



Special Event Application

3/9/2022

Standard

50-SE-2022

Event Information

Event Name CINCO DE MAYO W/ROGER CLYNE & THE PEACEMAKERS AT ROCKBAR SCOTTSDALE

Event Location 4245 N CRAFTSMAN CT

Event URL WWW.ROCKBARSCOTTSDALE.COM

Event Description A TWO DAY CINCO DE MAYO CELEBRATION WITH ARIZONA'S OWN ROGER CLYNE AND THE PEACEMAKERS!

Event Dates

Event Dates (1)	Start Date	End Date	Participant Attendance	Other Attendance
	THU 5/5/2022 5:00 PM	THU 5/5/2022 11:00 PM	300	15
	FRI 5/6/2022 5:00 PM	FRI 5/6/2022 11:00 PM	300	

Setup Date THU 5/5/2022 3:30 PM - 04:30 PM

Teardown Date THU 5/5/2022 11:00 PM - 11:30 PM

Applicant Information

Applicant ROCKBAR INC.

Applicant Address 4245 N. CRAFTSMAN CT.

Applicant City SCOTTSDALE, AZ 85251

Applicant Name ALEX MUNDY

Title OWNER

Phone (602) 478-3136 Email ALEX@ROCKBARINC.COM

On-Site Contact ALEX MUNDY

Title OWNER

Phone (602) 478-3136 Email ALEX@ROCKBARINC.COM

Applicant Experience OVER 20 YEARS OF EVENT PRODUCTION EXPERIENCE AND OVER 10 YEARS HERE AT ROCKBAR SCOTTSDALE.

Prior Events

Has this event been produced before? NO

Is this an annual event? NO

Are there any changes from previous years? NO

Event Elements

Elements ENTERTAINMENT

Description ONE OF THE BEST ARIZONA BANDS PLAYING A 2 DAY CINCO DE MAYO CELEBRATION!

Public Property Criteria

Are there any cross promotions or collaborations with local businesses to encourage sales or visibility? NO

WORKING WITH LOCAL HOTELS AND OTHER RESTAURANTS FOR THOSE COMING INTO TOWN OR ACROSS TOWN FOR THE EVENT.



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Explain any anticipated regional, national, or international attendance.

AS DO ALL OF THEIR BIG SHOWS, ROGER CLYNE AND THE PEACEMAKERS, ALONG WITH THE JONS FROM TUCSON(OPENING BAND), WILL DRAW FANS FROM ALL PARTS OF ARIZONA AND BEYOND.

Is Scottsdale promoted in the special event marketing? NO

Explain how the community benefits from the event from a civic or cultural perspective.

CONCERT EVENTS AND CELEBRATIONS LIKE THIS BRING PEOPLE FROM ALL OVER TO ENJOY DOWNTOWN SCOTTSDALE AND ALL THAT IT OFFERS.

Does your event require a paid fee for participants and/or spectators? YES

Event Equipment

Stages	NO	Tables, Chairs, Furniture	YES
Generators	NO	Inflatables	NO
Portable Bars	NO	Amplified Sound	NO
Speakers	YES QTY: 1-2	Temporary Restrooms	NO
Fencing	YES HEIGHT: 3 TYPE: WOOD LATTICE	BBQ Grills or Propane Use	NO
Lighting	NO	Tents/Canopies	NO

Vendor Sales

Retail Merchandise	NO	Food And Non-Alcoholic Beverages	NO
Food Trucks	NO	Alcohol	NO
Services	NO		

Signage Plan

On-Site Signs? NO

Off-Premise Signs? NO

Signage Plan Description:

Parking Plan

City parking lot	NO	City parking garage	NO
On-street parking	NO	On-site parking	NO
Off-site parking	NO	Shuttle service from off-site parking areas	NO



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Valet service NO

Rider Provider NO

Parking Plan Description

Street Use

Street or Alley Use

Street Closure : NO

Public Parking Use

Parking Closure : NO

Sidewalk Use

Sidewalk Closure : YES

Sidewalk Name : ALLEY TO NORTH OF ROCKBAR, SOUTH OF KIVA CENTER

Closure Dates : 5/5/2022 5:00:00 PM - 5/5/2022 11:30:00 PM

Barricade Company

Company Name : PRIVATELY OWNED

Contact Name : ALEX MUNDY

Phone Number : (602) 478-3136

Entertainment - Amplification/Sound Plan

Entertainment

Sound Monitoring

Time and type of outside sound and sound check times

Plan for sound monitoring, containment, and mitigation

Police/Security

Security Personnel

Inhouse Security YES Estimated Number : 8

Hired Security NO

Off Duty Police NO

Scottsdale Fire Department and Medical Standby Services

Fire Department Permit Required NO

Medical Standby NO

Fire Apparatus/Personnel Standby Required NO



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Insurance

Insurance: Event activities on City/public property must be covered by insurance that protects the event sponsor/applicant and the City of Scottsdale. Various types and levels of liability insurance are required depending on the event. The required coverage and limits will be at the discretion of the Risk Management Division depending on the size and scope of the event. It is recommended that you submit your application and receive a determination on coverage and amounts before purchasing insurance coverage. Please refer to the Special Events Users Guide for more detailed information.

The following is a general guideline of the minimum limits that will be required:

Commercial General Liability Insurance coverage is required for all events with minimum limits of \$1,000,000 Each Occurrence, \$2,000,000 Products & Completed Operations Aggregates, \$2,000,000 General Aggregate. Liquor Liability Insurance of \$1,000,000 to \$5,000,000 Per Occurrence is required for any event where liquor is being served.

All Insurance must endorse the City of Scottsdale as an Additional Insured. A separate insurance addendum with additional insurance requirements may be added to this application and become part of this contract.

I have a race event and have submitted a copy of the participant waiver that includes waiving liability against the city of Scottsdale and holding the city of Scottsdale harmless? NO

I have included a copy of the insurance certificate showing appropriate limits and coverages as required and naming City of Scottsdale as additional insured? YES

Application Authorization

WARRANTY: Applicant warrants that the information provided in this application is true and accurate to the best of Applicant's knowledge and belief.

INDEMNIFICATION: To the fullest extent allowed by law, the Applicant agrees to defend, indemnify and hold harmless the City, its officers, officials, representatives, agents, employees and volunteers from and against all allegations, demands, proceedings, suits, actions, claims, damages, losses, expenses, including but not limited to, attorney fees, court costs, the cost of appellate proceedings, and all claim adjusting and handling expenses, arising from or related to any acts or omissions of the permit holder or its agents, contractors and subcontractors related to the Special Event including any claims, damages, or losses resulting from the City's or its employees' or agents' negligence.

The Applicant's signature below authorizes a City representative to inspect a special event on City or private property at any time, including setup.

AUTHORITY: For special events on public property, the Applicant warrants:

I am the permittee or an authorized agent of the permittee with authority to legally bind the permittee (an agent may sign only if the event is on private property) and agree to the conditions of this permit.

☒ Signature of Applicant - must be the same person listed on application.

Printed Name ALEX MUNDY

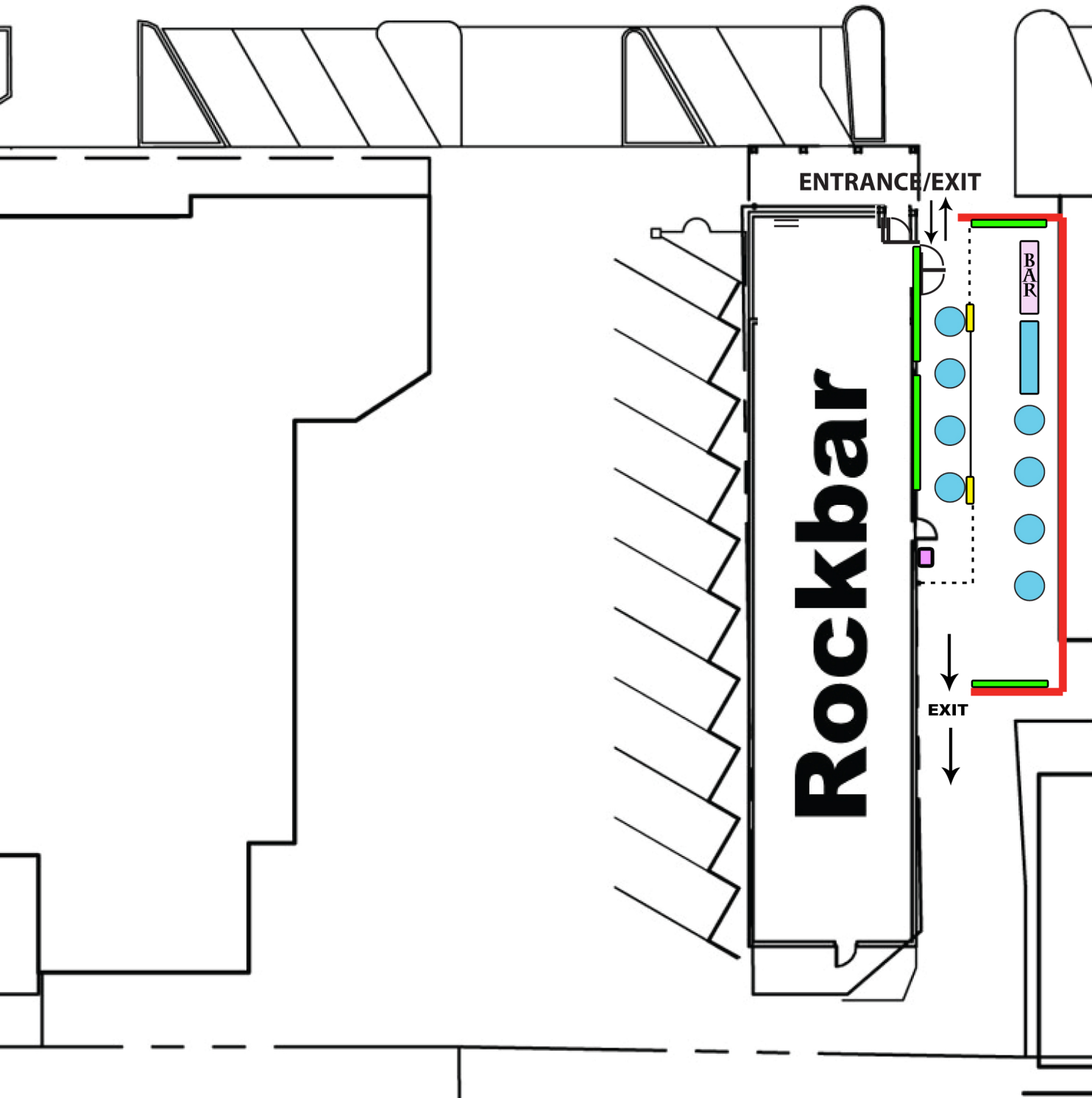
Date 3/9/2022

Title of Applicant OWNER

Cinco De Mayo Rockbar Day 2








<u>Date</u>	<u>Start</u>	<u>End</u>	<u>Setup</u>	<u>Teardown</u>	<u>Atten.</u>
5/6	5pm	11pm	3pm	11:30pm	330

Craftsman Court



ROCKBAR INC

* There will be
Exterior Decorations
for Holiday Atmosphere

-  Fence
-  Hi Top Table
-  Banner
-  Merchandise Table
-  Existing Fence
-  Removed Fence
-  Speaker

bswest



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/23/2022

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. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Ambassador Group Inc. 7010 E Chauncey Ln Ste 230 Phoenix AZ 85054	CONTACT NAME: Kristin Reider PHONE (A/C, No, Ext): (480) 776-6950 FAX (A/C, No): (480) 776-6951 E-MAIL ADDRESS: kreider@ambassadorins.com
INSURED Rockbar Inc DBA Rockbar 4245 N Craftsman Ct Scottsdale AZ 85251	INSURER(S) AFFORDING COVERAGE INSURER A: Illinois Casualty Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES**CERTIFICATE NUMBER:** 21-22 Master**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	BP44774	09/08/2021	09/08/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			BP44774	09/08/2021	09/08/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N	N / A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Liquor Liability	Y		LL108422	09/08/2021	09/08/2022	Aggregate 2,000,000 Occurrence 1,000,000

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

Coverage subject to policy forms, terms and conditions. City of Scottsdale is listed as additional insured on the General Liability and Liquor Liability as required by written contract. Waiver of subrogation is afforded.

Interest: Outside Patio & City Right of Way or Extension of Premise

CERTIFICATE HOLDER**CANCELLATION**

City of Scottsdale 7447 E. Indian School Rd. #100 Scottsdale AZ 85251	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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