



City of Chipley

CITY HALL
1442 Jackson Avenue
P.O. Box 1007
Chipley, Florida 32428
(850) 638-6350 Fax: (850) 638-6353



Special Event Application

Name/Organization: Project Downtown Chipley LLC

Address: 1367 S Railroad Ave Suite C

Contact person: Kristin Martin Phone: 8503266506 Fax: _____

E-mail: kmartin@southpointcontracting.com

Type of Event: Movie Night

Purpose of Event: Community event (in lieu of monthly Thursday Night Lights)

Location of Event: Downtown Chipley / Train Depot Indoors/Outdoors

Date(s) & Time(s) of Event: December 21st - 5pm to 9pm (estimated)

Amount of Liability Insurance: 1,000,000 (attach copy of policy)

Concert Yes/No If yes, What type of music? _____

Will food and nonalcoholic beverages be sold? TBD

Will fireworks be displayed? Yes/No If yes, provide name, license number and pyrotechnic plan to be approved by Fire Chief.

Will amusement rides be available? _____

Number of participants anticipated per day: 150

Are security and/or medical services provided? Yes

Applicant Signature:  Date: 10.03.24

Approved { } Denied { }

Mayor's Signature: _____ Date: _____

RELEASE AND HOLD HARMLESS AGREEMENT

FOR THE SOLE CONSIDERATION OF the City of Chipley granting permission for the undersigned to conduct a MOVIE NIGHT upon street(s) as provided for in it's letter of request, the undersigned agrees to indemnify and hold harmless the City of Chipley, it's successors, agents and assigns and all other persons, firms or corporations, from any and all claims, demands, damages, actions, causes of actions or suits of any kind or nature whatsoever, and particularly on account of all injuries, both to person and property, which may result from the use of the street(s) as described above, and releases forever discharges the City of Chipley, for any such Claims.

Undersigned hereby declares that the terms of this agreement and lease have been completely read and are fully understood and voluntarily accepted.

IN WITNESS WHEREOF, the undersigned has executed this release, this _____ day of _____, 20 ____.

FIRM OR ORGANIZATION: Project Downtown Chipley, LLC


Signature

Kristin Martin
Print Name

Witness

Witness

Print Name

Print Name

**STATE OF FLORIDA
COUNTY OF WASHINGTON**

The foregoing instrument was acknowledged before me by _____, who is personally known to me or who produced _____ as identification, and who executed the foregoing instrument and acknowledge before me that he/she executed the same freely and voluntarily and for purposes expressed therein.

Witness my hand and seal in the County and State last aforesaid this _____ day of _____, 20 ____.

Notary Public



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Request for Temporary Closure of City Road/Sidewalk/Alleyway

Name of Organization: Project Downtown Chipley		Person in Charge: Kristin Martin		Date: 10.04.24
Address of Organization 1367 S Railroad Ave Chipley FL 32428			Telephone Number: 850.326.6506	
Title of Event: Downtown Movie Night				
Date of Event: Dec 21, 2024	Starting Time of Event: approx 5pm	Duration of Event: approx. 4-5 hrs	Actual Closing Time (Set up of barriers, Etc.) 4:45pm	
Proposed Parade Route or Road/Sidewalk/Alleyway Closure (Include Exact Road Names and Map of Route): 7th Street - Museum Alleyway to N side of N. Railroad Ave, S. Railroad - State Road 77 to 7th Street Includes city parking lot at corner of S RR and 7th St, and N RR Ave - 7th St to 8th St				
This section is to be completed when closure is for special event filming. Liability Insurance Carrier: _____ Policy Effective Date: _____ Coverage Amount: _____ (\$1,000,000 Minimum) Length of Coverage: _____ Days Licenses Pyrotechnics Operator: _____ License Number: _____ Approval of Local Fire Department: _____ Federal Aviation Administration Approval for Low Flying Filming: _____ Additional Liability Insurance Amount: _____ PLEASE DO NOT WRITE BELOW THIS LINE				
Detour Route (Include Exact Road Names and Map of Detour Route): 				
Name of Department Responsible for Traffic Control (City Police Department, Sheriff's Department, Highway Patrol): Chipley City Police Department				
Special Conditions: Use this route only!				
Name of Police Chief: Michael Richter		Signature of Police Chief:		Date Signed:
Name and Title of City Official: Patrice Tanner, City Administrator		Signature of City Official:		Date Signed: