

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

Event Name: Irish Kevin's 5k/10k Shamrock Shuffle

Location: Irish Kevin's 211 Duval Street

Event Date(s): 3/14/26 Saturday

Event Hours: 7am-12pm

Set-Up Date: 3/14/26

Set-Up Time: 6am

Break-Down Date: 3/14/26

Break-Down Time: 12pm

Number of Expected Attendees: 700

Is the Event Open to the Public: Yes ☒ No ☐

Event Description: Provide a narrative description of the full scope of the event with as much detail as possible in the box, use additional sheets as needed. For multiple sub events, specify date and time range of each.

Celebrating our 13th year of supporting local charities and ringing in St. Patrick's Day, the 2026 Irish Kevin's 10k/5k will once again donate 100% to charities. We will benefit MARC House + 1 more local organization this year which is TBD. Last year we awarded over \$27,000 to two local charities. This is a family friendly event that starts and ends at Irish Kevin's.

EVENT ORGANIZER INFORMATION

Company or Organization Name On Pointe Entertainment

Name Liz Love

Phone number 479-200-4689

Mailing Address 211 Duval Street 33040

lizlovekw@gmail.com

City Key West State FL Zip _____ Email _____

Tax ID / EIN# 30-0303620

Event Website: _____

SECONDARY CONTACT INFORMATION

Name Daylin Starks

Phone number 734-564-3756

Company or Organization Name On Pointe Entertainment

Email dailyn@irishkevins.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.

INITIALS REQUIRED

Event Name: IK5K

Event Date: 3/14/26

1. **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: Elizabeth Love

Signature: 

2. **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: Elizabeth Love


Signature: 

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: Elizabeth Love

Signature: 


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: Elizabeth Love Signature: 

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: Elizabeth Love Signature: 

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: Elizabeth Love 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: Elizabeth Love Signature: 

Event Screening Questionnaire

Event Name: IK5K

Event Date: 3/14/26

The following questions will determine the correct application supplements that will be required for your event. Any permit or license may be revoked if there has been misrepresentation in the permit or license application with respect to the nature and location of the activity. If you answer "Yes" to any question next to a Supplement, that Supplement must be submitted with this application.

VENDOR SALES

- | | | |
|---|--|-----------------------------|
| 1. Will ANY alcoholic beverage be sold or served? | Yes <input checked="" type="checkbox"/> Needs City Commission Approval | No <input type="checkbox"/> |
| 2. Will ANY food be prepared or served? | Yes <input checked="" type="checkbox"/> Complete Supplement C | No <input type="checkbox"/> |

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 <input type="checkbox"/> Complete Supplement C | No <input checked="" type="checkbox"/> |
| 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 <input checked="" type="checkbox"/> Complete Supplement D | No <input type="checkbox"/> |

STREETS & SIDEWALKS

IF YES, COMPLETE REQUIRED FORMS

- | | | |
|---|---|--|
| 5. Will your event require a stationary street closure (Block Party, etc.) or block sidewalk? | Yes <input checked="" type="checkbox"/> Complete Supplement E | No <input type="checkbox"/> |
| 6. Will your event require a moving street closure (e.g. Race, Bike Rally, Parade)? | Yes <input checked="" type="checkbox"/> Complete Supplement E | No <input type="checkbox"/> |
| 7. Will your event require parking restrictions (i.e. clearing cars for parade)? | Yes <input type="checkbox"/> Complete Supplement E | No <input checked="" type="checkbox"/> |

- | | | |
|---|--|--|
| 8. Will your event take place in a City-owned Park, Recreation Center or Truman Waterfront? | Yes <input type="checkbox"/> Complete Supplement F | No <input checked="" type="checkbox"/> |
|---|--|--|

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 8/19/25

Required – Recycling Plan

Event Name: IK5K

Event Date: 3/14/26

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 Elizabeth Love

Phone Number 479-200-4689

Email lizlovekw@gmail.com

Number of people dedicated to recycling 6

INITIALS REQUIRED

LL

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

LL

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.

LL

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.

LL

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

Due Date
(Self
filling)

DAY OF EVENT:

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 recycle@cityofkeywest-fl.gov.

Required – Event Transportation Planning

Event Name: IK5K

Event Date: 3/14/26

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 REQUIRED

LL

Communications: Every event is required to provide communications about modes of transportation that will reduce vehicle traffic. These actions include:

1. Website(s)
2. Email
3. Ticketholders
4. Social Media

LL

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.

☒ Encourage Walking

☒ Encourage Biking

☐ Providing Bike Security with Valet

☐ Include Ride Service with VIP Passes

☐ Provide Pre-Sale parking only

☐ Premium parking prices

☐ Partner with Transit System/Buses

☐ Partner with Transit Friendly Hotels

☐ Partner with Restaurants/Bars

☐ Partner with Rideshare/Taxi Companies

☐ Implement Shuttles

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 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				

*Modification of rates or parking waivers can only be approved by City Commission.

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: IK5K

Event Date: 3/14/26

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

LL Attach Site Map Layout

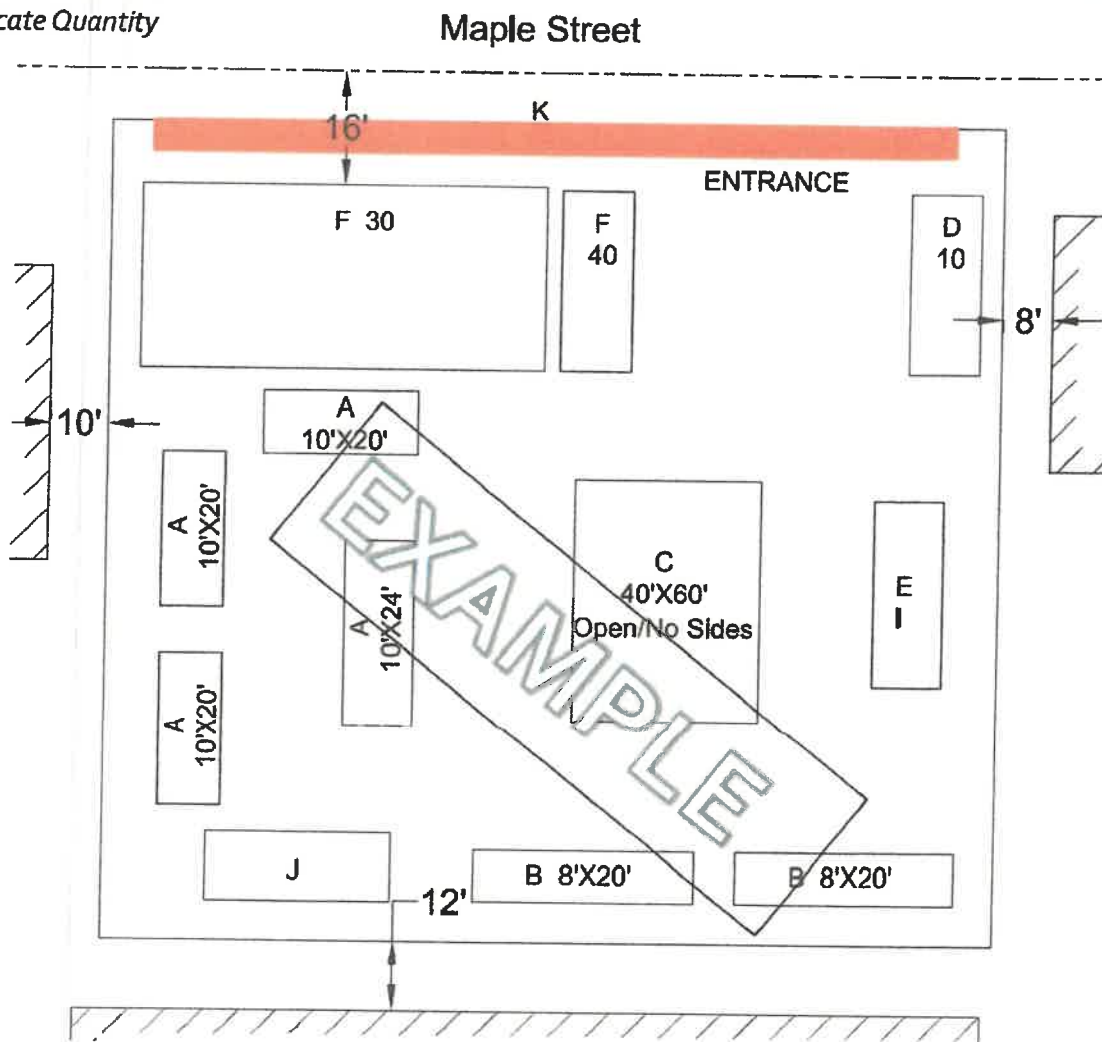
LL Attach Impacted Streets Map

Event Site Map Layout Legend:

- | | | |
|------------------------------|-------------------|-------------------------|
| A. Food/Bev. Vendor Tents* | F. Car Parking** | K. Podiums |
| B. Merchandise Vendor Tents* | G. Bike Parking** | L. Fire Lane (RED LINE) |
| C. Seating Tents* | H. Roads Closed | M. Label Street(s) |
| D. Toilets ** | I. Stage Area | N. Other: _____ |
| E. Amplified Music | J. Bounce House | O. Other: _____ |

* Indicate Tent sizes

** Indicate Quantity



Special Event Permit Application

Supplement A - Noise

Event Name: IK5K

Event Date: 3/14/26

Excerpt from City Code Sec. 26-192. - Unreasonably excessive noise prohibited.

Noise limitations - Within a core commercial district as defined in this article, the maximum dBA and dBC sound levels permitted on any property located therein shall be as follows:

The average measurement taken between ten (10) and twenty (20) seconds shall be no greater than the maximum levels set out below. The measurement shall be taken from the sound source property line, or individual lease boundary in the case of property which has been subdivided by the execution of individual leases, of the noise generating property at a location that is closest to the complainant's property line:

- a. Eighty-five (85) dBA or ninety-four (94) dBC between the hours of 11:00 a.m. and 2:59 a.m. b. Seventy-five (75) dBA or eighty-four (84) dBC between the hours of 3:00 a.m. and 10:59 a.m.

In any residential or commercial district as defined in this article, a decibel meter shall be used for a complaint of unreasonable noise made at or within 100 feet of the property line of the sound source. The decibel reading shall be made at the location of the complaint. The investigating officer shall issue a citation for unreasonably excessive noise, unless in his judgment a warning is sufficient to cease the violation. There shall be no more than a total of one warning per offending person or establishment.

Events that expect to exceed decibel levels set for their area must get a Noise Exemption from the City Commission. Noise Exemptions cannot be issued for the same location within 60 days of the last noise exemption approval.

Describe the Potential Noise Sources: Awards Presentation

Do you wish to apply for a Noise Exemption? Yes ☐ Need City Commission Approval No ☒

INITIALS REQUIRED

- LF 1. 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
- LF 2. The processing fee for the application is \$93.88, due upon submission of application. Include this fee in the Special Event Fee Schedule.
- LF 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 proposed event. The applicant is required to pay for the newspaper advertisement.

For more information on Noise and Noise Exemptions, consult the Special Event Guide and read the [City Code Section 26-192](#)

Event Name: <u>IK5K</u>	Event Date: <u>3/14/26</u>
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Non-Profit Organization Name MARC House +1 TBD (waiting to see how budget cuts affect NP's)Tax ID/EIN # 59-1031546 Representative Becki BalcerPurpose of Organization To provide life services for adults throughout Monroe Co with developmental & intellectual disabilities.Phone 305-294-9526 Email becki.balcer@marchouse.org

How will the nonprofit proceeds/donations, after payments of direct necessary expenses be used?

Help promote March is for MARC initiative, inclusion will allow the message of inclusiveness as well as services to reach a larger, diverse audience**INITIALS REQUIRED**

- LL 1. **Services Waived:** 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.
- LL 2. **Approval:** 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.
- LL 3. **Monies Received:** 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.
- LL 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.

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 acknowledge your electronic signature is valid and bonding in the same force as a handwritten signature. Date 8/19/25

Special Event Permit Application

Supplement C – Food & Safety

Event Name: IK5K

Event Date: 3/14/26

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.

EVENT ACTIVITIES – Check all that apply to the Special Event

Cooking:

☐ Deep Frying / Open Flame

☐ Charcoal Grill

☐ Gas Grill

☐ Food Warming Only

☐ Catered Food

Electrical Power

☐ Generator

☒ 110AC / Extension Cords

☐ DC Power

Structures:

☒ Stages / Risers / Canopies

☐ Viewing Stands / Bracing

Other

☒ Road Closure

☐ Fog/Smoke Machine

☐ Bubble Machine

☐ Pyrotechnics

☐ Special Effects

Alcohol To be Served By

☒ Existing Licensed Establishment

☐ Commercial Licensed Vendors

☐ Non-profit Licensed Vendors

☒ Seating

☐ Air Supported Bounce House

☐ Tents Greater than 200 SF

☐ Open Flame

☐ Lasers

☐ Confetti

☐ Vehicle/Motorcycle Demo

INITIALS REQUIRED

LL

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.

LL

Applicant must have a liquor license and provide liquor liability insurance.

LL

2. Cooking Safety: If cooking, a KWFD Fire Watch must be provided and fire extinguisher(s) with a minimum rating of 3A40BC shall be provided near cooking equipment.

LL

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.

LL

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.

LL

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.

Special Event Permit Application

Supplement D – Tents & Structures

Event Name: IK5K

Event Date: 3/14/26

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

Provide copy of Event Site Map/Layout

Yes ☒

No ☐

TENTS

Total Number of Food/Beverage Vendor Tents:

Total Number of Merchandise Vendor Tents:

Total: _____

Tent Supplier Name _____ Contact Number _____

Size & Type of Tents: _____

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?

Yes* ☐

No ☐

***Exit plans must be indicated on Site Map Layout.**

STRUCTURES

What structures will be erected? 16 x 20 stage

Will structures be erected on any part of a street or sidewalk?

Yes ☒

No ☐

For each structure, note number of footings, weight and dimensions (L/W/H) below:

Special Event Permit Application

Supplement E – Street Closure

Event Name: IK5K

Event Date: 3/14/26

STREET CLOSURE INFORMATION

Street(s) to be closed Duval Block/Address Number(s) 200 blk

Cross-Streets: between Greene and Caroline

Closure Date(s) 3/14 Time 5am AM/PM to 12pm AM/PM

INITIALS REQUIRED

LL

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.

LL

2. **Consent:** 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.

LL

3. **ADA Restrooms:** Whenever the Event Organizer of a Special Event provides temporary bathroom facilities within the public right-of-way, at least five percent of those facilities or one of those facilities, whichever is the greater number, shall be accessible to persons with physical disability.

LL

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.

LL

5. **Public access:** Pedestrians must be allowed access to the closed area free of charge.

LL

6. **Emergency Access:** The closed street/roadway will immediately be available for emergency vehicles and vehicles within the close block.

SIGNATURE 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. Date 8/19/25

Special Event Permit Application

Supplement F – City Property

Event Name: IK5K

Event Date: 3/14/26

A list of City Properties that are available for event use, their amenities and Use Fees are listed in the Special Event Guide.

Which City Property do you wish to use? _____

Which Area(s) of the City Property do you wish to use? _____

Will Utilities be required (Water and/or Electricity)? Yes ☐ No ☒

INITIALS REQUIRED

- _____ 1. The City makes no guarantees that the requested City Property and Area will be available on the dates requested. Submitting this application acts as a request, not a guarantee.
- _____ 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 approval 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 [liquor license](#) and liquor liability insurance.
- _____ 4. Prior to use of the requested facility, the applicant must provide a refundable deposit and a nonrefundable payment for use of the City Property, as determined by the Fee Schedule. 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.
- _____ 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.
- _____ 6. Ingress/egress by the Event Organizer shall be coordinated with the City of Key West.
- _____ 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.
- _____ 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.
- _____ 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.

- ____ 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.



10







MONROE ASSOCIATION FOR REMARCABLE CITIZENS

Diana Flenard
Executive Director

Mark Stanton
President
Board of Directors

P. O. Box 428
Key West, Florida 33041-0428
305-294-9526 phone
305-292-0078 fax

To Whom it May Concern:

MARC is happy to announce that it will be the official charity partner of Irish Kevin's Shamrock Shuffle for 2026!

MARC Inc. provides around life services for adults throughout Monroe County Florida with Developmental and Intellectual Disabilities.

We are excited to be included in this year's Shamrock Shuffle which will help to promote our March is for MARC initiative. March is Developmental Disabilities Awareness Month. Our inclusion in the Shamrock Shuffle allows our message of inclusiveness as well as our services to reach a larger, diverse audience.

Please feel free to contact me with any questions.

Becki Balcer
PR, Events, and Fundraising Coordinator
MARC, Inc.
305.294.9526 xt 25
becki.balcer@marchouse.org
www.marchouse.org

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

MARC is a tax-exempt, non-profit agency designated as 501(c) (3) by the IRS
IRS Tax ID# 59-1031546



Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248336501
Jan. 26, 2009 LTR 4168C E0
59-1031546 000000 00 000
00013536
BODC: TE

MONROE ASSOCIATION FOR RETARDED
CITIZENS INC
PO BOX 428
KEY WEST FL 33041-0428



002407

Employer Identification Number: 59-1031546
Person to Contact: Ms. Holland
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your request of Jan. 14, 2009, regarding your tax-exempt status.

Our records indicate that a determination letter was issued in September 1981, that recognized you as exempt from Federal income tax, and discloses that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Michele M. Sullivan

Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations I



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by FEI/EIN Number](#) /

Detail by FEI/EIN Number

Florida Not For Profit Corporation

MONROE ASSOCIATION FOR RETARDED CITIZENS, INC.

Filing Information

Document Number	711570
FEI/EIN Number	59-1031546
Date Filed	10/05/1966
State	FL
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	06/16/1977
Event Effective Date	NONE

Principal Address

1401 SEMINARY
KEY WEST, FL 33040

Changed: 01/05/2010

Mailing Address

P.O. BOX 428
KEY WEST, FL 33041

Changed: 02/19/2009

Registered Agent Name & Address

Zuelch, Kevin
24 ARBUTUS DR
KEY WEST, FL 33040

Name Changed: 01/07/2020

Address Changed: 01/07/2020

Officer/Director Detail

Name & Address

Title TD

ZUELCH, KEVIN
24 ARBUTUS DR
Key West, FL 33040

Title PD

STANTON, MARK W
1227 FLAGLER AVE
KEY WEST, FL 33040

Title SD

HAM, SUSAN
2315 STAPLES AVE.
KEY WEST, FL 33040

Title VP

Shultz, Christopher
1025 Roberts Lane
Key, FL 33040

Title EXECUTIVE DIRECTOR

FLENARD, DIANA
1401 SEMINARY ST
KEY WEST, FL 33040

Annual Reports

Report Year	Filed Date
2024	01/25/2024
2025	02/07/2025
2025	06/17/2025

Document Images

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<u>03/27/1996 -- ANNUAL REPORT</u>	View image in PDF format
<u>01/30/1995 -- ANNUAL REPORT</u>	View image in PDF format

Special Event Permit Application

Department Approvals

Event Name: Irish Kevin's 5K/10K Shamrock Shuffle

Event Date: 3/14/2026

Department	Signature / Restrictions / Conditions
Special Events Manager	<i>Kelli Funkhouser</i>
Code Compliance	<i>Chris Counsellor</i>
Engineering	<i>Doug Bradshaw</i>
Fire Department	Dereck Berger emailed Conditional Memo
KW DOT	
Parking	
Police Department	<i>Alex Gauffillet</i>
Port & Marine Services	<i>Steve McAlearney</i>
Property Management	<i>[Signature]</i>
Community Services	<i>Marcus Davila</i>
Utilities	<i>Keely Kessler</i>
Risk Management	COI will be approved upon receipt
Other	



THE CITY OF KEY WEST

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

To: On Point Entertainment (Liz Love) 479-200-4689

From: Lieutenant Dereck Berger

Date: 9/10/2025

Reference:

This office reviewed the special event application for the Irish Kevins 5k/10k Shamrock Shuffle event to be held on Duval St. on March 14, 2026, from 7am-12pm.

The following conditions apply:

- **Road closures need to allow one lane open for emergency vehicle.**
 - Closing and/or altering of roads and traffic for the event that may hinder the response of emergency vehicles.
 - High potential for this event to cause strain on Fire and EMS resources due to the participants falling ill or becoming injured while participating.
- Previous events of this nature have required the emergency response of Fire and Rescue units. **Event organizer is responsible for an EMS rescue Gator (2) personnel @ \$75.00 an hour per person. They will be present for the entire event to monitor all participants of this competitive endurance event.**
- **Applicant is responsible for reaching out if the event is cancelled or if there are any changes.**

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

Key to the Caribbean – average yearly temperature 77 ° Fahrenheit.

326E LS3M W3X