or Secretary of State verifying tax exempt status.

| By checking "I agree", you agree and acknow | /ledge | your electronic signature is valid and bonding in the 10/8/2025 |
|---|--------|---|
| same force as a handwritten signature.      | Date   | 10/8/2025   |

## Supplement C – Food & Safety

| Event Name: | Back in Time Fundraiser | Event Date: | 1/22/26 |
|-------------|-------------------------|-------------|---------|
|             |                         |             |         |

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.

| EVEN   | EVENT ACTIVITIES – Check all that apply to the Special Event   |  |  |  |  |
|--|--|--|--|--|--|
| Cookir   | ng:  | Electrical Power   | <u>Other</u>   |  |  |
|  | Deep Frying / Open Flame   | Generator  | Road Closure   |  |  |
|  | Charcoal Grill<br>Gas Grill<br>Food Warming Only<br>Catered Food   | 110AC / Extension CordsDC Power Structures:                    | Fog/Smoke MachineBubble MachinePyrotechnicsSpecial Effects |  |  |
| Alcoho   | ol To be Served By   | Stages / Risers / Canopies<br>Viewing Stands / Bracing         | Open Flame<br>Lasers                                       |  |  |
|  | Existing Licensed Establishment<br>Commercial Licensed Vendors<br>Non-profit Licensed Vendors  | X Seating Air Supported Bounce House Tents Greater than 200 SF | Confetti<br>Vehicle/Motorcycle Dem                         |  |  |
| INITI  | ALS REQUIRED   |  |  |  |  |
| 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 liquor license and provide liquor liability insurance. |  |  |  |  |  |
| MFG  | MFG  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.  |  |  |  |  |
| MFG  | 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.   |  |  |  |  |
| MFG  | 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. |  |  |  |  |
| MFG  | 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.  |  |  |  |  |

## ${\sf Supplement\,D-Tents\,\&\,Structures}$

| Event Name: Back in Time Fundraiser   |                                 | Event Date:                                | 1/22/26                                    |
|---|---------------------------------|--|--|
| This section will be reviewed by the Key West Fire and security needs may be required at the Special requirements that may be deemed necessary.   | and Police Dep<br>Event. The Fe | partments to detern<br>e Schedule may be r | nine what safety checks<br>evised based on |
| Please contact the following City representatives before con  | npleting your app               | lication:                                  |  |
| Fire Department and EMS – Chief Alan Ave<br>Police Department – LT Joseph Tripp (305)   |                                 | 9-3938                                     |  |
| Provide copy of Event Site Map/Layout   | Yes 🔳                           | No 🗌                                       |  |
| TENTS   |                                 |  |  |
| Total Number of Food/Beverage Vendor Tents:   | 0                               |  |  |
| Total Number of Merchandise Vendor Tents:   | 0                               |  |  |
| Tota  | . 0                             |  |  |
| lota  | ·                               | X .  |  |
| Tent Supplier Name NA   | Co                              | ntact Number <u>NA</u>                     |  |
| Size & Type of Tents: There is no plan to uti   | lize tents fo                   | r this event.                              |  |
|   |                                 |  |  |
| Decision of Florida Decision of Potentian   | ·for Tont Eshri                 | c. Yes $\square$                           | No 🔳                                       |
| Provide Certificate of Flame Resistance/Retardant   | Tor Tent Fabri                  | c. res                                     | 110  |
| Will there be any combustibles or flammable liquid  | ds under the te                 | nt? Yes                                    | No 🔳                                       |
| Will the sides of the tent be used? Yes* *Exit plans must be indicated on Site Map Layout.  | No [                            |  |  |
| STRUCTURES  |                                 |  |  |
| What structures will be erected? None   |                                 |  |  |
| What services was serviced and |                                 |  |  |
|   |                                 |  |  |
| Will structures be erected on any part of a street o  | r sidewalk?                     | Yes No                                     |  |
| For each structure, note number of footings, weig   | ht and dimensi                  | ions (L/W/H) below:                        |  |
|   |                                 |  |  |
|   |                                 |  |  |
|   |                                 |  |  |

# Supplement E – Street Closure

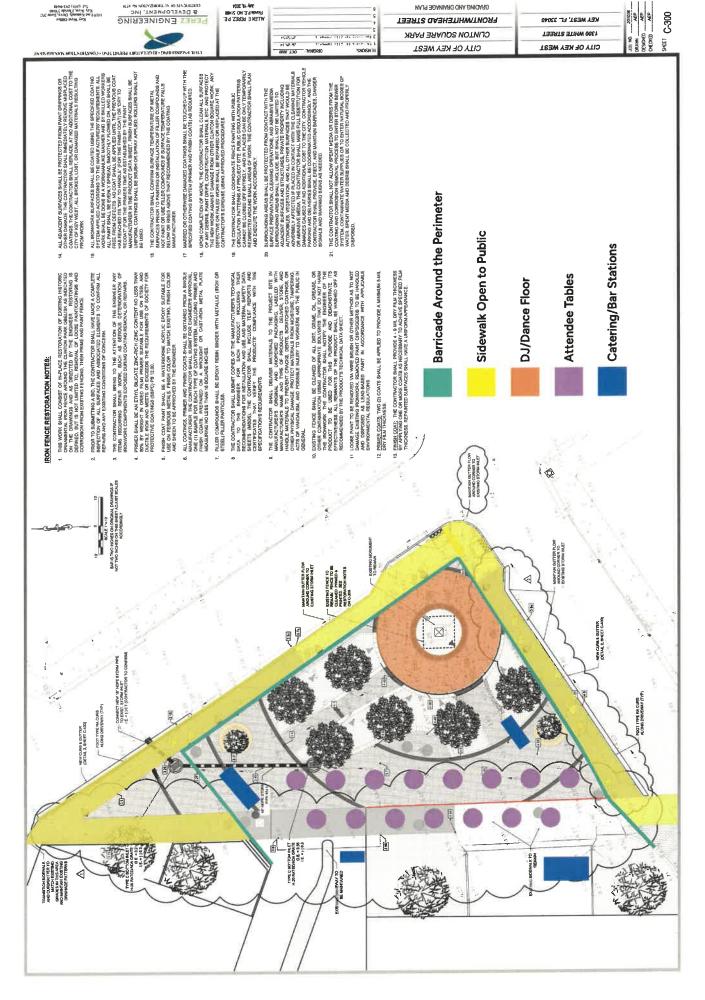
| Event N  | lame: Back in Time Fundraiser Event Date: 1/22/26  |  |  |  |
|--|--|--|--|--|
| STREET   | CLOSUREINFORMATION   |  |  |  |
|  | to be closed Front Street Block/Address Number(s) 200  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Closure Date(s) 1/22/2026 Time 9:00ANAM/PM to 11:00PM _AM/PM |  |  |  |  |
| INITIAL  | S REQUIRED   |  |  |  |
| MFG  | 1. Non-Profit Inclusion: Applicant(s) who are businesses or private persons who wish to close a City street must make an application jointly with a Non-profit organization. When an Event Organizer proposes a Special Event that will cause the closing of a city street or other public right-of-way, the Event Organizer must donate at least 25% of the Event Organizer's gross revenues or \$1000.00, whichever is greater, to at least one Non-profit organization. The Event Organizer must designate the Non-profit organization(s) on the application for the event. Each named Non-profit organization must provide the City Manager with a letter of agreement with the Event Organizer. |  |  |  |
| MFG<br>——  | 2. <b>Consent:</b> The Event Organizer must have neighboring businesses sign a petition of no objection to the street closure. A template consent form can be found in the Special Events Guide.   |  |  |  |
| MFG  | 3. ADA Restrooms: Whenever the Event Organizer of a Special Event provides temporary<br>bathroom facilities within the public right-of-way, at least five percent of those facilities or one<br>of those facilities, whichever is the greater number, shall be accessible to persons with physical<br>disability.  |  |  |  |
| MFG<br>——  | 4. Insurance: Typical insurance policies may not provide coverage for accidents that may occur off private property and in the City Right-of-way. Events taking place within City Right-of-Way require insurance in the amount of \$1M – liability and \$2M – aggregate.   |  |  |  |
| MFG  | 5. Public access: Pedestrians must be allowed access to the closed area free of charge.  |  |  |  |
| MFG<br>  | <ol> <li>Emergency Access: The closed street/roadway will immediately be available for<br/>emergency vehicles and vehicles within the close block.</li> </ol>  |  |  |  |
| SIGNAT   | TURE REQUIRED  |  |  |  |
| person ar  | ndersigned, agree to save and hold harmless, the City of Key West from all cost and damage to any nd/or property which is caused by any activity, condition, or event arising out of temporary use of the reet for the purpose of this Special Event.  |  |  |  |
|  | checking "I agree", you agree and acknowledge your electronic signature is valid and bonding in the ce as a handwritten signature.  Date 10/8/25   |  |  |  |

# Supplement F – City Property

| Event Name:    | В    | ack in Time Fundraiser   | Event Date:  | 1/22/26   |
|----------------|------|--|--|---|
| Event Guide.   | -    | erties that are available for event use, th  |  | are listed in the Special                                     |
| Which City Pro | ope  | rty do you wish to use? Clinton F  | 'lace  |   |
| Which Area(s)  | of t | the City Property do you wish to use?  | linton Place   |   |
|                |      | quired (Water and/or Electricity)? Yes   |  |   |
| INITIALS REC   | QUI  | RED  |  |   |
| MFG            | 1.   | The City makes no guarantees that the the dates requested. Submitting this a   |  |   |
| MFG —          | 2.   | Events taking place on City Property re<br>\$2M – aggregate.   | equire insurance in the amo                                | ount of \$1M — liability and                                  |
| MFG<br>——      | 3.   | Applicants wishing to sell/consume alo<br>by the City Commission via Resolution<br>control and safety as determined by th<br>Organizer must first have obtained a <u>lie</u> | and must hire an extra-dut<br>ne Key West Police Departm   | ty police officer(s) for crowo<br>nent or City Manager. Event |
| MFG            | 4.   | Prior to use of the requested facility, nonrefundable payment for use of the This payment shall be delivered to the 33040 at time of application. All check                  | e City Property, as determ<br>City Manager's Office at 130 | nined by the Fee Schedule<br>oo White St., Key West, FL       |
| MFG            | 5.   | All utility use must be coordinated thr<br>support the activity will be at the sole of<br>Utilities used by the Event Organizer wi   | cost of the Event Organizer                                | and must meet City Codes                                      |
| MFG            | 6.   | Ingress/egress by the Event Organizer  | shall be coordinated with th                               | ne City of Key West.  |
| MFG            | 7.   | The City property used must be main West may request Event Organizer to become unacceptable.   |  |   |
| MFG            | 8.   | No trash may be left on site. Use of prior approval is obtained from the City  |  | ers is not authorized unless                                  |
| MFG            | 9.   | No alcoholic beverages/non-prescript<br>Truman Waterfront without prior appre  |  |   |
| MFG<br>——      | 10.  | No hazardous material or waste shall<br>a Hazardous Waste Handling and Spill   |  |   |

| MFG         | 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.                                   |
|-------------|------|---|
| MFG<br>——   | 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 RI | EQUI | RED for Truman Waterfront Property  |
| or Use of T | rum  | an 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. |
| <u> </u>    | 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.  |
| <del></del> | 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.



DANIMG AND DRAINGHE PLAN



Department of State | Division of Corporations | Search Records | Search by Enlity Name |

## **Detail by Entity Name**

Florida Not For Profit Corporation
KEY WEST ART AND HISTORICAL SOCIETY, INC.

Filing Information

**Document Number** 

708495

FEI/EIN Number

59-0660461

Date Filed

02/19/1965

State

FL

Status

ACTIVE

Last Event

**AMENDMENT** 

Edd: #10111

VIAIPIADIAIPIAI

**Event Date Filed** 

04/17/2013

**Event Effective Date** 

NONE

Principal Address

281 FRONT STREET KEY WEST, FL 33040

Changed: 05/18/2000

**Mailing Address** 

281 FRONT STREET KEY WEST, FL 33040

Changed: 05/18/2000

Registered Agent Name & Address

Gieda, Michael

281 FRONT STREET KEY WEST, FL 33040

Name Changed: 03/31/2017

Address Changed: 02/05/2008

Officer/Director Detail
Name & Address

**Title Secretary** 

Starr, Emma 281 FRONT STREET KEY WEST, FL 33040

Title CEO

GIEDA, MICHAEL 281 FRONT STREET KEY WEST, FL 33040

Title President

Torregrosa , Enid 281 FRONT STREET KEY WEST, FL 33040

Title Treasurer

Hall, Jay 281 Front Street Key West, FL 33040

Title Second Vice President

Sam, Kaufman 281 Front Street Key West, FL 33040

Title First Vice President

John , O'Leary 281 Front Street Key West, FL 33040

### **Annual Reports**

| Report Year | Filed Date |  |
|-------------|------------|--|
| 2023        | 02/28/2023 |  |
| 2024        | 02/15/2024 |  |
| 2025        | 02/06/2025 |  |

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|                                      |                          |

Event Name: Back in Time Fundraiser Event Date: 1/22/2026

| Department             | Signature / Restrictions / Conditions |
|------------------------|---------------------------------------|
| Special Events Manager | Kelli Funkhouser                      |
| Code Compliance        | Chris Counsellor                      |
| Engineering            | Doug Bradshaw                         |
| Fire Department        |                                       |
| KW DOT                 |                                       |
| Parking                |                                       |
| Police Department      | JT                                    |
| Port & Marine Services | Steve McAlearney                      |
| Property Management    | Marcus Davila                         |
| Community Services     | Marcus Davila                         |
| Utilities              | Keely Kessler                         |
| Risk Management        | COI will be approved upon receipt     |
| Other                  |                                       |