



Agenda Item # C - 8

**Village of Royal Palm Beach
Village Council
Agenda Item Summary**

Agenda Item:

APPROVAL OF A SPECIAL EVENT PERMIT FOR H.L JOHNSON ELEMENTARY PTO, INC TO HOLD A SPRING CARNIVAL STYLE FUND-RAISER EVENT LOCATED AT 1000 CRESTWOOD BOULEVARD ON SATURDAY, MARCH 7, 2020, FROM 10:00 A.M. TO 4:00 P.M.; BY JULIE HIGHSMITH

Issue:

The applicant, H.L Johnson Elementary PTO, Inc, is requesting a special event permit in order to hold a "Spring Carnival" event located at 1000 Crestwood Boulevard on March 7, 2020 from 10:00 a.m. to 4:00 p.m. The applicant has provided the Village with all necessary documentation, including proof of insurance.

Recommended Action:

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

Initiator:	Village Manager Approval	Agenda Date	Village Council Action
------------	-----------------------------	----------------	---------------------------

Director of P & Z

2/20/20

EXHIBIT A

1. The event may only occur on March 7, 2020, from 10:00 a.m. to 4:00 p.m.
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. A clearly defined paved parking area must be provided.
7. The applicant shall provide for portable restroom facilities including at least one handicapped accessible facility if public facilities are not within 500' of accessibility.
8. Adequate trash receptacles shall be provided for tree trimming and other debris, which may accumulate on site.

A FULLY COMPLETED APPLICATION MUST BE SUBMITTED TO THE VILLAGE CLERK 30 DAYS IN ADVANCE OF THE EVENT. FAILURE TO SUBMIT A COMPLETE APPLICATION MAY RESULT IN REJECTION OF THE APPLICATION.

RECEIVED BY:
Village of Royal Palm Beach

JAN 30 2020

VILLAGE OF ROYAL PALM BEACH
SPECIAL EVENTS PERMIT APPLICATION

Time 1:10 pm *Re*

DATE: 1/28/2020

I/We H.L. Johnson Elementary School PTO, Inc.
(Name of applicant)

of 1000 Crestwood Blvd. N, Royal Palm Beach, FL 33411
(Mailing address)

Name and phone number of contact person Julie Highsmith 561-389-6811

Email address: HLJaguarPTO@gmail.com

on behalf of H.L. Johnson Elementary PTO, Inc.
(Name of person, corporation, organization, etc.)

hereby request a Special Events Permit from the Village of Royal Palm Beach in order to:
hold a spring carnival style fund-raiser, "Spring Scene," on March 7, 2020.

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

1. Proposed location: H.L. Johnson Elementary School
1000 Crestwood Blvd. N, Royal Palm Beach, FL 33411
(Owner's written consent and affidavit of responsibility is attached.)

2. Proposed date, time of commencement and duration of event:
March 7, 2020 from 10am - 4pm

3. Approximate number of participants expected:

4. Insurance company and policy number: Philadelphia Indemnity Insurance
Company Policy Number PHPK1981763
(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? **No anticipated impact on municipal traffic control, fire/rescue operations or utilities. Ample parking at the school.**

Proposed impact mitigation plan: **No impact anticipated**

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

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?
4 standard and 1 ADA port-o-let will be provided, as indicated on map, in addition to existing school restrooms

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 16-12A.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?

There is ample parking at the school and the west field will allow for additional parking as indicated on layout. The bus loop is additional parking.

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?

The location of the event has no adjacent properties that would be impacted by this event.

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?

No noise impact anticipated for this event. Food Trucks will be limited and positioned as not to affect adjacent properties.

D. How is the proposed special event compatible with the character of the location for which it is proposed?

The school is a perfect place to hold a community event to raise money for the school.

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 Event Permit in order to reduce adverse impacts and to protect the health, safety and welfare of all.

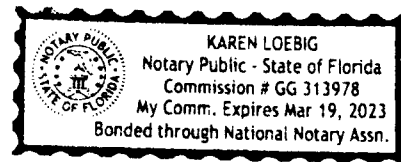
Julie Highsmith
Signature of Applicant

Julie Highsmith, President
Print name and office held, if applicable

THE STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 28 day of Jan, 2020, by Julie Highsmith, 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.

Karen Loebig
NOTARY PUBLIC
STATE OF FLORIDA
(Seal)



VILLAGE OF ROYAL PALM BEACH, FLORIDA
OWNER'S AFFIDAVIT OF CONSENT AND RESPONSIBILITY
DO NOT COMPLETE FOR EVENTS ON VILLAGE PROPERTY

DATE: 1/28/2020

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

PROPOSED LOCATION FOR SPECIAL EVENT OR TEMPORARY SALE:

H.L. Johnson Elementary School
1000 Crestwood Blvd N
Royal Palm Beach, FL 33411

I/We, Jennifer Makowski, own the property referenced above and hereby grant my/our consent for H.L. Johnson Elementary PTO, Inc. to utilize the property for Spring Scene Event acknowledging that I/we will be responsible for the activities conducted thereon.

Makowski
_____ Affiant

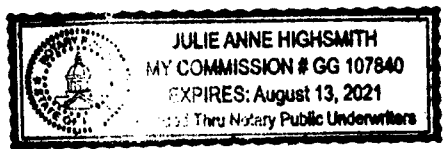
_____ Affiant

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 28th day of January, 2020 by Jennifer Makowski and _____, 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.

Julie Anne Highsmith

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 28th day of January, 2020.

WITNESSES:

Matthew Weigel
Signature

Matthew Weigel
Printed Name

Jennifer Makowski
Signature

Jennifer Makowski
Printed Name

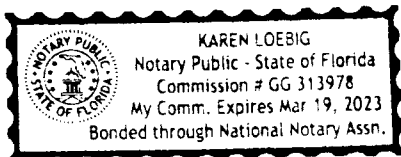
Julie Highsmith
Applicant

Julie Highsmith
Printed Name

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 28 day of Jan, 2020 by Julie Highsmith, 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.

Karen Loebig
Notary Public
State of Florida
(Seal)



HOLD HARMLESS AGREEMENT FOR OWNER OF PROPERTY

(IF DIFFERENT FROM APPLICANT)

DO NOT COMPLETE FOR EVENTS ON VILLAGE PROPERTY

The undersigned is the owner of the real property to be utilized for the proposed Special Event or Temporary Sale. The undersigned has granted the Applicant permission to apply for a Special Events/Seasonal Vendor permit (circle one) from the Village of Royal Palm Beach, Florida ("Village"), to use the undersigned's property for this purpose, and acknowledges responsibility (owner's affidavit is attached hereto).

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 or Seasonal Vending conducted.

Executed this 28th day of January, 2020.

WITNESSES:

Matthew Weigel
Signature

Matthew Weigel
Printed Name

Julie Highsmith
Signature

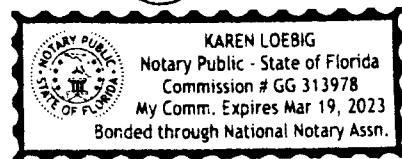
Julie Highsmith
Printed Name

STATE OF FLORIDA
COUNTY OF PALM BEACH

Jennifer Makowski
Owner of Property
Jennifer Makowski
Printed Name

The foregoing instrument was acknowledged before me this 28 day of Jan, 2020 by Julie Highsmith, 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.

Karen Loebig
Notary Public
State of Florida
(Seal)



**AFFIDAVIT FOR SPECIAL NO FEE PERMIT
NON-PROFIT, CHARITABLE, VETERANS' ORGANIZATIONS
AND/OR OTHERS ENTITLED TO EXEMPTIONS**

DATE: 1/28/2020

I/We

Julie Highsmith

(Name of Applicant)

of 1000 Crestwood Blvd N, Royal Palm Beach, FL 33411

(Mailing Address of Applicant)

on behalf of

H.L. Johnson Elementary PTO, Inc.

(Non-profit, Charitable, Veterans' Organization or others entitled to exemptions)

hereby request a special no fee permit or reduced rate occupational license from the VILLAGE OF ROYAL PALM BEACH in accordance with Section 16-8 of the Village Code in order to operate the business as described below or to hold the following fundraising project and/or sale at the following location:

Spring Scene Event

1. The H.L. Johnson Elementary PTO, Inc.

(Non-profit, Charitable, Veterans' Organization or others entitled to exemptions)

is a bonafide Non-Profit, Charitable, Veterans' Organization or other person/entity entitled to an exemption which operates without private profit for a civic, charitable, youth, service, fraternal or religious purpose. Attached is documentation to support this statement, i.e. incorporation certificate; 501c(3) status, etc.

2. Julie Highsmith
(Name of persons involved in project)

are bonafide members of the H.L. Johnson Elementary PTO, Inc.
organization and will not receive any compensation, whatsoever, for the operation of the project.

3. The H.L. Johnson Elementary PTO, Inc.
(Name of Organization or Person)

will abide by all regulations set forth in the VILLAGE OF ROYAL PALM BEACH Code of Ordinances.

4. I understand that all facts stated herein may be investigated by the VILLAGE OF ROYAL PALM BEACH and that if there are any misrepresentation stated herein, any permit or occupational license issued on the basis of this Affidavit shall be automatically revoked. I hereby swear that all facts stated herein are true and correct.

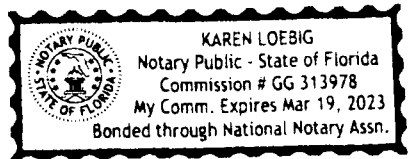
Julie Highsmith
Signature of Applicant

President
Office Held, if applicable

STATE OF FLORIDA)
)ss:
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 28 day of Jan, 2020 by Julie Highsmith, 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.

Karen Loebig
Notary Public
State of Florida
(Seal)





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/28/2020

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 Bene-Marc, Inc. 6301 Southwest Blvd., Suite 101 Fort Worth, TX 76132-1063 (800) 247-1734	CONTACT NAME: PHONE (A/C, No, Ext): (800) 247-1734 FAX (A/C, No): (817) 738-1811 E-MAIL ADDRESS: contact@bene-marc.com	
	INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Indemnity Insurance Company NAIC # 18058 INSURER B: AXIS Insurance Company 37273 INSURER C: Tokio Marine Specialty Insurance Company 23850 INSURER D: INSURER E: INSURER F:	INSURED School Family Media, LLC/School Support Purchasing Group and all its Members and their Officers, Directors & Volunteers H.L. Johnson Elementary PTO

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

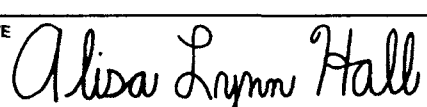
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 type="checkbox"/> LOC OTHER:	X		PHPK1981763	9/18/2019	9/18/2020	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000						
							MED EXP (Any one person) \$ 5,000*
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							*Medical Exp for Spectators Only
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
B	Excess Accident Medical			SRPO-30002-4002-0001	9/18/2019	9/18/2020	Limit \$25,000/Deductible \$0/AD&D \$10,000
C	Crime-Employee Dishonesty			PSD1446030	9/18/2019	9/18/2020	Limit \$25,000/Deductible \$250

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Coverage also includes:
 C Directors & Officers Liability PSD1446029 9/18/2019 9/18/2020 Limit \$1,000,000/\$2,500 Retention
 A Business Personal Property PHPK1981765 9/18/2019 9/18/2020 Limit \$10,000/Deductible \$250

Event Name: Spring Scene held at H.L. Johnson Elementary School
 Event Date: March 7, 2020

CERTIFICATE HOLDER The Village of Royal Palm Beach 1050 Royal Palm Beach Blvd. Royal Palm Beach, FL 33411 - 15171-1	CANCELLATION 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 
---	---

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
The Village of Royal Palm Beach 1050 Royal Palm Beach Blvd. Royal Palm Beach, FL 33411
H.L. Johnson Elementary PTO
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A.** In the performance of your ongoing operations; or
- B.** In connection with your premises owned by or rented to you.



**United States
Department of
Agriculture**

**Marketing and
Regulatory
Programs**

**Animal and
Plant Health
Inspection
Service**

Animal Care

EXPIRATION DATE: OCTOBER 22, 2020

This is to certify that

YUSLEIDY TARRERO

is a licensed
under the

CLASS C EXHIBITOR

Animal Welfare Act
(7 U.S.C. 2131 et seq.)

Certificate No. 58-C-0948

Customer No. 322194

Deputy Administrator



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Animal Industry
Bureau of Animal Disease Control

OFFICIAL CERTIFICATE OF VETERINARY INSPECTION

Chapter 585, F.S.
5C-24.003, F.A.C.

NO. 58 D **113893**

C

Name & Address of Consignor/Shipper YUSLEIDY TARRERO Every Kid's Dream LLC 15828 Keylime BLVD Loxahatchee FL 33470	Name & Mailing Address of Consignee/Purchaser Commons Park 11600 PoINCIANA BLVD Royal Palm Beach FL 33411
--	---

Note: All documents and attachments submitted with this request are subject to public review pursuant to Chapter 119, F.S.

SPECIES <input checked="" type="checkbox"/> Cattle <input checked="" type="checkbox"/> Sheep <input type="checkbox"/> Swine <input type="checkbox"/> Horses <input checked="" type="checkbox"/> Poultry <input type="checkbox"/> Other	AREA STATUS <input type="checkbox"/> Accredited Free (TB) <input type="checkbox"/> Class Free (Bruc) <input type="checkbox"/> Class A (Bruc) <input type="checkbox"/> Class B (Bruc) <input type="checkbox"/> Class C (Bruc)	HERD OR FLOCK STATUS <input type="checkbox"/> Accredited Herd No. _____ <input type="checkbox"/> Certified Herd No. _____ <input type="checkbox"/> Validated Herd No. _____ <input type="checkbox"/> Qualified Neg. Herd No. _____	CARRIER <input type="checkbox"/> Air <input type="checkbox"/> Rail <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Trail <input type="checkbox"/> Water	VACCINATION STATUS VACCINATED FOR: DATE: PRODUCT:
ORIGIN OF SHIPMENT COUNTY Palm Beach MARKET	PERMIT NUMBER	QUALIFYING TEST DATES A. _____ B. _____ C. _____ D. _____	NAME & ADDRESS Every Kid's Dream LLC 15828 Keylime BLVD Loxahatchee FL 33470	

INDIVIDUAL ANIMAL IDENTIFICATION & TESTS					TUBERCULIN TEST (INTRADERMAL)	BRUCELLOSIS TEST	VACCINATION	OTHER TESTS	
EAR TAG NO. TATTOO OR OTHER PERMANENT IDENTIFICATION	L I N E No.	REGISTRY NUMBER OR DESCRIPTION (ALL ANIMALS PRESENTED FOR TEST MUST BE LISTED)	A G E	S E X	B R E E D	DATE: HOUR: DATE: HOUR: Test Results	DATE: LAB: (Name & Location) Test Results	DATE OR TATTOO SYMBOL	DATE: Laboratory: R E S U L T S
Mickey	1	6 Sheep + goats							
	2	1 Mini cow			3y Steer scbu				
	3	5 chickens							
	4	4 ducks							
	5	3 Rabbits							
	6	/							
	7	/							
	8	/							
	9	/							
	10	/							
	11	/							
	12	/							
	13	/							
	14	/							
	15	/							

ISSUING VETERINARIAN'S CERTIFICATION: I certify, as an accredited veterinarian, that the above described animals have been inspected by me & that they are not showing signs of infectious, contagious &/or communicable disease, (except where noted). The vaccinations & results of tests are as indicated on the certificate. To the best of my knowledge, the animals listed on this certificate meet the state of destination & federal interstate requirements. No further warranty is made or implied.

Carly Marie Penguin DVM Printed Name of Veterinarian Carly Marie Penguin DVM Veterinarian's Signature VM15588 Florida License Number 090293 National Accreditation Number 9/27/19 Date



Food Trucks

Gaming Area: Face painter, carnival games, tables and chairs

Port-o-lets: 4 standard and 1 handicap (5x total)

Signage in **YELLOW**

