### Exhibit B



DATE/TIME RECEIVED:

11/28 1pm

87V

# TOWN OF LAKE PARK SPECIAL EVENTS DEPARTMENT SPECIAL EVENT PERMIT APPLICATION

For Events being held on Town Property, Town services may be requested for an additional fee(s). Please schedule a pre-submittal meeting with the Special Events Director at least 60 days in advance of your event by calling 561-840-0160.

\*This Application must be completed and submitted by the Event Organizer ("Applicant")\*

If this Event requires a Town facility rental, please contact our Special Events Department at 561-840-0160 regarding the completion of the Facility Usage Application PRIOR to submitting this application.

#### **Instructions:**

This completed Special Event Permit Application and all relevant attachments must be submitted to the Special Events Department not less than thirty (30) calendar days prior to the date of the proposed Event. For events being proposed wholly or partially on Town Property, the deadline to submit is sixty (60) calendar days prior to the date of the proposed Event.

Application Fee Due and Payable Upon Submittal: \$100.00 (\$50.00 for individuals or Non-profit organizations). Note: Application Fees are Non-Refundable.

Non-Profit IRS Tax Identification Number (required if Applicant is a non-profit):

23-7167701 - Non profit

(If applicable)

Name of Applicant (i.e. Event Organizer):

Name of Event:

Cake Park Car Shaw and Cruise

Address/Location of Event:

796 10th St. Lake Park

Are you interested in sponsorship from the Town of Lake Park? Yes No

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Dates/Times of the event (as applicable):  Date Day		T 100		
·	•	End Time		
Event Day 1 Sunday DCC 10, 2003	3() AM ( <del>) P</del> M <u>3</u>	300 () AM () PM 7:00		
Event Day 2	() AM () PM _	() AM () PM		
Event Day 3	() AM () PM _	() AM () PM		
Event Day 4	() AM () PM _	() AM () PM		
Event Day 5	() AM () PM _	() AM () PM		
Event Day 6	_() AM () PM _	() AM () PM		
Additional Applicant Information:				
Names Kimberly Thomson	Carlo	Vernia		
Address: 796 10th 5t. Lake Park				
State/Zip 41. 33403				
CONTACT PHONE: 561 309. 2820				
Alternate Phone # 914. 966- 0905				
Fax:				
E-mail: estates palmbeach @ gmail.com				
Description and Purpose of the Event  Charity Event: Dec Attached - Please  wave application fee it is a non profit  event-please see attached				
Estimated number of participants? 200				
Has this event ever occurred in the Town of Lake	e Park?	Yes No		
Has this site had a Special Event Permit this cale	ndar year?	Yes No		
Will there be an admission fee for the Event? If y	es, how much?	Yes \( \( (\\$_)\)No		
	#44 004 0040 - F	UNATION		

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## \*\* THE FOLLOWING SECTIONS MAY NOT APPLY TO NON-COMMERCIAL EVENTS \*\*

TOTT COMMITMENT EVE	/
Will your event require road closure?	Yes No
If YES, describe the requested street segment closure and Circulation Plan prepared by a Traffic Engineer, including You are responsible for notifying affected businesses/entitivegarding affected routes: CEPTO PROVICE (Initial to acknowledge statement)	ig a detour signage plan. ies, including Palm Tran,
EVENT COMPONENTS (Check the items that will be associated associat	ciated with your event.)
Sidewalks blocked  Municipal park(s) prepared  Booths or other temporary structures  Parking lots to be partially or completely closed - PO  Food Vendors (Liquid Propane Gas Log).  Town litter pick-up or street sweeping	urking for guests at Town Hal Library, CRA Parking Lot
Tents (if yes, describe type and size  Barricades ordered (TOWN) > HOT PLAN  Alcohol served  Security/Law Enforcement  Music, bands, DJ - Toside Coastal Kor  Rides or other amusements	irma
Animals Fireworks Bleachers Designated parking area Town Restroom (if yes, please describe	)
Portable Restrooms (if yes, please describe  Dumpsters/Trash Receptacles (TOWN)  Portable stage  Other (e.g., bounce house, etc.)	)
EVENT VENDOR(S) LIST ALL NAMES (identify which of Outen P Smoothies Smash em up Burger Tacos Veracruz	ones are food trucks)

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		_		
Will the event require the use of electricity?	Yes			
Will the event require water hook-up?	Yes	No		
*Will food and/or beverages be served?	Yes 🖊			
*Will the event have vendors or concession sales, including food?	Yes	No		
*If the answer to the above question is YES, the Application responsible for securing all respective Palm Beach County and Certificates for food vendors, as well as copies of all other comm	State of Flo	orida Health		
WILL THE EVENT INCLUDE FOOD TRUCKS?	Yes	_No		
*If the answer to the above question is YES, all food trucks mus license, PBC Business Tax Receipt, and a current PBC Fire ReReport. Copies of these documents must be provided to the Town (14) calendar days prior to the event.	scue Safet	ty Inspection		
For events on Town property, the Liquid Propane Gas tanks we of the event for leaks prior to operating any gas appliances. A staff with their LPG Log at each event to ensure proper safet followed.	pplicants i	<mark>must provide</mark>		
Insurance issued no more than thirty (30) days prior to the date of naming the Town of Lake Park (and the CRA, if the event is take CRA area) as certificate holder and an additional insured with regeneral liability. The required limits are \$1 million per occurrent aggregate. \$100,000 damage to rented premises must also be predepticants who are found to have attempted to circumvent using another person/entity for the purposes of obtaining the coverage shall be barred from obtaining another special even town for three years.  (Applicant initial to the content of the purpose of the purpo	ing place we espect to conce and \$2 ovided. It this require ent permi	within the commercial million uirement by ed insurance t within the cover estatement)		
The Applicant holds full responsibility and liability for its vendo	rs. <u>CV</u>			
**Will alcoholic beverages be served?	Yes]	No		
**If the answer to the above question is YES, additional liquor leads to the insured's operations with a \$1 million limit must be Certificate of Insurance.	<mark>egal liabili</mark> included o	ty insurance n the		
***Are you proposing signage?	Yes	No		
***If the answer to the above question is YES, please fill out the Signage Permit Application available in the Community Development Department. An additional \$100.00 application fee is required for this signage application. This application will be deemed incomplete if signage is proposed and a signage application is not submitted.				

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Will the event have an official "Flyer" and/or promotional materials? Yes \_\_\_\_ No \_\_\_\_\_ If yes, please provide a copy of the "Flyer".

Please provide a sketch of the Special Event site including: Proposed location of parking, tent(s), concession stand(s), booth(s), stage(s), etc. OR provide an attachment:

**NOTE:** Public parking spaces are on a first-come, first-serve basis, and may be metered depending on where your event is being held.

### IF TENTS ARE BEING UTILIZED: MAXIMUM ALLOWABLE TENT SIZE IS 35' X 45'.

For ALL tents larger than 10 ft. x 10 ft. (pop-up style), a Certificate of Flame Resistance is required and must accompany this Special Event Permit Application.

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### LAKE PARK CAR SHOW & CRUISE

Benefitting the

Thomson Foundation

3:00 -7:00
796 10<sup>TH</sup> ST, LAKE PARK
FOOD TRUCKS & BREWS
LIVE BAND
\$10 ADMISSION FEE PER CAR

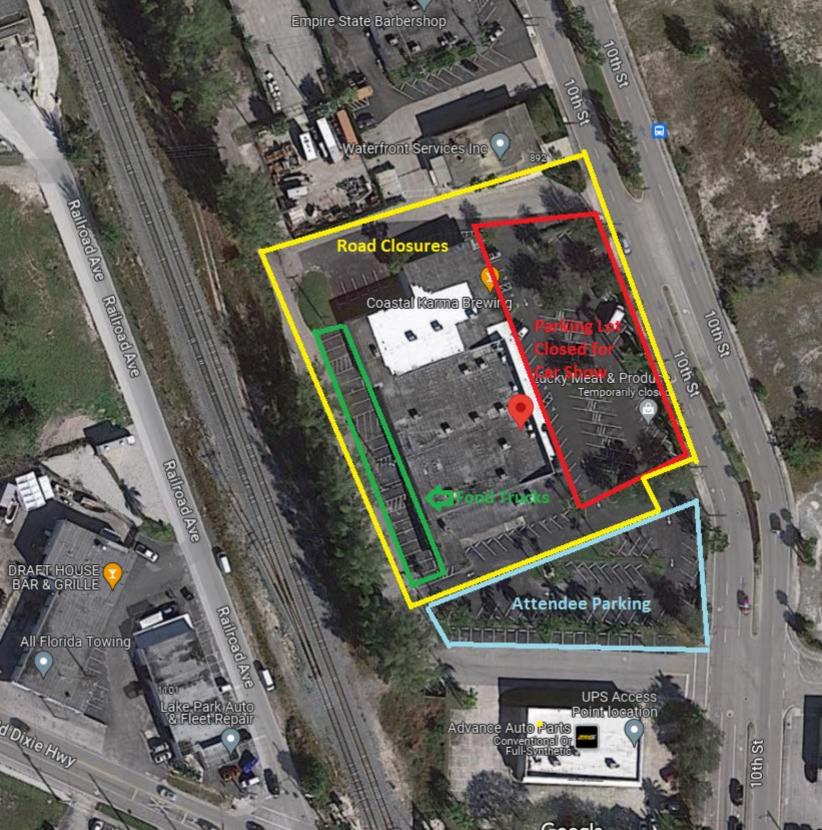
CONTACT: KIM THOMSON 561.309.2820











(All requirements imposed by any of the reviewing entities below, will be communicated to the Applicant early-on and must be secured no later than 14 calendar days in advance of the event, with verification provided to the Town prior to the issuance of the Special Events permit)

## (FOR OFFICE USE ONLY) SIGNATURES/APPROVALS:

Please Sign and Date

SPECIAL EVENTS DIRECTOR:		
	DATE:	
PUBLIC WORKS DIRECTOR:		
	DATE:	
MARINA DIRECTOR:		
	DATE:	
PALM BEACH COUNTY SHERIFF:		
	DATE:	
PALM BEACH COUNTY FIRE-RESCUE:		
	DATE:	
RISK MANAGEMENT:		ADA Requirements
	DATE:	Insurance Requirements
COMMUNITY DEVELOPMENT DIRECTOR:		
	DATE:	
A copy will be provided to the Staff Member and/o	or Code Officer if on	duty.

#### Additional Comments (reviewers may include attachments):

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APPLICANT SIGNATURE: Culo Venua	
APPLICANT PRINTED NAME: Carlo Vernia Kimberly Thomson	_DATE:
PROPERTY OWNER: (If Property Owner is not the Applicant)	
	_ DATE:
PROPERTY OWNER PRINTED NAME: Carlo Vernia	11/11/2003

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