(updated 1.26.2021)

Welcome & Introduction:

Thank you for expressing an interest in hosting your event at Byrne Plaza in Downtown Wildwood-By-The-Sea. Byrne Plaza is managed by the Wildwood Business Improvement District, Management Corporation (WBID). WBID is a private, non-profit corporation that was created, and is run by, property and business owners in Downtown Wildwood.

Byrne Plaza was made possible by the cooperation and financial support of the County of Cape May Open Space and Recreation Program, The Byrne Fund for Wildwood, Inc., Crest Savings Bank, the Greater Wildwood Tourism Improvement and Development Authority (GWTIDA), the City of Wildwood and WBID.

Use Policy:

Byrne Plaza was created to be an actively managed downtown event space for the specific purpose of bringing commerce to Downtown Wildwood to enhance and promote business retention and development. Therefore, event applications will be evaluated based on the criteria of whether or not the Board of Directors of WBID believes that the event will be beneficial to the business community in Downtown Wildwood.

Currently, WBID hosts a full schedule of seasonal events in Byrne Plaza. This includes Saturday Morning Farmers Markets, Free Tuesday Night Family Movies, Five Fabulous Days of Fitness (Monday through Friday Mornings), Free Concerts on Thursday Nights and a series of Friday evening events.

WBID invites experienced event promotors, with a proven track record of successful special event planning, production and management, to host events at Byrne Plaza. Special consideration and preference will be given to promotors interested in hosting multiple events during the year at Byrne Plaza.

Application Process:

WBID requires all organizations, corporations, and/or individuals planning to use our facilities to complete an application. This application must be fully completed, signed, and forwarded to WBID 150 days (5 months) in advance of the event.

All costs and fees associated with a Special Event will be the responsibility of the promotor.

If the Byrne Plaza bathrooms, sound system and electric are needed, there may be a fee, payable to a third party who is authorized to access these facilities.

Event organizers will be responsible for cleaning up and carrying out trash and litter from Byrne Plaza.

All applications will have a 90, 60 and 30-day review. Some may require a 14 day and 7-day review prior to their event.

Wildwood Business Improvement District Byrne Plaza Event Application Check List

Please use this check list to ensure a complete application package is submitted and acted upon within the timeline provided:

- 1) Does your application include a detailed description of the event?
- 2) Does your application include a preliminary site plan (Schedule C)? Site Plan may be updated but must be finalized within 30 days of event.
- 3) Does your application include your Certificate of Liability Insurance, naming *WBID*, *PO Box 2635*, *Wildwood*, *NJ 08260* as "additionally insured"?
- 4) Does your application include a fully executed Hold Harmless Agreement?
- 5) Does your application include a Vendor List including contact information (Schedule B)? *Vendor List may be updated but must be finalized within 90 days of event.*
- 6) Does your application include Copy of ABC / Social Affairs Permit and/or Special Event License and any other required permits and licenses?
- 7) Does your application include your detailed Event Promotion Plan (Schedule A)? *Promotion Plan may be updated but must be finalized within 90 days of event.*
- 8) Does your application include a copy of program schedule/timeline/description of events? *Program Schedule may be updated but must be finalized within* **90 days** of event.
- 9) Have trash pickup and/or carry out arrangements been confirmed?

Name of Event:	
Day & Date of Event: D	ate of Application:
Type of Event (check one)	
□ Festival □ 1Day □ multi-day	
□ Craft Show □ 1Day □ multi-day	
□ Ceremony / Celebration / Demonstration	
□ Other:	
SECTION 1 – ORGANIZATION	ON INFORMATION
1) Name of Organization:	
2) Address of Organization:	
3) Purpose of Organization:	
4) How many members are in your organization:	
5) Is your organization tax exempt: (please circle) YES N	O Is this a non-profit event YES NO
6) NJ Registered Charitable Organization#:	Tax ID#:
7) Organizer(s) Contact Information:	
Name of Event Chairperson / Organizer	
Title	Cell Phone
Address / City / State / Zip	
Email	
Name of Event Chairperson / Organizer	
Title	Cell Phone
Address / City / State / Zip	
Email	

SECTION 2 – APPLICATION AUTHORIZATION

I,Name of Applicant	, the undersigned state that I am the duly
authorized representative of the	Name of Organization
that some of the information is preliminary in	pplication is correct to the best of my knowledge. I understand nature and I will provide updated information as it becomes made to the proposed event as indicated when so granted.
Applicant Signature	

SECTION 3 – EVENT INFORMATION

1) Official Name of Event:		
2) Location of Event:		
2) Location of Event:		
4) Will the event be held for the sole purpose of advertising any product, goods, or event:	YES	NO
5) If yes, describe in detail:		
6) Is event open to the public? What is the admission fee or is it free?		
7) Will alcohol be served or sold by event organizers or others:	YES	NO
A) Do vou have a ABC/Social Affairs Permit:	YES	NO
B) Are you requesting approval for open display of alcohol: C) Designated Hours for open display of alcohol:	YES	NO
D) Designated Location of open display of alcohol: E) Do you own a City of Wildwood Liquor License:	YES	NO
, , ,	YES	NO
	YES	NO
8) Describe Event Activities:		
9) Rain Date or Delayed Starting Time:		
10) Describe how you plan to handle trash during event & clean up / trash removal after ev	vent:	
Dumpster Company (name/address/contact person/phone):		

SECTION 3 – EVENT INFORMATION CONTINUE

11) Schedule Details: (<i>Inc</i>		n schedule/timeline/descript 2 nd Day		4 th Day
Day of the Week (SU,M,TU,W,TH,F,SA)	,			
Date (MM/DD/YY)				
Set-Up (00:00AM/PM)				
Event Starts (00:00 AM/PM)				
Event Ends (00:00 AM/PM)				
Clean-Up (00:00 AM/PM)				
Rain Date				
13) Describe how you pla				
Private Security C	ompany (name/addre	ess/contact person/phone):		
14) If an event managem information:	ent company is con	tracted to handle the ev	vent, please provide th	e following
Company Name:				
Address:		City/ST	7/Zip:	
Contact Person:		Phone:		
Portion/s of event that the	company is respor	asible for: _		

ALL EVENTS MUST SUBMIT A DETAILED SITE PLAN (Schedule C)

Site plan should include port-a-pots, vendors, electrical hook-ups, road closings, etc.

SECTION 4 – INSURANCE REQUIREMENTS

1) Name of Insurance Company:	
Policy Number:	
Limits of Liability:	

Events are required to provide the Wildwood Business Improvement District with a Certificate of Insurance indicating the continuation of insurance coverage and designating the Wildwood Business Improvement District as an "<u>Additionally Insured</u>."

A copy of the Additional Insured Endorsement page(s) must be provided with the certificate.

CERTIFICATE OF INSURANCE

<u>Individuals</u> – Block Parties or any other oriented parties

<u>Non-Profit/Charitable Groups</u> – Civic Groups, Social Groups, Support Groups or any other group that does not gain profits.

<u>Commercial Rental</u> – Any organization that is for profit (i.e. Associations, Corporations, Partnerships, etc. ...)

I. INDIVIDUALS

A. General Liability Limit

\$100,000

Evidence that the individual has personal liability insurance in force is required to use any WBID property or facility. This would be in the form of Homeowners, Condo, or Tenant's policy where the personal liability coverage is included along with other coverage for the individual. A copy of the policy needs to be kept on file with the Special Event Application as evidence of coverage.

II. NON-PROFIT/CHARITABLE GROUPS

A. General Liability Limit

\$300,000

- Combine Single Limit of Liability for Bodily Injury and Property Damage.
- B. Wildwood Business Improvement District named as "Additional Insured" with Endorsement
- C. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the WBID facilities until it has obtained the insurance required under this contract. All coverage shall be with insurance carriers licensed and admitted to do business in the State of New Jersey and acceptable to the WBID. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

III. COMMERCIAL (FOR PROFIT) GROUPS

A. Commercial General Liability Limit \$1,000,000 Combine Single Limit of Liability for Bodily Injury and Property Damage.

- B. Wildwood Business Improvement District named as "Additional Insured" with Endorsement
- C. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the WBID facilities until it has obtained the insurance required under this contract. All coverage shall be with insurance carriers licensed and admitted to do business in the State of New Jersey and acceptable to the WBID. If the

organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from the vendor.

HOLD HARMLESS

NAME OF ORGANIZATION/USER

will be referred to as **USER** from this point forward. **USER** shall indemnify, save harmless and defend the **Wildwood Business Improvement District**, its elected and appointed officials, its employees, agents, volunteers and others working on behalf of the **Wildwood Business Improvement District**, from and against any and all claims, losses, costs, attorney's fees, damages, or injury including death and/or property loss, expense claims or demands arising out of **User's** use of the named Facilities / Equipment, including all suits or actions of every kind or description brought against the **Wildwood Business Improvement District**, either individually or jointly with **USER** for or on account of any damage or injury to any person or persons or property, caused or occasioned or alleged to have been caused by, or on account of, any of the activities conducted by or caused to be conducted by **USER**, or through any negligence or alleged negligence in safeguarding the FACILITY(IES) / EQUIPMENT, participants, or members of the public, or through any act, omission or fault or alleged act, omission or fault or alleged act, omission or fault of the **USER**, its employees, agents, volunteers, subcontractors or others under the direction, control or under any contractual relationship with the **USER**.

The above **USER** shall inspect the described FACILITY (IES) / EQUIPMENT prior to the use of the FACILITY (IES) / EQUIPMENT and report any defective, hazardous or dangerous conditions found at the FACILITY (IES) / EQUIPMENT to An Appointed Recreation Supervisor and/or Public Works Supervisor at (609) 522-2955 or (609) 522-4646, and **USER** shall immediately cease the use of the FACILITY (IES) / EQUIPMENT until such defective, hazardous or dangerous conditions are remedied. After the use of the FACILITY(IES) / EQUIPMENT, **USER** shall immediately report to the **Wildwood Business Improvement District** any and all defects, hazards, damages or dangerous conditions upon or adjacent to the FACILITY(IES) / EQUIPMENT.

INSURANCE

Notwithstanding the indemnification and defense obligations of the USER, USER shall purchase and maintain such insurance described in the attached schedule and as is appropriate for the type of use and hazards present and as will provide protection from any and all covered claims which may arise out of or caused or alleged to have been caused in any manner from User's use of the FACILITY(IES) / EQUIPMENT, whether it is to be used by the USER, its employees, agents, volunteers, subcontractors or others under the direction, control or under any contractual relationship with the USER or by anyone for whose acts any of them may be liable.

USER shall be required to name the Wildwood Business Improvement District as an "Additional Insured" on the User's policy of commercial general liability insurance, and simultaneously with the delivery of the executed Use of Facilities Agreement or Special Event Application, USER shall provide the WBID with a Certificate of Insurance indicating that the insurance coverage as described in the attached schedule, and as is appropriate for the type of use and hazards present, has been obtained and that the Wildwood Business Improvement District has been designated as an "Additional Insured" where required. The USER shall also provide the Additional Insured Endorsement page(s) to be included with the Certificate

Signed by an authorized representative of the USER and the Wildwood Business Improvement District on

this day	of, 20
USER (SIGNATURE)	WBID REPRESENTATIVE
USER (PRINT NAME)	WBID REPRESENTATIVE (PRINT)

FESTIVAL 1 DAY OR MULTIPLE DAYS

1) Location (list any street closing):
2) Number of Non-Food Vendor Spaces: Number of Food Vendor Spaces:
3) List of Vendors and Contact Numbers (Schedule A) –fully updated list must be turned in 30 days prior to event. (NOTE: Food Vendors must meet the requirements of the Cape May County Board of Health)
4) Promotion Plan to include print, radio, billboards, social media, etc. (Schedule B)
5) Location of Stages / Performance Areas (site plan):
6) Type of Entertainment / Music:
*Attach a program schedule–may submit draft version–final version must be turned in 90 days prior to event
7) Are Vendor fees charged: YES NO Amount: \$
8) Purpose of the fees and beneficiary:
9) Special Guests (i.e., Mascot, Politician, Musician, Controversial, Actor, Actress, etc.):
10) These items are PROHIBITED in the Festival Area:
• Driving on the sidewalks or grass area of the Plaza without permission is strictly prohibited.
• Any <u>Glass Bottles</u> and <u>Glass Containers</u> served at festival sites.
• Any type of <u>Back Packs.</u>
• Any type of <u>Coolers</u> .
11) Will you need access to bathroom, sound system and electricity? Yes No

SCHEDULE A VENDOR LIST		
EVENT NAME:EVENT DATE:		
VENDOR NAME	CONTACT INFO	PRODUCT DESCRIPTION

SCHEDULE B
PROMOTIONAL PLAN

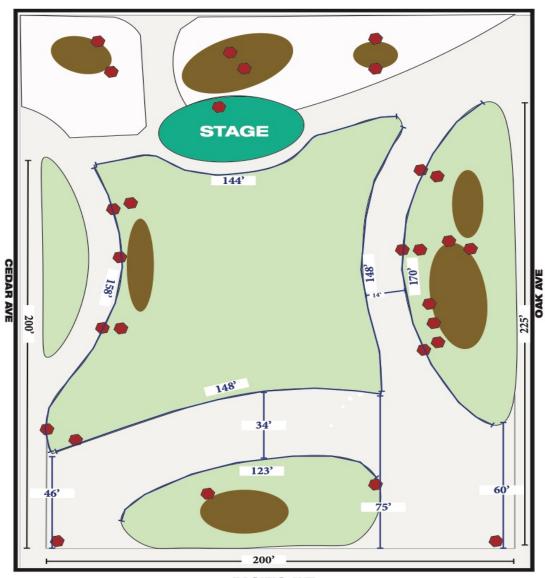
EVENT NAME:	
EVENT DATE:	

MEDIA	TIMING	MESSAGE	

SCHEDULE C SITE PLAN

EVENT NAME:	
DATE:	

PLAZA LAYOUT



PACIFIC AVE