

REQUEST FOR CITY COUNCIL CONSIDERATION

Meeting Date: November 1, 2021

Agenda Item: 5A	Prepared for: Mike Mahaney, City Manager
Agenda Section: Consent: Motion to Approve	Date: October 22, 2021
Subject: Annual North Myrtle Beach Christmas Parade	Division: Administration

Background:

Destination North Myrtle Beach is requesting approval to conduct the Annual North Myrtle Beach Christmas Parade Saturday, December 4, 2021. The event is co-sponsored by the City of North Myrtle Beach.

The event will be held from 5:30 PM until 7:30 PM. Set up will begin at 3:00 PM. Dismantling will take place after the parade and when the majority of parade attendees are off the street.

Please see original application, street closures, and map attached.

All applicable departments have signed off on the special event via email.

Recommended Action:

Approve the Special Event Application

Reviewed by Department Head	Reviewed by City Manager	Reviewed by City Attorney
Council Action: Motion By _____ 2 nd By _____ To _____		



FESTIVAL & SPECIAL EVENT DIRECTOR APPROVAL

Festival/Special Event: _____

Date of Event: _____

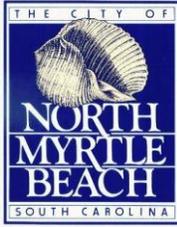
	Approval	Denial	Method	Date
City Manager/Admin:	_____	_____	_____	_____
Finance:	_____	_____	_____	_____
Human Resources:	_____	_____	_____	_____
Information Technology:	_____	_____	_____	_____
Parks & Recreation:	_____	_____	_____	_____
Planning & Development:	_____	_____	_____	_____
Public Safety: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

Date Sent for Director Approval: _____

Any Director Comments: _____

Date for City Council Approval: _____

Certificate of Liability Insurance sent to Risk Manager: _____



PERMIT # _____
City of North Myrtle Beach
Special Event/Festival Permit Application

Instructions: To apply for a Festival Permit, please complete this application and submit it, including required attachments, City of North Myrtle Beach Administration no later than sixty (60) days before your event.

I. APPLICANT AND SPONSORING ORGANIZATION INFORMATION

SPONSORING ORGANIZATION NAME:

Destination North Myrtle Beach

CHIEF OFFICER OF ORGANIZATION:

Cheryl Kilday, President/CEO

APPLICANT NAME:

Charlene Lynam

ADDRESS:

1521 Highway 17 South, North Myrtle Beach, SC 29582

DAYTIME PHONE: 843-361-3045 EVENING PHONE: 843-450-7754 FAX: 843-280-2930

ON-SITE CONTACT PERSON: Charlene Lynam PAGER/CELL PHONE: 843-450-7754

(NOTE: This person *must* be in attendance for the duration of the event and until last vendor leaves and immediately available to City officials.)

YES NO N/A

IS THE CITY A CO-SPONSOR.

WHAT IS THE NAME OF THE CITY CONTACT PERSON.

Angel Sylvester

II. EVENT INFORMATION

EVENT NAME:

The Annual North Myrtle Christmas Parade

PURPOSE OF EVENT:

To Provide a Holiday Event for locals and visitors

EVENT DATE(S): Saturday, December 4 TOTAL EXPECTED ATTENDANCE: 2,000

LOCATION:

Main Street, North Myrtle Beach, SC

EVENT HOURS: 5:30 PM until 7:30 PM

SET-UP HOURS: 3:00 PM until 5:30 PM

DISMANTLE HOURS: After the parade, when majority of parade attendees are off the street
(Includes same-day clean-up of all trash and debris generated by event)

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Have DHEC requirements been met? Permit number _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Will you provide portable toilets for the general public attending the event? If "YES", number of Portable Toilets _____ number of ADA Accessible Toilets _____ <i>(SUGGESTED: 1 for every 250 people)</i> <i>(SUGGESTED: 10% of total portable toilets)</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Will you require the use of City electricity?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Will you require the use of City water?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Will you require Traffic Control?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Will you require the use of City Personnel for Trash Removal?

Please list any other services you are requesting from the City of North Myrtle Beach. _____

IV. FEES AND PROCEEDS

YES	NO	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the SPONSORING ORGANIZATION a "Tax Exempt, non-profit" organization as defined by the IRS?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Will admission fees be charged to attend the event? If "YES", please provide amount(s) of all tickets. _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Will fees be charged to vendors to participate in this event? If "YES", please provide amount(s). application attached: <u>Individuals / Family \$30; Pageant Queens \$30; Civic Community Non Profit \$25; Business \$75; Commercial Float \$600</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If the SPONSORING ORGANIZATION is not a "Tax Exempt, non-profit" organization, will donations be made to any charitable organization(s)? If "YES" please list the names of the organization(s) and the expected amount of donation. _____ _____ _____

V. EVENT SITE MAP (Attachment)

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

- | | |
|---|---|
| 1. Fencing, Barriers and/or Barricades | 9. Trash Receptacles or Dumpsters |
| 2. Gates or points of Admission | 10. Locations(s) of Portable Generator(s) |
| 3. Scaffolding, Bleachers, Stages or Related Structures | 11. Points of Connection to City Water |
| 4. Alcohol Outlets | 12. Points of Connection to City Electric |
| 5. Food and Beverage Vendors | 13. Tables and Chairs |
| 6. Portable and Permanent Toilets | 14. Vehicles and/or Trailers |
| 7. First Aid Facilities | 15. Location of Vendor Parking |
| 8. Canopies or Tent Locations | 16. Other Components Not Covered Above |
| | 17. Amusement or Carnival Type Rides |

(Prior to issuance of a FESTIVAL PERMIT, you are required to submit a FINAL EVENT SITE map to the City.)

VI. SECURITY

YES NO N/A

X Will this event require security to handle the event? If so,

Security Source: _____
Address: _____
On-site Contact: _____ Phone No. _____

VII. INSURANCE INFORMATION

➤ **REQUIRED:** 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, notify Administration at (843) 280-5650. Otherwise, City personnel and equipment may be needlessly dispatched and approvals of your future applications may be jeopardized.

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge. That I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event established by the City Council and/or the City Manager or the City Manager’s designee. I agree to abide by these rules, and further certify that I, on behalf of the organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be insured by or on behalf of the Event by the City of North Myrtle Beach.

Name of Applicant (print) _____ Charlene Lynam _____

_____ ***Charlene Lynam*** _____ Date 10/20/2021
Signature of Applicant

ORIGINAL APPLICATION SHOULD BE CLEARLY PRINTED OR TYPED AND MAILED TO:

City of North Myrtle Beach
1018 2nd Avenue South
North Myrtle Beach, SC 29582
Attention: Steve Thomas
Phone: (843) 280-5507
Fax: (843) 280-5638
Email: sethomas@nmb.us

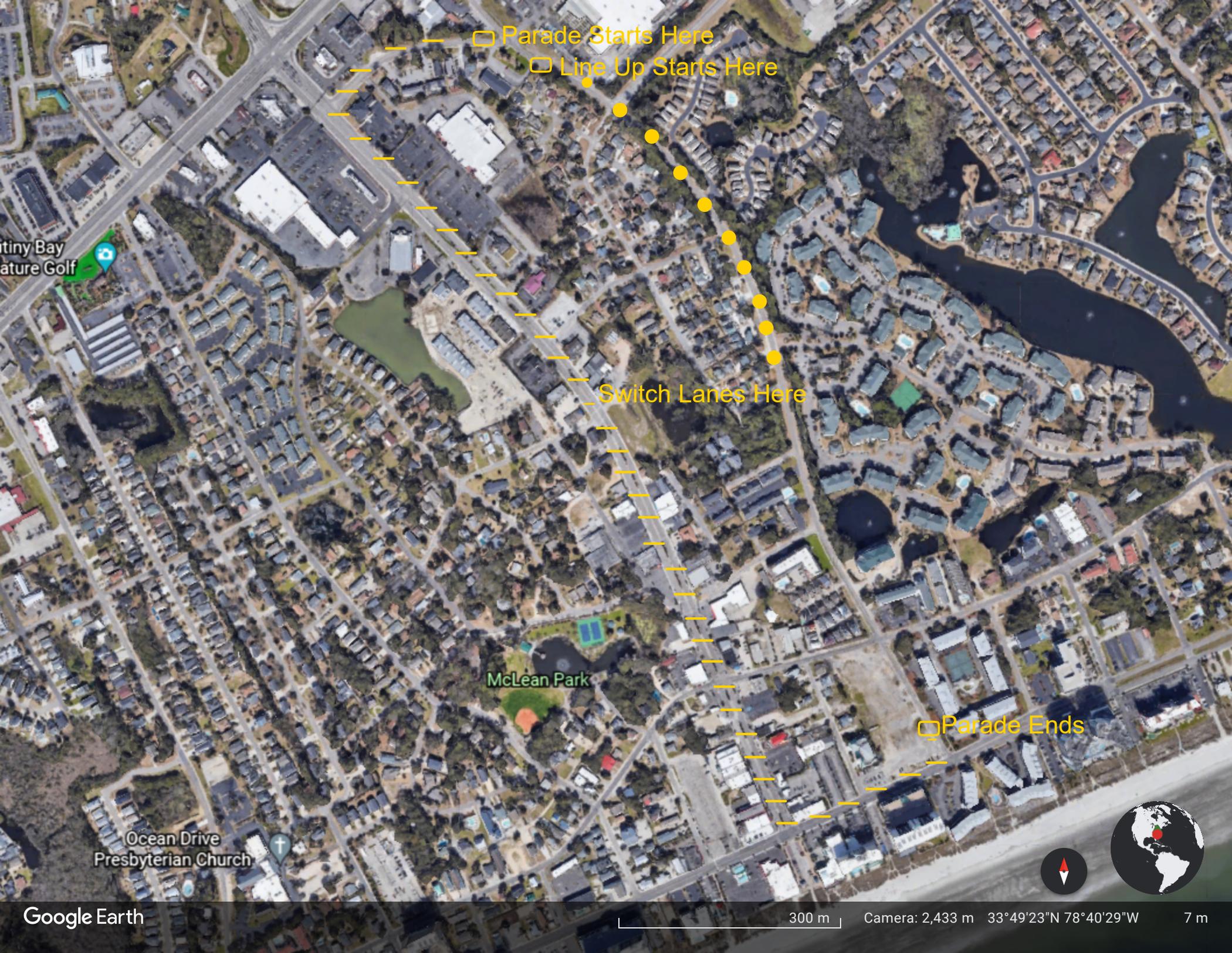
Road Closures

From 3:00 PM until the parade is over:

- ❖ 2nd Ave North
 - Ye Ole Kings Hwy
 - Deitra Lane
 - Ash Street
 - Rosemary Lane
 - Toby Court
 - Oak Street
 - Entrance to Cottages at Tilghman
 - Entrance to Ocean Keys
- ❖ North Hillside Drive
 - @1st Ave North
 - @ 3rd Ave North
- ❖ Ocean Blvd
 - @3rd Ave North

From 5:00 PM until the parade is over:

- ❖ Main Street
 - Ye Ole Kings Hwy
 - Palmer Street
 - Ash Street
 - Cedar Street
 - Pine Street
 - Oak Street
 - Hillside Drive
- ❖ Ocean Blvd
 - @ 1st Avenue South
 - @ 1st Avenue North
 - @ 2nd Avenue North
 - @3rd Avenue North



Parade Starts Here
Line Up Starts Here

Switch Lanes Here

Parade Ends

McLean Park

Ocean Drive
Presbyterian Church

