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: 31st Annual Hog Trot 5K Location: Hogs Breath Saloon 400 Front Street, Key West FI 33040 Event Hours: 8am-9:30am Event Date(s): Saturday November 29 2025 Set-Up Date: Saturday November 29, 2025 Set-Up Time: 5am Break-Down Date: Saturday November 29 2025 Break-Down Time: 10:30am Number of Expected Attendees: 400 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. 31st Annual Hot Trot 5K Run Walk benifitting SPCA EVENT ORGANIZER INFORMATION: Company or Organization Name Hogs Breath Saloon 850 428 7132 Name Jason Thompson Mailing Address 400 Front Street City Key West State Fl Zip ___ Email jasonte hogsbronth. com Event Website: www.hogsbreath.com Tax ID / EIN# __ SECONDARY CONTACT INFORMATION Phone number 317-294-3622 Name Jeff Graves Company or Organization Name Mile 0 Events, LLC Email Jeff@VisionEventManagement.com SPECIAL APPROVAL REQUIREMENTS (IF APPLICABLE) No la we don't need Complete Supplement A Noise Exemption Required: Yes Alcoholic Beverages Sold/Served at Event: Yes Needs City Commission Approval No E 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.

2.	Application Form: All Applicant(s) must fill out the City of K provided to you by the Office of the City Manager. All applic discretion of the City Manager and/or City Commission and Manager 60 days prior to the event. Applicant Printed Name: Therefore Sign Liability Insurance: Applicant(s) will be required to maintain of insurance during the Special Event. All insurance coverage companies authorized to transact business within the State A.M. Best rating of A- or better.	ature:	subject to a e Office of t	approval at the
2.	Liability Insurance: Applicant(s) will be required to maintain of insurance during the Special Event. All insurance coverage companies authorized to transact business within the State	n the follow es must be	ving types a	nd amounts
	of insurance during the Special Event. All insurance coverage companies authorized to transact business within the State	es must be	ving types a	nd amounts
	A.M. best fating of A- or better.	or Florida	and must m	y insurance
=	Commercial General Liability with minimum limits of \$1,000	.000		
	Business Automobile Liability with minimum limits of \$1,000			
	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 requ	ired to pay ar
	admittance fee and alcoholic beverages will be served, the p			
	Full Liquor Liability coverage with minimum limits to \$1,000,			, ,
	will not be acceptable. If the permittee will use the services of			
	providing and servicing the alcoholic beverages, the City will	nonor evid	ience from	the caterer
	that this requirement is being met.			
	The City of Key West shall be named as an "Additional Insure general liability policy.	ed" on the I	permittees	commercial
	Applicant Printed Name: JASON Thompson Signa	ature:	Fir (
3. 1	Indemnification: The applicant shall indemnify and hold the	City to har	mless from	all losses,
	claims, damages, liabilities, and expenses which maybe incur	rred by the	City or which	ch may be
(claimed against the City by any person, firm to the person or corporation, or entity which are consequent or arise from the	property	any person	, TIFM, .ta.la.la.la.

comply with all applicable laws, statutes, ordinances and regulations.

Applicant Printed Name: JASON Thompson

activities or which damages/injuries are consequent or arise from permit holders failure to

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: Jaser Thompson Signature: 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.
	Andrew Prince de Novembre de la Constantina del Constantina de la Constantina de la Constantina de la Constantina de la Constantina del Constantina de la Co
	Applicant Printed Name: Jasus Thompson Signature: 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: Jased Thompson Signature: Signature:
7.	Payment Terms: The City Manager is authorized to provide reasonable terms for time and manner of payment. If the event sponsor fails to pay the full costs at the time determined by the City Manager, or if no such deadline is established, then within 30 days after the event the City may impose an interest charge on the amount due at the rate of one and one-half percent (1.5%) per month.
	Applicant Printed Name: Jason Thereson Signature: 7

Event Screening Questionnaire

Event Name: Hog Trot 5k	Event Date: 11/29/25					
The following questions will determine the correct application permit or license may be revoked if there has been misreprese to the nature and location of the activity. If you answer "Yes" to must be submitted with this application.	ntation in the permit or license application with	respect				
VENDOR SALES WITH A PROPERTY OF THE PROPERTY O	PERCENTAGE PRODUCTION OF THE AMERICAN PROPERTY.					
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	12/14/19				
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 AND	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 🔳				
BLANNING UP TO THE PROPERTY OF THE PARTY OF	Note the character production and the stre	Wis Control				
Recreation Center or Truman Waterfront?		Ŀ				
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 ame force as a handwritten signature. Date 7/30/25						

Required - Recycling Plan

Event Name:	Hog Trot 5K	Event Date:	11/29/25

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.

	1000	St. 18 St	
RECYCL	ING POIN	T OF CON	TACT

Name Jason Thomason	Phone Number 850 428 7132
Email jason@Hogsbreath.com	Number of people dedicated to recycling 0

INITIALS REQUIRED



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



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



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

RECYCLING TIMELINE CONTROL OF THE PROPERTY OF

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@cityofkevwest-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 recycle@cityofkeywest-fl.gov.

Required - Event Transportation Planning

Event Name:	Hog Trot 5K	Event Date:	11/29/25
lanners in traffi	fic congestion are consistently a concern of Key Wic reduction as well as management. For more info	est residents. It is the Citres rmation consult the Spec	ty's goal to involve all event ial Events Guide.
INITIALS REO	UIRED ***		
	Communications: Every event is required to transportation that will reduce vehicle traffic.		
	1. Website(s)	3. Ticketholders	•
	2. Email	4. Social Media	
<u> </u>	Opportunities: Large Events are required to congestions and parking issues. Your event was transportation or utilize transit friendly alternative and the congestion of the co	vill be more successful b	y encouraging alternate
	Encourage Walking	Partner with Tra	ansit System/Buses
	Encourage Biking	Partner with Tra	ansit Friendly Hotels
	Providing Bike Security with Valet	Partner with Re	staurants/Bars
	Include Ride Service with VIP Passes	Partner with Ric	leshare/Taxi Companies
	Provide Pre-Sale parking only	Implement Shut	ttles
	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 Rules*	No. of Parking Spots Requested	No. of Days Needed	Total Parking Cost
Residential Permit Spaces	Not allowed			27402
Unmetered Street Parking	No Cost			
Park N Ride Garage	\$48/day			
Metered Street Parking	\$20/day			
Truman Waterfront Park	\$20/day	()	1	
Smathers Beach	\$20/day	1.7	18	
Angela Firehouse Parking Lot	\$20/day	1	()	
Simonton Beach Parking Lot	\$20/day	10	A	
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:	Hog Trot 5K	Event Date:	11/29/25

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

Attach Site Map Layout

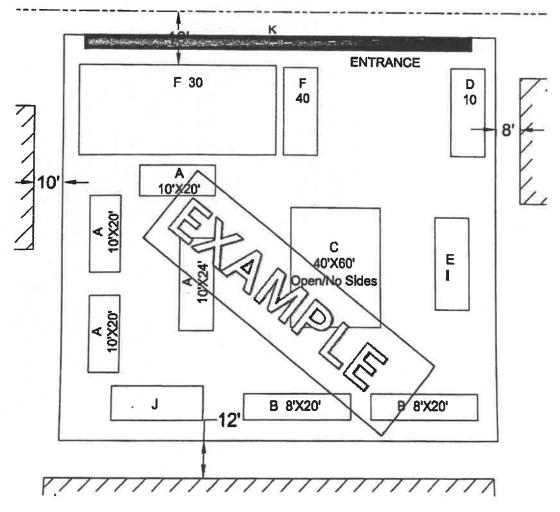
Course Map Attached
Attach Impacted Streets Map

Event Site Map Layout Legend:

A.	Food/Bev. Vendor Tents*	F.	Car Parking**	К.	Podiums
B.	Merchandise Vendor Tents*		Bike Parking**		Fire Lane (RED LINE)
	Seating Tents*	H.	Roads Closed		Label Street(s)
	Toilets **	l.	Stage Area		Other:
	Amplified Music	J.	Bounce House	0.	Other:
*	Indicate Tent since				

Indicate Tent sizes

Maple Street



^{**} Indicate Quantity

Code Section 26-192

Supplement A - Noise

Event	Name: rog flot ak	Event Date:	11/29/25
Excerpt	from City Code Sec. 26-192 Unreasonabl	y excessive noise prohibited.	
Noise lir levels pe	<u>mitations</u> - Within a core commercial distric ermitted on any property located therein sh	t as defined in this article, the maximal be as follows:	oum dBA and dBC sound
lease bo	rage measurement taken between ten (10) Im levels set out below. The measurement Dundary in the case of property which has b Ding property at a location that is closest to	shall be taken from the sound source een subdivided by the execution of inc	property line or individua
	a. Eighty-five (85) dBA or ninety-four (94) Seventy-five (75) dBA or eighty-four (84) dl	dBC between the hours of 11:00 a.m. BC between the hours of 3:00 a.m. an	and 2:59 a.m. b. d 10:59 a.m.
be made excessiva total of	esidential or commercial district as defined anable noise made at or within 200 feet of the at the location of the complaint. The inverse noise, unless in his judgment a warning is of one warning per offending person or established expect to exceed decibel levels set for	he property line of the sound source. I stigating officer shall issue a citation j s sufficient to cease the violation. The blishment. or their area must get a Noise Exem	The decibel reading shall for unreasonably re shall be no more than ption from the City
Commis	ssion. Noise Exemptions cannot be issue	d for the same location within 60 da	ys of the last noise
exempt	ion approval.		
Describe	e the Potential Noise Sources:		
		Yes Need City Commission Appr	roval No
INITIA	LS REQUIRED AND THE RESERVE AN	有关的有效的现在分词	
*(Applicant(s) has reviewed the City Co exemption from the noise control or Applications for noise exemptions m 	dinance requires approval from the (Tity Commission.
8	2. The processing fee for the application fee in the Special Event Fee Schedule		application. Include this
\$	 Notice of the City Commission's proposed event. The applicant is required. 	east five days prior to the date of the ers and occupants located within a 10	Commission meeting, po-foot radius of the
For more	e information on Noise and Noise Exempt	ions, consult the Special Event Guid	e and read the <u>City</u>

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

Event Nam	ne: Hay Trot 5K	Event Date: 11 12/25
Non-Profit	Organization NameFlorita	Keys SPLA
Tax ID/EIN	#_65-0891544F	Representative Jenn: for Rockford
Purpose of	Organization Humane tre	at most of all animals through compassionale ca
		nail jenniter pflesperrorg
		payments of direct necessary expenses be used?
Food	supplies a care of shell	tranimals
INITIALS	REQUIRED	
1.	Ordinances may be waived for any E tax-exempt Non-profit organization	o of costs as specified in Section 6-26 (d) of the Code of event Organizer or Sponsor organization which qualifies as a according to State or Federal law. Acceptance of this ponsor organization shall render the Special Event a public Rights provision of Section 38-225.
<u>X</u> 2.		viewed and approved for Non-profit waivers to be granted. of this form guarantees a waiver will be granted.
3.		the event completion the Event Organizer agrees to submit the Non-profit Organization receiving the waiver stating eceived from the event.
_10 4.	organization will ensure that the No	ng the Special Event, the Event Organizer or Sponsor n-profit organization receiving the waiver submits to the City ses and revenues incurred and generated during the event.
SIGNATUR	RE AND ATTACHMENT REQUIRED	and or other states and the states are states as the states are states are states as the states are states are states as the states are
educational, exemption s described an	, charitable, fraternal, or religious organ tatus with the Internal Revenue Service	rganization is a bona fide, in good standing, domestic civic, ization under the laws of the State of Florida or with proper tax; that the organization is the actual sponsor of the event after necessary direct expenses, will be used for civic,
and belief. I	tify that the answers to the above ques also understand that any organizations penalties provided for in Florida Statut	tions are correct and complete to the best of my knowledge s who fraudulently seek exemption shall be subjected to civil es.
Provide a co _l	py of your organization letter issued by	the I.R.S. or Secretary of State verifying tax exempt status.
By che	cking "I agree", you agree and ackno s a handwritten signature.	wledge your electronic signature is valid and bonding in the Date

Supplement C – Food & Safety

Event Name:	Hog Trot 5K	Event Date:	11/29/25

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	CONTRACTOR OF THE STATE OF THE
Cooking:	Electrical Power	<u>Other</u>
Deep Frying / Open Flame	× Generator	X Road Closure
Charcoal Grill Gas Grill Food Warming Only Catered Food	110AC / Extension CordsDC Power Structures:	Fog/Smoke MachineBubble MachinePyrotechnicsSpecial Effects
Alcohol To be Served By	Stages / Risers / Canopies Viewing Stands / Bracing	Open Flame Lasers
 Existing Licensed Establishment Commercial Licensed Vendors Non-profit Licensed Vendors 	Seating Air Supported Bounce House Tents Greater than 200 SF	ConfettiVehicle/Motorcycle Demo
INITIALS REQUIRED - ALCOHOLOGICAL	Managari (Mariana)	
approval by the City Commiss crowd control and safety as de	ng to sell/consume alcoholic beverages sion by Resolution and must hire an extr etermined by the Key West Police Depa icense and provide liquor liability insura	a-duty police officer(s) for rtment or City Manager.
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.		
3. Sidewalks: Structures must s	t not interfere with pedestrian moveme how a minimum setback of six (6) feet t	nt on the sidewalk. The from the property lines.
4. Special Event Site Map: In be located. The layout must al seating will be provided, show	dicate where structures, tents, stages, or identify distances to the nearest buit seating/chair arrangement.	cooking equipment, etc. will lidings and property line. If
5. Cooking Oil: Cooking oil must be disposed of properly. Vendors found dumping cooking oil improperly will result in forfeiture of a portion of the Event deposit.		

Supplement D – Tents & Structures

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

Supplement E – Street Closure

Event Name: Hog	Trot 5K		Event Date:	11/29/25	
STREET CLOSURE			Reference in the large	e produce de	Service Service
Street(s) to be close	Front Street	Block/	Address Number(s)		
Cross-Streets: betw	Duvol street	an	Tifts street		
Closure Date(s) 11	/29/25	Time 5am	AM/PM to	0:30am	_AM/PM
INITIALS REQUIRE	District of the property	Chief thurster western		ever kind of	erteresis.
City si Orgar right- reven Orgar name the Ev 2. Conse to the 3. ADA bathr of the disabi 4. Insura off pri requir 5. Public 6. Emer	Profit Inclusion: Applicative the must make an applicative proposes a Special of-way, the Event Organizes or \$1000.00, whiche sizer must designate the d Non-profit organization and the extra the Event Organizer. The Event Organize extreet closure. A temple Restrooms: Whenever the comfacilities within the exe facilities, whichever is litty. Ance: Typical insurance is access: Pedestrians must be access: Pedestrians must be gency vehicles and vehicles and vehicles and vehicles.	lication jointly with a Event that will cause nizer must donate at lever is greater, to at lever is greater number at lever is greater number, at lever is greater number, and of \$1M - liability are ust be allowed access and street/roadway will	Non-profit organizathe closing of a city east 25% of the Eve est one Non-profit or ion(s) on the application(s) on the application be found in the Special Event profit least five percent, shall be accessible ide coverage for acceptants taking place with a special Event profit least five percent in the Special Event profit least five percent is the coverage for acceptants taking place with \$2M — aggregate to the closed area from mediately be available.	ation. When a street or other organization. The control of the con	n Event er public s gross The Event event. Each ement with no objection uide. eary ties or one th physical
CICNATUREDED	IIDEO MARIANTE A	SA CONTRACTOR OF THE PARTY	de Si la constitución		He device
SIGNATURE REQU		hamalaga tha City - 4	Way West from 511	net and dage	aga ta pay
person and/or prope	l, agree to save and hold erty which is caused by a purpose of this Special	ny activity, condition	, or event arising ou	t of temporar	y use of the
By checking "I same force as a han	agree", you agree and a dwritten signature.	acknowledge your el Date	ectronic signature is 3。 しい	s valid and bo	nding in the

Supplement F – City Property

Event N	ame: _	Event Date:
A list of C Event Gu	ity Propide.	perties that are available for event use, their amenities and Use Fees are listed in the Special
Which Cit	ty Prope	erty do you wish to use?
Which Ar	ea(s) of	the City Property do you wish to use?
		equired (Water and/or Electricity)? Yes No No
INITIAL	SREQU	IRED
	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 <u>liquor license</u> 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.
<u> </u>	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 RE	QUI	RED for Truman Waterfront Property
for Use of Ti	uma	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.
	14.	Event Organizer must take part in pre- and post-activity walk-through inspections with the City of Key West point of contact, or designee.
	15.	. Event Organizer must provide the City of Key West with a detailed schedule for activities.
	16	. City of Key West personnel shall be always allowed access to the site.
	17.	Event Organizer shall provide sufficient personnel to ensure proper and safe operation of the activity.
	18.	Event Organizer may not stay overnight on Truman Waterfront without prior approval from the City of Key West.
	19.	. Any use of NOAA property or seawall must be coordinated with directly with NOAA.
	20	. Unfettered access to Navy, NOAA and State Park property must be maintained at all time
	21.	. Use of the inner basin for any activities is not authorized.



2025 Hogs Trot Course Map





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/08/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: Keri Devine PHONE 404 497-PRODUCER PHONE (A/C, No. Extl): 404 497-7500 E-MAIL ADDRESS: kdevine@mcgriff.com McGriff, a Marsh & McLennan Agency LLC Company (A/C, No): 3400 Overton Park Drive SE Suite 300 Atlanta, GA 30339 NAIC # INSURER(S) AFFORDING COVERAGE 11515 INSURER A :QBE Specialty Insurance Company INSURED INSURER B: Hog's Breath Saloon, LLC INSURER C: Westgate HB, LLC Central Florida Investments, Inc. INSURER D 2801 Old Winter Garden Road Ocoee, FL 34761 INSURER E : INSURER F: **CERTIFICATE NUMBER: 4BJ6QVG9 REVISION NUMBER:** COVERAGES THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. POLICY EFF POLICY EXP ADDL SUBR LIMITS POLICY NUMBER LTR TYPE OF INSURANCE 01/31/2025 01/31/2026 2,000,000 EACH OCCURRENCE \$ X COMMERCIAL GENERAL LIABILITY 100,000 PREMISES (Ea occurrence) \$ CLAIMS-MADE X OCCUR **EXCLUDED** Liquor Liability- \$2M/\$2M \$ Х MED EXP (Any one person) 2,000,000 Х PERSONAL & ADV INJURY \$ 4,000,000 GENERAL AGGREGATE \$ GEN'L AGGREGATE LIMIT APPLIES PER: 4,000,000 X Loc PRODUCTS - COMP/OP AGG \$ POLICY Aggregate Per Policy
COMBINED SINGLE LIMIT
(Ea accident) 10.000.000 \$ OTHER: AUTOMOBILE LIABILITY BODILY INJURY (Per person) \$ ANY AUTO OWNED SCHEDULED **BODILY INJURY (Per accident)** \$ AUTOS ONLY HIRED AUTOS ONLY AUTOS NON-OWNED AUTOS ONLY PROPERTY DAMAGE \$ (Per accident \$ \$ UMBRELLA LIAB EACH OCCURRENCE OCCUR **EXCESS LIAB** AGGREGATE \$ CLAIMS-MADE \$ DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Re: Hog Trot 5K Run & Walk (11/29/2025) - Hog's Breath Salon of Key West, 400 Front Street, Key West, FL 33040 City of Key West is included as Additional Insured as respects insured's ongoing & completed operations for General Liability as required by written contract. Where Additional Insured status is given, the General Liability coverage provided said Additional Insured is primary and non-contributory over any other in force and collectible coverage as required by written contract. CANCELLATION **CERTIFICATE HOLDER** SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

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AUTHORIZED REPRESENTATIVE

City of Key West PO Box 1409 Key West, FL 33040



Department of State / Division of Corporations / Search Records / Search by FEI/EIN Number /

Detail by FEI/EIN Number

Florida Not For Profit Corporation

FLORIDA KEYS SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS, INC.

Filing Information

Document Number N99000000602

FEI/EIN Number 65-0891564

Date Filed 01/27/1999

State FL

Status ACTIVE

Last Event AMENDMENT

Event Date Filed 11/21/2022

Event Effective Date NONE

Principal Address

5711 COLLEGE ROAD KEY WEST, FL 33040

Changed: 02/14/2019

Mailing Address

5711 COLLEGE ROAD KEY WEST, FL 33040

Changed: 02/14/2019

Registered Agent Name & Address

Fox-Royer, Tammy 5711 COLLEGE ROAD KEY WEST, FL 33040

Name Changed: 03/21/2019

Address Changed: 03/21/2019

Officer/Director Detail
Name & Address

Title Executive Director

Fox-Royer, Tammy 19616 Canal Dr Sugaloaf, FL 33042

Title President

Johnson, Jeffrey 1125 Von Phister Street Key West, FL 33040

Title Secretary

Jamison, Amy 2604 Patterson Avenue Key West, FL 33040

Title Member

Snow, Lurana S, Hon. 30836 Delgado Ln Big Pine Key, FL 33042

Title Member

Benkoczy, Jim 27016 Dolphin Road Ramrod Key, FL 33042

Title Member

Schreck, Carol PO Box 4298 Key West, FL 33041

Title Treasurer

TURNER, SUE 6800 MALONEY AVE. #47 Key West, FL 33040

Title VP

WALKER, LINDA 63 TWO TURTLES LANE KEY WEST, FL 33040

Title Member

EATON, DOUGLAS, Dr. 3810 CINDY AVENUE KEY WEST, FL 33040

Title Member

Eadie, Gayle 53 Spoonbill Way Key West, FL 33040

Title Member

Fisher, Shannon 2645 Gulfview Dr Key West, FL 33040

Title Member

Klitenick, Richard 2916 Harris Ave Key West, FL

Title Member

Held, Cory 5711 College Rd Key West, FL 33040

Title Member

Kaufman, Sam 5711 College Rd, Key West, FL, USA Key West, FL 33040

Annual Reports

Report Year	Filed Date
2023	03/14/2023
2024	02/02/2024
2025	04/16/2025

Document Images

04/16/2025 ANNUAL REPORT	View image in PDF format
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01/27/1999 Domestic Non-Profit	View image in PDF format



THE CITY OF KEY WEST

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

RELEASE AND INDEMNIFICATION
Hog's Breath Saloon
31st Annual Hog Trot 5K
Saturday, November 29, 2025
400 Front Street - Duval Street

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

Haf Delio	J 73 F
Signature of Witness	Signature of Applicant
LISA P. DEMO	JASON B. Thompson
Print Name	Print Name
8.14.25	8/14/25
Date	Date

Event Name: 31st Annual Hog Trot 5K Event Date: 11/29/2025

Department	Signature / Restrictions / Conditions
Special Events Manager	Kellí Funkhouser
Code Compliance	Chris Counsellor
Engineering	Doug Bradshaw
Fire Department	Dereck Berger emailed Conditional Memo
KW DOT	
Parking	
Police Department	Alex Gaufillet
Port & Marine Services	Steve McAlearney
Property Management	Steve McAlearney Mayler:
Community Services	Marcus Davila
Utilities	M. Willman
Risk Management	Laura Bringle emailed approval
Other	







THE CITY OF KEY WEST

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

To: Hogs Breath Saloon (jeff@visioneventmanagement.com)

From: Lieutenant Dereck Berger

Date: 8/12/2025

Reference: 31st Annual Hogs Trot 5k

This office reviewed the special event application for the 31st Annual Hogs Trot 5k to be held on Front St. on November 29, 2025. From 8am-9:30am.

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



BRUE LSBM MBX

Kelli Funkhouser

From:

Laura Estevez

Sent:

Tuesday, August 12, 2025 9:52 AM

To:

Kelli Funkhouser; Andrea S. Gomez

Subject:

RE: [EXTERNAL] Southernmost Turkey Trot Certificate Of Insurance

Hey Kelli,

They are good to go as long as WC and automobile does not apply to event.

Laura Estevez Bringle
Risk Manager/Safety Officer
City of Key West, Risk Management
Department of Finance
Phone# 305-809-3812
Fax# 305-809-3988

Email: lestevez@cityofkeywest-fl.gov



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

Sent: Tuesday, August 12, 2025 7:19 AM

To: Laura Estevez <lestevez@cityofkeywest-fl.gov>; Andrea S. Gomez <agomez@cityofkeywest-fl.gov>

Subject: FW: [EXTERNAL] Southernmost Turkey Trot Certificate Of Insurance

COI for the Southernmost Turkey Trot.

Kelli Funkhouser

Special Events Manager

City of Key West Office: 305.809.3881

kelli.funkhouser@cityofkeywest-fl.gov