

**Event Information** 

7210 E 2ND ST

Start Date

FRI FEB 3, 2023

REHAB BURGER THERAPY

3RD THROUGH FEB 12TH

REHAB BURGER THERAPY

7210 E. 2ND STREET

WILEY ARNETT

(480) 621-5358

(480) 621-5358

DENISE NELSON

OWNER

OWNER

SCOTTSDALE, AZ 85251

Event Name

Event URL

**Event Dates** 

Event Dates

Setup Date

Applicant

Title

Title

Phone

Phone

Teardown Date

**Applicant Information** 

**Applicant Address** 

Applicant City

**Applicant Name** 

**On-Site Contact** 

**Prior Events** 

(0)

Event Location

Event Description

1/2/2023

Simple 1-SE-2023 1-SG-2023 PARADA AND THE BIG GAME EVENTS REHAB BURGER THERAPY IS REQUESTING A PERMISSION TO EXPAND OUR SERVING AREA DURING PARADA AND SUPER BOWL CONSISTENT WITH PREVIOUS YEARS. FOR 2023 IT WILL BE BETWEEN FEB End Date Participant Attendance Other Attendance SUN FEB 12, 2023 FRI 2/3/2023 7:00 AM - 12:00 AM SUN 2/12/2023 11:00 PM - 11:30 PM Email WILEY@REHABBURGERTHERAPY.COM Email SCOTTSDALE@REHABBURGERTHERAPY.COM Applicant Experience WE HAVE ENJOYED SPECIAL EVENTS ANNUALLY FOR 10 YEARS NOW WITHOUT INCIDENT. Has this event been produced before? YES

Is this an annual event? YES Previous Years : 10

Are there any changes from previous years? NO

## **Event Elements**

Elements	GIVIC, RECREATIONAL
Description	GUESTS WILL JOIN US FOR A GREAT SEAT AT PARADA AS WELL AS FOOD AND DRINKS FOR ALL EVENTS

Stages NO Tables, Chairs, Furniture YES	
Generators NO Inflatables NO	

CITY OF SCOTTSDAL	E Special Ev	vent Appli	cation		1/2/2023 Simple 1-SE-2023		
Portable Bars	NO	Amplified Sound	NO				
Speakers	NO	Temporary Restroon	ns NO				
Fencing	YES HEIGHT: 40 TYPE: WOOD	BBQ Grills or Propar	ne Use NO				
Lighting	NO	Tents/Canopies	NO				
Vendor Sales							
Retail Merchandis	e NO	Food And Non-Alcoh	olic Beverages	NO			
Food Trucks	NO	Alcohol		NO			
Services	NO						
Signage Plan							
On-Site Signs? N	0						
Off-Premise Signs	? NO						
Signage Plan Des	cription:						
Parking Plan							
City parking lot	YES	City parking garage	NO				
On-street parking	NO	On-site parking	NO				
Off-site parking	NO	Shuttle service from	off-site parking	areas No	С		
Valet service	NO	Rider Provider	NO				
Parking Plan Desc	ription						
GUESTS WILL UTII	LIZE THE "PARKING CORRAL" LOCAT	ED NEXT TO PROPERT	Y ON 2ND STRE	ET.			
Entertainment - A	mplification/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 : 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

## 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:

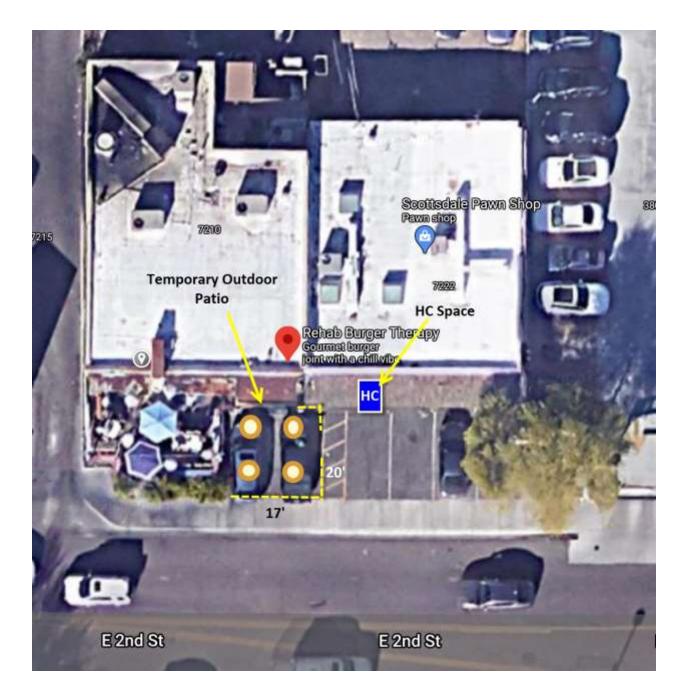
I am the permittee or an authorized agent of the permittee with authority to legally bind the permittee (an agent may sign only if the event is on private property) and agree to the conditions of this permit.

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

Printed Name WILEY ARNETT

Date 1/2/2023

Title of Applicant OWNER



## Rehab Burger Therapy Outdoor Dining Patio Extension