20, 122/21

CITY OF HIALEAH

ITEM #____

NOV 2 3 2021



EVENT PERMIT APPLICATION

(TO BE COMPLETED BY ORGANIZATION)

ORGANIZATION: Insomniac

ADDRESS: 212 N Miami Ave

ZIP CODE: 33128

TELEPHONE: 571-212-0027

CONTACT PERSON: William Cormier

TYPE OF EVENT: Music Event

PURPOSE FOR WHICH FUNDS WILL BE USED: Music and Arts event for Art Basel

I have received, read and understand the application process and regulations set forth by the City of Hialeah and other agencies.

Signature: William Cormier

FOR OFFICE USE ONLY

| Property Owner's Notarized Letter Received (If Applicable) | |
|--|--|
| Police recommendation received: | |
| Fire recommendation received: | |
| \$250 Clean-up Fee Received: | |

CITY OF HIALEAH



EVENT PERMIT APPLICATION

(TO BE COMPLETED BY PROMOTER/APPLICANT)

COMPANY/PROMOTER: Insomniac

CONTACT PERSON: William Cormier

PHONE #: 571-212-0027

EVENT LOCATION: 4800 NW 37th Ave

DATES: Wednesday 12/1 - Monday 12/6 5pm - 5am (ending 5am Monday)

TYPE OF EVENT: Music & Art Event

DESCRIPTION OF EVENT (PLEASE BE SPECIFIC, INCLUDING NAME OF ARTIST(S)):

5 day music and art event showcasing various electronic artists as well as an NFT art gallery

Set UP: 11/29/2021

Take down: 12/8/21

ANTICIPATED ATTENDANCE: 3000-6000

PROPERTY OWNER: Avra Jain

ADDRESS: 7272 NE 6th Ct #10

ZIP CODE: 33138

NEAREST RESIDENCE: N/A Industrial Area

I have received, read and understand the application process and regulations set forth by the City of Hialeah and other agencies.

Signature: William Cormier



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/22/2021

| 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 have ADDITIONAL INSURED provisions or be endorsed. |
| Is SUBDOCATION IS WANVED subject to the forme and conditions of the policy contain policies may require an endorsement. A statement on |

| PRODUCER 1-213-630-3200 | | | | | |
|---|---|--------|--|--|--|
| Aon Risk Insurance Services West, Inc. Aon 707 Wilshire Blvd. | PHONE FAX (A/C, No, Ext): (A/C, No): E-MAIL ADDRESS: | | | | |
| Suite 2700 | INSURER(S) AFFORDING | NAIC # | | | |
| Los Angeles, CA 90017 | INSURER A: ZURICH AMER INS CO | 16535 | | | |
| INSURED | INSURER B: NATIONAL FIRE & MARINE INS CO | | | | |
| Insomniac Holdings, LLC | INSURER C : AMERICAN ZURICH INS CO | | | | |
| c/o 9348 Civic Center Drive | INSURER D : | | | | |
| | INSURER E : | | | | |
| Beverly Hills, CA 90210 | INSTITUTE F | | | | |

| | | | | NOOKENT | | | |
|------------------------------------|--|----------------------|--|----------------------------|----------------------------|--|------------------|
| CO | VERAGES CER | TIFICATE | NUMBER: 63826173 | | | REVISION NUMBER: | |
| IN C | HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RI ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH | EQUIREME PERTAIN, | NT, TERM OR CONDITION C THE INSURANCE AFFORDE | D BY THE POLICIES | OR OTHER I | DOCUMENT WITH RESPECT | CT TO WHICH THIS |
| INSR | TYPE OF INSURANCE | ADDL SUBR | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMIT | S |
| A | X COMMERCIAL GENERAL LIABILITY | | GLO 1064137-04 | 11/01/21 | 11/01/22 | EACH OCCURRENCE | \$ 1,000,000 |
| | CLAIMS-MADE X OCCUR | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 1,000,000 |
| | X Contractual | | | | | MED EXP (Any one person) | \$ EXCLUDED |
| | X \$2,000,000 SIR | | | | | PERSONAL & ADV INJURY | \$ 1,000,000 |
| GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | GENERAL AGGREGATE | \$ 3,000,000 |
| | POLICY PRO- X LOC | | | | | PRODUCTS - COMP/OP AGG | \$ 2,000,000 |
| | OTHER: | | | | | | \$ |
| A | AUTOMOBILE LIABILITY | | BAP 1064134-04 | 11/01/21 | 11/01/22 | COMBINED SINGLE LIMIT (Ea accident) | \$ 2,000,000 |
| | ANY AUTO | | | | | BODILY INJURY (Per person) | \$ |
| | X OWNED AUTOS ONLY SCHEDULED | | | | | BODILY INJURY (Per accident) | \$ |
| | X HIRED AUTOS ONLY X AUTOS ONLY | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | | | | | | \$ |
| в | X UMBRELLA LIAB X OCCUR | | 42-UMO-304410-05 | 11/01/21 | 11/01/22 | EACH OCCURRENCE | \$ 5,000,000 |
| | EXCESS LIAB CLAIMS-MADE | | | | | AGGREGATE | \$ 5,000,000 |
| | DED X RETENTION \$ 25,000 | | | | | | \$ |
| С | WORKERS COMPENSATION | | WC 1064130 04 | 11/01/21 | 11/01/22 | X PER OTH- STATUTE ER | |

| | ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBEREXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N | N/A | WC 1064136 04 | 11/01/21 | E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT | \$ 2,000,000 \$ 2,000,000 \$ 2,000,000 |
|---|--|-----|-----|----------------|----------|---|--|
| A | Liquor Liability | | | GLO 1064137-04 | 11/01/21 | | 1,000,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedula, may be attached if more space is required)

Art Basel Week on 12/1-12/6/21 at 4800 NW 37th Ave, Miami, FL 33142 - permit

Certificate Holder is an additional insured on the liability policies, but only with respect to liability that arises out of the acts or omissions of the Named Insured; or, those persons or organizations with whom the Named Insured has agreed to provide this insurance under written contract, but only to the extent of the liability assumed under such contract.

Workers Compensation is evidenced for employees of the Named Insured Only. 30 days NOC

| CERTIFICATE HOLDER | | CANCELLATION |
|--------------------|-----|--|
| City of Hialeah | | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| 501 Palm Ave | | AUTHORIZED REPRESENTATIVE |
| Hialeah, FL 33010 | USA | Aon Risk Insurance Services West, Inc. |

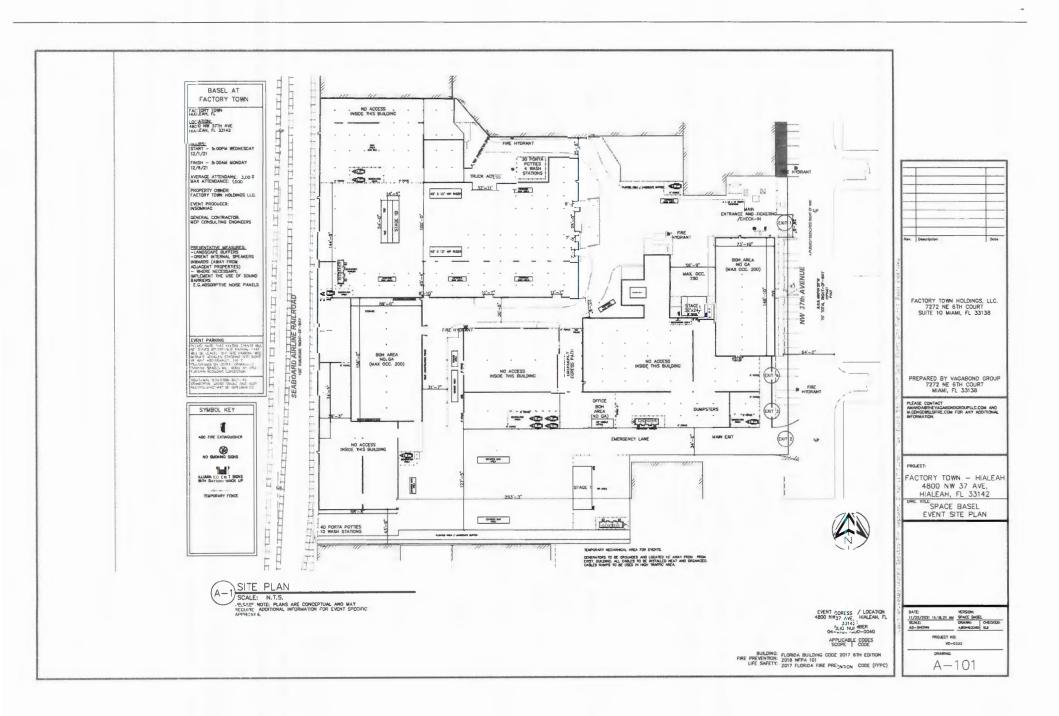
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SUPPLEMENT TO CERTIFICATE OF INSURANCE

NAME OF INSURED: Insomniac Holdings, LLC

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Leal, Brigette

From: Sent: To: Subject: Fatjo, Marbelys Tuesday, November 23, 2021 12:38 PM Leal, Brigette Police Recommendatins: Art Basel @ Factory Town

From: Perez, Yan <YPEREZ@hialeahfl.gov> Sent: Tuesday, November 23, 2021 11:25 AM To: Fatjo, Marbelys <MRubio@hialeahfl.gov> Cc: Fuente, George (1080) <GFUENTE@hialeahfl.gov> Subject: Fwd: Art Basel @ Factory Town

Hi Marbelys,

Please scroll down to the last email with the red lettering. Those are the daily breakdowns for the officers. Wednesday 12/1/2021 was later added with 3 officers and 1 supervisor from 5 pm to 4 am.

Again, they provide their own security inside the event. We are only on site to provide police presence, security to the surrounding area, and act inside the event in case of extreme emergency. They handle any other issues inside their event.

Thank you,

Yan

Sent from my iPhone

Begin forwarded message:

From: "Pineiro, Yunior 1204" <<u>YPINEIRO@hialeahfl.gov</u>> Date: November 23, 2021 at 10:55:55 AM EST To: "Perez, Yan" <<u>YPEREZ@hialeahfl.gov</u>> Subject: FW: Art Basel @ Factory Town

Commander,

The only add on is Wednesday 3 officers 1 supervisor and the times are 5 PM till 4 AM.

From: William Cormier <<u>william@clubspace.com</u>> Sent: Monday, November 15, 2021 3:51 PM To: Perez, Yan <<u>YPEREZ@hialeahfl.gov</u>> Cc: Pineiro, Yunior 1204 <<u>YPINEIRO@hialeahfl.gov</u>> Subject: Re: Art Basel @ Factory Town WARNING: This email originated outside of the City of Hialeah. Do not click on any links or attachments unless you recognize the sender and know the content is safe.

I dont have a flyer yet. But we will be expecting 3-6k people each day with the same egress plan and such as last time. Im happy to confirm any other specifics you may be missing.

Thank you!

On Mon, Nov 15, 2021 at 11:10 AM Perez, Yan <<u>YPEREZ@hialeahfl.gov</u>> wrote:

Hey William,

Everything is great. I will more than happy to assist you with this event, and I might be able to join you on this one.

Question. Do you have an information flier or anything that describes the event or events so that I can have an idea of what we are expecting?

Thank you,

Yan

From: William Cormier <<u>william@clubspace.com</u>> Sent: Sunday, November 14, 2021 3:03 PM To: Perez, Yan <<u>YPEREZ@hialeahfl.gov</u>> Cc: Pineiro, Yunior 1204 <<u>YPINEIRO@hialeahfl.gov</u>>; Andrea Bravo <<u>abravo@clubspace.com</u>> Subject: Art Basel @ Factory Town

WARNING: This email originated outside of the City of Hialeah. Do not click on any links or attachments unless you recognize the sender and know the content is safe.

I hope you're well!

Copying Yunior here for vision as well, but Im gearing up for our week of programming at Factory Town for Basel.

We will need the same deployment of officers for the following days:

4 days of operation - Thursday Dec 2nd -Sunday Dec 5th (ending on Monday morning)

5pm-5am (12 hours)

1 Commander @ \$70/hr

5 Officers @ \$65/hr

9pm-5am (8 hours)

4 Officers @ \$65/hr

Please let me know if you'd like to jump on a call or have a meeting but we are expecting the same number of people and the event plan is almost identical to last time.

I hope you can join us on this one Yan!

Tharik you!

~Will

William Cormier Technical Director | Club Space +1 (571) 212-0027

Email secured by Check Point

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.

Email secured by Check Point

CITY OF HIALEAH FIRE DEPARTMENT



Special Events/Carnivals/Fairs Fire Inspection Information and Plans Submittal Requirements

In reference to a request for a Music and Arts Basel Event.

| Organization: | Insomniac |
|------------------------|---|
| Event Location: | 4800 NW 37th Avenue, Hialeah |
| Dates: | December 1, 2021 through December 6, 2021 |
| Attendance: | 3,000 – 6,000 people |
| Hours: | 5:00 PM through 5:00 AM |
| Contact: | William Cornier or Amanda Bonvecchio |
| | 571.212.0027 or 305-213-4054 |
| | william@clubspace.com |

The City of Hialeah Fire Prevention Bureau's requirements are as follows:

- 1. A Life Safety Evaluation performed to provide an assessment of the conditions as listed per the Florida Fire Prevention Code Sec 12-4.
- 2. Provide a clear and understandable "Site Plan Drawing" of the area to be used for the event:

Plans must show:

- Area, Fence, and or Tent dimensions if one is used, door width and details.
- Show main entrance/exit
- Show tent location or location of Concessions on the Site Plan.
- If seating is provided seat separation of 16in where fourteen (14) or more seats are in one (1) row.
- Secure all temporary seating together to prevent movement of chairs into aisle or exit passageway (heavy tie-wraps to all four legs in all seats is acceptable).
- Show 44in. Aisle width.
- Show source of power and location.
- Show hours of operation.

CITY OF HIALEAH FIRE DEPARTMENT

CONDITIONS FOR EVENT

All promoters, event coordinators, etc. shall adhere to the Fire Prevention Bureau's conditions outlined below:

- 1. Provide and maintain proper lanes for emergency vehicle access to event area. Keep all automotive equipment and combustion engines 100 feet from any tent. Automotive equipment that is necessary for the event shall not be parked closer than twenty (20) feet from the tent.
- 2. All fire exits, fire escapes, exit ways must be kept open unblocked and unobstructed. An unobstructed passageway of not less than twelve (12) feet in width and free from guy ropes and other obstructions shall be maintained on all sides of any tent.
- 3. <u>Provide and coordinate off-street parking that should minimize traffic flow and obstruction</u> of responding emergency vehicles.
- 4. Cooking operations, if provided, should be remote from flammable, or combustible structures, and/or materials. <u>Keep cooking areas outside of tents and only in approved areas within any concession stand. If Deep Fryers and/or Grease Laden Vapors are present SHALL be protected with a "K" Type Extinguisher.</u>
- Provide and maintain appropriate fire extinguishers. A 2A10BC rated or better, readily accessible, with current certification tag or decal. An inspection of each tent, trailer and/or vehicle used for cooking operations will be conducted prior to the event. <u>ALL COOKING OPERATIONS SHALL</u> <u>HAVE A FIRE EXTINGUISHER BEARING A CURRENT CERTIFICATION, DATED AND</u> <u>TAGGED.</u>
- 6. <u>ALL INDOOR</u> or other cooking operations where <u>Deep Fat Fryers</u> or where <u>Grease Laden</u> <u>Vapors</u> are present SHALL be protected with a hood system, "K" Type extinguisher and automatic extinguishing system inspected and certified in accordance with NFPA 96. This includes carnival trailers and mobile cooking operations.
- 7. Each mechanized ride (electrical or engine driven) if provided shall be required to have one (1) portable ABC Fire Extinguisher (with current certification tag or decal), within reach of the ride operator. <u>Proof of an Approved Electrical and Mechanical Inspection by the City of Hialeah Building Department must be submitted prior to the issuance of this Permit.</u>
- 8. Event Personnel shall have direct radio access to an event supervisor to relay emergency information and event conditions.
- 9. The Fire Department should be provided with emergency contact personnel names, and phone numbers *answered during non-hours of operation*.

CITY OF HIALEAH FIRE DEPARTMENT

- 10. All tents (including but not limited to tents used for displays, exhibitions, sales, cooking operations, etc.) shall be of flame-resistant material. The Fire Marshal's office shall be provided with a current certificate of flame resistance. Fire extinguishers shall be placed near exits and not to exceed every seventy-five (75) feet travel distance or 2500 square feet.
- 11. All flammable decorations, effects, sawdust, etc. when used in doorways, means of egress, floors and/or passageways shall be treated with a flame-retardant solution.
- 12. NO SMOKING signs shall be conspicuously posted and enforced throughout any tent structure or where combustible materials are stored.
- 13. No fireworks, open flames, or other devices emitting flame or fire shall be allowed to be used in or adjacent to any tent. Balloons or other similar devices filled with a flammable, toxic, or explosive gas shall not be permitted in or adjacent any tent.
- 14. All pertinent and adopted fire codes must be adhered to as per the Florida Fire Prevention Code and the Code of Ordinances of the City of Hialeah.
- 15. <u>The event should be closed anytime lightning is in the area and precautions taken in anticipation of windstorm or severe weather.</u>
- 16. A <u>\$219.45 PERMIT FEE</u> per Hialeah Ordinance 94-69 is required PRIOR TO FINAL APPROVAL payable to the Hialeah Fire Department. an inspection will be required at the location of the event. The <u>INSPECTION FEE is \$144.90</u>. The <u>TOTAL COST is \$364.35</u> for the permit and the required inspection.
- 17. A fire inspection will be made prior to the opening date to insure compliance with applicable fire/life safety codes.

The Fire Marshal or his designee reserves the right to call in extra personnel if conditions warrant. Any unforeseen condition that presents a fire hazard or would contribute to the spread of fire, or would delay or interfere with the rapid exit of persons from the tent or would interfere with or delay the extinguishment of a fire and which is not otherwise covered by this document shall be immediately abated, eliminated or corrected as ordered by the Fire Marshal, Chief Fire Officer or his designee.

Contact the Fire Prevention Bureau to provide the required information. If you need assistance, please contact the Fire Prevention Bureau at 305- 883-6975.



City of Hialeah Fire Rescue Department Fire Prevention Bureau Coronavirus (COVID-19)

General Guidelines

- People must follow the social distancing and facial covering and personal protection equipment (PPE) guidelines as defined by the Centers for Disease Control (CDC) and consistent with Occupational Safety and Health Administration (OSHA) and other regulatory guidelines:
 - Gatherings of fewer than 10 people
 - Six-foot distance between people
 - Wear facial coverings
 - o Wash hands and/or use hand sanitizer often
- Facilities must implement certain procedures:
 - Enhanced sanitizing of all common areas and frequent touch points
 - Placement of trash containers for face masks and other personal protective equipment (PPE) near exits and entrances and other common areas
 - Comprehensive cleaning of facilities must be performed each night and include thoroughly disinfecting all frequent touch points and emptying all trash receptacles using solid waste bags that are double-bagged and securely sealed
 - Posting CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" and to exercise social responsibility
 - o Installing hand sanitizer at entry point and through site
 - Indicate one direction path of travel

Hialeah Fire Department



"Committed to Serve and Protect our Community"

| Permit Application | Permit Fee:\$219.45Inspection Fee:\$144.90Total Permit Fee:\$364.35After Hours Fire Watch Minimum 3 hours: \$376.24 |
|--|---|
| Please print or type (blue or black ink | only). No white-out allowed |
| Return completed application and fee | to: Fire Prevention Bureau 83 East 5 th Street 2 nd Floor, Hialeah Florida 33010 |
| Name of Event: Maya Warrior | Type of Event: Corporate |
| Date of Event: 12/1 - 12/3 | Promoters Estimate of Attendance: |
| Location of Event: <u>4800 NW 37 Ave</u> | Time of Event: 8 pm - to 5 am |
| company: Party Sparks Inc | Date of Application: 11/22/21 |
| Address: 4401 NW 87 ave 405 | city: DOral State: FL |
| Name of Promoter: Envel + PUI2 | Driver's License: 2200208754040 |
| Home Address: 4352 SW 159th path | City: MIAMI State: FL |
| Phone Number: 305 -760 - 4969 | |
| Email: (140 0 party sparks. com | |
| Name of Person(s) Who Will Manage/ Control | this Event: <u>HUGD Castaneda</u> |
| Emergency Contact: Ernest RU | 12 |
| Phone: 305-342-2403 | Cell: 305 - 342 - 2403 |
| Name of Applicant: Ernest RU12 | Title of Applicant: Owner |
| Date: 11/22/21 Signature: | Lann |
| | Office Use Only |
| Date Appl. Received: | Amount Received: \$ |
| Approved: | Permit Number: |

| | | | | Certifica | te of Insurance 28638 | Issue Date: 11/23/ | 2021 |
|--|-----------------|---|---------------------|-------------------------------------|---|--|--|
| PRODUCER Professional Program Insurance Brokerage 1304 Southpoint Blvd., Suite 101 Petaluma, CA 94954 | | | | | THIS CE INFORM CERTIFIC AMEND, | RTIFICATE IS ISSUED AS A MATTE ATION ONLY AND CONFERS NO RI CATE HOLDER. THIS CERTIFICATI EXTEND OR ALTER THE COVERAG ICIES BELOW. | R OF GHTS UPON THE DOES NOT GE AFFORDED B |
| | | | | | | INSURERS AFFORDING COV | |
| INSURED Party Sparks, Inc. and Light FX Pros, LLC 7261 NW 43rd Street Miami, FL 33166 | | | | | INSURE | R A: Underwriter's at Lloyd's, Lo | ndon |
| | | | | | INSURE | R B: | |
| | | | | | INSURE | R C: | |
| | | | | | INSURE | R D: | <u> </u> |
| ANY | REQUIREMENT, TE | ERM OR COND | TION OF ANY CONTRAC | CT OR OTHER DOCUMENT | WITH RESPECT TO WHICH | RED ABOVE FOR THE PERIOD INDICATED. NO THIS CERTIFICATE MAY BE ISSUED OR MAY F CONDITIONS OF SUCH POLICIES. | ERTAIN, THE |
| CO | TYPE OF INS | URANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (DD/MM/YY) | POLICY EXPIRATION DATE (DD/MM/YY) | LIMITS | |
| | GENERAL LIAN | BILITY | BY/21 0211 | 9/30/2021 | 9/30/2022 | EACH ACCIDENT | \$5,000,00 |
| A | CLAIMS MADE | | | 9/30/2021 | 9/30/2022 | MEDICAL EXP (any one person) | |
| | | | | | FIRE LEGAL LIABILITY | \$200,00 | |
| | | | | | GENERAL AGGREGATE | \$5,000,00 | |
| | | | | | | PRODUCTS-COMP/ OPS AGG | |
| | | | DCATIONS/VEHICLES | | BY ENDORSEMENT/SPE | CIAL PROVISIONS | |
| ocati | | 12/1/202 Factory T 4800 NW Hialeah F | 37th Ave | 2021 | | | |
| dditional Insured: Factory Town City Of Hialeah City of Hialea | | | | | e (Permit Only) | | |
| in D | ate(s): | 12/4/2021 | | | | | |
| | Disalaur | SPFX Firev | works Display | | · ···································· | | |
| be of | Display: | | | | | | |

| | | | | Certifica | 28632 | rance | Issue Date: 11/22/2 | 2021 | |
|--|---|------------|---|-------------------------------------|---|---------------------------------|--|--|--|
| PRODUCER Professional Program Insurance Brokerage 1304 Southpoint Blvd., Suite 101 Petaluma, CA 94954 | | | | | | INFORM/ CERTIFIC AMEND, I | RTIFICATE IS ISSUED AS A MATTEI ATION ONLY AND CONFERS NO RIU CATE HOLDER. THIS CERTIFICATE EXTEND OR ALTER THE COVERAG ICIES BELOW. | R OF SHTS UPON TH DOES NOT | |
| | | | | | INSURERS AFFORDING COVERAGE | | | | |
| INSURED Party Sparks, Inc. and Light FX Pros, LLC | | | | | INSURER A: Underwriter's at Lloyd's, London | | | | |
| | | | | | INSURER B: | | | | |
| | 7261 NW 43rd Street Miami, FL 33166 | | | | | INSURER C: | | | |
| | | | | | - | NSURE | R D: | A CONTRACTOR OF THE OWNER OF THE | |
| | | | | | | | RED ABOVE FOR THE PERIOD INDICATED. NO HIS CERTIFICATE MAY BE ISSUED OR MAY P CONDITIONS OF SUCH POLICIES. | ERTAIN, THE | |
| CO | TYPE OF INS | URANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (DD/MM/YY) | POLICY EXPI | | LIMITS | | |
| A | GENERAL LIAS | | PY/21-0211 | 9/30/2021 | 9/30/202 | | EACH ACCIDENT | \$5,000,0 | |
| A CLAIMS MADE | F1/21-0211 | | 5/30/2021 | 0,00,200 | - | MEDICAL EXP (any one person) | | | |
| | | | | | | | FIRE LEGAL LIABILITY | \$200,0 | |
| | | | | | | | GENERAL AGGREGATE | \$5,000,0 | |
| | | | | | | | PRODUCTS-COMP/ OPS AGG | | |
| | | | OCATIONS/VEHICLES | EXCLUSIONS ADDED | BY ENDORSEM | ENT/SPE | CIAL PROVISIONS | | |
| Date(| s) of Display: | Factory T | 21, 12/2/2021, 12/3/ own 37th Ave | 2021 | | | | | |
| Additic | onal Insured: | Hialeah, I | FL 33142 Holdings LLC 212 | N Miami Ave Miami | , FL 33128 All | performe | rs and dancers on Stage Hialeah Fi | re (Permit Only | |
| Rain Date(s): 12/4/2021 | | | | | | | | | |
| ype of | f Display: | SPFX Fire | works Display | | | | | | |
| Factor 4800 I | FICATE HOLD ry Town NW 37th Ave sh, FL 33142 | DER | | | EXIPIRATION DAT WRITTEN NOTICE | E THEREON | E DESCRIBED POLICIES BE CANCELLED BEF F, THE ISSUING INSURER WILL ENDEAVOR T ERTIFICATE HOLDER NAMED TO THE LEFT, B ATION OR LIABILITY OF ANY KIND UPON THI VES. | O MAIL 10 DAYS | |
| | | | | | < | 2 | S44. | | |

Party Sparks Inc

4401 NW 87th Ave Doral, FL 33166 Office #: (305)-378-8205 Fax#: (786)-419-4959

Material Used for Display on 12/01/21 Demo 12/3/21 8pm to 5am

2 Spark One Machines Propane Tanks 4 Explod Flame Units Isopar Liquid Alcohol

We will be installing the equipment on Dec 1st to demo and test the system out for client. We will have two water cannons on hand for demo. 2 Fire Extinguishers on site



City of Hialeah Fire Department

November 23, 2021

In reference to a request from Party Sparks Inc.

| Organization: | Party Sparks, Inc. |
|------------------------|---|
| Event Location: | 4800 NW 37th Avenue, Hialeah |
| Dates: | December 1, 2021 through December 6, 2021 |
| Attendance: | 3,000 – 6,000 people |
| Hours: | 5:00 PM through 5:00 AM |
| Contact: | William Cornier or Amanda Bonvecchio |
| | 571.212.0027 or 305-213-4054 |
| | william@clubspace.com |

The City of Hialeah Fire Prevention's requirements are as follows:

- 1. State of Florida Certificate of Registration: Seasonal Retailer License.
- 2. Occupational License issued by the City of Hialeah.
- 3. Certificate of Insurance for dates of operation and location.
- 4. Certificate of Flame Resistance (Class A required for tents, if applicable).
- 5. Show drawing of event's location (20 feet from nearest structure).
- 6. Area, fence, and door width and details.
- 7. Show main entrance/exit.
- 8. Provide exit signs and emergency lights.
- 9. Indicate the location of all fire extinguishers.
- 10. Indicate the location of the generator.
- 11. Show source of power and location.
- 12. Show hours of operation.
- 13. If seating is provided, seat separation of 16 in, where 14 or more seats are in one row.
- 14. All permit applications shall be approved by the appropriate agencies. (Fire and Zoning Departments)
- 15. Provide and maintain proper lanes for emergency vehicle access to event's area. Keep all automotive equipment and combustion engines 100 feet from any tent. Automotive equipment that is necessary for the event shall not be parked closer than twenty (20) feet from the tent.
- 16. All fire exits, fire escapes, and exit ways must be kept open unblocked and unobstructed. An unobstructed passageway of not less than twelve (12) feet in width and free from guy ropes and other obstructions shall be maintained.



City of Hialeah Fire Department

- 17. Provide and maintain appropriate fire extinguishers. A 2A:10BC rated or better, readily accessible, with current certification tag or decal.
- 18. Fire extinguishers shall be placed near exits and not to exceed every seventy-five fee travel distance.
- 19. The Fire Department should be provided with emergency contact personnel names, and phone numbers **answered during non-hours of operation**.
- 20. No fireworks, or other devices emitting flame or fire shall be allowed to be used without the Fire Marshal's approval.
- 21. All pertinent and adopted fire codes must be adhered to as per the Florida Fire Prevention Code and the Code of Ordinances of the City of Hialeah.
- 22. The event should be closed anytime lightning is in the area and precautions taken in anticipation of windstorm or severe weather.
- 23. A \$219.45 Permit Fee, payable to the City of Hialeah, is required prior to Final Approval as per Ordinance 94-69. An inspection will be required at the location of event. The inspection fee is \$144.90. The total cost for the permit and the required inspection is \$364.35.
- 24. A fire inspection will be made prior to the opening date to insure compliance with applicable fire/life safety codes.

The Fire Marshal or his designee reserves the right to call in extra personnel if conditions warrant.

Any unforeseen condition that presents a fire hazard or would contribute to the spread of fire, or would delay or interfere with the rapid exit of persons from the tent or would interfere with or delay the extinguishment of a fire and which is not otherwise covered by this document shall be immediately abated, eliminated or corrected as ordered by the Fire Marshal, Chief Officer or his designee.

Please contact the Fire Prevention Bureau to provide the required information. If you need assistance, you may contact the Fire Prevention Bureau at 305-883-6975.