# 8/3/105 3pm-8pm Event Date(s): By fish Ministries Werdose Drug Auwences Drug

Added to Rec Calendar: 2/11/26	Park Rental Fee: Mywest to Wall
Added to Legistar: 7/1/6	Damage Deposit:
Legistar File ID #: 96 0087	Total Amount Due:
Agenda Date: MWM3, 2095	Total Amount Paid:
Agenda Date:	Payment Date:
	Balance Due:
Event: Approved Disapproved	Receipt #:

#### 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 Demonstration Road Closure
Name of Sponsoring Organization: Big Fish Mivisties
Applicant: Michele Morgan, Development Director
Event Manager/Person in Charge: Micho Se Morror (If there is a different person in charge of activities at different locations, each person must be listed.)
Address: 8475 Hun 595, Foley
Day Phone: 251-970-0031 Evening Phone: 601-517-2847
Cell Phone: 601 - 517 -2847 Fax:
Email: michele & big Fish Milistries. org
Purpose of Application for Permit: Overdose Drug Awareness Dac
Estimated Number of Participants: 200 +
Date of Activity (Month/Day/Year) From: August 31,25 To: Hugust 31,25
Starting Time: 3:00 a.m. p.m. Disbanding Time: 8:00 a.m. p.m.
List any Special Equipment (hand carried, shown, displayed, props, stages, sound
equipment, and other structures) that will be used in assembly or rally areas
(If insufficient space, list on separate sheet) Staro Carpment, texts
For Vendors, Chars Francisto, Food Trucks
Parade/Demonstration Route/Assembly area (If insufficient space, list on separate
sheet) NOT readed
Please list street closures and why they are necessary (If insufficient space, list on separate sheet) 77 CLSSaru
separate sneet) // / Y U Sary

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

Number & Type of Vehicles:		
Number & Type of Animals:		
Number & Type of Bands:		
Number & Type of Banners:		
Number & Type of Signs:		
Number & Type of Special Prop	os:	
Number of Parade Marshals:		
Speed (if applicable) units at wh	/	nstration is to move:
Minimum:	Maximum:	
APPLICATION/PERMIT NO	<u>DT.valid unless si</u>	GNED
Signature of person filing apply	cation/permit:	
Printed name of person filing:	1	
Contact Information		
Address:	\	
Day Phone:	Evening Pho	one:
Cell Phone:	•	
Email:	***	
No person or entity shall engage in, participate to Demonstration/Road Closure unless a Parade/I the Police Chief. The Police Chief, if he deems not additional people who, along with the Event ma Road Closure in an orderly manner in compliant laws and regulations.	Demonstration/Road Closure Perm necessary, may require the applicant mager, shall be responsible for conc	nit has first been obtained from at to designate a certain number of ducting the Parade/Demonstration/
For Internal Use Only		
Date Submitted: Ap		
Leisure Services Signature:		
Police Chief's Signature (if needed):		
Fire Chief's Signature (if needed):		

even ( Even	t Details
Event Title: (/Verdose Drug	Awareness Dan
Purpose:	,
☐ Athletic/Recreation	Outdoor Market
Parade*	Concert/Performance
Festival/Fair	Social
Demonstration*  *Additional paperwork is required to be subm	Road Closure* aitted directly to Foley PD. Please See Appendix A
Provide a clear statement of the specific r	eason(s) you believe the event will
significantly contribute to and benefit the	•
This is the international	,
Huilhelp Citizens and	1
	st the presion but the
	In ballwid Co. to help pearso
with one ? alcahel addir!	in.
Provide a clear statement of the opportur	nity for City-wide citizen participation in the
event.	
First responders will be &	the agenda to Speak. In
addition a parent, a	recovered ordered, and local
ministers will share wh	to the comment on that day.
	8
Are there any potential negative impacts	to the local business community or
surrounding areas?	
No	

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: Ang 31, Sunday -1:00
Event Start Date: Aug. 31, 2025 Event Start Time: 5:00 pm
Event End Date: Aug 31, 2005 2025 Event End Time: 8:00 pm
Clean-up Date & Time: Aug 31-8:09
Outdoor entertainment may take place from 8 am – 10 pm, Sunday – Thursday and 8 am – 11 pm on Friday and Saturday.
Main Contact Name: Michele Morgan
Phone Number: <u>401 -517-&gt;842</u> Backup Phone Number:
Email Address: 2 michelewbiatishministries. org
Where will the event take place?  Public Property  Park Property
Estimated Attendance: 100-200
Estimated Attendance Previous Year: 75-150
Estimated Attendance During Peak: Z00
Event Website/Facebook Page: big 7/shministrics.org
Event Promoter (if other): Same
Is this a repeat event for the City? <u>USS</u>
Will the event include any of the following? $^{\prime\prime}$
Fireworks Mobile Food Vendors
Generators Street Closure
☑ Live Entertainment ☐ Parade
Tents Tents over 400 sq. ft.
Alcohol Other
Petting Zoo, Carnival, Circus, Inflatables (if 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
  - o 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)
  - 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 Plan

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.

Maise	Control	Plan
110150	Conno	rian

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Noise Control Plan
· Please describe the sound equipment that you will use land many microph ma
speakcers
Will you be using amplification?  Yes  No
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, performance times
and duration. The complete performance list is required 7 days prior to the event.
Worship band From a local church.
Road Closures
<ul> <li>Parades and Road Closures must be approved by City of Foley PD. All events must give substantial notice (60 days) to minimize the risk to your event. No road Closures</li> </ul>
Additional Service Providers
Provide a complete list all event service providers 7 days prior to event including EMS,
Carnival Operators, Portable Toilets, Tables/Tents, Barricades/Traffic, etc. This must
also include all food vendors so Foley FD can check for adherence to fire code.
Marketing Materials
<ul> <li>Any signage must comply with the City's Temporary Advertising Signs Policy. Signage</li> </ul>
must be robust and of good quality. Additional signage may require a permit,
Do you wish to erect signage or banners within the City to promote your event
Yes
o Type of signage or banners: Two barrer, one lack
the stands already provided in the park

#### **Required Documents Continued**

#### Certificates of Insurance

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 rerved, 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:	· <del></del>
Leisure Services Department Representative:	

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

City	Council Approval Date:	•		

#### **Self-Certification Form**

I/We, Rig Fish Wivistries For , as the event organizer seeking
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 loca community.
Signature: Michele Morgan Date: 2/3/25 Print Name: Michele Morgan
J.