



**Public Works Department
Office of the Director**

Tom Funcheon
Public Works Director

To: Mayor and Board of Commissioners

From: Tom Funcheon, Public Works Director

Date: April 17, 2018

Re: Special Event – Tarpon Springs Merchants Association
OPA Palooza
June 8-10, 2018

Recommendation:

That the Mayor and Board of Commissioners approve the Tarpon Springs Merchants Association's special event application for the "OPA Palooza" on June 8-10, 2018, and the temporary closure of Dodecanese Blvd. (Athens to Roosevelt.).

If a change in the event date is necessary due to inclement weather, the City Manager will authorize/designate a rain date.

Background:

This event has been approved by the Special Events Review Committee based on past years' events.

The hours of this Greek food and music festival will be from noon to 10:00 p.m. on Friday, 10:00 a.m. to 10:00 p.m. on Saturday, and 11:00 a.m. to 5:00 p.m. on Sunday. Set-up will begin at 6:00 a.m. on Friday and clean-up will be completed by at 9:00 p.m. on Sunday. Food and beverages (alcoholic) will be sold, and profits will be used for advertising other events.

All set-up and clean-up will be the event sponsor's (Tarpon Springs Merchants Association) responsibility.

It is understood that in order for the Sponsor to receive a permit to proceed, he/she must comply with the following:

- A Certificate of Insurance in the amount of \$1,000,000 naming the City as an "additional insured".

Approval of this event authorizes the Sponsor/User the use of City property for said special event with the understanding that they must operate and carry out the needs and functions of the event within the confines and requirements established and approved by the Special Events Committee, the B.O.C. and the Sponsor's application on record.

**City of Tarpon Springs
Application for Special Events**

Event Information:

Date of Application: March 1, 2018

Name of Event: OPA! Palooza

Date(s) of Event: June 8-10, 2018

Alternate Date(s): N/A

Hours of Event: Fri: 12-10pm, Sat: 10am-10pm, Sun: 11am-5pm

Set up/break down time needed: From Friday at 6:00 am to Sunday at 9:00 pm

Type/Purpose of Event: Greek Food & Music Festival

Location of Event (include map for parade/procession routes with assembly and disband points): Sponge Docks from Athens to Roosevelt

If Closure of a City Parking Lot is needed, please check: Mother Meres ___ Tarpon Ave. ___ Orange St. ___ Court/Lemon ___

Other:

Disposition of Proceeds: Pay for expenses of event and advertising for other events.

Applicant Information:

Name of Organization: Tarpon Springs Merchants Association

Registered Nonprofit Org.: Yes No

Organizations Address: P O Box 2793, Tarpon Springs FL 34688

Individual to Contact: Carol Rodriguez (Telephone #) 845-661-5518 (email) carolaer@ymail.com

Alternative Contact: Suzanne King (SIK Promotions) (Telephone #) 727-417-5494 (email) suzfest@gmail.com

General Information:

Number of Vendors: 100 (Sponsor is required to keep a list of vendors, and must be able to produce upon request.)

Location for Designated Vendor Parking (Please complete Vendor Designated Parking Form and attach to application):

Vendor parking on Roosevelt & Sackleson Lot on Hill Street

Approximate Number of Attendees: 5000 Entrance Fee: \$ FREE

Location for Attendee Parking: Various private lots throughout the Sponge Docks

Will Private Security be Provided: Yes No Name of Private Company: Gator Guards

Will the Following be Provided: Traffic Control: Yes No Crowd Control: Yes No

Will Music be Provided: Yes No Hours of Play: 12-10pm each day Band: DJ: Other:

Type & Location of Toilet Facilities: Port-o-Potties at 615 Hope Street (SIK Promotions handling this) & City public restroom

Tent or Other Structure: Yes No Type of Structure:

How will Structure be Secured: Barrel Weights

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Solid Waste Collection/Disposal: Yes No Dumpster: Rolloff: Other: Will hire City employee for the following hours: Fri: 5:30 pm until finished, Sat: 3:00 pm until finished, Sun: 2 pm until finished.

If parade # of Participants: Animals _____ Floats: _____ Bands: _____ Other: _____

Amusement/Carnival Rides: Yes No Name of Company Providing Rides: _____

Types of Rides: _____ Is Diagram of Layout Attached: Yes No

Will Food/Beverages be Served: Yes No Cooked on Site: Catered: Sold: Given Away:

Will Alcoholic Beverages be Served: Yes No Type of Alcoholic Beverages: Beer & Wine

Event Sponsor is responsible to ensure that all food/alcohol vendors have all necessary licenses as required by the Department of Business and Professional Regulations, Division of Hotels & Restaurants and/or Division of Alcohol and Tobacco, Department of Health, Environmental Health Division or any other applicable State Agency.

Equipment/Miscellaneous (please check if needed):

Barricades: How many: As needed per TSPD

Cones: How many: As needed per TSPD

Portable Stage: Location: _____

Electricity Needed: Where: Dodecanese from Athens to Roosevelt

Public Restrooms: Hours of Opening/Closing: 6am to 11pm each day

Street Banners: Locations: City approved locations

Additional City Trash Cans:

Directional Parking Signs: Locations: Where allowed

Other: Would like to hire shuttle driver from 5:30-10pm on Friday, 3-10pm on Saturday and 2-5pm on Sunday to pick up at Splash Park/Dog Park. SIK Promotions will be providing stage and placement at 615 Hope Street.

Is a check made payable to the City of Tarpon Springs for the Application Fee & Deposit Attached: Yes No

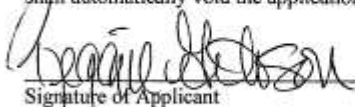
If not, when will it be sent: _____

Is the Certificate of Insurance Attached: Yes No If not, when will it be sent: When received from insurance company

I (we) agree that it is my (our) responsibility to cleanup after the conclusion of the special event: Yes No

I agree to provide a Post Special Report within 10 calendar days subsequent to the event: Yes No Failure to do so may result in forfeiture of deposit.

I (we) have read and completed this application and it is true and correct to the best of my (our) knowledge; I (we) have read the general instructions for this application and the City of Tarpon Springs Ordinance #88-25 and agree to conform with the provisions as set forth therein. I (we) understand that knowingly providing false information on the application shall automatically void the application and cancel the event.



Signature of Applicant

3-16-18

Date