

**REQUEST FOR CITY COUNCIL CONSIDERATION**

Meeting Date: December 4, 2023

|   |   |
|---|---|
| Agenda Item: 5C                                   | Prepared for:<br>Mike Mahaney, City Manager |
| Agenda Section:<br>Consent: Motion to Approve     | Date: November 10, 2023                     |
| Subject:<br>Main Street Showtime Charity Car Show | Division: Administration                    |

**Background:**

The Myrtle Beach Car Club of South Carolina is requesting approval for the Main Street Showtime Charity Car Show on April 6, 2024. The event will be held between the hours of 9:00 AM and 3:00 PM. Setup will begin at 7:30 AM and dismantling will begin at 2:30 PM.

Please see attached application and map.

All applicable departments have signed off on the special event either 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 |
|-----------------------------|--------------------------|---------------------------|

Council Action:

Motion By \_\_\_\_\_ 2<sup>nd</sup> 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: \_\_\_\_\_

## Westmoreland Angela C

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**From:** noreply@civicplus.com  
**Sent:** Tuesday, October 31, 2023 12:06 PM  
**To:** Galbreath Allison K; Sylvester, Angel; Gibbons, Matt; Fabbri Ryan L; Westmoreland Angela C  
**Subject:** Online Form Submittal: Special Event / Festival Permit Application

### Special Event / Festival Permit Application

#### Instructions

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##### 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.*

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#### I. Applicant & Sponsoring Organization Information

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Sponsoring Organization Name      The Myrtle Beach Car Club of South Carolina

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Chief Officer of Organization      Carol Hadley - Lead Director

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Applicant Name      Carol Hadley

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Address      601 Six Lakes Dr.

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Daytime Phone Number      4132046790

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Evening Phone Number      4132046790

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Fax      *Field not completed.*

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On-Site Contact Person      Carol Hadley

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Pager / Cell Phone Number      *Field not completed.*

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Is the city a co-sponsor?      No

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#### II. Event Information

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Event Name      Main Street Showtime Charity Car Show

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Purpose of Event      To raise money for Local Charities

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Event Date(s)      4/6/2024

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Event Date(s)      *Field not completed.*

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|                           |                                     |
|---------------------------|-------------------------------------|
| Total Expected Attendance | 300                                 |
| Location                  | Main Street, North Myrtle Beach, SC |
| Event Hours               | 9:00 AM - 3:00 PM                   |
| Set-Up Hours              | 7:30 AM - 9:00 AM                   |
| Dismantle Hours           | 2:30 PM - 3:00 PM                   |

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         | Main St between Hillside & Ocean Blvd.    |
| Date / Time Closed | 4/6/2024 7:30 AM                          |
| Date / Time Opened | 4/6/2024 3:00 PM                          |
| Street Two         | <del>Field not completed.</del> Horseshoe |
| Date / Time Closed | <del>Field not completed.</del> 7:30-3:30 |
| Date / Time Opened | <del>Field not completed.</del>           |
| Street Three       | <del>Field not completed.</del>           |
| Date / Time Closed | <del>Field not completed.</del>           |
| Date / Time Opened | <del>Field not completed.</del>           |
| Street Four        | <del>Field not completed.</del>           |
| Date / Time Closed | <del>Field not completed.</del>           |
| Date / Time Opened | <del>Field not completed.</del>           |

**III. Event Description**

|   |  |
|---|--|
| Does the event involve the sale of alcoholic beverages? | No                                       |
| Has State Permit been applied for or received?          | No                                       |
| Will items or services be sold at the event?            | Yes                                      |
| Please describe.  | Merchandise to raise money for Charities |

|  |                     |
|--|---------------------|
| Will there be musical entertainment at your event?   | Yes                 |
| Number of Stages   | 0                   |
| Number of Bands  | 0                   |
| Type(s) of Music   | DJ                  |
| Time Music Will Start & Stop   | 10:00 AM - 2:00 PM  |
| Name of Band(s)  | DJ - Cecil Chandler |
| Will there be any tents or canopies at the proposed event site?                                  | Yes                 |
| Number of Tents  | 10                  |
| 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?  | Yes                 |
| Will food be served at this event?   | No                  |
| 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?                    | No                  |
| Will you require the use of City electricity?  | Yes                 |
| Will you require the use of City water?  | No                  |
| Will you require Traffic Control?  | No                  |

Will you require the use of City Personnel for trash removal? No

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Please list any other services you are requesting from the City of North Myrtle Beach. *Field not completed.*

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**IV. Fees & Proceeds**

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Is the sponsoring organization a "tax exempt, non-profit" organization as defined by the Internal Revenue Service (IRS)? Yes

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Will admission fees be charged to attend the event? No

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Will fees be charged to vendors to participate in this event? No

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

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**V. Event Site Map**

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

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Attach a site map of the proposed event site indicating the locations of the following items: [NMB sitemap.JPG](#)

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**VI. Security**

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Will this event require security to handle the event? No

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**VII. Page Information**

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

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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.

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### VIII. Affidavit

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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.

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Electronic Signature Agreement

I agree.

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Electronic Signature

Carol A Hadley

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Date

11/2/1950

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Name of Applicant

Carol A Hadley

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Title

Lead Director

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Applicant Email

[carolhadley@hotmail.com](mailto:carolhadley@hotmail.com)

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#### Mailing Information

*The original application should be clearly printed or typed and mailed to City of North Myrtle Beach, Attention: Administration, Event/Festival Application, 1018 2nd Avenue S, North Myrtle Beach, SC 29582.*

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Anyone with questions should call Allison Galbreath at 843-280-5604.

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Email not displaying correctly? [View it in your browser.](#)

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Main St.

Hillside Dr.

Entrance Gate

Barricades

A-JAX  
Golf Cart

Registration Area

with Tents  
10'x10' ea

Pay Station - Tent  
10'x10'

Port-a-Pottie

Tent Shepards  
Table  
Tent  
10'x10'

Tent Veterans  
Rec Str  
10'x10'

Tent GSHS  
10'x10'

Tent MOW  
10'x10'

Barricades

S. Ocean Blvd.

N. Ocean Blvd.

Barricades

Cecil DJ  
set up

