Community Block Party. Date(s): July 24, 2025



Added to Rec Calend	ar: 6/10/25
Added to Legistar:	<u> </u>
	15,0509 11105
Agenda Date:	16/29
Event: Approve	d Disapproved

Park Rental Fee:
Damage Deposit:
Total Amount Due:
Total Amount Paid:
Payment Date:
Balance Due:
Receipt #:

Event Details	
event Title: Committy Black Party - Hur	itage Park
urpose:	•
☐ Athletic/Recreation ☐ Outdoo	r Market
☐ Parade* ☐ Concert	t/Performance
☐ Festival/Fair ☐ Social	
Demonstration* *Additional paperwork is required to be submitted directly to Foley PD. Plants	
Provide a clear statement of the specific reason(s) you believ	e the event will
significantly contribute to and benefit the City of Foley. First Baltist Gulf Shukes would like to bless	./
of Foles with an evert crimed at giving	Children and
ywas families a safe place to have	hun activities
and with a Christian whoset	
VIV VIIV D	
Provide a clear statement of the opportunity for City-wide c	itizen participation in the
event. Citizens would benefit from the fun,	hase achinises
Sigh as face painting bance houses,	Live Christian
Missing hot day and other the best of	the Cart.
The sie has been stored the	7.70 300 1 .
	4.4444466
Are there any potential negative impacts to the local busines	s community or
surrounding areas?	,
1 No not heliane so	
1 (10 110 1 / 14/18/6)	

The City reserves the right to request an Event Application Presentation to staff if they deem the event to have an impact on the surrounding community.

Event Details Continued

Setup Date & Time: 7/24/25 at 3 PM
Event Start Date: 7/24/25 Event Start Time: 6:30 Pm
Event End Date: 7/24/25 Event End Time: 8:00 Pm
Clean-up Date & Time: 7/24/25 at 8 Pm
Outdoor entertainment may take place from 8 am – 10 pm, Sunday – Thursday
and 8 am – 11 pm on Friday and Saturday.
Main Contact Name: John Yates
Phone Number: <u>254-488-0286</u> Backup Phone Number: <u>251-968-7369</u>
Email Address: john @ fbcqulf. Com
Where will the event take place?
☐Public Property ☐Park Property
Estimated Attendance: 200
Estimated Attendance Previous Year: W/A
Estimated Attendance During Peak: NA
Event Website/Facebook Page: None
Event Promoter (if other): Facebook Exit not yet Circa fee
Is this a repeat event for the City? Possilly
Will the event include any of the following?
☐ Fireworks ☐ Mobile Food Vendors
Generators Street Closure
☐ Live Entertainment ☐ Parade
Tents Tents over 400 sq. ft.
Alcohol Other Sno Cones, Grills for Hut Dogs, Papar
Petting Zoo, Garnival, Gircus Inflatables of yes additional insurance will be required)
Open Flames of Any Type

Required Documents

Site Plan

- · Provide a detailed plan on the location of the following:
 - Music, barricades, food truck and vendor layout
 - Number of toilets (how often are toilets serviced) and hand-washing sinks
 - o Entries and exits, including emergency access if deemed necessary

Utilities Plan

- Utilities including electrical requirements/generators and water supply.
- Obtaining complete electrical and water needs information from vendors, musicians, tent lighting, entertainers, exhibitors, is the responsibility of the event organizer.
- Event organizers will need to decide if the existing power facilities are suitable.
- The installation and distribution of all electrical power used to support the event shall be completed by a licensed electrician. In some cases, electrical distribution plans and load calculations prepared by a licensed electrician may be required.

Security/Safety Plan

- Plan will be developed and approved in coordination with Foley PD/FD
- Please describe your security plan including crowd control, internal security, and venue safety.
- Foley PD officers are required when alcohol will be served at City facilities.

Emergency Action Plan

- Please describe your basic emergency response plan including:
 - o Identification of who will make key decisions such as canceling the event
 - Plans for communicating with event staff, volunteers, guests, vendor, on-site police/security, and first aid providers
 - o Plan for safely managing site evacuation
 - o Plan for injured participants or lost children
 - Plan for securing potentially dangerous items on the event site (tents, signage, propane tanks, and items that can be propelled by high winds)
 - o Plans for inclement weather

Medical Plan

- This will require a plan to be approved by Foley Fire Department.
- The event organizer shall be responsible for making adequate plans for medical coverage of performers, employees, participants, and attendees. Please describe your medical plan including your communications plan and the types of resources that will be at your event.
- · Please identify any medical aid areas.

Required Documents (continued)

Waste Management Pla	ın
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 Consideration must be given at all times to how waste generated by event will be managed by Event Organizer. Depending on the details of your event, you may be required to develop a Waste Management Plan. Please note, if waste is left at City venues following an event the cost of removal and clean-up will be passed on to the Event Organizer.

nyent Organizer.	
Noise Control Plan	
 Please describe the sound equipment that you will use <u>Pw table</u> Sw 	1911
• Please describe the sound equipment that you will use <u>Partable</u> SN SWND system, able to he volume - Controlled	!
 Will you be using amplification? What noise sources are anticipated from the event? 	
Pre-recorded	
Live music/band	
Acoustics	
PA System	
Other	
 Please provide a list or performers, performance type, music genre, performand duration. The complete performance list is required 7 days prior to the 	
Road Closures • Parades and Road Closures must be approved by City of Foley PD. All even give substantial notice (60 days) to minimize the risk to your event.	ts must
Additional Service Providers	
 Provide a complete list all event service providers 7 days prior to event include a complete list all event service providers 7 days prior to event include arrival Operators, Portable Toilets, Tables/Tents, Barricades/Traffic, etc. Talso include all food vendors so Foley FD can check for adherence to fire complete. 	his must
Marketing Materials	
 Any signage must comply with the City's Temporary Advertising Signs Poli 	
must be robust and of good quality. Additional signage may require a pern	
Do you wish to erect signage or banners within the City to promote you Yes No	ii caciii
o Type of signage or banners: DH dow Banner at Site of	evert

Required Documents Continued

Certificates of Insurance

City Council Approval Date:

Any amusements rides or inflatables required additional insurance with the City listed as an additional insured. In addition to completing the application form and paying permit and rental fees (when applicable), the applicant is required to submit an original certificate of insurance showing Commercial General Liability coverage with a minimum of \$1,000,000 combined single limit per occurrence. If any alcohol will be served, liquor liability coverage must be obtained and is subject to Alabama's statutory limits. If the applicant has employees, workers' compensation insurance must be obtained and is subject to Alabama's statutory limits. The applicant also agrees to endorse the City of Foley (City of Foley, Alabama, Attn: Special Events Division, P.O. Box 1750, Foley, AL 36535) as an additional insured on the general liability, auto, and liquor liability policy and to include a copy of each endorsement with the certificate of insurance. Proof of insurance, acceptable to the City, shall be furnished no later than five (5) days preceding the date of the assembly. Failure to provide proof of insurance will automatically revoke permit. Each certificate of insurance shall provide that the insurer must give the City of Foley at least twenty-one (21) days' prior written notice of cancellation and termination of the applicant's coverage there under.

Events run for profit and commercial purposes will be subject to an application fee. Please contact the City of Foley for current fees and charges. Processing Fee TBD due 21 days prior. Applications will not be accepted less than 21 days before an Event Date. All vendors participating in events must have a business license or special event license.

Fire Department Representative:

Police Department Representative:

Public Works Department Representative:		
Leisure Services Department Representative:		
Department	Estimated Cost	
Fire Department		
Police Department		
Public Works		
Leisure Services		
TOTAL		

Self-Certification Form

I/We,
approval to host an event within the City of Foley, acknowledge that the information submitted in this application is true and correct.
I/We accept full responsibility for any damages incurred to City of Foley premises including irrigation lines, electrical lines, water mains, electricity, toilets, pavilion, and other permanent structures as a result of our activities during the specified contract period.
I/We indemnify the City of Foley against any action, suit or proceeding caused by my failure to observe all statutory and or other requirements or as a result of my negligence or willful actions.
I/We will ensure the appropriate liability and other insurances are in place for the activities to be conducted.
I/We understand that I am responsible for obtaining approval from all applicable agencies.
I/We will keep a copy of the completed form on-site during the event to present upon request to any police officer prior to or during the event.
I/We will provide a post event letter to the Mayor and Council to identify the contributions made to the local community.
Signature: Date: 5/29/25 Print Name: (INA) Vates

Additional Application for Parade/Demonstration/Road Closure

TO: Foley Police Department 200 East Section St Foley, AL 36535

Instructions: This application shall be filed not less than ten (10) days before the date on which it is proposed to conduct the parade/demonstration/road closure.

What are you applying for?

Parade	_	Road Closure
Name of Spor	nsoring Organization:	
Applicant:	······································	
		ns, each person must be listed.)
Address:		· · · · · · · · · · · · · · · · · · ·
Day Phone:		Evening Phone:
Cell Phone:	***************************************	Fax:
Email:		
		From:To:
Starting Time	a.m. p.m,	Disbanding Time:a.mp.m
		, shown, displayed, props, stages, sound l be used in assembly or rally areas
(If insufficient spa	ce, list on separate shee	t)

Parade/Demonstra	ation Route/Assembly a	rea (If insufficient space, list on separate
sheet)		
Please list street cl	losures and why they ar	e necessary (If insufficient space, list on
separate sheet)		

Additional Application for Parade/Demonstration/Road Closure (continued)

Number & Type of V	ehicles:
Number & Type of A	nimals:
Number & Type of B	ands:
Number & Type of B	anners:
Number & Type of Si	gns:
Number & Type of Sp	pecial Props:
Number of Parade M	arshals:
Speed (if applicable)	units at which the Parade/Demonstration is to move:
	Maximum:
	RMIT NOT VALID UNLESS SIGNED
Signature of person fi	ling application/permit:
	on filing:
Contact Informati	
Address:	
Day Phone:	Evening Phone:
Cell Phone:	
Email:	
Demonstration/Road Closure un the Police Chief. The Police Chie additional people who, along wit	in, participate in, aid, form, join, incite, continue, organize, or start any Parade/ lless a Parade/Demonstration/Road Closure Permit has first been obtained from f, if he deems necessary, may require the applicant to designate a certain number of h the Event manager, shall be responsible for conducting the Parade/Demonstration/ ner in compliance with the Parade/Demonstration/Road Closure Permit and other
For Internal Use Only	
Date Submitted:	Application Approved Application Denied
Leisure Services Signature	
Police Chief's Signature (i	f needed):
Fire Chief's Signature (if r	reeded):