TOWN OF SYLVA

Parks and Recreation Department 83 Allen Street Sylva, N.C. 28779

Phone: (828) 586-2719 Fax: (828) 586-8134 E-mail: townclerk@townofsylva.org

BRIDGE PARK PAVILION/OUTDOOR SPECIAL EVENT PERMIT APPLICATION

EVENT Date_October 18	3, 2025		Today's Date <u>Jan 1, 2025</u>
Name of Organization	Private wedding	Phone# _	850 694 8410
Primary Organizer Conta	ct:		
NameEmmy Schneider	-Green	Event Day P	hone#850 694 8410
Address149 Hillcrest S	t, Sylva NC 28779		
Email Addressemmy	x314@gmail.com		
Primary Event Category: **Note** 60-Day Advan	nce Notice is Required for E	Events that w	ill need a Road Closure!!
Educational	lly Race/Run/Walk Block Party Filming/Photography	×Other:	Wedding reception
Name of EventWedd	ling of Emmy Schneider-Green a	and Cameron W	/alker
•	tWedding reception with fam sence will be required at the		Estimated # Attending <u>120</u> pense)
Event Time(s) Ope	ening <u>3 PM</u> AM/PM -	Closing	7 PM AM/PM
Set-up Date(s)	Oct 18th Set-up Time(s)	11 AM A	M/PM AM/PM
Primary On-Site Contact	Emmy Schneider-Green	Mol	bile Phone#850 694 8410
our frier	nds and family in Bridge Park. W	<mark>/e're local and h</mark> d are working n	od and music, cake, and dancing with ave spoken prior to someone in your ow with Lazy Hiker to get them as our hut have spoken in person
List quantity of structur	es & equipment on-site (Ex. T	ents; Stakes;	Generators; Inflatables, etc.)
speakers and equipme		tirely sure what	nerwise will likely have a DJ with their own items they will need, as we're still in ckup in case of rain.

<u>Yes No X</u>			
<u>Yes No X</u>			
Yes No _X IF YES, how many?			
Yes X No			
Yes No _X			
Yes _X No			
Yes _X No			
Yes No _X			
Yes No			
YesX No			
Yes No _X			
Yes _X No			
What type of alcohol do you intend to serve?BeerBy Whom?			
se license to sell alcohol and certificate of liability n of Sylva for the day of the event.) aiting on this from the manager at Lazy Hiker			
TY OWNED OR OCCUPIED BY THE TOWN OF ROVED BY THE TOWN BOARD. DO NOT publicize			

If the date and/or location requested is not available, or if the requested location is not an appropriate site to conduct your proposed event, the department will contact you and an alternate location will suggested if available. Your confirmation will be in the form of a permit, issued to the organization and/or person responsible for planning the event. Do not publicize your event until preliminary approval has been confirmed by the Town of Sylva. The submission of an Outdoor Special Event Permit Application is NOT approval to hold an event.

Confetti is strictly prohibited.

List of Fees: *NOTE: All t Park Reservation Fees	fees must be paid before the reservation is approved. <u>Vendor Fees</u>
\$30.00 for two hours (Town Residents)	\$100 for up to 30 tent/table vendors
\$50.00 for two hours (non-Town Residents)	\$75 for up to six food vendors. Please List:
\$50.00 for four hours (Town Residents)	
\$75.00 for four hours (non-Town Residents)	
\$100.00 for eight hours (Town Residents) $ \frac{1}{2} $ \$125.00 for eight hours (non-Town Residents) $ \frac{1}{4} $	* \$25 for each alcohol vendor, Qty: 1 # 150.00 \$ 75,00 TOTAL for BOTH Columns
and agree to abide by the policies, rules, and regulative vocable at any time at the absolute discretion of the Name of Applicant Emmy Schneider-Green	
Signature Emmy Schneider-Green orvolv2025	Date 1/1/2025
	Date
Official Use Only ☐ Certificate of Liability Insurance Coverc ☐ Copy of NC License to Sell Alcohol	age Resolution Approval Date:
 Trucks/trailers: must be parked in the left permaximum of 6 can be staged there. All towns Tent and cart food vendors not requiring elements. 	2 30-amp connections, 4 double 120v receptacles. baved lot as you face the stage, along Scott's Creek. A vehicles must be disconnected and moved to a parking space. ectricity may set up along Scott's Creek in the grass on the the stage. A maximum of 4 can be staged there.

-Parkina

- Vendor tents must be staked into the grass or weighted.
- No vendor tents may be staged in the right-paved parking lot as you face the stage without approval.

All food vendors must have an active "Itinerant Merchant Permit" with the Town of Sylva.

- Applicants who are expecting large crowds should consider providing a shuttle service as parking is limited.
- We recommend you avoid parking on Main and Mill Streets to allow merchant customers to park there.
- Public Parking Suggestions: Poteet Park, Mark Watson Park, Jackson County Library, Bicentennial Park (Keener Street) or request private lots by permission (Pinnacle Relief on Grindstaff Cove Road, First United Methodist Church on Jackson Street)

<u>Restrooms</u>: Public restrooms are available from dawn until dusk at Poteet Park or at the corner of Allen Street and Mill Street & Railroad Avenue. Depending on your crowd size, you may want to consider renting porta-potties. Please let Town Staff know if you intend to do that in order to coordinate the location.

MLEDFORD

DATE (MM/DD/YYYY)

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYY 1/6/2025

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). CONTACT NAME: FAX (A/C, No): (828) 369-5917 Wayah Insurance Group, Inc. PO Box 999 PHONE (A/C, No, Ext): (828) 524-4442 E-MAIL ADDRESS: Franklin, NC 28744 INSURER(S) AFFORDING COVERAGE INSURER A: Employers Mutual Casualty Co 21415 INSURED INSURER B: **INSURER C:** Lazy Hiker LLC 188 West Main Street INSURER D Franklin, NC 28734 INSURER E INSURER F: REVISION NUMBER: **CERTIFICATE 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. ADDL SUBFINSD WVD POLICY EFF (MM/DD/YYYY) POLICY EXP TYPE OF INSURANCE POLICY NUMBER LIMITS 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) Α X COMMERCIAL GENERAL LIABILITY 1,000,000 CLAIMS-MADE | X | OCCUR 6/17/2024 6/17/2025 6A34651 X 10,000 MED EXP (Any one person) 1,000,000 PERSONAL & ADV INJURY 2.000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: 2,000,000 POLICY PRO-JECT LOC PRODUCTS - COMP/OP AGG 1,000,000 LIQUOR LIABILIT OTHER: COMBINED SINGLE LIMIT (Ea accident) 1,000,000 AUTOMOBILE LIABILITY 6/17/2024 6/17/2025 Χ 6E34651 BODILY INJURY (Per person) ANY AUTO \$ SCHEDULED OWNED AUTOS ONLY BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) HIRED AUTOS ONLY NON-OWNED AUTOS ONLY EACH OCCURRENCE UMBRELLA LIAB **EXCESS LIAB** CLAIMS-MADE AGGREGATE RETENTION \$ DED PER STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 6/17/2024 6/17/2025 500,000 6H34651 ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT 500,000 E.L. DISEASE - EA EMPLOYEE 500,000 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) 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. Town of Sylva 83 Allen Street Sylva, NC 28779 AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

ACORE

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00225841CM - 999 Malt Beverage Special Event

Macon

LLC Manager Managed

00225841DG

THIS CERTIFIES THAT Lazy Hiker LLC

Lazy Hiker Brewing Company 188 West Main Street

Franklin, NC 28734

IS AUTHORIZED BY THIS PERMIT TO

THIS PERMIT IS NOT TRANSFERABLE.

CONDUCT TASTINGS AND SALES AT MALT BEVERAGE SPECIAL EVENTS

on the above named premises as set forth in Chapter 18B of the General Statues and the related rules promulgated by the Alcoholic Beverage Control Commission. This permit is subject to revocation, suspension or annulment.

Chairman



00225841CM - 999 Brewery Macon

LLC Manager Managed

00225841BM

THIS CERTIFIES THAT Lazy Hiker LLC

Lazy Hiker Brewing Company

188 West Main Street

Franklin, NC 28734

IS AUTHORIZED BY THIS PERMIT TO MANUFACTURE MALT BEVERAGES

on the above named premises as set forth in Chapter 18B of the General Statues and the related rules promulgated by the Alcoholic Beverage Control Commission. This permit is subject to revocation, suspension or annulment.

THIS PERMIT IS NOT TRANSFERABLE.



00225841CM - 999 Malt Beverage Wholesaler Macon LLC Manager Managed

$00225841\mathrm{BW}$

THIS CERTIFIES THAT Lazy Hiker LLC

Lazy Hiker Brewing Company 188 West Main Street Franklin, NC 28734

IS AUTHORIZED BY THIS PERMIT TO

THIS PERMIT IS NOT TRANSFERABLE.

RECEIVE, TRANSPORT AND SELL AT WHOLESALE, APPROVED MALT BEVERAGE on the above named premises as set forth in Chapter 18B of the General Statues and the related rules promulgated by the Alcoholic Beverage Control Commission. This permit is subject to revocation, suspension or annulment.

Chairman