# <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 (acityofkeywest-fl.gov

| Event Name: Rotary 4th of July 5K  |
|--|
| Location: 1801 White Street, Key West, - Edward B. Knight Pier 6:30 am   |
| Date(s): July 4th, 2025 Friday Hours of Operation: 6:00am - 10am   |
| Break Down Date: July 4th 2025 Number of Expected Attendees: 250   |
| Is the Event open to the Public? Yes  No   |
| 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.   |
| -see next page for description -   |
| EVENT ORGANIZER INFORMATION  |
| Company or Organization Name Rotary Club of Key West   |
| Name Krystal Thomas Phone number 30539440473   |
| Mailing Address PO Box 293   |
| City Key West State FL Zip 33040 Email krystal@krystalthomaskeywest.com  |
| Tax ID/EIN# 59-6152300   |
| SECONDARY CONTACT INFORMATION  |
| Name Troy Phillips Phone number +1 (504) 400-2376  |
| Company or Organization Name Rotary Club of Key West   |
| Email troydamon@gmail.com  |
| SPECIAL APPROVAL REQUIREMENTS (IF APPLICABLE)  |
| Noise Exemption Required: Yes Complete Supplement A No   |
| Non-Profit Applicant or Benefit: Yes Complete Supplement B No  |
| Alcoholic Beverages Sold/Served at Event: Yes Needs City Commission Approval No 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. |

### Rotary 5K Permit Description:

4th of July 5K race - managed by Mile Zero Events, benefitting The Rotary Club of Key West Scholarship Fund. The course set up begins at 5:30am and then the event set up begins at 6am. Race time is 7:30am sharp and is an up and back race along Atlantic & South Roosevelt. The race typically draws about 225- 250 participants each year and is wrapped by 10am.

| INITIALS REC           | QUIRED  |  |   |
|------------------------|---|--|---|
| Event Name:            | Rotary Club of Key West 4th of July 5K  | Event Date:  | July 4th 2025   |
| Ç                      | Application Form: All Applicant(s) must fill out the provided to you by the Office of the City Manager discretion of the City Manager and/or City Commit Manager 60 days prior to the event.  | . All applications are   | subject to approval at the  |
| ,                      | Applicant Printed Name: Krystal Thomas  | Signature: <i>K</i>  | nystal Thomas   |
| C                      | <b>Liability Insurance:</b> Applicant(s) will be required to of insurance during the Special Event. All insurance companies authorized to transact business within A.M. Best rating of A- or better.  | e coverages must be  | provided by insurance   |
| E<br>S<br>E<br>-       | Commercial General Liability with minimum limits Business Automobile Liability with minimum limit Statutory Workers' Compensation Coverage Employers Liability with minimum limits: \$1,000,000 injury by accident \$1,000,000 Policy Limits — Each Employee  |  |   |
| a<br>F<br>w<br>p<br>tl | f alcohol beverages will be sold at the event or if t<br>dmittance fee and alcoholic beverages will be ser<br>full Liquor Liability coverage with minimum limits<br>will not be acceptable. If the permittee will use the<br>providing and servicing the alcoholic beverages, the<br>hat this requirement is being met.   | ved, the permittee w<br>to \$1,000,000. Host l<br>services of a caterer<br>se City will honor evic   | ill be required to maintain<br>Liquor Liability coverage<br>and the caterer will be<br>lence from the caterer |
|                        | he City of Key West shall be named as an "Addition<br>eneral liability policy.  | onal Insured" on the p   | permittees commercial   |
| A                      | pplicant Printed Name: Krystal Thomas   | Signature:   | Knystal Thomas  |
| ci<br>ci<br>co<br>ao   | ndemnification: The applicant shall indemnify and aims, damages, liabilities, and expenses which make laimed against the City by any person, firm to the orporation, or entity which are consequent or aristivities or which damages/injuries are consequent or aristivities or which damages/injuries are consequent omply with all applicable laws, statutes, ordinance | aybe incurred by the person or property fe from the activities of the permiter | City or which may be any person, firm, of the permit holder tholders failure to                               |
| Α                      | pplicant Printed Name: Krystal Thomas   | Signature:   | Knystal Thomas  |

| 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: Krystal Thomas Signature: Knystal Thomas   |
| 5. | 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: Krystal Thomas Signature:  |
| 6. |  |
|    | Applicant Printed Name: Krystal Thomas Signature: Knystal Thomas   |
| 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: Krystal Thomas Signature: Knystal Thomas   |
|    |  |

Event Name: Rotary Club of Key West 4th of July 5K

### **Event Screening Questionnaire**

| The following questions will determine the correct application permit or license may be revoked if there has been misrepress 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 wit   | h respect                               |
|--|---|---|
| VENDOR SALES   |   | (A) 1 P                                 |
| 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   | 1000                                    |
| 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<br>or structures?<br>Tents, Booths, Canopies or Podiums, Viewing Stands<br>and Bracing, Stages, Risers or Air Support Structures   | Yes Complete Supplement D   | No 🗌                                    |
|  | ES, COMPLETE REQUIRED FORMS   |   |
| 5. Will your event require a stationary street closure   | Yes Complete Supplement E   | No 🔳                                    |
| (Block Party, etc.) or block sidewalk?   |   |   |
| <ul><li>(Block Party, etc.) or block sidewalk?</li><li>6. Will your event require a moving street closure (e.g. Race, Bike Rally, Parade)?</li></ul>   | Yes Complete Supplement E   | No 🗌                                    |
| 6. Will your event require a moving street closure   | Yes Complete Supplement E  Yes Complete Supplement E  | No 🔳                                    |
| <ul><li>6. Will your event require a moving street closure (e.g. Race, Bike Rally, Parade)?</li><li>7. Will your event require parking restrictions (i.e.</li></ul>  |   |   |
| <ul><li>6. Will your event require a moving street closure (e.g. Race, Bike Rally, Parade)?</li><li>7. Will your event require parking restrictions (i.e.</li></ul>  |   |   |
| <ul> <li>6. Will your event require a moving street closure (e.g. Race, Bike Rally, Parade)?</li> <li>7. Will your event require parking restrictions (i.e. clearing cars for parade)?</li> </ul>  | Yes Complete Supplement E   | No 🔳                                    |
| <ul> <li>6. Will your event require a moving street closure (e.g. Race, Bike Rally, Parade)?</li> <li>7. Will your event require parking restrictions (i.e. clearing cars for parade)?</li> <li>8. Will your event take place in a City-owned Park,</li> </ul>                                 | Yes Complete Supplement E  Yes Complete Supplement F  information of this application and all of its supplem grees to assume full responsibility and liability for an all liability, claims for damages, and suits for or by read or of the third persons for any and all cause or cause any act or omission or thing in any manner related to upon the part of the City their agents or employees. | No X  ents are ad ason for an es o said |

7/4/25

**Event Date:** 

### Required - Recycling Plan

Event Name: Rotary 4th of July 5K Event Date: 7/4/25

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 Krystal Thomas Phone Number 305-394-4073

Email krystal@krystalthomaskeywest.com Number of people dedicated to recycling 2

#### **INITIALS REQUIRED**

KT

KT

KT

KT

 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.

 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:**

- 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 <a href="mailto:recycle@cityofkeywest-fl.gov">recycle@cityofkeywest-fl.gov</a>

#### **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

| Event Name:   | Rotary 4th of July 5K   | Event Date:              | 7/4/25                |  |  |
|---|---|--------------------------|-----------------------|--|--|
| Parking and traffic congestion are consistently a concern of Key West residents. It is the City's goal to involve all event planners in traffic reduction as well as management. For more information consult the Special Events Guide. |   |                          |                       |  |  |
| INITIALS REC  | UIRED   |                          | A 15 15 15            |  |  |
| KT  | Communications: Every event is required to transportation that will reduce vehicle traffic 1. Website(s) 2. Email   |                          |                       |  |  |
| KT  | Opportunities: Large Events are required to explore opportunities to help minimize traffic congestions and parking issues. Your event will be more successful by encouraging alternate transportation or utilize transit friendly alternatives. Check opportunities you will explore. |                          |                       |  |  |
|   | X Encourage Walking   | Partner with Tra         | nsit System/Buses     |  |  |
|   | X Encourage Biking  | Partner with Tra         | nsit Friendly Hotels  |  |  |
|   | Providing Bike Security with Valet  | Partner with Res         | staurants/Bars        |  |  |
|   | Include Ride Service with VIP Passes  | Partner with Rid         | eshare/Taxi Companies |  |  |
|   | Provide Pre-Sale parking only   | Implement Shut           | tles                  |  |  |
|   | Premium parking prices  | Other:                   |                       |  |  |
| If Event Organi   | zare ar Vandare dacire to utiliza materad park  | ing spages or lets, nown |                       |  |  |

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           |                                   |                       |                       |

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: | Rotary 4th of July 5K | Event Date: | 7/5/25 |
|-------------|-----------------------|-------------|--------|
|             |                       |             |        |

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**

KT Attach Site Map Layout KT 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

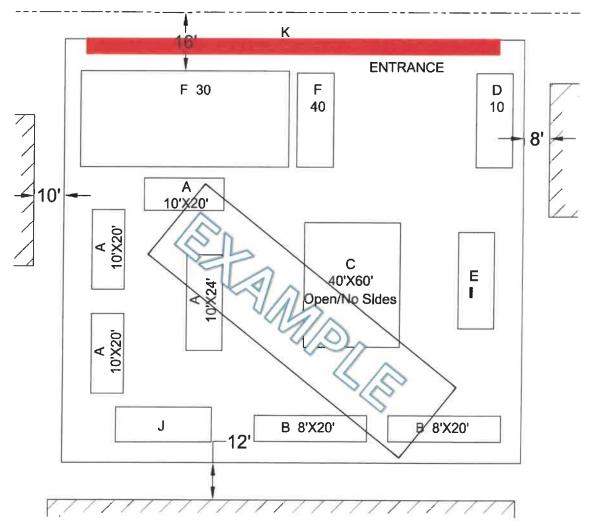
- F. Car Parking\*\*
- G. Bike Parking\*\*
- H. Roads Closed
- I. Stage Area
- J. Bounce House

- 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

| Even                        | t Name: Rotary 4th of July 5K   | Event Date: 7/4/25  |
|-----------------------------|---|---|
| Excerp                      | ot from City Code Sec. 26-192 Unreasonably exc  | essive noise prohibited.  |
|                             | limitations - Within a core commercial district as o<br>permitted on any property located therein shall be                                    | defined in this article, the maximum dBA and dBC sound as follows:  |
| maxim<br>lease b            |   | be taken from the sound source property line, or individual<br>ubdivided by the execution of individual leases, of the nois   |
|                             | a. Eighty-five (85) dBA or ninety-four (94) dBC be<br>Seventy-five (75) dBA or eighty-four (84) dBC be  |   |
| unreas<br>be mad<br>excessi | onable noise made at or within 100 feet of the pro<br>de at the location of the complaint. The investigat                                     | cient to cease the violation. There shall be no more than   |
| Comm<br>exemp               | that expect to exceed decibel levels set for the ission. Noise Exemptions cannot be issued for tion approval.  Dethe Potential Noise Sources: | eir area must get a Noise Exemption from the City the same location within 60 days of the last noise  |
| Do you                      | wish to apply for a Noise Exemption? Yes  | Need City Commission Approval No 🗸  |
| INITIA                      | ALS REQUIRED  |   |
| KT_                         |   | egarding Noise limitations and understands that an<br>ace requires approval from the City Commission.<br>he received 30 days before the event   |
| KT                          | <ol> <li>The processing fee for the application is \$ fee in the Special Event Fee Schedule.</li> </ol>                                       | 93.88, due upon submission of application. Include this   |
| <u>KT</u>                   | newspaper of general circulation at least f   | action on a Noise Exemption shall be published in a ive days prior to the date of the Commission meeting, d occupants located within a 100-foot radius of the to pay for the newspaper advertisement. |
|                             | re information on Noise and Noise Exemptions, ection 26-192   | consult the Special Event Guide and read the <u>City</u>  |

## ${\bf Supplement\,B-Non-Profit\,Verification}$

| Event Nam   | ne: Rotary Club of Key West 4th of July 5K   | Event Date: <u>7/4/25</u>   |  |  |
|---|--|---|--|--|
| Non-Profit Organization Name Rotary Club of Key West  |  |   |  |  |
| Tax ID/EIN #  | # 59 · ((152300 Representative Britt M   | yers  |  |  |
| Purpose of C  | Organization Service Organization  |   |  |  |
| Phone   | Email  |   |  |  |
| How will the  | e nonprofit proceeds/donations, after payments of direct ne  | cessary expenses be used?   |  |  |
| Edward B. k   | Knight Scholarship Fund - Monroe County Vocational Schol   | arship  |  |  |
| INITIALSR   | EQUIRED  |   |  |  |
|   | <b>Services Waived:</b> The first \$1,000.00 of costs as specified in Ordinances may be waived for any Event Organizer or Spotax-exempt Non-profit organization according to State or waiver by such Event Organizer or Sponsor organization shaccommodation subject to Human Rights provision of Section 1. | nsor organization which qualifies as a<br>Federal law. Acceptance of this<br>nall render the Special Event a public |  |  |
|   | <b>Approval</b> : Supplement B must be reviewed and approved f<br>Neither Completion nor Submission of this form guarantee   |   |  |  |
|   | Monies Received: Within 30 days of the event completion to the City Commission a letter from the Non-profit Organ the amount of monetary donation received from the event  | ization receiving the waiver stating  |  |  |
| 4. Accounting: 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.   |  |   |  |  |
| SIGNATUR  | E 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 acknowledge your electronic signature is valid and bonding in the ame force as a handwritten signature.  Date 4/22/25  |  |   |  |  |

### Supplement C – Food & Safety

| Event Name: | Rotary 4th of July 5K | Event Date: | 7/4/25 |
|-------------|-----------------------|-------------|--------|
|             |                       |             |        |

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   | <u>Other</u>   |
| Deep Frying / Open Flame   | KT Generator   | Road Closure   |
| Charcoal Grill Gas Grill Food Warming Only KT Catered Food                                   | KT110AC / Extension Cords KTDC Power  Structures:  | Fog/Smoke MachineBubble MachinePyrotechnicsSpecial Effects |
| Alcohol To be Served By  | Stages / Risers / Canopies<br>Viewing Stands / Bracing   | Open Flame<br>Lasers                                       |
| Existing Licensed EstablishmentCommercial Licensed VendorsNon-profit Licensed Vendors        | Seating Air Supported Bounce House Tents Greater than 200 SF   | Confetti<br>Vehicle/Motorcycle Dem                         |
| INITIALS REQUIRED  | The state of the s | A Section of the Section                                   |
| Alcohol: Applicant(s) wishing approval by the City Commission crowd control and safety as de | ng to sell/consume alcoholic beverages<br>ion by Resolution and must hire an extr<br>etermined by the Key West Police Depa<br>cense and provide liquor liability insura  | a-duty police officer(s) for<br>rtment or City Manager.    |
|  | , a KWFD Fire Watch must be provided shall be provided near cooking equipm   |  |
|  | not interfere with pedestrian moveme<br>how a minimum setback of six (6) feet f  |  |
|  | dicate where structures, tents, stages, c<br>so identify distances to the nearest buil<br>seating/chair arrangement.   |  |
|  | ust be disposed of properly. Vendors for<br>ure of a portion of the Event deposit.   | und dumping cooking oil                                    |

## Supplement D – Tents & Structures

| Event Name: Rotary Club of Key West  | Event Date:     | 7/4/25             |  |
|--|-----------------|--------------------|--|
| 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<br>Police Department – LT Joseph Tripp (305) 809-1027   | 3               |                    |  |
| Provide copy of Event Site Map/Layout Yes No   |                 |                    |  |
| TENTS  |                 |                    |  |
| Total Number of Food/Beverage Vendor Tents: 1  |                 |                    |  |
| Total Number of Merchandise Vendor Tents:  |                 |                    |  |
| Total:   |                 |                    |  |
| Tent Supplier Name   | Numahan         |                    |  |
| Tent Supplier Name Contact    Mile Zero Events Set Un Tents for check in + F   |                 |                    |  |
| Size & Type of Tents: Mile Zero Events Set Up Tents for check in + F  1 for food, 1 for medals   | Totally Club of | Rey West Tellt X 2 |  |
| 1 101 1000, 1 101 medals   |                 |                    |  |
|  |                 |                    |  |
| Provide Certificate of Flame Resistance/Retardant for Tent Fabric.   | Yes 🗌           | No 🔳               |  |
| Will there be any combustibles or flammable liquids under the tent?  | Yes 🗌           | No 🔳               |  |
| Will the sides of the tent be used?  *Exit plans must be indicated on Site Map Layout.   |                 |                    |  |
| STRUCTURES   |                 |                    |  |
| What structures will be erected? N/A   |                 |                    |  |
|  |                 |                    |  |
| Will structures be erected on any part of a street or sidewalk? Yes  | ☐ No [          | ŷ                  |  |
| For each structure, note number of footings, weight and dimensions (L/   | W/H) below:     |                    |  |
|  |                 |                    |  |
|  |                 | -                  |  |

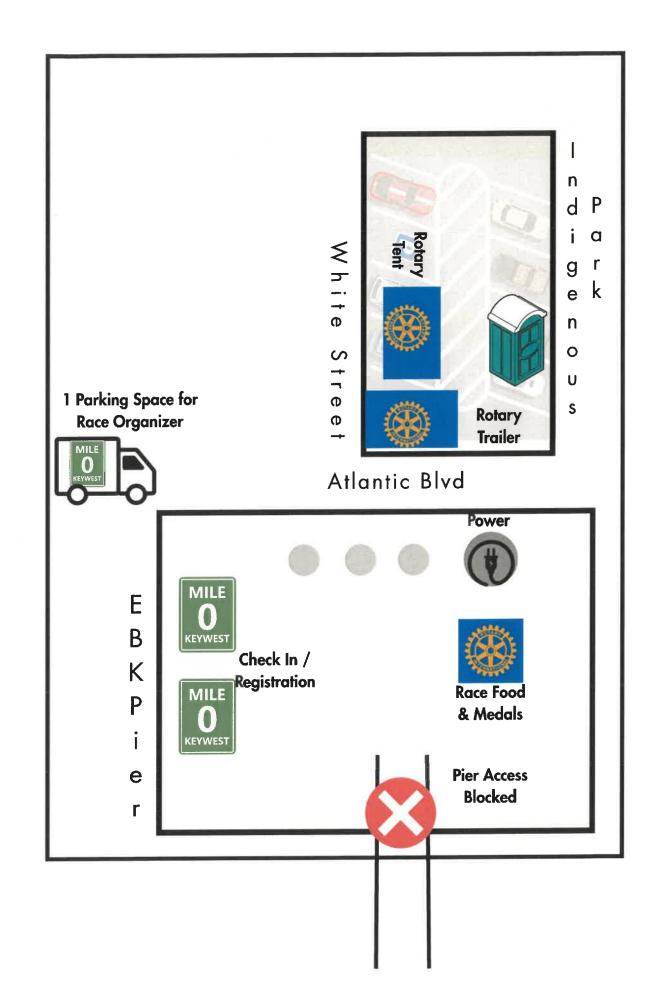
# ${\sf Supplement}\, E-{\sf Street}\, {\sf Closure}$

| Event Name: Rotary Club of Key West Event Date: 7/4/25  |   |  |  |   |  |  |
|---|---|--|--|---|--|--|
| STREE   | T CLOSURE INFORMATION   | # 5 3 15 15 15 24  |  |   |  |  |
| Street(s) to be closed Atlantic Blvd Block/Address Number(s)  |   |  |  |   |  |  |
| Cross-Streets: between White and Steven   |   |  |  |   |  |  |
| Closure [   | Date(s) 7/4/25  | Time <b>7:20am</b>   | AM/PM to _ <b>7 : 40</b> a   | <b>m</b> AM/PM  |  |  |
| INITIAL   | SREQUIRED   |  | All property and the   |   |  |  |
| KT  | City street must make a<br>Organizer proposes a Sp<br>right-of-way, the Event<br>revenues or \$1000.00, w<br>Organizer must designa   | pplicant(s) who are businesse<br>in application jointly with a No<br>becial Event that will cause the<br>Organizer must donate at least<br>thichever is greater, to at least<br>the the Non-profit organization<br>dization must provide the City  | on-profit organization.<br>e closing of a city stree<br>st 25% of the Event Or<br>t one Non-profit organ<br>n(s) on the application  | When an Event<br>et or other public<br>ganizer's gross<br>ization. The Event<br>for the event. Each |  |  |
| <u>KT</u> <u>KT</u> <u>KT</u> <u>KT</u>   | to the street closure. At a street closure. At a street closure. At a street closure. At a street closure with a street closure with a street closure of those facilities, which disability.  4. Insurance: Typical insur off private property and require insurance in the a street closure. Public access: Pedestria closure closure. The street closure closure closure. | ganizer must have neighboring template consent form can be ever the Event Organizer of a in the public right-of-way, at lever is the greater number, shows a policies may not provide in the City Right-of-way. Eve amount of \$1M – liability and ns must be allowed access to the closed street/roadway will im vehicles within the close bloc | e found in the Special E<br>Special Event provides<br>east five percent of the<br>hall be accessible to pe<br>e coverage for accident<br>nts taking place within<br>\$2M – aggregate.<br>the closed area free of | events Guide.  Is temporary  Is temporary  Is that may occur  In City Right-of-Way  Icharge.        |  |  |
| SIGNAT  | URE REQUIRED  |  |  |   |  |  |
| We the undersigned, agree to save and hold harmless, the City of Key West from all cost and damage to any person and/or property which is caused by any activity, condition, or event arising out of temporary use of the above street for the purpose of this Special Event. |   |  |  |   |  |  |
| By checking "I agree", you agree and acknowledge your electronic signature is valid and bonding in the same force as a handwritten signature.  Date05/09/2025   |   |  |  |   |  |  |

## Supplement F – City Property

| Event Na                    | me:     | Event Date: 7/4/25   |  |  |
|-----------------------------|---------|--|--|--|
| A list of Cit<br>Event Guid |         | perties that are available for event use, their amenities and Use Fees are listed in the Special   |  |  |
| Which City                  | / Prop  | erty do you wish to use <b>Edward B. Knight Pier Entrance</b>  |  |  |
| Which Are                   | a(s) of | the City Property do you wish to use? Edward B. Knight Pier  |  |  |
| Will Utilitie               | es be r | equired (Water and/or Electricity)? Yes No   |  |  |
| INITIALS                    | REQU    | IRED TO THE REPORT OF THE PARTY |  |  |
| <i>KT</i>                   | 1.      | The City makes no guarantees that the requested City Property and Area will be available or the dates requested. Submitting this application acts as a request, not a guarantee.   |  |  |
| KT<br>KT                    | 2.      | Events taking place on City Property require insurance in the amount of $\$1M - liability$ and $\$2M - aggregate$ .  |  |  |
|                             | 3.      | Applicants wishing to sell/consume alcoholic beverages on City property must have approva by the City Commission via 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. Event Organizer must first have obtained a <u>liquor license</u> and liquor liability insurance.   |  |  |
| <u>KT</u>                   | 4.      | Prior to use of the requested facility, the applicant must provide a refundable deposit and nonrefundable payment for use of the City Property, as determined by the Fee Schedu This payment shall be delivered to the City Manager's Office at 1300 White St., Key West, FL 33040 at time of application. All checks shall be made payable to City of Key West.   |  |  |
| <i>KT</i> —                 | 5.      | All utility use must be coordinated through City of Key West. Any modification to utilities to support the activity will be at the sole cost of the Event Organizer and must meet City Codes. Utilities used by the Event Organizer will be charged at current rates or agreed upon method.  |  |  |
| -KT                         | 6.      | Ingress/egress by the Event Organizer shall be coordinated with the City of Key West.  |  |  |
| KT<br>—<br>KT               | 7.      | The City property used must be maintained in an orderly and neat condition. City of Key West may request Event Organizer to improve conditions of site within reason if conditions become unacceptable.  |  |  |
|                             | 8.      | No trash may be left on site. Use of City of Key West dumpsters is not authorized unless prior approval is obtained from the City Manager.   |  |  |
| KT                          | 9.      | No alcoholic beverages/non-prescription drugs or food may be brought onto or sold on Truman Waterfront without prior approval from the City Commission.  |  |  |
| <del>X</del> /              | 10.     | No hazardous material or waste shall be used or stored on the premises without submitting a Hazardous Waste Handling and Spill Plan to the City of Key West.   |  |  |

| DigiSign Verified | d - fe058126-a0af-485c-8ecc-73a41972871d   |
|-------------------|--|
|                   | 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.  |
| <u>KT</u>         | 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.                           |
| INITIALSRI        | EQUIRED for Truman Waterfront Property   |
| For Use of T      | ruman Waterfront, the Event Organizer is subject to the following additional provisions:   |
|                   | 13. Event Organizer is responsible for obtaining necessary permits required by any other<br>agencies pertaining to this Special Event such as Federal, State, Local, Coast Guard, Navy,<br>Marine Sanctuary, etc. and is responsible for providing proof of permit prior to entering into<br>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.   |
| _                 | <ol> <li>Event Organizer shall provide sufficient personnel to ensure proper and safe operation of the<br/>activity.</li> </ol>  |
|                   | 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.   |







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

#### **Detail by Entity Name**

Florida Not For Profit Corporation ROTARY CLUB OF KEY WEST, FLORIDA, INC.

Filing Information

**Document Number** N0000005436 FEI/EIN Number 59-6152300 **Date Filed** 08/14/2000

FL State

Status ACTIVE

AMENDMENT Last Event **Event Date Filed** 08/14/2018 **Event Effective Date** NONE

Principal Address 1107 KEY PLAZA

#294

KEY WEST, FL 33040

Changed: 03/06/2016

**Mailing Address** 1107 KEY PLAZA

#294

KEY WEST, FL 33040

Changed: 03/06/2016

**Registered Agent Name & Address** 

KNOWLES, LISA 1107 KEY PLAZA #294

KEY WEST, FL 33040

Name Changed: 03/06/2016

Address Changed: 03/06/2016

Officer/Director Detail Name & Address

Title President

Caso, Joe 1107 KEY PLAZA BOX #294 KEY WEST, FL 33040

Title Director

Steele, Sam

1107 KEY PLAZA BOX #294 KEY WEST, FL 33040

Title Past-President

Myers, Britt 1107 KEY PLAZA BOX #294 KEY WEST, FL 33040

Title Other

OROPEZA, RACHEL 1107 KEY PLAZA BOX #294 KEY WEST, FL 33040

Title Treasurer

Brandenburg , Sean 1107 KEY PLAZA #294 KEY WEST, FL 33040

Title Secretary

White , Charlene 1107 KEY PLAZA #294 KEY WEST, FL 33040

Title Director

Occhiuto, Danielle 1107 KEY PLAZA #294 KEY WEST, FL 33040

Title Director

McDowell, Megan 1107 KEY PLAZA #294 KEY WEST, FL 33040

Title Director

Beeman, Jason 1107 KEY PLAZA #294 KEY WEST, FL 33040

Title Director

Weekley, Alton 1107 KEY PLAZA #294 KEY WEST, FL 33040

Title Director

Thomas, Krystal 1107 KEY PLAZA #294 KEY WEST, FL 33040

Title Director

Guerra, Krystin 1107 KEY PLAZA #294 KEY WEST, FL 33040

#### Annual Reports

 Report Year
 Filed Date

 2023
 01/30/2023

 2024
 03/06/2024

 2025
 02/13/2025

#### Document Images

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| 01/28/2002 ANNUAL REPORT         | View image in PDF format |
| 01/17/2001 ANNUAL REPORT         | View Image in PDF format |
| 08/14/2000 Domestic Non-Profit   | View image in PDF format |
|                                  |                          |

Event Name: Rotary 4<sup>th</sup> of July 5K Event Date: 7/4/2025

| Department             | Signature / Restrictions / Conditions   |
|------------------------|---|
| Special Events Manager | Kellí Funkhouser                        |
| Code Compliance        | Sophia Doctoche                         |
| Engineering            | David Allen                             |
| Fire Department        | See Conditional Memo from Dereck Berger |
| KW DOT                 |   |
| Parking                |   |
| Police Department      | Alex Gaufillet                          |
| Port & Marine Services |   |
| Property Management    | Rayler.                                 |
| Community Services     | m                                       |
| Utilities              | M Willman                               |
|                        |   |
| Other:                 |   |







#### THE CITY OF KEY WEST

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

To: The Rotary Club of Key West (krystal@krystalthonmaskeywest.com)

From: Lieutenant Dereck Berger

Date: 5/13/25

Reference: Rotary 4th of July 5k

This office reviewed the special event application for the Rotary 4<sup>th</sup> of July 5k, to be held at White St Peir from 7:30am-10am.

Based on the application the following conditions apply:

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



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