

Village of Royal Palm Beach
Village Council
Agenda Item Summary

Agenda Item: C - 2

APPROVAL OF A SPECIAL EVENT PERMIT FOR MISSION BBQ COMPANY TO HOLD A "9/11 CEREMONY" HONORING OUR FIRST RESPONDERS, LAW ENFORCEMENT AND FIREFIGHTERS AT A MISSION BBQ RESTAURANT LOCATED AT 11929 SOUTHERN BOULEVARD. THE EVENT WILL TAKE PLACE DURING BUSINESS HOURS ON SEPTEMBER 11, 2025, BY LISA WHISNAND.

Issue:

The request is for a Special Event Permit in order to hold a "9/11 Ceremony" honoring first responders, law enforcement, and firefighters at a Mission BBQ restaurant located at 11929 Southern Boulevard. The event will take place during business hours on September 11, 2025. Staff has reviewed this application and determined that the proposed event will not adversely affect the immediate area.

Recommended Action:

Approval of Special Event Permits, subject to the attached conditions (Exhibit A).

EXHIBIT A

1. The event will take place during business hours on September 11, 2025.
2. Any tents used shall be flame resistant.
3. A Business Tax Receipt is required and permits must be obtained for all temporary electrical services, generators or temporary power poles and must be inspected prior to commencement of sales.
4. All electrical circuits shall be GFI protected.
5. Signage shall be set back at least 10 feet from the property line and shall not interfere with sight lines along public roadways and shall conform to the requirements of Sec. 20-71 of the Village Code of Ordinances.
6. Adequate trash receptacles shall be provided for any debris, which may accumulate on site.



RECEIVED BY:
Village of Royal Palm Beach

JUL 28 2025

Time: 3:46pm

SPECIAL-EVENTS PERMIT APPLICATION

A FULLY COMPLETED APPLICATION MUST BE SUBMITTED TO THE VILLAGE CLERK 45 DAYS IN ADVANCE OF THE EVENT. FAILURE TO SUBMIT A COMPLETE APPLICATION MAY RESULT IN REJECTION OF THE APPLICATION.

Date: July 25, 2025

I/We Lisa Whisnand
(Name of applicant)

of 11929 Southern Blvd. Royal Palm Beach, FL 33411
(Mailing address)

Name and phone number of contact person: Lisa Whisnand 301-302-5735

Email address: ~~communityambassador~~ community33411@Missionbbq

On behalf of Mission BBQ
(Name of person, corporation, organization, etc.)

hereby request a Special-Events Permit from the Village of Royal Palm Beach in order to:

Conduct our annual 9/11 Ceremony for
our local 1st Responders, Law Enforcement and
fire fighters

In support of such application, I submit the following information:

1. Proposed location: Mission BBQ
11929 Southern Blvd
(Owner's written consent and affidavit of responsibility is attached.)

2. Proposed date, time of commencement and duration of event:
September 11, 2025 10:30-12pm
1st Responder Appara

3. Approximate number of participants expected: 100

4. Insurance company and policy number: _____

(Copy of Certificate of Insurance showing general liability & property damage coverage is attached.)

5. Will state, municipal or county controlled property be involved? Yes _____ No X

If yes, please describe:

(State, municipal or county permit or written consent, if applicable,
to utilize the above property is attached.)

6. How will this proposed event impact municipal traffic control, fire/rescue operations and/or utilities? This event will not impede on

municipal traffic, fire rescue or pedestrian
traffic.

Proposed impact mitigation plan: all vehicles will be in
designated parking places

7. Are animals involved in this event? Yes _____ No X

If yes, all certificates required by Chapter 5 of the Village Code of Ordinances must be attached hereto prior to the issuance of this permit.

8. What toilet facilities will be provided for use by event participants and the public?

Facilities in our restaurant

9. Site plan for proposed location of special event showing layout of all facilities, including parking and signage, is attached hereto along with a fully executed hold harmless agreement as required by Section 16-12(a)(2) of the Village Code of Ordinances.

10. Please address the following items:

A. How will you assure that the proposed special event will have no adverse vehicular or pedestrian traffic impacts which cannot be prevented by the imposition of conditions?

Everything is on our property
no obstruction of neighboring vendors/stores

B. How will you assure that the proposed special event will have no adverse impacts on adjacent properties and will not be detrimental to their use and peaceful enjoyment of their property? Everything pertaining to our event is held on our
property the ceremony itself is 10 minute duration

C. How will you assure that the proposed special event will not cause objectionable noise,

vibrations, fumes, odors, glare or physical activity which cannot be prevented by the imposition of conditions? all vehicles are turned off

Anthem is sung with no sound system
acappella

D. How is the proposed special event compatible with the character of the location for which it is proposed? It honors our local heroes.

We get to give back to those who gave so much for us.

11. In addition to depicting proposed temporary signage on the provided site plan, please list below all signs to be displayed as part of the special event. Please include sign type, dimensions, square footage and proposed location(s) (See Village Code Section 20-71).

All signage is on our building

I affirm that all facts set forth herein are true and correct and understand that the Village of Royal Palm Beach may impose reasonable conditions upon the Special-Events Permit in order to reduce adverse impacts and to protect the health, safety and welfare of all.

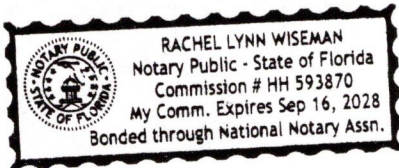
L. Whisnand
Signature of Applicant

Lisa Whisnand
Print name and office held, if applicable

THE STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization this 28 day of July, 2025, by Lisa Whisnand, who is personally known to me or who has produced a Florida driver's license as identification and who did/did not take an oath (circle one).

(Seal)



[Signature]
NOTARY PUBLIC
STATE OF FLORIDA



VILLAGE OF ROYAL PALM BEACH
OWNER'S AFFIDAVIT OF CONSENT AND RESPONSIBILITY

***DO NOT COMPLETE FOR EVENTS ON VILLAGE PROPERTY**

DATE: Sep July 25, 2025

APPLICATION FOR: Special-Events Permit X OR Seasonal Vendor Permit _____

PROPOSED LOCATION FOR SPECIAL EVENT OR TEMPORARY SALE:

Mission BBQ
11929 Southern Blvd
Royal Palm Beach 33411

I/We, Lisa Whisnand, own the property referenced above and hereby grant my/our consent for Mission BBQ to utilize the property for _____ acknowledging that I/we will be responsible for the activities conducted thereon.

L Whisnand
Affiant Owner

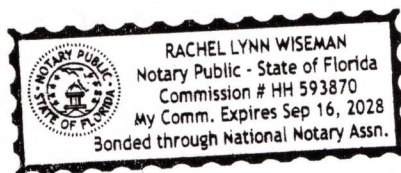
Affiant Agent

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me by means of [] physical presence or online [] notarization this 28 day of July, 20 25 by Lisa Whisnand and _____, who are personally known to me or who have produced a Florida driver's license as identification and who did/did not take an oath (circle one).

[Signature]
Notary Public
State of Florida

(Seal)





HOLD HARMLESS AGREEMENT FOR APPLICANT

The undersigned hereby requests a Special Events/Seasonal Vendor Permit (circle one) from the Village of Royal Palm Beach, Florida ("Village").

NOW, THEREFORE, for and in consideration of the issuance of the permit by the Village and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I/we agree as follows:

1. I/we hereby agree to abide by all regulations set forth in the VILLAGE OF ROYAL PALM BEACH Code of Ordinances and all other laws.

2. I/we hereby agree that I/we will indemnify and hold the Village harmless from and against any and all claims, demands, lawsuit, settlements, damages, costs and expenses, including attorneys' fees, suffered or incurred by the Village and arising out of or in connection with the Special Event, Temporary Sale, or Seasonal Vending conducted.

Executed this 25 day of July, 2025.

WITNESSES:

Signature

Printed Name

Signature

Printed Name

Applicant

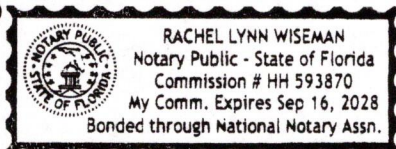
Printed Name

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization this 28 day of July, 2025 by Lisa Whisnand, who is personally known to me or who has produced a Florida driver's license as identification and who did/did not take an oath (circle one).

Notary Public
State of Florida

(Seal)





MISSBBQ-01

STALIANO

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/3/2025

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(ies) 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).

PRODUCER License # 2060346 Hub International Mid Atlantic 3290 North Ridge Road Suite 300 Ellicott City, MD 21043	CONTACT NAME: Sara Taliano PHONE (A/C, No, Ext): (410) 465-4300 FAX (A/C, No): (410) 465-7458 E-MAIL ADDRESS: sara.taliano@hubinternational.com
INSURED Mission BBQ Royal Palm, FL LLC 11929 Southern Blvd Royal Palm Beach, FL 33411-7674	INSURER(S) AFFORDING COVERAGE INSURER A: Hartford Fire Insurance Company 19682 INSURER B: Trumbull Insurance Company 27120 INSURER C: Hartford Casualty Insurance Company 29424 INSURER D: MEMIC Indemnity Company 11030 INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	X	X	30UENAX3C9M	1/1/2025	1/1/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	X	X	30UENBH4T1X	1/1/2025	1/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			30RHUAY6AG7	1/1/2025	1/1/2026	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	3102807228	7/1/2024	7/1/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Village of Royal Palm Beach, Florida is automatically included as an additional insured on the Commercial General Liability and Automobile Liability policies on a primary and non-contributory basis with respect to liability arising out of the named insured's operations when required by contract. Commercial General Liability, Automobile Liability and Workers' Compensation/Employer's Liability policies include automatic waiver of right to recover from others endorsement in favor of additional insured(s) when required by contract. Umbrella follows form. In the event of cancellation, 30-days' notice will be provided, with the exception of cancellation due to non-payment of premium, when 10-days' notice will apply.

CERTIFICATE HOLDER

CANCELLATION

Village of Royal Palm Beach, Florida
1060 Royal Palm Beach Blvd
Royal Palm Beach, FL 33411

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

