



City of Hermosa Beach
Community Resources Department

CONTRACT NUMBER: 5958

PROMOTION DATE: **RECEIVED-YS**

DATE STAMP
NOV 07 2013

STAFF
INITIALS



COMMUNITY RESOURCES

COMMERCIAL PIER PLAZA PROMOTION PERMIT APPLICATION

710 Pier Avenue • Hermosa Beach, CA 90254 • 310.318.0280 • Fax: 310.372.4333

\$758 NON-REFUNDABLE APPLICATION FEE REQUIRED WITH APPLICATION.

Request Event Date: 1st choice **

June 28, 2014

2nd Choice ** (Required):

June 21, 2014

****Date choice is not guaranteed until final calendar has been determined by City staff.**

ORGANIZATION'S INFORMATION

EVENT TITLE: Ultimate Fitness Expo

Applicant Name: Debbie Levine

CONTACT PERSON'S INFORMATION (IF DIFFERENT FROM ABOVE)

Name: _____

Address: _____

City

State

Zip

Phone: () _____

Cell: () _____

Email Address: _____

Fax: () _____

REQUIRED: CONTACT PERSON ON THE DAY OF THE EVENT:

Name: _____

Cell: () _____

EVENT INFORMATION

Promotion Type: _____

Event Start Time: 10A

Event End Time: 4p

Set Up Date: 8A (day of)

Set Up Time: 8A

(if set up includes multiple days, please include additional pages with a daily schedule).

Break Down Date: day of

Break Down Time: 4p

Estimated # of Participants: 500 + 15

Age of Participants: all

Estimated # of Spectators (daily): 500 + 15

Total Estimated Attendance: 2000*

+ throughout day

Overall Event Description - Briefly explain event and activities;

Free fitness classes, samples and info. Promoting local fitness providers and schools. Classes offered every hour.

Amplified Sound? Yes No (just in area) Filming or Television Coverage? Yes No

If **yes** to Amplified Sound, describe: Live music, PA, number and size of speakers, subs, microphone, bullhorn etc.

EQUIPMENT INFORMATION (ATTACH SITE PLAN)

A DIAGRAM OF YOUR SITE PLAN THAT INCLUDES ALL FACILITIES, EXACT PLACEMENT OF ALL EQUIPMENT, STREET CLOSURES, INGRESS AND EGRESS ROUTES, SHUTTLE ROUTES, FENCING, ACCESSIBILITY PLAN, AND PARKING MUST BE ATTACHED TO THE APPLICATION.

YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT A SITE PLAN

Please check all the boxes that apply to the equipment that will be on site for your event and specify the number and size of each (if applicable).

- | | |
|---|---|
| <input type="checkbox"/> Cars _____ | <input type="checkbox"/> Porta Potties _____ |
| <input type="checkbox"/> Semi-Trucks _____ | <input type="checkbox"/> Motor Homes _____ |
| <input type="checkbox"/> Generator _____ | Size: _____ |
| Size/Type: _____ | <input type="checkbox"/> Trailer _____ |
| <input type="checkbox"/> Vans _____ | Size: _____ |
| Size: _____ | <input checked="" type="checkbox"/> Stage <u>3x8</u> |
| <input checked="" type="checkbox"/> Sound Equipment <u>2 speakers at stage, 1 mic</u> | Measurements: _____ |
| <input type="checkbox"/> Enclosed Tents _____ | <input checked="" type="checkbox"/> Canopies <u>12-15</u> |
| <input type="checkbox"/> Other (please attach list with description of each item) | or Umbrellas |

PARKING PLAN (ATTACH DIAGRAM OF PARKING PLAN)

Parking (\$1.25 per hour or \$30 per space per day)

Will you need reserved parking spaces? Yes No

*will need 6-8 spots

If YES, please list requested parking times for each day of request:

| | | | | |
|--------------------|---------------|---------------|-------------|---------------|
| Date <u>day of</u> | from <u>8</u> | <u>am</u> /pm | to <u>6</u> | <u>am</u> /pm |
| Date _____ | from _____ | am/pm | to _____ | am/pm |
| Date _____ | from _____ | am/pm | to _____ | am/pm |

SAFETY/SECURITY PLAN

Please describe your procedures for both crowd control and internal security:

Onsite staff to oversee event flow. 3rd year doing event here, no additional security needed.

If hiring private security, please include company name and contact:

GREEN MATRIX (ENVIRONMENTAL PROTECTION PLAN)

COMPLETE THE ATTACHED GREEN MATRIX AND ATTACH TO YOUR APPLICATION.

ACCESSIBILITY PLAN

It is the applicant's responsibility to comply with all City, County, State and Federal disability access requirements applicable to the event, including the American with Disabilities Act (ADA). All indoor and outdoor sites, activities and programs must be accessible to persons with disabilities. Please describe your accessibility plan:

INSURANCE

Unless greater or lesser coverage is requested, applicant agrees to furnish the City of Hermosa Beach evidence of \$2 million comprehensive general liability insurance in the form of a certificate, including endorsement, covering the entire period of this permit, naming the City of Hermosa Beach, its officers, agents and employees as additionally insured. Permittee waives claims against the City of Hermosa Beach, its officers, agents and employees, for fees or damages caused, arising out of or in any way connected with the exercise of this permit.

APPLICANT AGREES TO COMPLY WITH ALL APPLICANT'S LAWS AND AGREES TO MAINTAIN PREMISES IN GOOD CONDITION AND RETURN IN THE SAME CONDITION AS BEFORE SAID USE.

I certify that the information contained herein is true and correct to the best of my knowledge. I have read and agree to comply with the City of Hermosa Beach Sustainability Measures. All fees, charges and other material will be paid and or furnished to the Department of Community Resources as mutually agreed to by both parties.



Company Representative (signature)

11/4/13

Date

Department of Community Resources

Date

ADDITIONAL FEES MAY BE ASSESSED ACCORDING TO IMPACT:

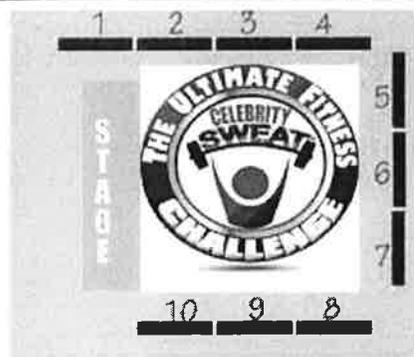
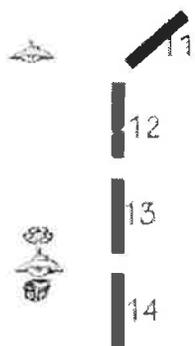
- o Public Works pre and post cleanup, barricades, dumpsters, etc.
- o Police and Safety Fees
- o Community Development Plan Checks, Permits and Inspection Fees

Damage deposit is set according to impact.

City may require attendance at Pre and Post Operations meetings

STRAND

Hennessy's
Fish Market



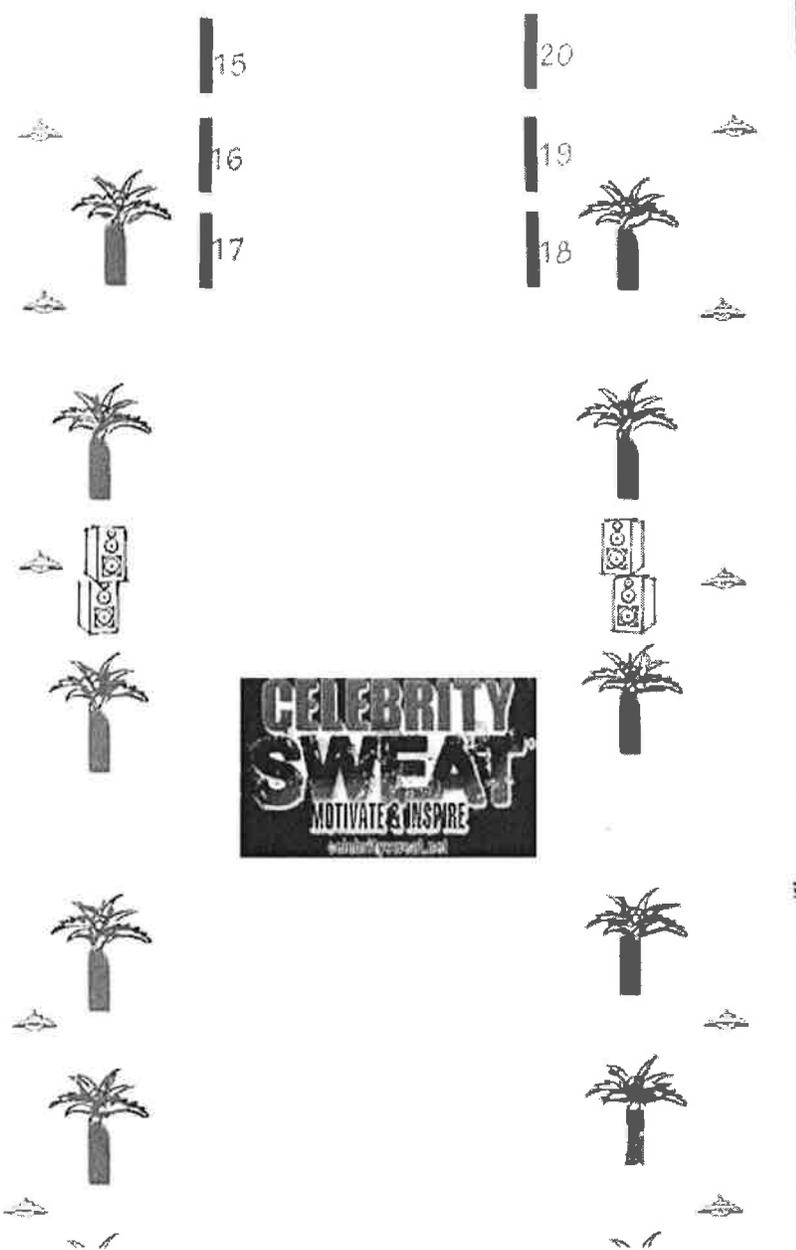
Mermaid
Parking Lot
Beach Dr.

Beach Dr.

FIRE LANE

FIRE LANE

Dragon
Lighthouse
Shirts & Tales
Zeppy's
Treasure Chest
Patrick Molloy's
Sharkey's
Sangrias
Liquor Store



Cantina Real
Pier Surf
Lapperts
Avanti
Café Bonaparte
Il Bocaccio
Beach Shop
Heroes of Xerox
Spyder
Mediterraneo