APOPKA DEVELOPMENT REVIEW COMMITTEE AGENDA

October 30, 2024 9:00 AM

Apopka City Hall Council Chambers

SPECIAL EVENTS

1. Trader Maes Furniture and Decor Market - Trader Maes Christmas Festival - 2001 North Rock Springs Road - November 30, 2024 and December 1, 2024, 9:00 AM - 5:00 PM

2. Epilepsy Association of Central Florida - Jingle, Mingle Tree Festival - Camp WeWa - 221 South Binion Road - December 7, 2024, 5:00 PM - 8:30 PM

3. Re-Imagine Communities - Jingle Bell Book Bash - Kit Land Nelsdon Park - 10 North Forest Avenue - December 12, 2024, 5:00 PM - 7:00 PM

4. Brandon Meriweather 31 Ways Foundation Inc. - Christmas in the Park 2024 - 225 M A Board Street - December 21, 2024, 11:00 AM - 4:00 PM

SPECIAL EXCEPTION

1. SPX-24-6, Advent Health Fudge Road Complex - Special Exception (SPX), 1st Submittal

DISCUSSION

1. Pre-Application Meetings - Possibility to conduct during the DRC meetings

   Would like to discuss conducting Pre-Application meetings during the Development Review Meetings.
   Presented by: Jean Sanchez, Senior Planner

ADJOURNMENT

Individuals with disabilities needing assistance to participate in any of these proceedings should contact the City Clerk at least two (2) working days in advance of the meeting date and time at (407) 703-1704. F.S. 286.0105 If a person decides to appeal any decision or recommendation made by Council with respect to any matter considered at this meeting, he will need record of the proceedings, and that for such purposes he may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

Any opening invocation that is offered before the official start of the Council meeting shall be the voluntary offering of a private person, to and for the benefit of the Council. The views or beliefs expressed by the invocation speaker have not been previously reviewed or approved by the City Council or the city staff, and the City is not allowed by law to endorse the religious or non-religious beliefs or views of such speaker. Persons in attendance at the City Council meeting are invited to stand during the opening ceremony. However, such invitation shall not be construed as a demand, order, or any other type of command. No person in attendance at the meeting shall be required to participate in any opening invocation that is offered or to participate in the Pledge of Allegiance. You may remain seated within the City Council Chambers or exit the City Council Chambers and return upon completion of the opening invocation and/or Pledge of Allegiance if you do not wish to participate in or witness the opening invocation and/or the recitation of the Pledge of Allegiance.

Trader Maes Christmas Festival
Nov. 30 - Dec. 1

DRC: 10/30

Special Event Permit Application

A completed Special Event Permit application is required for all events with the City of Apopka. All events will be reviewed by our Development Review Committee for approval. The City of Apopka has the exclusive right to permit or deny an individual or organization facility use.

Once we have the complete special event application we will schedule for review and approval. Please note this may take time, as we suggest that all applications submitted at least 60 to 90 days prior to the event.

Incomplete applications will not be reviewed. After approval, an estimation of fees forms for your event based on the application and the approval is applicable.

Lexi Lahendro – Events Coordinator
events@apopka.net
407-703-1812

You must submit all required documents with your application.

Special Event Permit Application Checklist

Remember, we suggest that all applications submitted at least 60-90 days prior to the event.

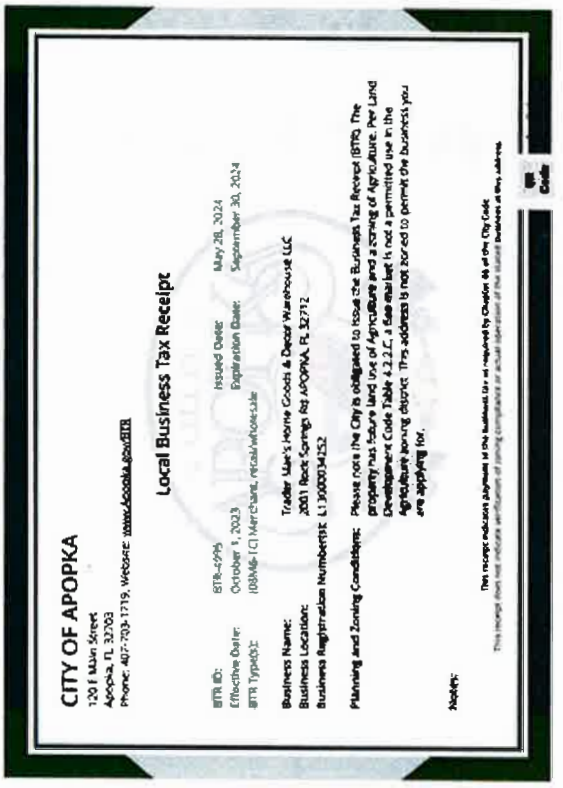
Please review this checklist and make sure you have the items requested below available during this application process.

- Completed Special Event Permit Application
- Event Description
- A non-refundable application fee of $50.00 or completed application for waiver of permit fee is due when application is submitted. *Staff will contact you about this step.*
- A certificate of general liability insurance listing the "City of Apopka" as 'Additional Insured' must be submitted. Copy of the declaration sheet and endorsement page must be included. Additional insurance may be required, please see the event insurance requirements.
- A site plan (Map) or Parade/Race Route **MUST** be submitted with your application. Map must identify location of staging, tents, parking, barricades, vendors, and restrooms and must be to scale.
- Letter from the property owner granting permission for use of their property. (if on private property)
- If alcohol will be served at your event you must include the alcohol permit and insurance with the completed permit
- Copies of flyers and advertisements.
- Policies and protocols in regards to CDC Guidelines/COVID-19 & social distancing
- All renters and vendors must have a listing with the Florida Department of State Division of Corporations. Visit www.sunbiz.org for more information about the process of registering a business.
- All businesses must also must submit a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.

Applicant must be present for duration of event.

Organization Name	Trader Maes Furniture and Decor Market

Name of Applicant	Anna Marie Rita
Mailing Address	1017 Lake Francis Drive
City	Apopka
State	Florida
Zip Code	32712
Cell Phone	4076906504
Email	Annmarierita@yahoo.com
Is your organization a Non – Profit (501C3) OR Tax Exempt Organization?	No
State of Florida Tax ID Number	5880161598696
Please attach a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.	



CITY OF APOPKA
120 E Main Street
Apopka, FL 32703
Phone: 407-703-1719, Website: www.Apopka.gov/BTR

Local Business Tax Receipt

BTR ID: BTR-4995 Issued Date: May 28, 2024
Effective Date: October 1, 2023 Expiration Date: September 30, 2024
BTR Type(s): (088M6-) (C) Merchant, retail/wholesale

Business Name: Trader Mae's Home Goods & Decor Warehouse LLC
Business Location: 2001 Rock Springs Rd APOPKA, FL 32712
Business Registration Number(s): L13000034252

Planning and Zoning Conditions: Please note the City is obligated to flood the Business Tax Receipt (BTR). The property has future land use of Agriculture and a zoning of Agriculture. Per Land Development Code Table 4.2.2.C, a flea market is not a permitted use in the Agriculture zoning district. This address is not zoned to permit the business you are applying for.

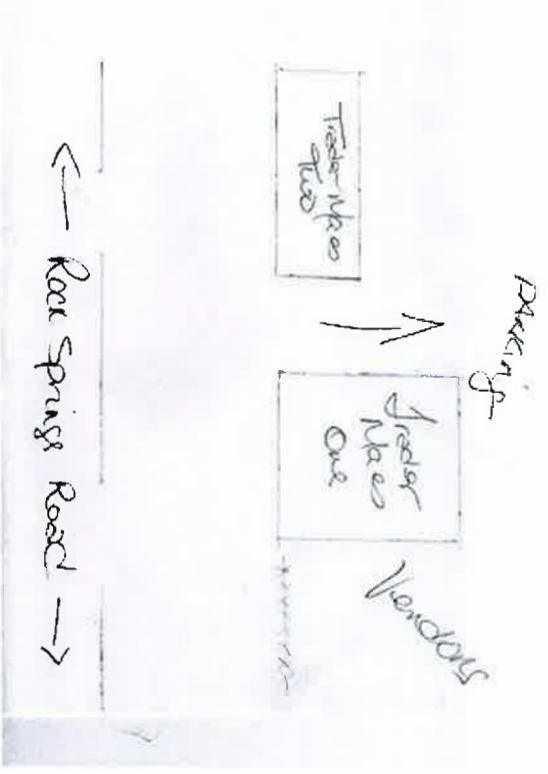
Notes:

This receipt does not include certification of zoning compliance or actual operation of the stated business at the address

Name of the Event	Trader Maes Christmas Festival
Date(s) of the Event	November 30-Dec1st
Hours of the Event	9:00am-5:00pm
Location of the Event	2001 N. Rock Springs Road, Apopka
Does the location of the event take place on Public or Private Property?	No
Anticipated attendance:	200
Briefly describe the event and all activities that will occur during the event:	Vendors selling arts and crafts for christmas
Event Category	• Festival/Celebration
Are there flyers or advertisements for this event?	No
Will there be admission fees to your event?	No
Will you be serving alcohol?	No
Is your event open to the public?	Yes
Does your event include food concession?	No
Do you intend to have food trucks at your event?	No
Will there be merchandising vending at your event?	Yes

How many vendors?	20
Will they need electric?	No
Will you be hiring a private security company for the event?	No
Do you require overnight security?	No
Are there musical entertainment features related to your event?	No
Will amplified sound be used during the event?	No
Will any streets be closed or will the flow of traffic be affected by the event?	No
Does your event include the use of tents?	No
Will inflatables be used at your event?	No
Will your event include any fireworks or pyrotechnics?	No

Layout map for event



Date/Time (on site load in and load out)

For events that are held on City Property, set up days and load out days may require additional fees.

Setup/Load In

Date	11/30/2024
Start Time	9:00 AM (EDT)
End Time	5:05 PM (EDT)

Event Dates

Date	12/01/2024
Start Time	9:00 AM (EDT)
End Time	5:00 PM (EDT)

Take Down/Load Out

Date	12/01/2024
Start Time	9:00 AM (EDT)
End Time	5:00 PM (EDT)

I, Being the Applicant/Event Organizer, have read and understand the guidelines contained within the City of Apopka's Special Event Permit Application and agree to conduct my event in accordance. I further understand that failure to abide by these guidelines may result in the denial or forfeiture of my Special Event Permit.

The City of Apopka is not responsible for lost, stolen or damaged items.

I acknowledge that the information contained in this application is true, correct, and complete to the best of my knowledge.

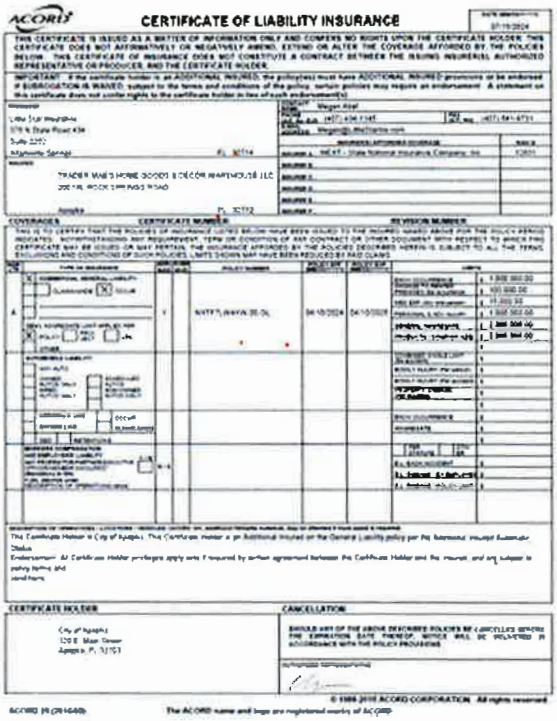
Applicant Signature	
Name of Applicant	Anna Marie Rita
Title of Applicant	Owner
Date Submitted	09/28/2024

The Applicant/Event Organizer shall maintain at all times throughout the duration of the event, a current insurance policy naming the City of Apopka as an additional insured providing coverage for all approved event activities and must be active on the date(s) of the event, including the set-up and break-down period. Failure to provide proof of adequate coverage will result in the denial of the special event permit or cancellation of the event. The City may require subcontractors acting on behalf of the Applicant/Event Organizer to provide proof of insurance or other related documents depending on the scope or location of the event.

- Comprehensive listing of all subcontractors, including but not limited to concessionaires, vendors, exhibitors, and entertainers must be submitted no later than forty-five (45) business days prior to the event.
- All certificates of insurance, required extensions to said insurance certificates, copies of insurance policies and insurance agreements must be submitted no later than **thirty (30) business days prior to the event**.

If insurance requirements are not met at least twenty (20) business days prior to the date of the event, your event will be cancelled!

Please provide a copy of your certificate of insurance.



ACORD CERTIFICATE OF LIABILITY INSURANCE

The City of Apopka defines an Applicant/Event Organizer as any individual or organization that is responsible for all aspects of an event to include advertising, marketing, talent costs, insurance, hold harmless agreement contracts, along with all the revenues and expenses for the event. The Applicant/Event Organizer agrees to conduct this event in accordance with the City of Apopka Code of Ordinances (Chapters 46 and 62).

REQUIREMENTS

- Applicant/Event Organizer recognizes the City's authority to halt the operation of the above listed event due to inclement weather or any other safety concern that may arise.
- The City is not responsible or liable for any damage, loss or theft to any vendor or event participant.
- Applicant/Event Organizer agrees that the City may use photographic images and video taken at the event in promotions and publications. These images may be used online or provided to media outlets and/or used in social media applications.

INSURANCE

Before activity setup, or any other site activity begins, Applicant/Event Organizer must have a Certificate of Liability Insurance **(including all extensions to the insurance certificate—to also include a copy of the complete insurance policy)** on file with the City's Risk Management Division. The cost of such insurance shall be the responsibility of the

Applicant/Event Organizer and must meet ALL requirements as directed by the City of Apopka. The City reserves the right to increase coverage as determined for higher risk events or activities. This insurance policy must remain in effect throughout the entire duration of the property use beginning with load-in and ending at the conclusion of load-out.

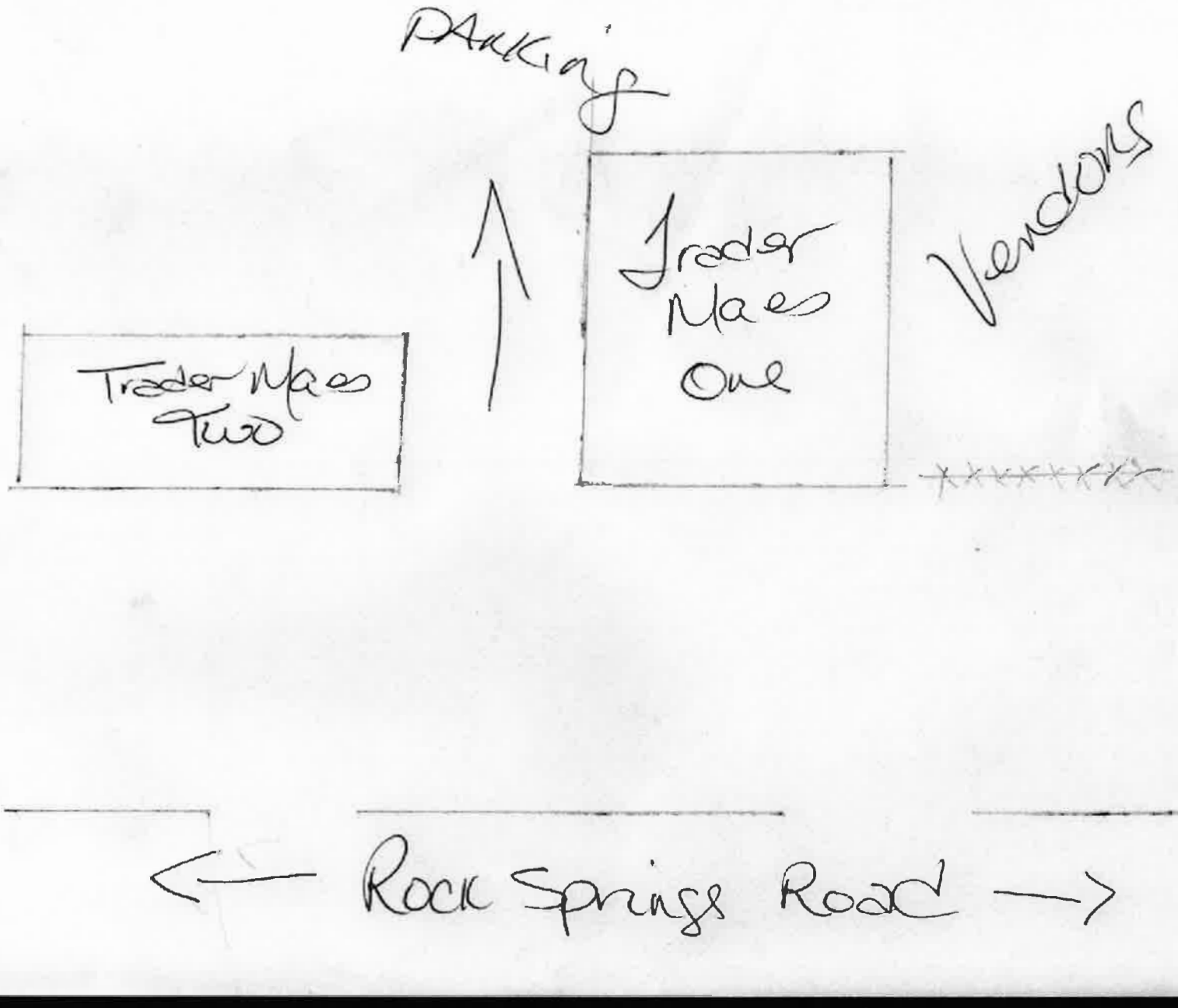
- Applicant/Event Organizer shall, at its sole cost and expense, procure and maintain throughout the term of this agreement, Commercial General Liability and Workers' Compensation insurance, including Employer Liability insurance, with minimum policy limits of $1,000,000 Combined Single Limits, or to the extent and in such amounts as required and authorized by Florida Law. If such GL insurance contains a general aggregate limit, it shall apply separately to this event in the amount of $2,000,000. Products and completed operations aggregate shall be $1,000,000. Damage to rented premises shall be included at $100,000. The event Applicant/Event Organizer and their representatives who wish to drive on City property to set up or tear down for events, and/or Food Trucks and/or any vehicle that functions as the workplace or is used to perform contracted work must provide an Automobile Liability insurance policy in the minimum amount of $300,000 Combined Single Limit. If alcohol is being served, the Applicant/Event Organizer shall provide evidence of coverage for liquor liability in the minimum amount of $1,000,000. The insurance policy must not exclude Personal Injury/Advertising Injury, Medical, volunteer coverage or spectator liability.
- All insurance policies shall: 1) provide that the insurance carrier shall not cancel, terminate or otherwise modify the terms and conditions of said policies except upon thirty days written notice to the City's contract administrator; 2) be evidenced by an endorsed Certificate of Insurance generated and executed by a licensed insurance broker, brokerage, or similar licensed insurance professional evidencing such coverage, and naming the City of Apopka as a named additional insured, as well as furnishing the City with a certified copy, or copies, of said insurance policies; and 3) be approved as to form and sufficiency by the City's contract administrator. The original insurance certificate(s) and all extensions to the insurance certificate(s) should be sent to: City of Apopka, Risk Management, 120 East Main Street, Apopka, FL 32703 or e-mailed to riskmanagement@apopka.net. All insurance coverage shall be written with a company having an A.M. Best Rating of at least the "A" category and size category of VIII.
- Applicant/Event Organizer is solely responsible for all applicable policy premiums, deductibles, and/or self-insured retention attached to any required coverages. Said insurance coverages procured by the Applicant/Event Organizer as required herein, including but not limited to any excess and/or umbrella coverages, shall be considered, and the Applicant/Event Organizer agrees that said insurance coverages it procures as required herein shall be considered, as primary insurance over and above any other insurance, or self–insurance, available to the City, and that any other insurance, or self-insurance available to the City shall be considered secondary to, or in excess of, the insurance coverage(s) procured by the Applicant/Event Organizer as required herein.
- Applicant/Event Organizer shall require and verify that all subcontractors, including but not limited to concessionaires, vendors, exhibitors, and entertainers, maintain insurance meeting all of the requirements stated herein. Furthermore, the insurance policy held by the Applicant/Event Organizer shall have no endorsement(s) restricting, limiting or excluding the subcontractors or work on behalf of the Applicant/Event Organizer by a subcontractor. The Certificate of Insurance submitted by the Applicant/Event Organizer must clearly state that all such subcontractors are "Named Insureds".

Nothing herein shall be construed to extend the City of Apopka's liability beyond that provided in section 768.28, Florida Statutes.

By signing below, I acknowledge that I have read and understand the insurance requirements contained herein. I further understand that my permit application may be declined if I fail to provide the appropriate insurance coverage.

Signature of Applicant	
Name of Applicant	Anna M Rita

Title of Applicant	Owner
Sponsoring Organization Name	None


PARKING
Trader Mae's Two
Trader Mae's One
Vendors
Rock Springs Road

Tax Collector Scott Randolph **Local Business Tax Receipt** **Orange County, Florida**

This local Business Tax Receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

2024 **EXPIRES** **9/30/2025** 3200-1114050

3200 RETAIL STORE $30.00 1 EMPLOYEE

TOTAL TAX	$30.00
PREVIOUSLY PAID	$30.00
TOTAL DUE	$0.00

2001 N ROCK SPRINGS RD #B,C, D
D - APOPKA, 32712

PAID: $30.00 2004-10030702 8/22/2024

RITA ANNA MARIE

TRADER MAES HOME GOODS & DECOR
WAREHOUSE LLC
RITA ANNA MARIE
1017 LAKE FRANCIS DR
APOPKA FL 32712

This receipt is official when validated by the Tax Collector.

Orange County Code requires this local Business Tax Receipt to be displayed conspicuously at the place of business in public view It is subject to inspection by all duly authorized officers of the County.

octaxcol.com | octaxcol

CITY OF APOPKA

120 E Main Street
Apopka, FL 32703
Phone: 407-703-1719, Website: www.Apopka.gov/BTR

Local Business Tax Receipt

BTR ID:	BTR-4995	**Issued Date:**	May 28, 2024
Effective Date:	October 1, 2023	**Expiration Date:**	September 30, 2024
BTR Type(s):	(08M6-1C) Merchant, retail/wholesale		

Business Name: Trader Mae's Home Goods & Decor Warehouse LLC
Business Location: 2001 Rock Springs Rd APOPKA, FL 32712
Business Registration Number(s): L13000034252

Planning and Zoning Conditions: Please note the City is obligated to issue the Business Tax Receipt (BTR). The property has future land use of Agriculture and a zoning of Agriculture. Per Land Development Code Table 4.2.2.C, a flea market is not a permitted use in the Agriculture zoning district. This address is not zoned to permit the business you are applying for.

Notes:

This receipt indicates payment of the business tax as required by Chapter 66 of the City Code.
This receipt does not indicate verification of zoning compliance or actual operation of the stated business at this address.

QR Code

Jingle Mingle 12/7 @ Camp Wewa

DRC: 10/30

Special Event Permit Application

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Lexi Lahendro – Events Coordinator
events@apopka.net
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- Letter from the property owner granting permission for use of their property. (if on private property)
- If alcohol will be served at your event you must include the alcohol permit and insurance with the completed permit
- Copies of flyers and advertisements.
- Policies and protocols in regards to CDC Guidelines/COVID-19 & social distancing
- All renters and vendors must have a listing with the Florida Department of State Division of Corporations. Visit www.sunbiz.org for more information about the process of registering a business.
- All businesses must also must submit a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.

Applicant must be present for duration of event.

Organization Name	Epilepsy Association of Central Florida

Name of Applicant	David Manchon
Mailing Address	109 North Kirkman Road
City	Orlando
State	Florida
Zip Code	32811
Cell Phone	407-252-3772
Email	ceil@epilepsyassociation.com
Is your organization a Non – Profit (501C3) OR Tax Exempt Organization?	Yes
State of Florida Tax ID Number	23-7247844

A copy of your 501C3 non-profit certificate is required for non-profit status. Otherwise taxes will be charged.

Please attach a copy of your 501C3 non-profit certificate	Certificate of Exemption 2019-2024.pdf
Please attach a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.	Orange County Florida Tax Receipt.pdf
Name of the Event	Jingle, Mingle Tree Festival
Date(s) of the Event	December 7, 2024
Hours of the Event	5:00pm - 8:30Pm
Location of the Event	Camp WeWa
Does the location of the event take place on Public or Private Property?	No
Anticipated attendance:	200
Briefly describe the event and all activities that will occur during the event:	The Jingle, Mingle Tree Festival truly kicks off the holiday season with over 50 trees and 20 Wreaths beautifully decorated by businesses and individuals for auction. Raffle packages with seasonal items will be availabe. Santa will make a special appearance to visit with everyone and have story time for the children. Holiday fare will be served as well as s'mores by the campfire. Seasonal music and carolers will join the festivities. There will be a few selfie stations for those Kodak moments.
Event Category	• Festival/Celebration
Are there flyers or advertisements for this event?	Yes

Attach Flyer or Advertisement 1	Join us for Holiday Family Fun and Tree Festival (002).docx
Additional Event Information	Security will be provided.
Will there be admission fees to your event?	No
Will you be serving alcohol?	Yes
Copy of your liquor license & insurance	2024 Temporary Liquor License.pdf

If yes for serving alcohol, a copy of your liquor license & insurance is required.

City Council approval is also required.

Is your event open to the public?	Yes
Does your event include food concession?	Yes
Do you intend to have food trucks at your event?	No
Will there be merchandising vending at your event?	Yes
How many vendors?	1
Will they need electric?	No
Will you be hiring a private security company for the event?	No
Do you require overnight security?	No
Are there musical entertainment features related to your event?	Yes

Please attach a list of all stage performance schedules.

Please attach a list of all stage performance schedules.	Jingle Mingle Entertainment.docx
Will amplified sound be used during the event?	No
Will any streets be closed or will the flow of traffic be affected by the event?	No
Does your event include the use of tents?	No
Will inflatables be used at your event?	No
Will your event include any fireworks or pyrotechnics?	No

Layout map for event	Layout for Jingle Mingle Tree Festival.pdf

Date/Time (on site load in and load out)

For events that are held on City Property, set up days and load out days may require additional fees.

Setup/Load In

Date	12/06/2024
Start Time	10:00 AM (EDT)
End Time	5:00 PM (EDT)

Event Dates

Date	12/07/2024
Start Time	5:00 PM (EDT)
End Time	8:30 PM (EDT)

Take Down/Load Out

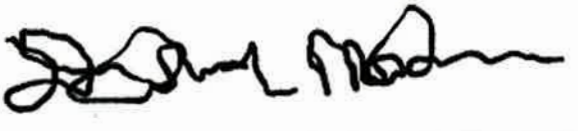
Date	12/08/2024
Start Time	9:00 AM (EDT)
End Time	10:00 AM (EDT)

I, Being the Applicant/Event Organizer, have read and understand the guidelines contained within the City of Apopka's Special Event Permit Application and agree to conduct my event in accordance. I further understand that failure to abide by these guidelines may result in the denial or forfeiture of my Special Event Permit.

The City of Apopka is not responsible for lost, stolen or damaged items.

I acknowledge that the information contained in this application is true, correct, and complete to the best of my knowledge.

Applicant Signature



Name of Applicant	David Manchon
Title of Applicant	Executive Director, Epilepsy Association
Date Submitted	09/24/2024

The Applicant/Event Organizer shall maintain at all times throughout the duration of the event, a current insurance policy naming the City of Apopka as an additional insured providing coverage for all approved event activities and must be active on the date(s) of the event, including the set-up and break-down period. Failure to provide proof of adequate coverage will result in the denial of the special event permit or cancellation of the event. The City may require subcontractors acting on behalf of the Applicant/Event Organizer to provide proof of insurance or other related documents depending on the scope or location of the event.

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If insurance requirements are not met at least twenty (20) business days prior to the date of the event, your event will be cancelled!

Please provide a copy of your certificate of insurance.	Certificate_of_Insurance City of Apopka Jingle Mingle Tree Festival.pdf

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REQUIREMENTS

- Applicant/Event Organizer recognizes the City's authority to halt the operation of the above listed event due to inclement weather or any other safety concern that may arise.
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INSURANCE

Before activity setup, or any other site activity begins, Applicant/Event Organizer must have a Certificate of Liability Insurance **(including all extensions to the insurance certificate—to also include a copy of the complete insurance policy)** on file with the City's Risk Management Division. The cost of such insurance shall be the responsibility of the Applicant/Event Organizer and must meet ALL requirements as directed by the City of Apopka. The City reserves the right to increase coverage as determined for higher risk events or activities. This insurance policy must remain in effect throughout the entire duration of the property use beginning with load-in and ending at the conclusion of load-out.

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- Applicant/Event Organizer is solely responsible for all applicable policy premiums, deductibles, and/or self-insured retention attached to any required coverages. Said insurance coverages procured by the Applicant/Event Organizer as required herein, including but not limited to any excess and/or umbrella coverages, shall be considered, and the Applicant/Event Organizer agrees that said insurance coverages it procures as required herein shall be considered, as primary insurance over and above any other insurance, or self–insurance, available to the City, and that any other insurance, or self-insurance available to the City shall be considered secondary to, or in excess of, the insurance coverage(s) procured by the Applicant/Event Organizer as required herein.
- Applicant/Event Organizer shall require and verify that all subcontractors, including but not limited to concessionaires, vendors, exhibitors, and entertainers, maintain insurance meeting all of the requirements stated herein. Furthermore, the insurance policy held by the Applicant/Event Organizer shall have no endorsement(s) restricting, limiting or excluding the subcontractors or work on behalf of the Applicant/Event Organizer by a subcontractor. The Certificate of Insurance submitted by the Applicant/Event Organizer must clearly state that all such subcontractors are "Named Insureds".

Nothing herein shall be construed to extend the City of Apopka's liability beyond that provided in section 768.28, Florida Statutes.

By signing below, I acknowledge that I have read and understand the insurance requirements contained herein. I further understand that my permit application may be declined if I fail to provide the appropriate insurance coverage.

Signature of Applicant	
Name of Applicant	David Manchon
Title of Applicant	Executive Director
Sponsoring Organization Name	Epilepsy Association of Central Florida, Inc.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

DIVISION OF ALCOHOLIC BEVERAGES & TOBACCO
ODP APPLICATION# 194667 FILE # 53772

TEMPORARY LICENSE/PERMIT

EFFECTIVE DATE: December 07, 2024 EXPIRATION DATE: December 07, 2024

DATE	RECEIPT NBR	FEE	LICENSE NBR	SERIES	CLASS
09/24/2024	240036998	$25	ODP5802749	ODP	

NON-TRANSFERABLE, DISPLAY CONSPICUOUSLY, VALID ONLY FOR THE DATE AND PLACE INDICATED

JINGLE MINGLE TREE FESTIVAL
EPILEPSY ASSOCIATION OF CENTRAL
FLORIDA INC
221 S BINION ROAD
APOPKA, FL 32703

CONTROL NUMBER: 33068822

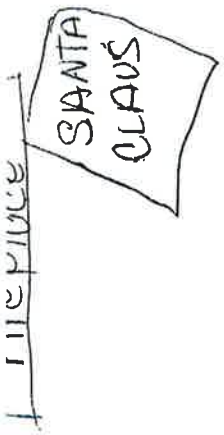
DISPLAY AS REQUIRED BY LAW

LAYOUT FOR Jingle Mingle Tree Festival

Dining Room

Tree and Wreath

AUCTION AREA



Line Place

Refreshments & Cookies

Raffle Items

BAR

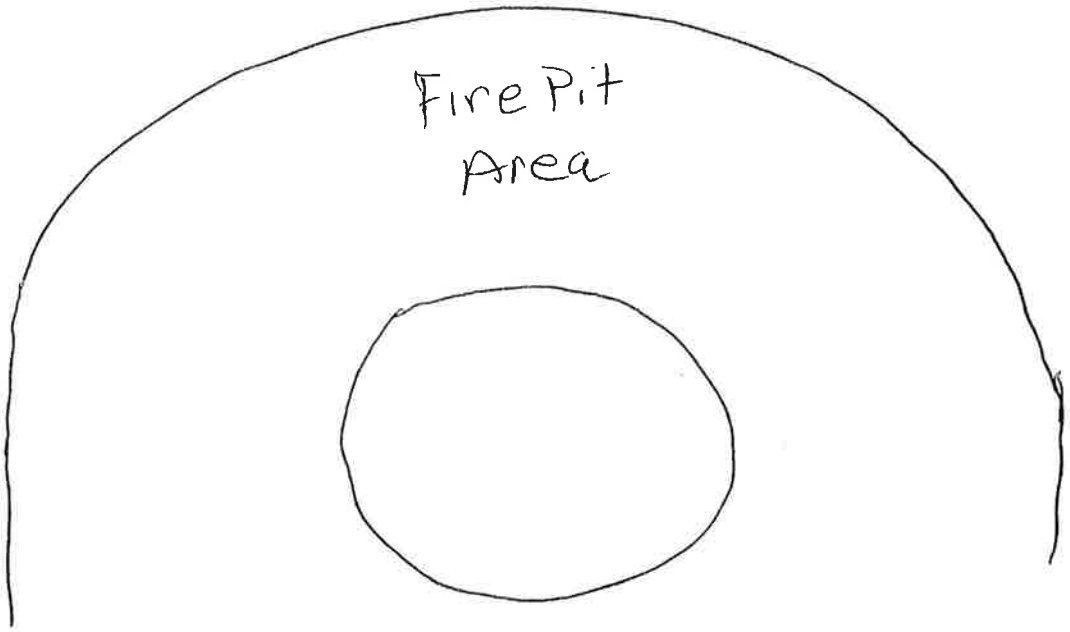
Mingle Bar

Doors to Deck

Food Area

Chalk Board Keyboard

Pavilion



S'mores

Carolers

Tax Collector Scott Randolph **Local Business Tax Receipt** **Orange County, Flo**

This local Business Tax Receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

2023 **EXPIRES 9/30/2024** 5000-1076697

5000 NON PROFIT BUSINESS O $30.00 5 EMPLOYEES

SCOTT RANDOLPH, TAX COLLECTOR • ORANGE COUNTY, FLORIDA •

TOTAL TAX	$30.00
PREVIOUSLY PAID	$30.00
TOTAL DUE	$0.00

FITZGERALD SEAN

EPILEPSY ASSOCIATION OF CENTRAL FLORIDA
109 N KIRKMAN RD
ORLANDO FL 32811

109 N KIRKMAN RD
U - ORLANDO, 32811

PAID: $30.00 0099-01112516 7/19/2023

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 05/28/2024

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 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

HCC Specialty
401 Edgewater Place, Suite 400
Wakefield, MA 01880

CONTACT NAME:
PHONE (A/C, No, Ext):
FAX (A/C, No):
E-MAIL ADDRESS:
PRODUCER CUSTOMER ID #:

INSURED

The Epilepsy Association of Central Florida, Inc.
109 N Kirkman Rd.
Suite 119
Orlando, FL 32811

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A :	U.S. Specialty Insurance Company	29599
INSURER B :	United States Fire Insurance Company	21113
INSURER C :		
INSURER D :		
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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY	X		U24SE11867	06/13/2024	12/10/2024	EACH OCCURRENCE	$ 1,000,000
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	$ 5,000
	X Liquor Liability* $1M/$1M						PERSONAL & ADV INJURY	$ 1,000,000
B	X Medical Expense			US1938446	06/13/2024	12/10/2024	GENERAL AGGREGATE	$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	$ 1,000,000
	X POLICY PRO-JECT LOC							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS						BODILY INJURY (Per accident)	$
	SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident)	$
	HIRED AUTOS							$
	NON-OWNED AUTOS							$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DEDUCTIBLE							$
	RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						WC STATU-TORY LIMITS OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH)						E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

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

The Certificate Holder is added as Additional Insured with respects to our Insured's operations only.
This insurance is primary and non-contributory as required by written contract.
This coverage is with respect to Jingle Mingle event to be held 12/07/2024 - 12/07/2024 at City of Apopka Camp Wewa Apopka FL.
Waiver of Subrogation Applies (only as required by written contract).

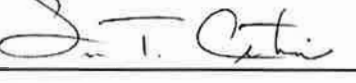
CERTIFICATE HOLDER

City of Apopka
120 E Main St.
Apopka, FL 32703

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



Alcohol Dispensing Agreement

All documents (Alcohol Dispensing Agreement, Indemnity and Hold Harmless Agreement, Certificate of Insurance and Temporary Alcohol License/Alcohol License) must be received a minimum of 30 business days prior to the event. All documents must be issued in the name of the organization dispensing the product .

Organization (Responsible for dispensing alcohol.)

Name of Organization: Epilepsy Association of Central Florida, Inc.

Primary Contact/Organization Leader Name: David Mauchon

Contact Phone Number: 407-422-1416 x4.01 E-Mail Address: david@epilepsyassociation.com

Organization Mailing Address: 109 N. Kirkman Road Orlando, FL 32811
STREET/PO BOX CITY STATE ZIP

Event Information

Name of Event:

Venue Name: Camp Wewa 221 S. Binion Road Apopka, FL 32703

Venue Address:
STREET/PO BOX CITY STATE ZIP

Please indicate the days and times your organization will be dispensing alcohol.

☑ Date: December 7, 2024 _____AM _____ Mid-Day 5:00 PM

☑ Date: December 7, 2024 _____AM _____ Mid-Day 8:30 PM

☐ Date: _____ _____AM _____ Mid-Day _____PM

561.422 Nonprofit civic organizations, charitable organizations, municipalities, and counties; temporary permits. (Please review)

Department of Business and Professional Regulation Alcohol License/Permit Number: _____

This license/permit must be issued in the name of the organization dispensing the product .

Rules and Regulations

Your organization is responsible for abiding by all local, State and Federal regulations, including those outlined by the Florida Division of Alcoholic Beverages and Tobacco, including the rules and regulations detailed below.

- Persons who serve or sell alcoholic beverages shall be at least twenty-one (21) years of age. The consumption of alcohol in or around the booth until their shift is completed is prohibited.
- Your organization will be required to visually identify persons who can legally purchase alcoholic beverages with an observable, distinctive wristband.
- No person under the age of 21 years is served.
- No person is served who appears to be intoxicated.
- Alcohol is consumed only within the event area and may not be carried out of the event area.
- No more than one (1) alcoholic beverage may be sold per customer, per sale.
- Alcohol is served in clear flexible (soft) plastic cups only.
- Beer or wine will only be poured upon order and will not be stacked waiting for orders.
- Commencement of alcohol service/sales shall not begin prior to start time of the event.
- Police may close alcohol sales at any time if they determine that controls are not being adhered to or in the interest of public safety.
- Upon demand of any peace officer, licensee shall immediately surrender the license and cease all sales of alcoholic beverages.
- Supervision of the distribution, sales and operation of alcoholic beverage concession area(s) shall at all times be under the control of the licensed organization. No other person or entity shall have authority to sell, pour, or distribute alcoholic beverages.

Agreement

THIS AGREEMENT made and entered into this 3 day of October, 2024 by and between, Epilepsy Association of Central Florida, Inc., hereinafter referred to as Organization and the CITY OF APOPKA, FLORIDA, hereinafter referred to as the City.

Organization has entered an agreement with the City to serve alcohol at the aforementioned named event. Organization agrees to comply with all local ordinances and codes, application state and federal statutes and regulations, including those set forth by the Florida Department of Business and Professional Regulation - Division of Alcoholic Beverages and Tobacco. This agreement will remain in effect throughout the duration of the event, to also include the set-up and break-down period.

Requirements

A. Organization shall, at its sole cost and expense, procure and maintain throughout the term of this agreement, Commercial General Liability and Workers' Compensation insurance, including Employer Liability insurance, with minimum policy limits of $1,000,000 Combined Single Limits, or to the extent and in such amounts as required and authorized by Florida Law. If such GL insurance contains a general aggregate limit, it shall apply separately to this event in the amount of $2,000,000. Products and completed operations aggregate shall be $1,000,000. Damage to rented premises shall be included at $100,000. Food Trucks and/or any vehicle that functions as the workplace, must provide an Automobile Liability insurance policy in the minimum amount of $300,000 Combined Single Limit. Organization shall also provide evidence of coverage for liquor liability in the minimum amount of $1,000,000. The insurance policy must not exclude Personal Injury/Advertising Injury, Medical, or volunteer coverage.

   All insurance policies shall: 1) provide that the insurance carrier shall not cancel, terminate or otherwise modify the terms and conditions of said policies except upon thirty days written notice to the City's contract administrator; 2) be evidenced by an endorsed Certificate of Insurance generated and executed by a licensed insurance broker, brokerage, or similar licensed insurance professional evidencing such coverage, and naming the City of Apopka as a named additional insured, as well as furnishing the City with a certified copy, or copies, of said insurance policies; and 3) be approved as to form and sufficiency by the City's contract administrator. The original insurance certificates, all extensions to the insurance certificate, and declaration sheet should be sent to City of Apopka, Human Resources/Risk Management, 120 East Main Street, Apopka, FL 32703 or e-mailed to riskmanagement@apopka.net. All insurance coverage shall be written with a company having an A.M. Best Rating of at least the "A" category and size category of VIII.

   Said insurance coverage's procured by Organization as required herein, including but not limited to any excess and/or umbrella coverages, shall be considered, and Organization agrees that said insurance coverage's it procures as required herein shall be considered, as primary insurance over and above any other insurance, or self–insurance, available to the City, and that any other insurance, or self-insurance available to the City shall be considered secondary to, or in excess of, the insurance coverage(s) procured by the Organization as required herein.

   Nothing herein shall be construed to extend the City of Apopka's liability beyond that provided in section 768.28, Florida Statutes.

B. Organization recognizes the City's authority to cancel the aforementioned event due to inclement weather or any other safety concern that may arise and agrees to fully cooperate with personnel from the City, County and local health departments.

C. The City is not responsible or liable for any damage, loss or theft the Organization may sustain.

D. Organization agrees that the City may use photographic images and video taken at the aforementioned event in promotions and publications. These images may be used online or provided to media outlets and/or used in social media applications.

Signature of Organizer	David Mawhon Printed Name of Organizer
Title of Organizer	Organization Name

Indemnification and Hold Harmless Agreement

Organization shall defend, indemnify and hold harmless the City of Apopka and all of City's officers, agents, and employees from and against all claims, liability, loss and expense, including reasonable costs, collection expenses, attorneys' fees, and court costs which may arise because of the negligence (whether active or passive), misconduct, or other fault, in whole or in part (whether joint, concurrent, or contributing), of the Organization, its officers, agents or employees in performance or non-performance of its obligations under the Agreement, including, but not limited to automobile negligence, foodborne illness negligence, or other claims and/or suits. Organization recognizes the broad nature of this indemnification and hold harmless clause, as well as the provision of a legal defense to the City when necessary, and voluntarily makes this covenant and expressly acknowledges the receipt of such good and valuable consideration provided by the City in support of these indemnification, legal defense and hold harmless contractual obligations in accordance with the laws of the State of Florida. This clause shall survive the termination of this Agreement. Compliance with any insurance requirements required elsewhere within this Agreement shall not relieve the Organization of its liability and obligation to defend, hold harmless and indemnify the City as set forth in this article of the Agreement.

Nothing herein shall be construed to extend the City of Apopka's liability beyond that provided in section 768.28, Florida Statutes.

I attest that I am a representative of the organization named above and have been authorized to sign on its behalf.

Signature of Organizer

David Manchon
Printed Name of Organizer

Executive Director
Title of Organizer

Epilepsy Association of Central Florida, Inc
Organization Name

STATE OF FLORIDA
County of Orange

The foregoing instrument was acknowledged before me this 4 day of October, 2024, by David Manchon, and who is personally known to me or who has produced _____ as identification and who did (did not) take an oath.

CECELIA W. LAYFIELD
Notary Public - State of Florida
Commission # HH 295622
My Comm. Expires Aug 30, 2026
Bonded through National Notary Assn.

Notary Public: Cecelia W. Layfield
Commission No. HH 295622
Commission Expires: August 30, 2026

LAW ENFORCEMENT EXTRA DUTY REQUEST

☐ **New Vendor (Must completely fill out form)**

☑ **Existing Vendor (*Only need to fill out name and dates required and any updated information*)**

Business/Vendor Name: Epilepsy Association of Central Florida, INC.

Business/Vendor Address: 109 N. Kirkman Road Orlando, FL 32811

Business/Vendor Phone: 407-422-1416 Fax: 407-423-0417

Vendor Type: (i.e. Financial, Construction, Funeral Home, Individual etc.) NON-PROFIT

Primary Contact Name: David Mowchon Contact Phone: 407-422-1416 X-101

Email Address: david@epilepsyassociation.com

Billing Contact Name: Ceil Layfield Contact Phone: 407-252-3772

Email Address: ceil@epilepsyassociation.com

Location of Security Detail: Camp Wewa 221 S. Binion Road Apopka, FL 32703

Estimated Number of Attendees: 200

Duties Requested at Detail:

☐ Escort ☑ Security ☐ Traffic Control ☐ Law Enforcement

☐ Patrol ☐ Other (Describe): _____

Is Alcohol Being Served? ☐ No ☑ Yes (if so, a copy of the alcohol permit must be submitted with this form)

READ AND UNDERSTAND THE FOLLOWING REQUIREMENTS:

Approval of employment activities will not be given, where in the judgment of the police chief, the extra-duty or extra-duty employment would be incompatible with the proper discharge of employment duties or would tend to impair, or appear to impair, independent judgment or action in the performance of one's duties.

No extra-duty job or outside employment will be authorized if a potential employer places any restrictions of race, color, gender, or national origin on who may work the job.

Licensed Liquor Establishments or locations where alcohol is being served: (Bar establishments and not a licensed restaurant where the bar is de minimus to the sale of food.)

Officers are requested for the following:

DATE	TIME			#OF OFFICERS	#OF HOURS (*4 hour minimum)
12/7/2024	5:00PM	To	9:00PM	2	4
		To			
		To			
		To			
		To			
		To			
		To			
		To			
		To			
		To			
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		To			
		To			
		To			
		To			
		To			
		To			
		To			

I HAVE READ AND UNDERSTAND THE ABOVE LISTED RULES AND COMPENSATION PROCESS.

Vendor Signature

David Mandon
Vendor Name Printed

10/3/2024
Date

Approved by Extra-Duty Coordinator or Police Chief

Date

FLORIDA

Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 01/18

85-8012627575C-6	11/30/2024	11/30/2029	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

THE EPILEPSY ASSOCIATION OF
CENTRAL FLORIDA INC
109 N KIRKMAN RD
ORLANDO FL 32811-1403

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.

FLORIDA

Important Information for Exempt Organizations

DR-14
R. 01/18

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).

2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.

3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.

4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).

5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.

6. If you have questions about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

DIVISION OF ALCOHOLIC BEVERAGES & TOBACCO
ODP APPLICATION# 194667 FILE # 53772

TEMPORARY LICENSE/PERMIT

EFFECTIVE DATE: December 07, 2024 EXPIRATION DATE: December 07, 2024

DATE	RECEIPT NBR	FEE	LICENSE NBR	SERIES	CLASS
09/24/2024	240036998	$25	ODP5802749	ODP	

NON-TRANSFERABLE, DISPLAY CONSPICUOUSLY, VALID ONLY FOR THE DATE AND PLACE INDICATED

JINGLE MINGLE TREE FESTIVAL
EPILEPSY ASSOCIATION OF CENTRAL
FLORIDA INC
221 S BINION ROAD
APOPKA, FL 32703

CONTROL NUMBER: 33068822

DISPLAY AS REQUIRED BY LAW

12-12 Jingle Bell Book Bash

DRC: 10/30

KLNP

Special Event Permit Application

A completed Special Event Permit application is required for all events with the City of Apopka. All events will be reviewed by our Development Review Committee for approval. The City of Apopka has the exclusive right to permit or deny an individual or organization facility use.

Once we have the complete special event application we will schedule for review and approval. Please note this may take time, as we suggest that all applications submitted at least 60 to 90 days prior to the event.

Incomplete applications will not be reviewed. After approval, an estimation of fees forms for your event based on the application and the approval is applicable.

Lexi Lahendro – Events Coordinator
events@apopka.net
407-703-1812

You must submit all required documents with your application.

Special Event Permit Application Checklist

Remember, we suggest that all applications submitted at least 60-90 days prior to the event.

Please review this checklist and make sure you have the items requested below available during this application process.

- Completed Special Event Permit Application
- Event Description
- A non-refundable application fee of $50.00 or completed application for waiver of permit fee is due when application is submitted. *Staff will contact you about this step.*
- A certificate of general liability insurance listing the "City of Apopka" as 'Additional Insured' must be submitted. Copy of the declaration sheet and endorsement page must be included. Additional insurance may be required, please see the event insurance requirements.
- A site plan (Map) or Parade/Race Route **MUST** be submitted with your application. Map must identify location of staging, tents, parking, barricades, vendors, and restrooms and must be to scale.
- Letter from the property owner granting permission for use of their property. (if on private property)
- If alcohol will be served at your event you must include the alcohol permit and insurance with the completed permit
- Copies of flyers and advertisements.
- Policies and protocols in regards to CDC Guidelines/COVID-19 & social distancing
- All renters and vendors must have a listing with the Florida Department of State Division of Corporations. Visit www.sunbiz.org for more information about the process of registering a business.
- All businesses must also must submit a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.

Applicant must be present for duration of event.

Organization Name Re-imagine Communities

Name of Applicant	Shaunte Jemison
Mailing Address	1186 Tallow Rd
City	Apopka
State	FL
Zip Code	32703
Cell Phone	3212973791
Email	Shaunte@re-imaginecommunities.org
Is your organization a Non – Profit (501C3) OR Tax Exempt Organization?	Yes
State of Florida Tax ID Number	85-0664901

A copy of your 501C3 non-profit certificate is required for non-profit status. Otherwise taxes will be charged.

Please attach a copy of your 501C3 non-profit certificate	501c3 letter.pdf RE IMAGINE COMMUNITIES EXEMPTION (1).pdf
Please attach a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.	Reimagine BTR.pdf
Name of the Event	Jingle Bell Book Bash
Date(s) of the Event	12/12/2024
Hours of the Event	5:00-7pm
Location of the Event	Kitland Nelson park
Does the location of the event take place on Public or Private Property?	Yes
Anticipated attendance:	75
Briefly describe the event and all activities that will occur during the event:	The Literacy Christmas Party aims to provide a joyful and educational holiday experience for students in our community. This event will include storytelling session Santa, holiday-themed crafts, & loads of holiday fun. This end of year party is a thank you for the students and celebrating all their hard work during the academic school year. Students will receive free books, design book marks, and enjoying the literacy themed activities, and is all designed to promote literacy and a love for reading.
Event Category	• Festival/Celebration

Are there flyers or advertisements for this event?	Yes
Additional Event Information	We do not currently have event flyers as we have to identify sponsors and solidify the location for the event. Although this is event is open to the public, students must register to attend & their parent or guardian must be with them at all times. Also we do not plan to have vendors or tables all around the park. We will not be hiring security as we normally partner with the Fire and Police Department on these events.
Will there be admission fees to your event?	No
Will you be serving alcohol?	No
Is your event open to the public?	Yes
Does your event include food concession?	No
Do you intend to have food trucks at your event?	No
Will there be merchandising vending at your event?	No
Will they need electric?	No
Will you be hiring a private security company for the event?	No
Do you require overnight security?	No
Are there musical entertainment features related to your event?	No
Will amplified sound be used during the event?	No
Will any streets be closed or will the flow of traffic be affected by the event?	No
Does your event include the use of tents?	No
Will inflatables be used at your event?	No
Will your event include any fireworks or pyrotechnics?	No

Date/Time (on site load in and load out)

For events that are held on City Property, set up days and load out days may require additional fees.

Setup/Load In

Date	12/12/2024
Start Time	4:00 PM (EDT)
End Time	7:00 PM (EDT)

Event Dates

Date	12/12/2024
Start Time	5:00 PM (EDT)
End Time	7:00 PM (EDT)

Take Down/Load Out

Date	12/12/2024
Start Time	6:30 PM (EDT)
End Time	7:00 PM (EDT)

I, Being the Applicant/Event Organizer, have read and understand the guidelines contained within the City of Apopka's Special Event Permit Application and agree to conduct my event in accordance. I further understand that failure to abide by these guidelines may result in the denial or forfeiture of my Special Event Permit.

The City of Apopka is not responsible for lost, stolen or damaged items.

I acknowledge that the information contained in this application is true, correct, and complete to the best of my knowledge.

Applicant Signature	
Name of Applicant	Shaunte Jemison
Title of Applicant	Founder /CEO
Date Submitted	08/01/2024

The Applicant/Event Organizer shall maintain at all times throughout the duration of the event, a current insurance policy naming the City of Apopka as an additional insured providing coverage for all approved event activities and must be active on the date(s) of the event, including the set-up and break-down period. Failure to provide proof of adequate coverage will result in the denial of the special event permit or cancellation of the event. The City may require subcontractors acting on behalf of the Applicant/Event Organizer to provide proof of insurance or other related documents depending on the scope or location of the event.

- Comprehensive listing of all subcontractors, including but not limited to concessionaires, vendors, exhibitors, and entertainers must be submitted no later than forty-five (45) business days prior to the event.
- All certificates of insurance, required extensions to said insurance certificates, copies of insurance policies and insurance agreements must be submitted no later than **thirty (30) business days prior to the event**.

If insurance requirements are not met at least twenty (20) business days prior to the date of the event, your event will be cancelled!

Please provide a copy of your certificate of insurance. COI.pdf

The City of Apopka defines an Applicant/Event Organizer as any individual or organization that is responsible for all aspects of an event to include advertising, marketing, talent costs, insurance, hold harmless agreement contracts, along with all the revenues and expenses for the event. The Applicant/Event Organizer agrees to conduct this event in accordance with the City of Apopka Code of Ordinances (Chapters 46 and 62).

REQUIREMENTS

- Applicant/Event Organizer recognizes the City's authority to halt the operation of the above listed event due to inclement weather or any other safety concern that may arise.
- The City is not responsible or liable for any damage, loss or theft to any vendor or event participant.
- Applicant/Event Organizer agrees that the City may use photographic images and video taken at the event in promotions and publications. These images may be used online or provided to media outlets and/or used in social media applications.

INSURANCE

Before activity setup, or any other site activity begins, Applicant/Event Organizer must have a Certificate of Liability Insurance **(including all extensions to the insurance certificate—to also include a copy of the complete insurance policy)** on file with the City's Risk Management Division. The cost of such insurance shall be the responsibility of the Applicant/Event Organizer and must meet ALL requirements as directed by the City of Apopka. The City reserves the right to increase coverage as determined for higher risk events or activities. This insurance policy must remain in effect throughout the entire duration of the property use beginning with load-in and ending at the conclusion of load-out.

- Applicant/Event Organizer shall, at its sole cost and expense, procure and maintain throughout the term of this agreement, Commercial General Liability and Workers' Compensation insurance, including Employer Liability insurance, with minimum policy limits of $1,000,000 Combined Single Limits, or to the extent and in such amounts as required and authorized by Florida Law. If such GL insurance contains a general aggregate limit, it shall apply separately to this event in the amount of $2,000,000. Products and completed operations aggregate shall be $1,000,000. Damage to rented premises shall be included at $100,000. The event Applicant/Event Organizer and their representatives who wish to drive on City property to set up or tear down for events, and/or Food Trucks and/or any vehicle that functions as the workplace or is used to perform contracted work must provide an Automobile Liability insurance policy in the minimum amount of $300,000 Combined Single Limit. If alcohol is being served, the Applicant/Event Organizer shall provide evidence of coverage for liquor liability in the minimum amount of $1,000,000. The insurance policy must not exclude Personal Injury/Advertising Injury, Medical, volunteer coverage or spectator liability.
- All insurance policies shall: 1) provide that the insurance carrier shall not cancel, terminate or otherwise modify the terms and conditions of said policies except upon thirty days written notice to the City's contract administrator; 2) be evidenced by an endorsed Certificate of Insurance generated and executed by a licensed insurance broker, brokerage, or similar licensed insurance professional evidencing such coverage, and naming the City of Apopka as a named additional insured, as well as furnishing the City with a certified copy, or copies, of said insurance policies; and 3) be approved as to form and sufficiency by the City's contract administrator. The original insurance certificate(s) and all extensions to the insurance certificate(s) should be sent to: City of Apopka, Risk Management, 120 East Main Street, Apopka, FL 32703 or e-mailed to riskmanagement@apopka.net. All insurance coverage shall be written with a company having an A.M. Best Rating of at least the "A" category and size category of VIII.
- Applicant/Event Organizer is solely responsible for all applicable policy premiums, deductibles, and/or self-insured retention attached to any required coverages. Said insurance coverages procured by the Applicant/Event Organizer as required herein, including but not limited to any excess and/or umbrella coverages, shall be considered, and the Applicant/Event Organizer agrees that said insurance coverages it procures as required herein shall be considered, as primary insurance over and above any other insurance, or self–insurance, available to the City, and that any other insurance, or self-insurance available to the City shall be considered secondary to, or in excess of, the insurance coverage(s) procured by the Applicant/Event Organizer as required herein.

- Applicant/Event Organizer shall require and verify that all subcontractors, including but not limited to concessionaires, vendors, exhibitors, and entertainers, maintain insurance meeting all of the requirements stated herein. Furthermore, the insurance policy held by the Applicant/Event Organizer shall have no endorsement(s) restricting, limiting or excluding the subcontractors or work on behalf of the Applicant/Event Organizer by a subcontractor. The Certificate of Insurance submitted by the Applicant/Event Organizer must clearly state that all such subcontractors are "Named Insureds".

Nothing herein shall be construed to extend the City of Apopka's liability beyond that provided in section 768.28, Florida Statutes.

By signing below, I acknowledge that I have read and understand the insurance requirements contained herein. I further understand that my permit application may be declined if I fail to provide the appropriate insurance coverage.

Signature of Applicant	
Name of Applicant	Shaunte Jemison
Title of Applicant	Founder/CEO
Sponsoring Organization Name	Re-Imagine Communities

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAY 06 2020

RE-IMAGINE COMMUNITIES CORP
1186 TALLOW RD
APOPKA, FL 32703-0000

Employer Identification Number:
85-0664901
DLN:
26053511007470
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
April 3, 2020
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

RE-IMAGINE COMMUNITIES CORP

Sincerely,

Director, Exempt Organizations
Rulings and Agreements

Letter 947

FLORIDA

Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 01/18

Certificate Number	Effective Date	Expiration Date	Exemption Category
85-8019446003C-8	04/08/2024	04/30/2029	501(C)(3) ORGANIZATION

This certifies that

RE-IMAGINE COMMUNITIES CORP
1186 TALLOW RD
APOPKA FL 32703-8442

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.

FLORIDA

Important Information for Exempt Organizations

DR-14
R. 01/18

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).

2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.

3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.

4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).

5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.

6. If you have questions about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

RE-IMAGINE COMMUNITIES CORP
1186 TALLOW RD
APOPKA FL 32703-8442

CITY OF APOPKA

120 E Main Street
Apopka, FL 32703
Phone: 407-703-1719, Website: www.Apopka.gov/BTR

Local Business Tax Receipt

BTR ID:	BTR-5191	**Issued Date:**	June 19, 2024
Effective Date:	October 1, 2023	**Expiration Date:**	September 30, 2024
BTR Type(s):	(0801) Organization/association		

Business Name: Re-Imagine Communities Corp
Business Location: 1186 Tallow Rd APOPKA, FL 32703
Business Registration Number(s): N20000003901

Planning and Zoning Conditions:

Notes: Non-profit dedicated to empowering Central Florida's underserved and at-risk youth through innovative educational strategies and youth services.
Exempt 501(c)(3)

This receipt indicates payment of the business tax as required by Chapter 66 of the City Code. This receipt does not indicate verification of zoning compliance or actual operation of the stated business at this address.

NON-TRANSFERABLE **TO BE PLACED IN A CONSPICUOUS PLACE** **QR Code** **For Online Access**

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2024
Secretary of State
5830563210CC

DOCUMENT# N20000003901

Entity Name: RE-IMAGINE COMMUNITIES CORP.

Current Principal Place of Business:

1186 TALLOW RD
APOPKA, FL 32703

Current Mailing Address:

P.O. BOX 33
MOUNT PLYMOUTH, FL 32768 US

FEI Number: 86-0664901

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JEMISON, SHAUNTE L
1186 TALLOW RD
APOPKA, FL 32703 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEO
Name	JEMISON, SHAUNTE L
Address	1186 TALLOW RD
City-State-Zip:	APOPKA FL 32703

Title	VP
Name	MASON, TIA L
Address	PO BOX 36
City-State-Zip:	ZELLWOOD FL 32798

Title	MEM
Name	LEWIS, DEIDRE A
Address	PO BOX 47294
City-State-Zip:	TAMPA FL 33646

Title	MEM
Name	JEMISON, ALBERIC R III
Address	1186 TALLOW RD
City-State-Zip:	APOPKA FL 32703

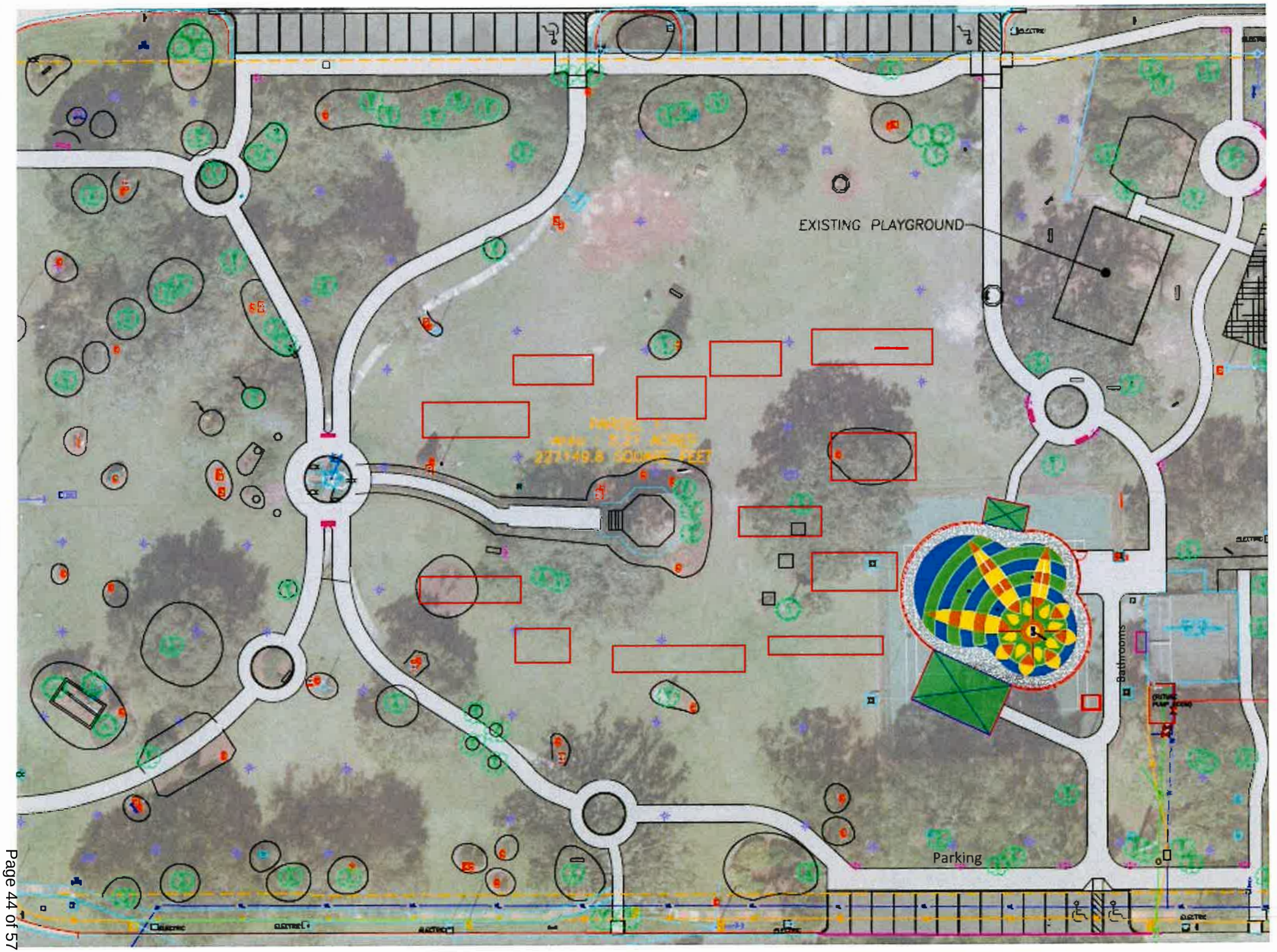
Title	PRESIDENT
Name	PLEAS, RAMON A
Address	3717 RUNDO DR
City-State-Zip:	ORLANDO FL 32818

Title	MEM
Name	MCBEAN, DALE
Address	1754 PALMERSTON CIRCLE
City-State-Zip:	OCOEE FL 34761

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHAUNTE L JEMISON CEO 04/30/2024

Electronic Signature of Signing Officer/Director Detail — Date


EXISTING PLAYGROUND
Bathrooms
Parking

Christmas in the Park 2024
Dec. 21

DEC: 10/30

Alonzo Williams

Special Event Permit Application

A completed Special Event Permit application is required for all events with the City of Apopka. All events will be reviewed by our Development Review Committee for approval. The City of Apopka has the exclusive right to permit or deny an individual or organization facility use.

Once we have the complete special event application we will schedule for review and approval. Please note this may take time, as we suggest that all applications submitted at least 60 to 90 days prior to the event.

Incomplete applications will not be reviewed. After approval, an estimation of fees forms for your event based on the application and the approval is applicable.

Lexi Lahendro – Events Coordinator
events@apopka.net
407-703-1812

You must submit all required documents with your application.

Special Event Permit Application Checklist

Remember, we suggest that all applications submitted at least 60-90 days prior to the event.

Please review this checklist and make sure you have the items requested below available during this application process.

- Completed Special Event Permit Application
- Event Description
- A non-refundable application fee of $50.00 or completed application for waiver of permit fee is due when application is submitted. *Staff will contact you about this step.*
- A certificate of general liability insurance listing the "City of Apopka" as 'Additional Insured' must be submitted. Copy of the declaration sheet and endorsement page must be included. Additional insurance may be required, please see the event insurance requirements.
- A site plan (Map) or Parade/Race Route **MUST** be submitted with your application. Map must identify location of staging, tents, parking, barricades, vendors, and restrooms and must be to scale.
- Letter from the property owner granting permission for use of their property. (if on private property)
- If alcohol will be served at your event you must include the alcohol permit and insurance with the completed permit
- Copies of flyers and advertisements.
- Policies and protocols in regards to CDC Guidelines/COVID-19 & social distancing
- All renters and vendors must have a listing with the Florida Department of State Division of Corporations. Visit www.sunbiz.org for more information about the process of registering a business.
- All businesses must also must submit a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.

Applicant must be present for duration of event.

Organization Name	BRANDON MERIWEATHER 31 WAYS FOUNDATION INC

Name of Applicant	CARLA PRYOR
Mailing Address	2013 NOBSCOT PLACE
City	APOPKA
State	FLORIDA
Zip Code	32703
Cell Phone	407-718-6294
Email	carla@bm31waysfoundation.org
Is your organization a Non – Profit (501C3) OR Tax Exempt Organization?	Yes
State of Florida Tax ID Number	352468988

A copy of your 501C3 non-profit certificate is required for non-profit status. Otherwise taxes will be charged.

Please attach a copy of your 501C3 non-profit certificate	501 C 3 Letter.pdf
Please attach a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.	BM 31 Ways Bussiness Tax Certificate 2024.pdf
Name of the Event	Christmas in the Park 2024
Date(s) of the Event	12/21/2024
Hours of the Event	11-4pm
Location of the Event	225 M A Board Street Apopka, Florida 32703
Does the location of the event take place on Public or Private Property?	Yes
Anticipated attendance:	300
Briefly describe the event and all activities that will occur during the event:	Toy giveaway that offers free food, health screenings and fun-filled kid activities like face painting, bounce house and games
Event Category	• Festival/Celebration
Are there flyers or advertisements for this event?	Yes

Attach Flyer or Advertisement 1

Will there be admission fees to your event?	No
Will you be serving alcohol?	No
Is your event open to the public?	Yes
Does your event include food concession?	Yes
Do you intend to have food trucks at your event?	No
Will there be merchandising vending at your event?	No
Will they need electric?	No
Will you be hiring a private security company for the event?	Yes

Name of Security Company: TBD

Do you require overnight security?	No
Are there musical entertainment features related to your event?	No
Will amplified sound be used during the event?	Yes
Will any streets be closed or will the flow of traffic be affected by the event?	No
Does your event include the use of tents?	No
Will inflatables be used at your event?	Yes
Will your event include any fireworks or pyrotechnics?	No

Layout map for event

Date/Time (on site load in and load out)

For events that are held on City Property, set up days and load out days may require additional fees.

Setup/Load In

Date	12/21/2024
Start Time	9:00 AM (EDT)
End Time	12:00 PM (EDT)

Event Dates

Date	12/21/2024
Start Time	12:00 PM (EDT)
End Time	4:00 PM (EDT)

Take Down/Load Out

Date	12/21/2024
Start Time	4:00 PM (EDT)
End Time	6:00 PM (EDT)

I, Being the Applicant/Event Organizer, have read and understand the guidelines contained within the City of Apopka's Special Event Permit Application and agree to conduct my event in accordance. I further understand that failure to abide by these guidelines may result in the denial or forfeiture of my Special Event Permit.

The City of Apopka is not responsible for lost, stolen or damaged items.

I acknowledge that the information contained in this application is true, correct, and complete to the best of my knowledge.

Applicant Signature	
Name of Applicant	Carla Pryor
Title of Applicant	Administration
Date Submitted	10/01/2024

The Applicant/Event Organizer shall maintain at all times throughout the duration of the event, a current insurance policy naming the City of Apopka as an additional insured providing coverage for all approved event activities and must be active on the date(s) of the event, including the set-up and break-down period. Failure to provide proof of adequate coverage will result in the denial of the special event permit or cancellation of the event. The City may require subcontractors acting on behalf of the Applicant/Event Organizer to provide proof of insurance or other related documents depending on the scope or location of the event.

- Comprehensive listing of all subcontractors, including but not limited to concessionaires, vendors, exhibitors, and entertainers must be submitted no later than forty-five (45) business days prior to the event.
- All certificates of insurance, required extensions to said insurance certificates, copies of insurance policies and insurance agreements must be submitted no later than **thirty (30) business days prior to the event**.

If insurance requirements are not met at least twenty (20) business days prior to the date of the event, your event will be cancelled!

Please provide a copy of your certificate of insurance.	Certificate.pdf

The City of Apopka defines an Applicant/Event Organizer as any individual or organization that is responsible for all aspects of an event to include advertising, marketing, talent costs, insurance, hold harmless agreement contracts, along with all the revenues and expenses for the event. The Applicant/Event Organizer agrees to conduct this event in accordance with the City of Apopka Code of Ordinances (Chapters 46 and 62).

REQUIREMENTS

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- Applicant/Event Organizer is solely responsible for all applicable policy premiums, deductibles, and/or self-insured retention attached to any required coverages. Said insurance coverages procured by the Applicant/Event Organizer as required herein, including but not limited to any excess and/or umbrella coverages, shall be considered, and the Applicant/Event Organizer agrees that said insurance coverages it procures as required herein shall be considered, as primary insurance over and above any other insurance, or self–insurance, available to the City, and that any other insurance, or self-insurance available to the City shall be considered secondary to, or in excess of, the insurance coverage(s) procured by the Applicant/Event Organizer as required herein.
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Nothing herein shall be construed to extend the City of Apopka's liability beyond that provided in section 768.28, Florida Statutes.

By signing below, I acknowledge that I have read and understand the insurance requirements contained herein. I further understand that my permit application may be declined if I fail to provide the appropriate insurance coverage.

Signature of Applicant	
Name of Applicant	Carla Pryor
Title of Applicant	Administration
Sponsoring Organization Name	BRANDON MERIWEATHER 31 WAYS FOUNDATION INC

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAR 18 2015

BRANDON MERIWEATHER 31 WAYS
FOUNDATION INC
2013 NOBSCOT PLACE
APOPKA, FL 32703-0000

Employer Identification Number:
35-2468988
DLN:
26053475001565
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
March 12, 2015
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

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If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 5436

BRANDON MERIWEATHER 31 WAYS

Sincerely,

Director, Exempt Organizations

Letter 5436

CITY OF APOPKA

120 E Main Street
Apopka, FL 32703
Phone: 407-703-1719, Website: www.Apopka.gov/BTR

Local Business Tax Receipt

BTR ID:	BTR-6470	**Issued Date:**	September 23, 2024
Effective Date:	October 1, 2024	**Expiration Date:**	September 30, 2025
BTR Type(s):	(08O1) Organization/association		

Business Name: Brandon Meriweather 31 Ways Foundation Inc
Business Location: 2013 Nobscot Pl APOPKA, FL 32703
Business Registration Number(s): N12000009575

Planning and Zoning Conditions:

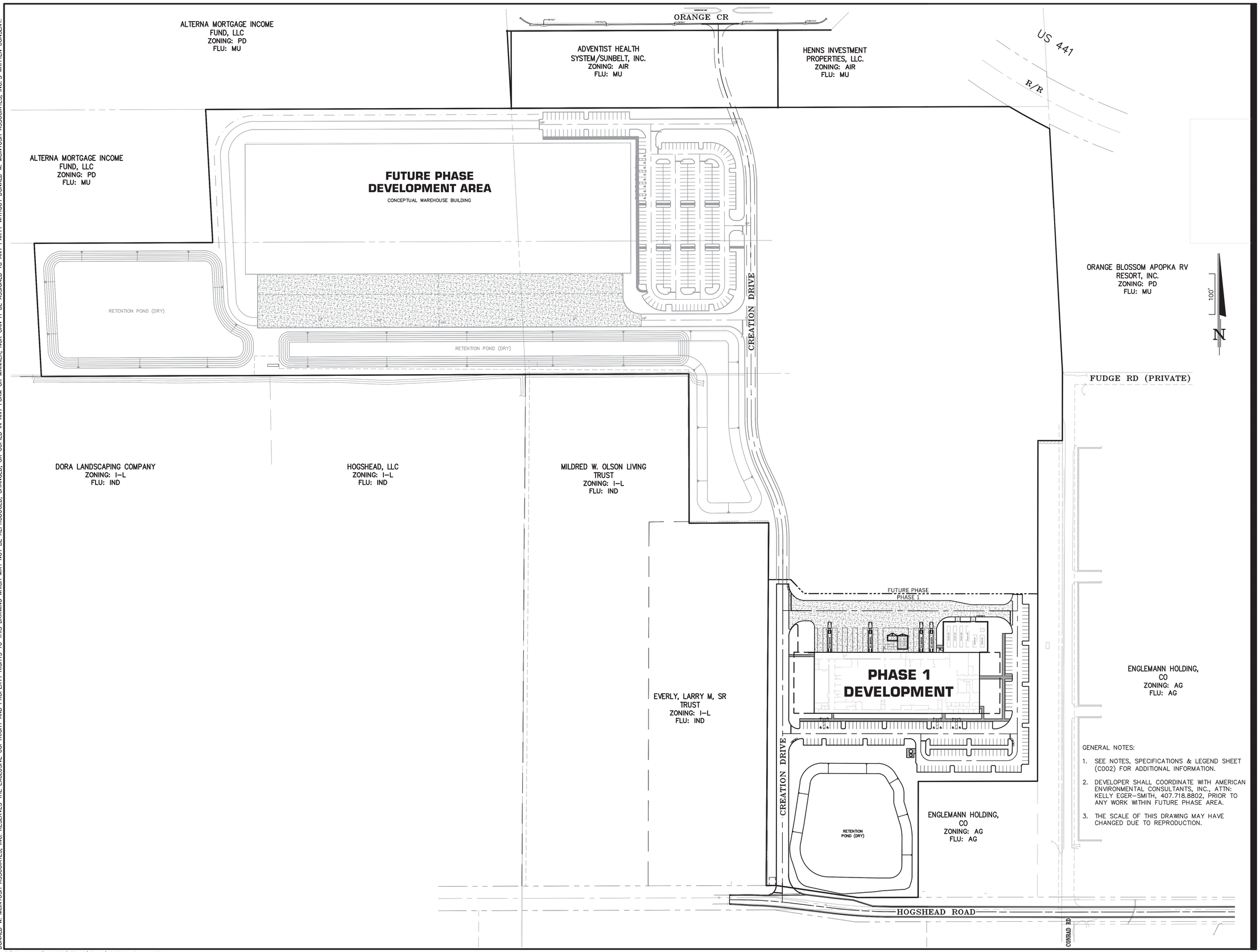
Notes: 501(C)(3) Exempt

This receipt indicates payment of the business tax as required by Chapter 66 of the City Code. This receipt does not indicate verification of zoning compliance or actual operation of the stated business at this address.

NON-TRANSFERABLE **TO BE PLACED IN A CONSPICUOUS PLACE** **QR Code** **For Online Access**


GINGERBREAD HOUSE
CUPCAKE COMMONS


Christmas in the park
December 21st.
2024
12PM-4PM
TOY GIVE AWAY FREE
COMMUNITY RESOURCES HEALTH
SCREENINGS*FREE FOOD
Alonzo Williams Park
225 M.A Board St.
Apopka Fl, 32703
Brandon Meriweather
31 WAYS FOUNDATION
LOVING, CARING & SHARING
Big Raffle for
Middle & High
schoolers



GENERAL NOTES:

1. SEE NOTES, SPECIFICATIONS & LEGEND SHEET (C002) FOR ADDITIONAL INFORMATION.
2. DEVELOPER SHALL COORDINATE WITH AMERICAN ENVIRONMENTAL CONSULTANTS, INC., ATTN: KELLY EGER-SMITH, 407.718.8802, PRIOR TO ANY WORK WITHIN FUTURE PHASE AREA.
3. THE SCALE OF THIS DRAWING MAY HAVE CHANGED DUE TO REPRODUCTION.

McINTOSH ASSOCIATES
an LJA company
1950 SUMMIT PARK DRIVE, SUITE 600
ORLANDO, FL 32810 407.644.4068

Seals

DATE: _____

CONSTRUCTION SITE PLANS

AdventHealth

Fudge Road Complex – Phase 1

CITY OF APOPKA, FLORIDA

DOCUMENT CHANGES

Description	Date
ADD TURN LANE & STREET NAME PER COUNTY	7/19/21
NEW BLDG, REVISED PHASE 1	9/23/24

Issue Description	
Issue Date	6/12/21
Project No	20566
Drawn/ Designed	MAB / MAB
Checked By	JTT

Drawing Title

MASTER SITE PLAN

Sheet Number

C031

6 OF 36