

REQUEST FOR CITY COUNCIL CONSIDERATION

Meeting Date: May 20, 2024

Agenda Item: 5C	Prepared for: Mike Mahaney, City Manager
Agenda Section: Consent: Motion to Approve	Date: May 9, 2024
Subject: Shamrock-N-Run Race	Division: Administration

Background:

Coastal Race Productions is requesting approval to conduct the event “Shamrock-N- Run” Race on Saturday, March 22, 2025. Please see attached maps.

The event will be held from 7:00 AM until 10:30 AM. Set-up will be between the hours of 3:00 AM and 6:30 AM. Dismantling will take place from 10:30 AM to 11:30 AM.

Please see attached application and map.

All applicable departments have signed off on the special event verbally or by email.

Recommended Action:

Approve or deny the Special Event Application

Reviewed by Department Head	Reviewed by City Manager	Reviewed by City Attorney
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Council Action:

Motion By _____ 2nd By _____ To _____



FESTIVAL & SPECIAL EVENT DIRECTOR APPROVAL

Festival/Special Event: _____

Date of Event: _____

	Approval	Denial	Method	Date
City Manager/Admin:	_____	_____	_____	_____
Finance:	_____	_____	_____	_____
Human Resources:	_____	_____	_____	_____
Information Technology:	_____	_____	_____	_____
Parks & Recreation:	_____	_____	_____	_____
Planning & Development:	_____	_____	_____	_____
Public Safety:	_____	_____	_____	_____
Public Works:	_____	_____	_____	_____

Date Sent for Director Approval: _____

Any Director Comments: _____

Date for City Council Approval: _____

Certificate of Liability Insurance sent to Risk Manager: _____

Special Event / Festival Permit Application

Instructions

Instructions

To apply for a Special Event / Festival Permit, please complete this application and submit it, including required attachments, to the City of North Myrtle Beach Administration no later than 60 days before your event.

I. Applicant & Sponsoring Organization Information

Sponsoring Organization Name Coastal Race Productions

Chief Officer of Organization Johnna (JoJo) Terragna

Applicant Name Johnna (JoJo) Terragna

Address 620 Eastwood Park Rd Sunset Beach NC 28468

Daytime Phone Number 910-713-3331

Evening Phone Number *Field not completed.*

Fax *Field not completed.*

On-Site Contact Person Johnna (JoJo) Terragna

Pager / Cell Phone Number 9107133331

Is the city a co-sponsor? Yes

What is the name of the city contact person? Angel Sylvester

II. Event Information

Event Name ShamRock-N-Run

Purpose of Event Focus of Sports Tourism along with promoting a healthy lifestyle and community.

Event Date(s) 3/22/2025

Event Date(s) 3/22/2025

Total Expected Attendance 1800

Location	220 Main St. North Myrtle Beach SC
Event Hours	7:00 AM - 10:30 AM
Set-Up Hours	3:00 AM - 6:30 AM
Dismantle Hours	10:30 AM - 11:30 AM

List any street(s) you are requesting to be closed as a result of this event. Include street name(s), day, date and time of closing and reopening:

Street One	Southbound Lane of S Ocean Blvd between Main St and 14th Ave S
Date / Time Closed	3/22/2025 7:00 AM
Date / Time Opened	3/22/2025 7:15 AM
Street Two	Outside Southbound Lane of N Ocean between Spring St and Main St.
Date / Time Closed	3/22/2025 7:00 AM
Date / Time Opened	3/22/2025 10:30 AM
Street Three	<i>Field not completed.</i>
Date / Time Closed	<i>Field not completed.</i>
Date / Time Opened	<i>Field not completed.</i>
Street Four	<i>Field not completed.</i>
Date / Time Closed	<i>Field not completed.</i>
Date / Time Opened	<i>Field not completed.</i>

III. Event Description

Does the event involve the sale of alcoholic beverages?	Yes
Please describe.	Beer Garden for participants
Has State Permit been applied for or received?	No
Will items or services be sold at the event?	No

Will there be musical entertainment at your event?	Yes
Number of Stages	1
Number of Bands	0
Type(s) of Music	DJ playing Music and Race Announcing
Time Music Will Start & Stop	6:00 AM - 10:30 AM
Name of Band(s)	<i>Field not completed.</i>
Will there be any tents or canopies at the proposed event site?	Yes
Number of Tents	5
Will any tent be over 30 by 30 feet in the area?	No
Will there be any fireworks associated with this event?	No
Has City Permit been applied for or received?	N/A
Will food be served at this event?	Yes
Please describe.	BBQ cooked off site and served to participants.
Have South Carolina Department of Health and Environmental Control (DHEC) requirements been met?	N/A
Will you provide portable toilets for the general public attending the event?	Yes

Number of Portable Toilets	20+
Number of Americans with Disabilities Act (ADA) Accessible Toilets	<i>Field not completed.</i>
Will you require the use of City electricity?	Yes
Will you require the use of City water?	No
Will you require Traffic Control?	Yes
Will you require the use of City Personnel for trash removal?	Yes
Please list any other services you are requesting from the City of North Myrtle Beach.	<i>Field not completed.</i>
IV. Fees & Proceeds	
Is the sponsoring organization a "tax exempt, non-profit" organization as defined by the Internal Revenue Service (IRS)?	Yes
Will admission fees be charged to attend the event?	Yes
Please provide the amount(s).	\$25 - \$89
Will fees be charged to vendors to participate in this event?	Yes
Please provide the amount(s).	\$250 - \$500

If the sponsoring organization is not a “tax exempt, non-profit” organization, will donations be made to any charitable organization(s)?

Yes

Please list the names of the organization(s) and the expected amount of donation.

Combat Vets, Kiwanis, Jr Beta Club

V. Event Site Map

Prior to issuance of a Festival Permit, you are required to submit a Final Event Site map to the City.

Attach a site map of the proposed event site indicating the locations of the following items:

[SHAMROCK-N-RUN 2025.png](#)

VI. Security

Will this event require security to handle the event?

No

VII. Page Information

Prior to the issuance of a Special Events Permit, proof of insurance will be required.

You must provide an Original Certificate of Insurance showing you have purchased commercial general liability insurance that names “the City of North Myrtle Beach, its officers, employees and agents” as an additional insured. Insurance coverage must be maintained for the duration of the event. The amount of insurance coverage required will depend on the risk level of the event and will be determined by the City’s Risk Management Office depending on the nature of the event, additional coverage may be required.

VIII. Affidavit

Advance cancellation notice required: If this event is cancelled, please call 843-280-5604 with this information. Otherwise, City personnel and equipment may be

needlessly dispatched and approvals of your future applications may be jeopardized.

Electronic Signature Agreement

I agree.

Electronic Signature

Johnna Terragna

Date

1/17/2024

Name of Applicant

Johnna

Title

Owner | Race Director

Applicant Email

jojo@coastalraceproductions.com



FIRST AVE N

FIRST AVE N

FIRST AVE N

ND

HILLSIDE DR N

SPONSORS

BBQ

PACKET PICK-UP

TRASH

BEER GARDEN

FINISH

MAIN ST

TIMER

DJ

START

MAIN ST

N OCEAN BLVD

S OCEAN BLVD

MAIN ST

PORT-A-JONS

HILLSIDE DR S

85°
AQI 48

E