

# CITY OF NORTH WILDWOOD

## NOTICE OF PROPOSED AGENDA OF COUNCIL MEETING

AUGUST 1, 2023 AT 5:00 PM

**NOTE: WORK SESSION AT 4:45 PM**

This is a proposed agenda which is subject to change by Mayor and Council without further notice.

**ROLL CALL.....FLAG SALUTE.....MOMENT OF SILENCE.**

**MINUTES:** APPROVAL OF MINUTES OF REGULAR MEETING OF JULY 18, 2023

### **COMMUNICATIONS:**

#### *Receive & File:*

NJ DEPT. OF TRANSPORTATION, RE: Chip Seal Application, Repaving of Rt. 147 to NY Avenue

TOP SPORTS, RE: Thank You to NW Beach Patrol for Assistance on Family Fun Day

ATLANTIC CITY ELECTRIC, RE: Power the Future Solar Resiliency and Reliability Program

#### *Approve & File:*

SPECIAL EVENT, RE: Duffy String Band Bdwk Parades, August 2, 16 & 30

SPECIAL EVENT, RE: Summer Nights Elvis Block Party, August 12

SPECIAL EVENT, RE: Live Like Bolle 5K Run, August 12

SPECIAL EVENT, RE: North Wildwood Flea Market, August 13

SPECIAL EVENT, RE: Kelly's Kids 5K Run & Family Walk, August 19

### **APPOINTMENTS:**

Recreation Dept.

### **RESOLUTIONS:**

1. Extending Grace Period for Real Estate Tax Bills
2. Authorizing Application for PROTECT Resiliency Improvement Grant
3. Approving Municipal Public Access Plan
4. National Lighthouse Day

**VOUCHER LIST/FINANCE:** Authorizing payment of all approved vouchers

### **COUNCIL:**

### **PUBLIC:**

### **ADJOURNMENT:**

Next Regular Meeting: Tuesday, August 15, 2023 @ 10:00 a.m.



## State of New Jersey

DEPARTMENT OF TRANSPORTATION  
P.O. Box 600  
Trenton, New Jersey 08625-0600

PHILIP D. MURPHY  
*Governor*

DIANE GUTIERREZ-SCACCEITI  
*Commissioner*

SHEILA Y. OLIVER  
*Lt. Governor*

July 11, 2023

The Honorable Patrick T. Rosenello  
Mayor – City of North Wildwood  
901 Atlantic Ave  
North Wildwood, NJ 08260

**Subject: Chip Seal Application - Pavement Preservation**  
Rt 47, W Rio Grande Blvd to Hawthorne Ave; Rt 109, Yacht Ave to Rt 9; Rt 147, Rt 9 to New York Ave  
M.P. 0.98-4.3 (B); 1.35-3.06 (B); 0.0-4.2 (B)  
Lower Township, Middle Township, North Wildwood City  
Cape May County  
UPC: 233380

Dear Mayor Patrick T. Rosenello,

The New Jersey Department of Transportation is sending this letter of notification regarding the Route 47, W Rio Grande Blvd to Hawthorne Ave; Rt 109, Yacht Ave to Rt 9 to New York Ave, Pavement Preservation project located in North Wildwood City. This project consists of Chip Seal application on the Mainline and Shoulder of Route 47, 109, and Route 147 from MP 0.98-4.3 (B); 1.35- 3.06 (B); 0.0-4.2 (B). All ramps within the project limits will also receive the same treatment. Existing Rumble Strips will be restored. Other incidental work might include HMA Patches to repair longitudinal joints and asphalt pavement repair. Under-clearances at all overpasses will be maintained the same as existing. Guide rail work is not included in this project.

This is a limited scope project intended to improve and maintain the State's infrastructure. The intent of the project is to improve the pavement ride quality and extend the roadway pavement life.

In order to accomplish the above construction activities, staged construction will be necessary. The work will be done during nighttime hours, in order to minimize the impacts on traffic. We do not anticipate any long duration closures; only lane shifts and daily lane closures during paving operations. We have detour plans for ramp closures only.



## State of New Jersey

DEPARTMENT OF TRANSPORTATION  
P.O. Box 600  
Trenton, New Jersey 08625-0600

CHRIS CHRISTIE  
*Governor*


KIM GUADAGNO  
*Lt. Governor*

RICHARD T. HAMMER  
*Commissioner*

This project will be awarded in Fall of 2023. The anticipated construction is expected to begin in Summer of 2024.

Should you have any questions concerning the project, please contact Christopher Yandoli, Office of Community and Constituent Relations at (609) 963-1982 or via email at [Christopher.Yandoli@dot.nj.gov](mailto:Christopher.Yandoli@dot.nj.gov)

Sincerely yours,

  
Christopher Yandoli  
Office of Government and Community Relations  
New Jersey Department of Transportation  
1035 Parkway Avenue  
Trenton, NJ 08625-0600

Cc: W. Scott Jett – City Clerk, City of North Wildwood



HARRISON TOWNSHIP TOPSPORTS

P.O. Box 442

Mullica Hill, NJ 08062

[www.topsportsnj.org](http://www.topsportsnj.org)

July 14, 2023

Mayor Patrick Rosenello  
90 Atlantic Avenue  
North Wildwood, NJ 08260

Dear Mayor Rosenello and Council Representatives,

With deep respect and appreciation, TOPSports of Harrison Township, New Jersey would like to recognize the North Wildwood Beach Patrol for executing another successful Family Fun Day at the Beach for our families as well as members of Heritage Homestead Day Center.

Friday, June 30, 2023 was a day full of fun and excitement for the athletes of TOPSports and members of Heritage Homestead Day Center of Marmora. The NWBP professionally and compassionately provided opportunities to learn the basics of surfing, an activity many of our members would never be able to access without their patient coaching. Our parents watched with amazement as their children interacted with many different lifeguards in the water, playing beach soccer and beach volleyball. This event demonstrated inclusion and acceptance of all people, regardless of ability, at the highest level.

We are grateful for the organizational efforts of Chief Ciavarelli and Shawn McAnaney in bringing this day to fruition, for donating lunch, recruiting Dave Bannon and Ryan Troiana of the Wildwood Fire Department to cook the burgers and hotdogs and securing one of the athletes' favorite parts of the day, ice cream donated by Tony Visalia. Lifeguard Allie Bofinger did an excellent job as the point person for the day, ensuring that all participants were engaged throughout the event.

Family Fun Day at the Beach with the NWBP was a memorable experience for all. In recognition of all NWBP has done for our families, TOPSports was honored to donate a beach wheelchair this year. We look forward to this continued partnership in the future.

With gratitude,

Troy S. Memis on behalf of the TOPSports Board and all of our athletes and families  
Executive Director  
TOPSports

## W. Scott Jett

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**From:** Davis, Marie F:(ACE) <marie.davis@atlanticcityelectric.com> on behalf of Town, Veronica A:(ACE) <veronica.town@atlanticcityelectric.com>  
**Sent:** Tuesday, July 18, 2023 11:28 AM  
**Subject:** EXTERNALAtlantic City Electric Program Will Help to Further Advance Solar and Provide More Resiliency and Reliability to the Electric Grid Serving South Jersey Communities

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Government Official:

Atlantic City Electric has received approval of its Powering the Future program, a \$93.1 million portfolio of projects the company will perform during the next four years to further modernize and enhance the local energy grid and advance new clean energy opportunities across South Jersey. The approval, provided by the New Jersey Board of Public Utilities, allows for the acceleration of 22 targeted projects that are essential to expanding the local energy grid's ability to support the interconnection of more solar and other clean energy technologies, improve system reliability, and leverage more modern, smart technologies to help make the grid stronger and more resilient against increasingly impactful storms.

Powering the Future includes four specific categories of projects. These include:

- **Solar/Distributed Energy Resource (DER) Enablement** – Further expand the ability of the local energy grid to incorporate the increasing interconnection of clean energy technologies, including local solar and other distributed energy resources that will help achieve the State's clean energy and climate goals.
- **Targeted Reliability Improvements** – Targeted work on the local energy grid focused on enhancing reliability where power outages are occurring more frequently or where system redundancy can help reduce the impacts of outages when they do occur.
- **Smart Technology Upgrades** – Further enhance the communications network and supporting devices that are used to reduce the frequency and duration of power outages.
- **Substation Improvements** – Upgrade various substations throughout the company's service area to enhance customer reliability by modernizing infrastructure and other critical equipment, helping fortify these substations against more frequent and extreme weather events.

Powering the Future will build on Atlantic City Electric's efforts over the past several years in making the local energy grid smarter, stronger, and cleaner. This work is having a significant and noticeable impact on the reliability of the service provided to local customers and communities. Just last year, Atlantic City Electric customers experienced the most reliable service ever, with the lowest frequency of electric outages in the company's history. Ongoing investments in the local energy grid have reduced the frequency of electric outages by more than 75 percent since 2012 for Atlantic City Electric customers, despite the increasing frequency and severity of storms.

Atlantic City Electric will begin executing Powering the Future in July 2023. To recover costs for Powering the Future, gradual rate changes will occur over four years between 2023 and 2027. The total monthly bill for a typical residential customer using 680 kilowatt hours will increase by approximately \$1.22 or 0.84 percent over the four-year period.

Atlantic City Electric customers can view the company's [solar hosting capacity map](#) for updates on available solar opportunities in their area, as well as the digital solar toolkit and ConnectTheGrid [application portal](#) for helpful information to make the switch to solar.

Please feel free to pass this information along to your constituents.

Thank you,

**Ronnie Town | External Affairs Manager**

**Atlantic City Electric | Governmental & External Affairs**

420 Route 9 North | Cape May Court House, NJ 08210

o: 267-533-0825 | c: 609-425-2993

[atlanticcityelectric.com](http://atlanticcityelectric.com)



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## City of North Wildwood Special Event Application Form

Name of Event: Parade Duffy String Band

Date of Event: 8/2 8/16 8/30 Date of Application: 7-18-2023

Type of Event (check one)

7:30pm - 8:30pm

- ☒ Parade / Procession      ☐ Festival ☐ 1Day ☐ multi-day      ☐ Block Party      ☐ Bonfire
- ☐ Craft Show ☐ 1Day ☐ multi-day      ☐ Walk / Run (1K-5K-10K) / Triathlon / Bike / Marathon / Race
- ☐ Ceremony / Celebration / Demonstration      ☐ Polar Plunge / Water Event      ☐ Car Show
- ☐ Film / Photography      ☐ Stage Request Only      ☐ Other: \_\_\_\_\_

The City of North Wildwood requires all organizations, corporations, and/or individuals planning to stage an event file an official application with the Recreation & Tourism Department. **This application must be fully completed, signed, and forwarded to the Recreation & Tourism Department 90 days in advance of the event date unless waived by the Mayor and/or governing body.**

(City Code 382-23) A "special event" is an event sponsored by an organization who desires to use portion of the public streets or other public property, or avail itself of public facilities. Such event must be sponsored by a corporation (nonprofit or for profit), authorized to do business in the State of New Jersey, a nonprofit civic association, a charitable association, a religious association or any other association of persons. Special events shall include, by way of example and not by way of limitation, such events as parades, festivals, craft fairs, art shows, athletic contests, running races, bicycle races, fund raising events and similar events of which may include entertainment.

(City Code 382-24) There shall be an application fee charged to each organization, excluding municipal operations, operating a special event in the sum of **\$25.00 for non-profit and \$50.00 for for-profit** entities.

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

### SECTION 1 – ORGANIZATION INFORMATION

1) Name of Organization: Duffy String Band

2) Address of Organization: 429 East 18th Ave

3) Purpose of Organization: Mummer

4) How many members are in your organization: 90

5) Is your organization tax exempt: (please circle) YES NO Is this a non-profit event YES NO

6) NJ Registered Charitable Organization#: \_\_\_\_\_ Tax ID#: 23-2773106

## SECTION 1 – ORGANIZATION INFORMATION CONT

### 1) Organizer Contact Information:

Name of Event Chairperson / Organizer Cheryl Crowe	
Title Owner/Pres.	Cell Phone
Address / City / State / Zip 429 E 18th	
Email cac429@msn.com	

Name of Event Chairperson / Organizer	
Title	Cell Phone
Address / City / State / Zip	
Email	

## SECTION 2 – APPLICATION AUTHORIZATION

I, Cheryl Crowe, the undersigned state that I am the duly  
Name of Applicant  
authorized representative of the Duffy String Band  
Name of Organization

in addition, the information provided in this application is correct to the best of my knowledge. I understand that some of the information is preliminary in nature and I will provide updated information as it becomes available. I further agree to abide by changes made to the proposed event as indicated when so granted.

Cheryl Crowe  
Applicant Signature

7-18-2023  
Date



### SECTION 3 – EVENT INFORMATION

1) Official Name of Event: Duffy Strong 121 Park

2) Location of Event (please list city venue requirements by day/date): 16th to 26th  
Brooklyn

3) Describe Event Activities: 7:30pm to 8:30pm parade on Brooklyn  
from 16th Street to 26th St.

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) Will alcohol be served or sold by event organizers or others: YES ☐ NO ☒

A) Do you have a ABC/Social Affairs Permit: YES ☐ NO ☒

B) Are you requesting approval for open display of alcohol: YES ☐ NO ☒

C) Designated Hours for open display of alcohol: \_\_\_\_\_

D) Designated Location of open display of alcohol: \_\_\_\_\_

E) Other Conditions: \_\_\_\_\_

**If alcohol is being sold at the event, the organizer is responsible to identify patrons of legal age to consume alcohol and provide the patron with a wristband after identification was properly checked.**

8) Rain Date or Delayed Starting Time: \_\_\_\_\_

9) Schedule Details: (Include a copy of program schedule/timeline/description of events)

	1 <sup>st</sup> Day	2 <sup>nd</sup> Day	3 <sup>rd</sup> Day	4 <sup>th</sup> 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)				

### SECTION 3 – EVENT INFORMATION CONTINUE

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10) Will the event require site to remain in place overnight, or will the site be broken down each night (partially or completely) Explain: \_\_\_\_\_

11) Describe how you plan to provide security for the event: \_\_\_\_\_

a) Private Security Company (name/address/contact person/phone): \_\_\_\_\_

N/A

12) If an event management company is contracted to handle the event, please provide the following information:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Portion/s of event that the company is responsible for: \_\_\_\_\_

### **ALL EVENTS MUST SUBMIT A DETAILED SITE PLAN**

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

### SECTION 4 – INSURANCE REQUIREMENTS

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1) Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Limits of Liability: \_\_\_\_\_

Events are required to provide the City of North Wildwood with a Certificate of Insurance indicating the continuation of insurance coverage and designating the City of North Wildwood as an ***“Additionally Insured.”***

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

# CERTIFICATE OF INSURANCE

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Evidence of financial responsibility from event chairperson, organization and others with whom the City of North Wildwood does business is required. Evidence should be in the form of a document that is issued by an insurance company or their authorized representative, which spells out the insurance coverage in force at the dates and times the special event will occur. It does not serve as a binder and does not confer rights upon the holder. The policy must be current and not expire before or on the dates of the event. The City of North Wildwood reserves the right to require complete, certified copies of all required insurance policies, including endorsements affecting the coverage required by these specifications at any time.

The Director of Tourism and Special Events, City Administrator or City of North Wildwood Mayor and Council may refuse to grant the use of permission to execute the Special Event whenever in their judgment there is good reason why permission should be refused. They shall not be required to give a reason for such refusal.

**Individuals** – Block Parties or any other oriented parties

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

**Commercial Rental** – Any organization that is for profit (i.e. Associations, Corporations, Partnerships, etc. ...)

## I. INDIVIDUALS

A. General Liability Limit \$500,000

Evidence that the individual has comprehensive personal liability insurance in force is required to use any City of North Wildwood 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.

B. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or to use the City of North Wildwood until it has been 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

## II. NON-PROFIT/CHARITABLE GROUPS

A. General Liability Limit (Per Occurrence) \$1,000,000

B. Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000

C. City of North Wildwood, N.J. named as "**Additional Insured**" with Endorsement page(s) to read as follows:

**The City of North Wildwood  
901 Atlantic Avenue  
North Wildwood, NJ 08260**

D. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

E. Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.

### 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. Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000
- C. City of North Wildwood, N.J. named as **"Additional Insured"** with Endorsement page(s) to read as follows:  
**The City of North Wildwood**  
**901 Atlantic Avenue**  
**North Wildwood, NJ 08260**
- D. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.
- E. Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.

## HOLD HARMLESS

**NAME OF ORGANIZATION/USER** Campy String Band will be referred to as **USER** from this point forward. **USER** shall indemnify, save harmless and defend the **City of North Wildwood**, its elected and appointed officials, its employees, agents, volunteers and others working on behalf of the **City of North Wildwood**, 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 **Facility(ies)/Equipment**, including all suits or actions of every kind or description brought against the **City of North Wildwood**, 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 **City of North Wildwood** 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. Where indicated, the **USER** shall be required to name the **City of North Wildwood** 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 **City of North Wildwood** 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 **City of North Wildwood** 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. On or before the renewal date of said policy, **USER** shall be required to provide the **City of North Wildwood** with a Certificate of Insurance indicating the continuation of insurance coverage and designating the **City of North Wildwood** as an "Additional Insured" for the duration of this agreement. The schedule of insurance and the limits of liability for the insurance shall provide coverage for not less than the amounts listed in the attached schedule or greater where required by law.

### COVID-19

**USER** verifies and asserts that all activities conducted at the **FACILITY(IES)** shall be in full compliance with the CDC, DOH Guidelines and the State of New Jersey Governor's Executive Orders applicable to public pools, summer camps, sports leagues, and recreation programs with can be reviewed at:

[https://nj.gov/infobank/eo/056murphy/approved/eo\\_archive.html](https://nj.gov/infobank/eo/056murphy/approved/eo_archive.html)

**USER** shall be responsible for all participants or guests complying with any social distancing or masks/face covering requirements of the state or Federal government which are in effect.

Signed by an authorized representative of the **USER** and the **City of North Wildwood** on

this 14 day of July, 2022.

Cheryl A. Crowe  
USER (SIGNATURE)

USER (PRINT NAME)

Steve DeBary  
CITY REPRESENTATIVE

CITY REPRESENTATIVE (PRINT)



## PARADE / PROCESSION / CAR SHOW

- 1) Proposed Parade Route (include turn-by-turn directions): Denshulls 16<sup>th</sup> Street to 26<sup>th</sup>  
St
- 2) Starting Location & Ending Location (identify on site-plan): 16<sup>th</sup> Street 26<sup>th</sup> St
- 3) Assembly Area & Disbanding Area (identify on site-plan): \_\_\_\_\_
- 4) Location of Reviewing/Judging Stands & Bleachers (identify on site-plan): \_\_\_\_\_
- 5) Number of Participants: 25+ Number of Spectators: 300+ Number of Animals: 0
- 6) Number of Bands / Musical Units: 1 Number of Floats: 0
- 7) Number of Cars / Trucks: 0 (Certain height restrictions may apply due to overhead wires)
- 8) Number of Buses: 0 Will you require Off-Site Bus Parking? YES ☐ NO ☒
- 9) If yes, how much Off-Site Parking will you need: \_\_\_\_\_
- 10) Is Bollard Removal Required? YES ☐ NO ☒  
Bollard Location: \_\_\_\_\_  
Removal Time: \_\_\_\_\_

**A NW Police officer must be present on scene to authorize removal and reinstallation of bollards**

- 11) All Parades must have at least one designated Parade Marshall on location, during assembly, operation, and disbanding.

Name of Parade Marshall / Coordinator <u>Cheryl Crow</u>	
Title <u>Owner / Pres</u>	Cell Phone <u>609 320 301</u>
Address / City / State / Zip 	
Email 	

- 12) Special Guests (i.e., Mascot, Politician, Musician, Controversial, Actor, Actress, Media Person):
- \_\_\_\_\_
- \_\_\_\_\_

## PUBLIC WORKS

1) Are NW trash/recycling receptacles and removal requested: YES NO  
Is the event organization ordering the Dumpsters: YES NO  
Number Requested: Trash- \_\_\_\_\_ Recycling can/bottles- \_\_\_\_\_ Dumpsters- \_\_\_\_\_

### VENDOR COORDINATOR PLEASE ATTACH A RECLYING/TRASH PLAN

- All trash from set-up to clean-up must be removed and placed in the dumpsters provided. No stockpiling of trash behind space.
- Walkways behind vendors must be kept clear of all obstructions at all times.
- In cooking areas, the complete floor space must be covered with approved material to protect the ground surface, for example, tar paper.
- Water is available at the sink location. All grey water must be contained and disposed of in containers at the sink location. No dumping of any water in the event area is allowed.
- Before festivals, maps will be provided indicating locations of trash and recycle dumpsters, grey water, and grease disposal.
- Cardboard boxes intended for disposal must be broken down. All cardboard must be put into dumpsters designated for cardboard.

**Improper disposal of any material (including grey water, trash, garbage, and recyclables) – will be subject to legal action for violations under Ordinance #374-19.5.**

The information above needs to be distributed by the Event Organizer to all vendors prior to and during the event on their own stationary.

Name of person responsible for distributing information to vendors: \_\_\_\_\_

2) Do you request the use of any portable equipment from Public Works: YES NO  
(Please write an amount next to each requested item)

Traffic Cones- \_\_\_\_\_ Fencing- \_\_\_\_\_ Trash/Recycle Cans- \_\_\_\_\_ Eating Tables- \_\_\_\_\_  
Grease Drums- \_\_\_\_\_ Ash Drums- \_\_\_\_\_ Grey Water Tanks- \_\_\_\_\_ Sinks- \_\_\_\_\_  
Additional Equipment Requested \_\_\_\_\_

3) Restrooms/Port-a-Pots: Will your event direct people to public restrooms- YES NO  
Will your event use portable toilets/trailers- YES NO  
Is the event organizer ordering toilets/trailers- YES NO  
If yes, how many will be used: \_\_\_\_\_  
Cleaning schedule will be \_\_\_\_\_ cleaning(s) per day or as directed NW Officials  
Name of company: \_\_\_\_\_  
Contact Person/Cell: \_\_\_\_\_

**Note: One toilet for every 500 people is requested for events lasting over 2 hours – an appropriate number of these toilets should be handicapped accessible.**

4) Will your event have any temporary structures, fences, or fixtures: YES NO  
Anchors, pins, spikes or other materials are strictly prohibited in asphalt, boardwalk, and/or concrete to secure objects.

If so, please describe in detail: \_\_\_\_\_

Event Organizer is required to contact the Construction office for permits. 609 522 2030 ext. 1560

The City of North Wildwood will not allow any markings and/or painting of the streets, sidewalks, boardwalks, and parking lots, except those made by approved marking devices. Call the Dept. of Public Works to arrange for an appointment with the Director of Public Works prior to the event to submit marking devices for approval. If unapproved marking devices are used, the event/organization will be charged with the cost of removing and restoring to prior to event status. In addition, this department will likely not approve this organization's future events.

Respectfully,

Doug Nordberg, Director of Public Works

## RECREATION & TOURISM DEPARTMENT

1) Do you anticipate the need for Rec/Tour Dept. staff to support your event: YES NO

If yes, how many- \_\_\_\_\_

Purpose: \_\_\_\_\_

2) Will you require the use of Recreation Dept. Facilities (Rec Center/Parks): YES NO

If yes, please describe in detail (include dates/times)- \_\_\_\_\_

3) Will you require the use of Recreation Dept. portable equipment: YES NO

(Please write an amount next to each requested item)

Bleachers- \_\_\_\_\_ Coolers- \_\_\_\_\_ Chairs (folding)- \_\_\_\_\_ Tables- \_\_\_\_\_ Chairs (ceremony)- \_\_\_\_\_

Sound System (2 or 4 speakers) w/ microphone- \_\_\_\_\_ Podium- \_\_\_\_\_ Tents- \_\_\_\_\_ Signs- \_\_\_\_\_  
circle one

Additional Equipment- \_\_\_\_\_

	1 <sup>ST</sup> DAY	2 <sup>ND</sup> DAY	3 <sup>RD</sup> DAY
Day of the Week (SU,M,TU,W,TH,F,SA)			
Date (MM/DD/YY)			
Equipment Requested			
Set-Up (00:00 AM/PM)			
Break-Down (00:00 AM/PM)			
Location:			

4) Does the publicity plan for this event include any of the below: YES NO

☐ Posters ☐ Website ☐ Social Media ☐ Radio ☐ TV ☐ Newspaper/Publication ☐ Other

5) List any planned Print/Radio/TV Advertising: \_\_\_\_\_

Include copies of any direct mail/invitations/email/internet/posters/press releases/media kit being sent out



## BUILDINGS, GROUNDS & PARKS DEPARTMENT

1) Will any object, such as tent posts or signs be driven into the ground: YES NO  
(If yes, please consult with B.G. & P. Dept. to avoid damaging the irrigation system)

2) Will the event require the closure of any park / City area to the general public: YES NO

If yes, please describe in detail: \_\_\_\_\_

3) Will the boardwalk be used to secure any items (tents, signs or any other type of structure): YES NO

If yes, please describe in detail: \_\_\_\_\_

4) Will you have any vehicles on the boardwalk (Weight limit of 5000 lbs.): YES NO

(Vehicles are restricted to the Tram Path only)

If yes, please describe in detail: \_\_\_\_\_

5) Will your event have any electrical needs: YES NO  
(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)  
Will you have any sound / lighting equipment: YES NO  
Will you be using a lighting or sound contractor: YES NO

Contractor Information: \_\_\_\_\_

6) Overhead banners, banner flags and/or signs installed on City property

(Please request a banner specifications sheet with your application. All banners need City approval before being created and displayed.  
Organizer is responsible to collect banners following the event)

- a) Overhead Banners should be professionally made and measure 40 feet in length by 3 feet in width
- b) To get maximum display use; heavy duty grommets should be 16 inches apart and wind flaps cut and stitched in banner, should be constructed to last 2-4 weeks of display in the wind
- c) Banner Flags (10 poles) should be 5 feet in length by 30 inches wide (display should be 53" long)
- d) Welcome Area Billboard is 8 feet in length by 12 feet in width

7) Describe banners/signs in detail with proper wording (please attach a photo/layout): \_\_\_\_\_

8) Electrical service fees shall be paid by the vendor:

(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

- A) \$35 per event for ONE twenty-amp \$50 per event for ONE thirty-amp
- \$75 per event for ONE fifty-amp

B) Extra circuits will be provided only if there is a surplus of circuits after all vendors who have paid for electrical service have been provided with electrical service and thereafter will be provided on a first-requested and paid/first-provided basis.

C) Any service calls to a vendor that is necessitated by an overloaded circuit will result in the vendor being assessed an additional \$70 fee, which sum is payable in the advance of the restoration of electrical service to the vendor.

## NORTH WILDWOOD BEACH PATROL

1) What location(s) of the beach/ocean will be used and for what purpose: \_\_\_\_\_

2) Do you anticipate the need for NWBP staff to support your event: YES NO  
If yes, how many- \_\_\_\_\_ Purpose: \_\_\_\_\_

3) Will you require the use of NWBP Facilities, Vehicles, or Equipment: YES NO  
(If yes, please describe in detail; include dates and times)

	1 <sup>st</sup> DAY	2 <sup>nd</sup> DAY	3 <sup>rd</sup> DAY
Day of the Week (SU,M,TU,W,TH,F,SA)			
Date (MM/DD/YY)			
Equipment Requested			
Set-Up (00:00 AM/PM)			
Break-Down (00:00 AM/PM)			
Location:			

## CITY CLERK OFFICE

1) Number of Non-Food Vendor Spaces:   6   Number of Food Vendor Spaces:   6    
(Final Vendor list must be turned in 1 week prior to event date)  
(Organizer is responsible for obtaining vendor permits from Clerk's office & distributing vendor permits to vendors before inspection)

Vendor Fees	1 Day	2 Day	3 Day
First Year Fee	\$ 10.00	\$ 20.00	\$ 40.00
Second Year Fee	\$ 20.00	\$ 40.00	\$ 80.00
Third & Fourth Year Fee	\$ 50.00	\$ 100.00	\$ 150.00
Fifth & Plus Year Fee	\$ 75.00	\$ 150.00	\$ 200.00

2) Will your event require bulk special event parking passes: YES NO  
**FOR 3-DAY OR MORE EVENTS ONLY**

3) If yes, how many: \_\_\_\_\_ List dates for passes: \_\_\_\_\_  
\*Minimum 250 for out of season events and 500 for in season events; \$5 per day/per vehicle  
(Must be paid for 30 days prior to date of event) (In season is Memorial Day to Labor Day of each calendar year)

## POLICE DEPARTMENT

1) Contact information of person in charge of event: Cheryl Crowe

2) Contact information of person on-site of event: 11

3) Street or sidewalk closure(s): YES

Plan approved: YES

NO

NO

4) Barricade request (*fencing/barrels/cones*)

Plan submitted:

Plan approved:

YES

YES

YES

NO

NO

NO

5) Responsible party for barricade set-up (*Federal Fencing-Atlas-Police, etc.*): \_\_\_\_\_

Contact information: \_\_\_\_\_

6) Signage requested "NO PARKING", Other (*describe below*): \_\_\_\_\_ Post Time: \_\_\_\_\_

7) Equipment stored overnight: YES NO

Location: \_\_\_\_\_ Contact Info: \_\_\_\_\_

8) Site Plan – Detour/Traffic plan submitted: YES

Police Approval: YES

NO

NO

9) Police requested or required for event: YES

(*Please write amount next to request*)

NO

Start time: \_\_\_\_\_

Finish time: \_\_\_\_\_

Officers- \_\_\_\_\_ Traffic Posts- \_\_\_\_\_ Overnight Security- \_\_\_\_\_

10) Music: YES NO Start time: \_\_\_\_\_ Finish time: \_\_\_\_\_

Location: \_\_\_\_\_

11) Alcohol being served at event: YES

State ABC Approval: YES

City Approval: YES

NO

NO

NO

12) Staging Area: YES

Plan Submitted: YES

Plan Approved: YES

NO

NO

NO

13) First-Aid/EMS on site: YES

NO

14) Large Events: Command Post being utilized: YES NO

Location of Command Post: \_\_\_\_\_ Phone #: \_\_\_\_\_

List of Department representatives and contact numbers:

(*Please put on a separate sheet*)

## FIRE & EMS DEPARTMENT

---

1) Do you anticipate the need for Fire / EMS staff / equipment to support your event: YES NO  
*Fire Chief will determine the amount of staff and/or equipment needed for your request. attendance - \_\_\_\_\_*

3) Purpose: \_\_\_\_\_  
\_\_\_\_\_

4) Will you require the use of Fire Dept. Facilities or portable equipment: YES NO

5) If yes, please describe in detail, including dates and times: \_\_\_\_\_  
\_\_\_\_\_

## CONSTRUCTION, FIRE & HOUSING DEPARTMENT

---

1) Will there be a bonfire, open flame, lighting, cooking, extinguishing, or burning of any material: YES NO

2) If yes, please describe in detail: \_\_\_\_\_  
\_\_\_\_\_

3) Will there be any tents used larger than 900 square feet and more than 30 feet in any direction: YES NO

4) If yes, please describe in detail: \_\_\_\_\_  
\_\_\_\_\_

5) Permit #:        (Will be issued after Mayor & Council Approval)

**\*\*The number of bonfire permits are limited and based on the availability of fire personnel\*\***

a) Application for a permit required by this code shall be made to the fire official in such form and detail as the fire official shall prescribe. Applications for permits shall be accompanied by plans or drawings as required by the fire official for evaluation of the application.

b) Type 1 Permit: PERMIT FEE - \$54.00 (non-refundable)

1) The use of any open flame or flame-producing device, in connection with any public gathering for purpose of entertainment, amusement, or recreation.

2) The erection, operation or maintenance of any tent or canopy that is greater than 900 square feet and more than 30 feet in any direction.

## PERMIT / APPROVAL / AUTHORIZATION

Event Name: Duffy Strong Band Reel

Date(s) of Event: Wed 8/2 - 8/10 - 8/20

Mayor & Council: \_\_\_\_\_

Date: \_\_\_\_\_

City Clerk: \_\_\_\_\_

Date: \_\_\_\_\_

Director of Tourism: \_\_\_\_\_

Date: \_\_\_\_\_

Application Fee waived:

☒ YES

☐ NO

Service Fees waived:

☒ YES

☐ NO

☐ Approved as submitted.

☐ Approved with the following conditions:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

### Office use only:

Final Date of Approval: \_\_\_\_\_ Projected Total Costs for this event: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Permit Cost: \_\_\_\_\_ Total City Departmental Projected Costs: \_\_\_\_\_

## FOR OFFICIAL USE ONLY

Date of Preliminary Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

Date of Pre-event Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

### EVENT CHECKLIST

- |                                     |            |                     |  |
|-------------------------------------|------------|---------------------|--|
| <input checked="" type="checkbox"/> | <u>SM</u>  | <u>land 7-21-22</u> | Application Fee Paid   |
| <input type="checkbox"/>            | _____      |                     | Certificate of Insurance listing N.W. as Additionally Insured                |
| <input type="checkbox"/>            | _____      |                     | Additional Insured Endorsement Page(s) attached                              |
| <input checked="" type="checkbox"/> | <u>SM</u>  | <u>7-21-23</u>      | Hold Harmless completed & signed   |
| <input type="checkbox"/>            | _____      |                     | Detailed Site Plan defining the logistics of the event                       |
| <input type="checkbox"/>            | <u>N/A</u> |                     | Vendor list submitted to Clerk's Office                                      |
| <input type="checkbox"/>            | _____      |                     | Copy of extra materials such as schedule, agenda, flyers, timeline, etc.     |
| <input type="checkbox"/>            | <u>N/A</u> |                     | Additional applications (State Police-BOH-NJDOT-Fire Permit-ABC-Tent Permit) |
| <input type="checkbox"/>            | _____      |                     | Special Event Parking Passes Paid  |
| <input type="checkbox"/>            | _____      |                     | Miscellaneous  |
| <input type="checkbox"/>            | _____      |                     | Ready to be placed on the DMS  |

# TREASURER DEPARTMENT

## BILLING

Duffy Song Band  
Name of Event

Wed 8/2 - 8/16 - 8/20  
Date of Event

Application Fee \$ 0.00

Non-Profit \$25.00

For-Profit \$50.00

Police Dept. \$ \_\_\_\_\_

Fire Dept. \$ \_\_\_\_\_

Public Works Dept. \$ \_\_\_\_\_

Buildings, Grounds, Electric-Parks \$ \_\_\_\_\_

Clerk's Office \$ \_\_\_\_\_

Construction, Fire & Housing \$ \_\_\_\_\_

Beach Patrol \$ \_\_\_\_\_

Recreation & Tourism Dept. \$ \_\_\_\_\_

Stage Rental \$ \_\_\_\_\_

Special Event Parking Passes \$ \_\_\_\_\_

Miscellaneous Costs \$ \_\_\_\_\_

TOTAL \$ 0.00





# City of North Wildwood Special Event Application Form

Name of Event: ELVIS Tribute Concert

Date of Event: 8/12/23 Date of Application: 2/22/23

Type of Event (check one)

- ☐ Parade / Procession ☐ Festival ☐ 1Day ☐ multi-day ☒ Block Party ☐ Bonfire
- ☐ Craft Show ☐ 1Day ☐ multi-day ☐ Walk / Run (1K-5K-10K) / Triathlon / Bike / Marathon / Race
- ☐ Ceremony / Celebration / Demonstration ☐ Polar Plunge / Water Event ☐ Car Show
- ☐ Film / Photography ☐ Stage Request Only ☐ Other: \_\_\_\_\_

The City of North Wildwood requires all organizations, corporations, and/or individuals planning to stage an event file an official application with the Recreation & Tourism Department. **This application must be fully completed, signed, and forwarded to the Recreation & Tourism Department 90 days in advance of the event date unless waived by the Mayor and/or governing body.**

(City Code 382-23) A "special event" is an event sponsored by an organization who desires to use portion of the public streets or other public property, or avail itself of public facilities. Such event must be sponsored by a corporation (nonprofit or for profit), authorized to do business in the State of New Jersey, a nonprofit civic association, a charitable association, a religious association or any other association of persons. Special events shall include, by way of example and not by way of limitation, such events as parades, festivals, craft fairs, art shows, athletic contests, running races, bicycle races, fund raising events and similar events of which may include entertainment.

(City Code 382-24) There shall be an application fee charged to each organization, excluding municipal operations, operating a special event in the sum of **\$25.00 for non-profit and \$50.00 for for-profit** entities.

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

## SECTION 1 – ORGANIZATION INFORMATION

- 1) Name of Organization: Summer Notes
- 2) Address of Organization: 2110 Atlantic Ave
- 3) Purpose of Organization: Bed & Breakfast
- 4) How many members are in your organization: 2
- 5) Is your organization tax exempt: (please circle) YES ☒ NO Is this a non-profit event ☒ YES ☐ NO
- 6) NJ Registered Charitable Organization#: \_\_\_\_\_ Tax ID#: \_\_\_\_\_



## SECTION 1 – ORGANIZATION INFORMATION CONT

### 1) Organizer Contact Information:

Name of Event Chairperson / Organizer <u>Richard Brown</u>	
Title <u>Pres.</u>	Cell Phone <u>609-780-2778</u>
Address / City / State / Zip <u>2110 Atlantic Ave, N. Wildwood, NJ 08260</u>	
Email <u>Rick@richardbrownbuilders.com</u>	

Name of Event Chairperson / Organizer <u>Sheila Brown</u>	
Title <u>VP</u>	Cell Phone <u>609-780-2676</u>
Address / City / State / Zip <u>2110 Atlantic Ave, N. Wildwood, NJ 08260</u>	
Email <u>Sheila@SummerNites.com</u>	

## SECTION 2 – APPLICATION AUTHORIZATION

I, Sheila Brown, the undersigned state that I am the duly  
Name of Applicant

authorized representative of the Summer Nites  
Name of Organization

in addition, the information provided in this application is correct to the best of my knowledge. I understand that some of the information is preliminary in nature and I will provide updated information as it becomes available. I further agree to abide by changes made to the proposed event as indicated when so granted.

Sheila Brown  
Applicant Signature

2/22/23  
Date

### SECTION 3 – EVENT INFORMATION

1) Official Name of Event: Elvis Tribute Concert

2) Location of Event (please list city venue requirements by day/date): 2110 Atlantic Ave

3) Describe Event Activities: Entertainment

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) Will alcohol be served or sold by event organizers or others: YES ☒ NO

A) Do you have a ABC/Social Affairs Permit: YES NO

B) Are you requesting approval for open display of alcohol: YES NO

C) Designated Hours for open display of alcohol: \_\_\_\_\_

D) Designated Location of open display of alcohol: \_\_\_\_\_

E) Other Conditions: \_\_\_\_\_

**If alcohol is being sold at the event, the organizer is responsible to identify patrons of legal age to consume alcohol and provide the patron with a wristband after identification was properly checked.**

8) Rain Date or Delayed Starting Time: \_\_\_\_\_

9) Schedule Details: (Include a copy of program schedule/timeline/description of events)

	1 <sup>st</sup> Day	2 <sup>nd</sup> Day	3 <sup>rd</sup> Day	4 <sup>th</sup> Day
Day of the Week (SU,M,TU,W,TH,F,SA)	SAT			
Date (MM/DD/YY)	8-12-23			
Set-Up (00:00AM/PM)	6:00 PM			
Event Starts (00:00 AM/PM)	7:00 PM			
Event Ends (00:00 AM/PM)	9:00 PM			
Clean-Up (00:00 AM/PM)	9:00 PM			

### SECTION 3 – EVENT INFORMATION CONTINUE

10) Will the event require site to remain in place overnight, or will the site be broken down each night (partially or completely) Explain: NO

11) Describe how you plan to provide security for the event: OWNER SUPERVISOR  
adequate for 1st 18 yrs.

a) Private Security Company (name/address/contact person/phone): \_\_\_\_\_

12) If an event management company is contracted to handle the event, please provide the following information:

Company Name: W/A

Address: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Portion/s of event that the company is responsible for: \_\_\_\_\_

### ALL EVENTS MUST SUBMIT A DETAILED SITE PLAN

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

### SECTION 4 – INSURANCE REQUIREMENTS

1) Name of Insurance Company: Liberty Mutual

Policy Number: CBP 974-0397 \* Policy renews in July  
we'll provide at that time

Limits of Liability: 1,000,000

Events are required to provide the City of North Wildwood with a Certificate of Insurance indicating the continuation of insurance coverage and designating the City of North Wildwood as an "Additionally Insured."

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

# CERTIFICATE OF INSURANCE

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Evidence of financial responsibility from event chairperson, organization and others with whom the City of North Wildwood does business is required. Evidence should be in the form of a document that is issued by an insurance company or their authorized representative, which spells out the insurance coverage in force at the dates and times the special event will occur. It does not serve as a binder and does not confer rights upon the holder. The policy must be current and not expire before or on the dates of the event. The City of North Wildwood reserves the right to require complete, certified copies of all required insurance policies, including endorsements affecting the coverage required by these specifications at any time.

The Director of Tourism and Special Events, City Administrator or City of North Wildwood Mayor and Council may refuse to grant the use of permission to execute the Special Event whenever in their judgment there is good reason why permission should be refused. They shall not be required to give a reason for such refusal.

**Individuals** – Block Parties or any other oriented parties

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

**Commercial Rental** – Any organization that is for profit (i.e. Associations, Corporations, Partnerships, etc. ...)

## I. INDIVIDUALS

A. General Liability Limit \$500,000

Evidence that the individual has comprehensive personal liability insurance in force is required to use any City of North Wildwood 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.

B. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or to use the City of North Wildwood until it has been 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

## II. NON-PROFIT/CHARITABLE GROUPS

A. General Liability Limit (Per Occurrence) \$1,000,000

B. Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000

C. City of North Wildwood, N.J. named as "**Additional Insured**" with Endorsement page(s) to read as follows:

**The City of North Wildwood  
901 Atlantic Avenue  
North Wildwood, NJ 08260**

D. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

E. Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.

### 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. Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000
- C. City of North Wildwood, N.J. named as **"Additional Insured"** with Endorsement page(s) to read as follows:

**The City of North Wildwood**  
**901 Atlantic Avenue**  
**North Wildwood, NJ 08260**

D. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

E. Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.

## HOLD HARMLESS

NAME OF ORGANIZATION/USER Sheila Brown / Summer Notes will be referred to as **USER** from this point forward. **USER** shall indemnify, save harmless and defend the **City of North Wildwood**, its elected and appointed officials, its employees, agents, volunteers and others working on behalf of the **City of North Wildwood**, 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 **Facility(ies)/Equipment**, including all suits or actions of every kind or description brought against the **City of North Wildwood**, 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 **City of North Wildwood** 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. Where indicated, the **USER** shall be required to name the **City of North Wildwood** 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 **City of North Wildwood** 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 **City of North Wildwood** 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. On or before the renewal date of said policy, **USER** shall be required to provide the **City of North Wildwood** with a Certificate of Insurance indicating the continuation of insurance coverage and designating the **City of North Wildwood** as an "Additional Insured" for the duration of this agreement. The schedule of insurance and the limits of liability for the insurance shall provide coverage for not less than the amounts listed in the attached schedule or greater where required by law.

### COVID-19

**USER** verifies and asserts that all activities conducted at the **FACILITY(IES)** shall be in full compliance with the CDC, DOH Guidelines and the State of New Jersey Governor's Executive Orders applicable to public pools, summer camps, sports leagues, and recreation programs with can be reviewed at:

[https://nj.gov/infobank/eo/056murphy/approved/eo\\_archive.html](https://nj.gov/infobank/eo/056murphy/approved/eo_archive.html)

**USER** shall be responsible for all participants or guests complying with any social distancing or masks/face covering requirements of the state or Federal government which are in effect.

Signed by an authorized representative of the **USER** and the **City of North Wildwood** on

this 14 day of April, 2020

  
USER (SIGNATURE)

USER (PRINT NAME)

  
CITY REPRESENTATIVE

  
CITY REPRESENTATIVE (PRINT)



## BLOCK PARTY

- 1) Location (site-plan): 2110 Athletic Ave
- 2) List any Street Closings (site-plan): Athletic Ave between 21<sup>st</sup> & 22<sup>nd</sup>
- 3) Purpose: ELVIS Tribute Concert
- 4) Date(s): 8/12/23 Hours: 6:00 PM - 9:00 PM
- 5) Estimated number of people attending: 200
- 6) Type of Music or Entertainment: ELVIS Tribute Concert
- 7) Name of DJ or Entertainer: Keith Gipson
- DJ or Entertainer Contact information: 609-865-1622
- Names of Band(s): N/A
- Band Contact Information: N/A

Note: The issuance of a **BLOCK PARTY** permit **DOES NOT** waive the local noise ordinance, which prevents excessive noises from 10PM to 8AM. Please include the address, name, and signature of every property owner on the street that is being proposed to shut down stating their approval for the block party.

**DISCHARGE OF FIREWORKS IS PROHIBITED.**

## PUBLIC WORKS

- 1) Are NW trash/recycling receptacles and removal requested: YES ☒ NO  
Is the event organization ordering the Dumpsters: YES ☒ NO  
Number Requested: Trash-\_\_\_\_\_ Recycling can/bottles-\_\_\_\_\_ Dumpsters-\_\_\_\_\_

### VENDOR COORDINATOR PLEASE ATTACH A RECLYING/TRASH PLAN

- All trash from set-up to clean-up must be removed and placed in the dumpsters provided. No stockpiling of trash behind space.
- Walkways behind vendors must be kept clear of all obstructions at all times.
- In cooking areas, the complete floor space must be covered with approved material to protect the ground surface, for example, tar paper.
- Water is available at the sink location. All grey water must be contained and disposed of in containers at the sink location. No dumping of any water in the event area is allowed.
- Before festivals, maps will be provided indicating locations of trash and recycle dumpsters, grey water, and grease disposal.
- Cardboard boxes intended for disposal must be broken down. All cardboard must be put into dumpsters designated for cardboard.

**Improper disposal of any material (including grey water, trash, garbage, and recyclables) – will be subject to legal action for violations under Ordinance #374-19.5.**

The information above needs to be distributed by the Event Organizer to all vendors prior to and during the event on their own stationary.

Name of person responsible for distributing information to vendors: \_\_\_\_\_

- 2) Do you request the use of any portable equipment from Public Works: YES ☒ NO  
(Please write an amount next to each requested item)

Traffic Cones-\_\_\_\_\_ Fencing-\_\_\_\_\_ Trash/Recycle Cans-\_\_\_\_\_ Eating Tables-\_\_\_\_\_  
Grease Drums-\_\_\_\_\_ Ash Drums-\_\_\_\_\_ Grey Water Tanks-\_\_\_\_\_ Sinks-\_\_\_\_\_  
Additional Equipment Requested \_\_\_\_\_

- 3) Restrooms/Port-a-Pots: Will your event direct people to public restrooms- YES ☒ NO  
Will your event use portable toilets/trailers- YES ☒ NO  
Is the event organizer ordering toilets/trailers- YES ☒ NO  
If yes, how many will be used: \_\_\_\_\_  
Cleaning schedule will be \_\_\_\_\_ cleaning(s) per day or as directed NW Officials  
Name of company: \_\_\_\_\_  
Contact Person/Cell: \_\_\_\_\_

**Note: One toilet for every 500 people is requested for events lasting over 2 hours – an appropriate number of these toilets should be handicapped accessible.**

- 4) Will your event have any temporary structures, fences, or fixtures: YES ☒ NO  
Anchors, pins, spikes or other materials are strictly prohibited in asphalt, boardwalk, and/or concrete to secure objects.

If so, please describe in detail: \_\_\_\_\_

Event Organizer is required to contact the Construction office for permits. 609 522 2030 ext. 1560

The City of North Wildwood will not allow any markings and/or painting of the streets, sidewalks, boardwalks, and parking lots, except those made by approved marking devices. Call the Dept. of Public Works to arrange for an appointment with the Director of Public Works prior to the event to submit marking devices for approval. If unapproved marking devices are used, the event/organization will be charged with the cost of removing and restoring to prior to event status. In addition, this department will likely not approve this organization's future events.

Respectfully,

Doug Nordberg, Director of Public Works



## RECREATION & TOURISM DEPARTMENT

1) Do you anticipate the need for Rec/Tour Dept. staff to support your event: YES NO

If yes, how many- \_\_\_\_\_

Purpose: \_\_\_\_\_

2) Will you require the use of Recreation Dept. Facilities (Rec Center/Parks): YES NO

If yes, please describe in detail (include dates/times)- \_\_\_\_\_

3) Will you require the use of Recreation Dept. portable equipment: YES NO

(Please write an amount next to each requested item)

Bleachers- \_\_\_\_\_ Coolers- \_\_\_\_\_ Chairs (folding)- \_\_\_\_\_ Tables- \_\_\_\_\_ Chairs (ceremony)- \_\_\_\_\_

Sound System (2 or 4 speakers) w/ microphone- \_\_\_\_\_ Podium- \_\_\_\_\_ Tents- \_\_\_\_\_ Signs- \_\_\_\_\_  
circle one

Additional Equipment- \_\_\_\_\_

	1 <sup>ST</sup> DAY	2 <sup>ND</sup> DAY	3 <sup>RD</sup> DAY
Day of the Week (SU,M,TU,W,TH,F,SA)			
Date (MM/DD/YY)			
Equipment Requested			
Set-Up (00:00 AM/PM)			
Break-Down (00:00 AM/PM)			
Location:			

4) Does the publicity plan for this event include any of the below: YES NO

☐ Posters ☐ Website ☐ Social Media ☐ Radio ☐ TV ☐ Newspaper/Publication ☐ Other

5) List any planned Print/Radio/TV Advertising: \_\_\_\_\_

Include copies of any direct mail/invitations/email/internet/posters/press releases/media kit being sent out

## BUILDINGS, GROUNDS & PARKS DEPARTMENT

1) Will any object, such as tent posts or signs be driven into the ground: YES NO  
(If yes, please consult with B.G. & P. Dept. to avoid damaging the irrigation system)

2) Will the event require the closure of any park / City area to the general public: YES NO

If yes, please describe in detail: \_\_\_\_\_

3) Will the boardwalk be used to secure any items (tents, signs or any other type of structure): YES NO

If yes, please describe in detail: \_\_\_\_\_

4) Will you have any vehicles on the boardwalk (**Weight limit of 5000 lbs.**): YES NO  
(Vehicles are restricted to the Tram Path only)

If yes, please describe in detail: \_\_\_\_\_

5) Will your event have any electrical needs: YES NO  
(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

Will you have any sound / lighting equipment: YES NO

Will you be using a lighting or sound contractor: YES NO

Contractor Information: \_\_\_\_\_

6) Overhead banners, banner flags and/or signs installed on City property

(Please request a banner specifications sheet with your application. All banners need City approval before being created and displayed.  
Organizer is responsible to collect banners following the event)

- a) Overhead Banners should be professionally made and measure 40 feet in length by 3 feet in width
- b) To get maximum display use; heavy duty grommets should be 16 inches apart and wind flaps cut and stitched in banner, should be constructed to last 2-4 weeks of display in the wind
- c) Banner Flags (10 poles) should be 5 feet in length by 30 inches wide (display should be 53" long)
- d) Welcome Area Billboard is 8 feet in length by 12 feet in width

7) Describe banners/signs in detail with proper wording (please attach a photo/layout): \_\_\_\_\_

8) Electrical service fees shall be paid by the vendor:

(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

- A) \$35 per event for ONE twenty-amp      \$50 per event for ONE thirty-amp  
\$75 per event for ONE fifty-amp

B) Extra circuits will be provided only if there is a surplus of circuits after all vendors who have paid for electrical service have been provided with electrical service and thereafter will be provided on a first-requested and paid/first-provided basis.

C) Any service calls to a vendor that is necessitated by an overloaded circuit will result in the vendor being assessed an additional \$70 fee, which sum is payable in the advance of the restoration of electrical service to the vendor.

# NORTH WILDWOOD BEACH PATROL

1) What location(s) of the beach/ocean will be used and for what purpose: N/A

2) Do you anticipate the need for NWBP staff to support your event: YES NO

If yes, how many- \_\_\_\_\_ Purpose: \_\_\_\_\_

3) Will you require the use of NWBP Facilities, Vehicles, or Equipment: YES NO

(If yes, please describe in detail; include dates and times)

	1 <sup>st</sup> DAY	2 <sup>nd</sup> DAY	3 <sup>rd</sup> DAY
Day of the Week (SU,M,TU,W,TH,F,SA)			
Date (MM/DD/YY)			
Equipment Requested			
Set-Up (00:00 AM/PM)			
Break-Down (00:00 AM/PM)			
Location:			

## CITY CLERK OFFICE

1) Number of Non-Food Vendor Spaces: \_\_\_\_\_ Number of Food Vendor Spaces: \_\_\_\_\_

(Final Vendor list must be turned in 1 week prior to event date)

(Organizer is responsible for obtaining vendor permits from Clerk's office & distributing vendor permits to vendors before inspection)

Vendor Fees	1 Day	2 Day	3 Day
First Year Fee	\$ 10.00	\$ 20.00	\$ 40.00
Second Year Fee	\$ 20.00	\$ 40.00	\$ 80.00
Third & Fourth Year Fee	\$ 50.00	\$ 100.00	\$ 150.00
Fifth & Plus Year Fee	\$ 75.00	\$ 150.00	\$ 200.00

2) Will your event require bulk special event parking passes: YES NO

**FOR 3-DAY OR MORE EVENTS ONLY**

3) If yes, how many: \_\_\_\_\_ List dates for passes: \_\_\_\_\_

**\*Minimum 250 for out of season events and 500 for in season events; \$5 per day/per vehicle**

(Must be paid for 30 days prior to date of event) (In season is Memorial Day to Labor Day of each calendar year)

# POLICE DEPARTMENT

1) Contact information of person in charge of event: Sheila Brown

2) Contact information of person on-site of event: Sheila Brown

3) Street or sidewalk closure(s): YES NO  
Plan approved: YES NO

4) Barricade request (fencing/barrels/cones) YES NO  
Plan submitted: YES NO  
Plan approved: YES NO

5) Responsible party for barricade set-up (Federal Fencing-Atlas-Police, etc.): \_\_\_\_\_

Contact information: \_\_\_\_\_

6) Signage requested "NO PARKING", Other (describe below): \_\_\_\_\_ Post Time: \_\_\_\_\_

\*Please Post signs on Friday, Aug 11<sup>th</sup> by 4:00 PM \*\*

7) Equipment stored overnight: YES NO

Location: \_\_\_\_\_ Contact Info: \_\_\_\_\_

8) Site Plan – Detour/Traffic plan submitted: YES NO  
Police Approval: YES NO

9) Police requested or required for event: YES NO Start time: \_\_\_\_\_  
(Please write amount next to request) Finish time: \_\_\_\_\_

Officers- \_\_\_\_\_ Traffic Posts- \_\_\_\_\_ Overnight Security- \_\_\_\_\_

10) Music: YES NO Start time: 7:00 PM Finish time: 9:00 PM  
Location: 2110 ATLANTIC AVE

11) Alcohol being served at event: YES NO Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
State ABC Approval: YES NO  
City Approval: YES NO

12) Staging Area: YES NO  
Plan Submitted: YES NO  
Plan Approved: YES NO

13) First-Aid/EMS on site: YES NO

14) Large Events: Command Post being utilized: YES NO

Location of Command Post: \_\_\_\_\_ Phone #: \_\_\_\_\_

List of Department representatives and contact numbers:  
(Please put on a separate sheet)

## FIRE & EMS DEPARTMENT

---

1) Do you anticipate the need for Fire / EMS staff / equipment to support your event: YES NO  
*Fire Chief will determine the amount of staff and/or equipment needed for your request. attendance - \_\_\_\_\_*

3) Purpose: \_\_\_\_\_  
\_\_\_\_\_

4) Will you require the use of Fire Dept. Facilities or portable equipment: YES NO

5) If yes, please describe in detail, including dates and times: \_\_\_\_\_  
\_\_\_\_\_

## CONSTRUCTION, FIRE & HOUSING DEPARTMENT

---

1) Will there be a bonfire, open flame, lighting, cooking, extinguishing, or burning of any material: YES NO

2) If yes, please describe in detail: \_\_\_\_\_  
\_\_\_\_\_

3) Will there be any tents used larger than 900 square feet and more than 30 feet in any direction: YES NO

4) If yes, please describe in detail: \_\_\_\_\_  
\_\_\_\_\_

5) Permit #: \_\_\_\_\_ (Will be issued after Mayor & Council Approval)

**\*\*The number of bonfire permits are limited and based on the availability of fire personnel\*\***

a) Application for a permit required by this code shall be made to the fire official in such form and detail as the fire official shall prescribe. Applications for permits shall be accompanied by plans or drawings as required by the fire official for evaluation of the application.

b) Type 1 Permit: PERMIT FEE - \$54.00 (non-refundable)

1) The use of any open flame or flame-producing device, in connection with any public gathering for purpose of entertainment, amusement, or recreation.

2) The erection, operation or maintenance of any tent or canopy that is greater than 900 square feet and more than 30 feet in any direction.

## Stephen DeHorsey

---

**From:** Casey Byrne <cbyrne@jbyrneagency.com>  
**Sent:** Thursday, July 13, 2023 9:42 AM  
**To:** Stephen DeHorsey  
**Subject:** EXTERNALRE: EXTERNALSummer Nites

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Steve,

This one is approved!

Thank you,

**Casey Byrne, ACSR  
President**



5200 New Jersey Ave.  
Wildwood NJ 08260  
609-522-3406 Ext. 160  
609-224-1672 Direct  
609-522-2844 Fax  
[cbyrne@jbyrneagency.com](mailto:cbyrne@jbyrneagency.com)  
[www.jbyrneagency.com](http://www.jbyrneagency.com)



**[Click HERE to check out our Agency Newsletter!](#)**

**\*\*A REFERRAL IS THE BEST COMPLIMENT\*\***



**From:** Stephen DeHorsey <sdehorsey@northwildwood.com>  
**Sent:** Thursday, July 13, 2023 7:35 AM





SUMMNIT-01

CSIMIONE

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/12/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Helst Insurance Agency, an Alera Group Company PO Box 480 700 West Avenue Ocean City, NJ 08226	<b>CONTACT NAME:</b>	
	<b>PHONE (A/C, No, Ext):</b> (609) 399-0655	<b>FAX (A/C, No):</b> (609) 399-8681
	<b>E-MAIL ADDRESS:</b> mail@helstinsurance.com	
<b>INSURED</b>  2110 Atlantic Avenue, LLC t/a Summer Nites Corp. 2110 Atlantic Avenue Wildwood, NJ 08260	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Fitchburg Mutual Insurance Company	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	
	<b>NAIC #</b> 13943	

**COVERAGES** **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X		V2037992A	7/10/2023	7/10/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 250,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NJ) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Bed & Breakfast located at: 2110 Atlantic Avenue, Wildwood, NJ

\$1,000 deductible per claim

Wind/Hail Exclusion

City of North Wildwood is hereby named as additional insured as required by written contract and to the extent of the policy language. This certificate does to alter the terms, conditions or exclusions of the policy.  
Elvis Concert 8/12/2023

## CERTIFICATE HOLDER

## CANCELLATION

City of North Wildwood North Wildwood Community Center 900 Central Avenue North Wildwood, NJ 08260	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE <i>Cheryl A. Simione</i>
---	---



# Site Plan

**Street Closure for Elvis Tribute Concert**

**Close Atlantic Ave between 21st & 22nd Ave**

**August 12<sup>th</sup> from 6:00 PM - 9:00 PM**



**Please post "NO PARKING" signs the day before, on August 12<sup>th</sup> by 4:00 PM to avoid parking issues the date of the event.**

**Thank you**

**Subject:** Re: Elvis Block Party  
**From:** j <jscholtz1@verizon.net>  
**Date:** 4/7/2023, 3:45 PM  
**To:** Sheila <sheila@summernites.com>

John and Janice Scholtz approved the wonderful Elvis show on August 12 2023!!!!

Janice Scholtz

[Sent from the all new AOL app for iOS](#)

---

On Friday, April 7, 2023, 8:44 AM, Sheila <sheila@summernites.com> wrote:

Hi Janice & John,  
Can you please me an email approving our Elvis Show for August 12, 2023.

Thanks  
Sheila Brown

**Subject:** Elvis Block Party  
**From:** "Dave Lawall" <djl@lawall.com>  
**Date:** 4/7/2023, 3:21 PM  
**To:** <sheila@summernites.com>

To whom it may concern:


I am writing about the annual Elvis Block Party that is sponsored by Summer Nights on August 12. My name is David Lawall and we have our home next door to the Summer Nights at 2104 Atlantic Ave. My family and friends are always looking forward to that weekend. I have ^ family members that live the Wildwood that attend and celebrate the day w us. We absolutely support the coming of Elvis and with amount of people that attend, it is real treat to have the street closed and ability to watch the King perform.

*CONFIDENTIALITY NOTICE: The information contained in this message may be privileged and confidential and protected from disclosure by the Health Insurance Portability & Accountability Act (HIPAA). If the reader of this message is not the intended recipient, or an employee or agent responsible for delivering this message to the intended recipient, you are hereby notified that any dissemination or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us immediately by replying to this message and deleting it from your computer. Thank You.*

To Whom it May Concern

I, Richard Carroll approve of having the Elvis Block Party on August 12, 2023 at Summer Nites.

We approve the closure of Atlantic Ave from 21<sup>st</sup> – 22<sup>nd</sup> street for the Elvis Tribute Artist show

A handwritten signature in blue ink, appearing to read 'Richard Carroll', is written over a horizontal line.

Richard Carroll

4/11/23

Date:

## PERMIT / APPROVAL / AUTHORIZATION

Event Name: Summer Nites E/na Black Pt,

Date(s) of Event: Sat 8-12-23

Mayor & Council: \_\_\_\_\_

Date: \_\_\_\_\_

City Clerk: \_\_\_\_\_

Date: \_\_\_\_\_

Director of Tourism: \_\_\_\_\_

Date: \_\_\_\_\_

Application Fee waived: ☐ YES ☒ NO

Service Fees waived: ☐ YES ☒ NO

☐ Approved as submitted.

☐ Approved with the following conditions:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

### Office use only:

Final Date of Approval: \_\_\_\_\_ Projected Total Costs for this event: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Permit Cost: \_\_\_\_\_ Total City Departmental Projected Costs: \_\_\_\_\_

## FOR OFFICIAL USE ONLY

Date of Preliminary Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Pre-event Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### EVENT CHECKLIST

- |                                     |                    |  |
|-------------------------------------|--------------------|--|
| <input checked="" type="checkbox"/> | <u>SMD</u> 4-14-23 | Application Fee Paid   |
| <input checked="" type="checkbox"/> | <u>SMD</u> 7-14-23 | Certificate of Insurance listing N.W. as Additionally Insured                |
| <input checked="" type="checkbox"/> | <u>SMD</u> 7-23-23 | Additional Insured Endorsement Page(s) attached                              |
| <input checked="" type="checkbox"/> | <u>SMD</u> 4-14-23 | Hold Harmless completed & signed   |
| <input checked="" type="checkbox"/> | <u>SMD</u> 4-14-23 | Detailed Site Plan defining the logistics of the event                       |
| <input type="checkbox"/>            | <u>N/A</u>         | Vendor list submitted to Clerk's Office                                      |
| <input type="checkbox"/>            | _____              | Copy of extra materials such as schedule, agenda, flyers, timeline, etc.     |
| <input type="checkbox"/>            | <u>N/A</u>         | Additional applications (State Police-BOH-NJDOT-Fire Permit-ABC-Tent Permit) |
| <input type="checkbox"/>            | <u>N/A</u>         | Special Event Parking Passes Paid  |
| <input type="checkbox"/>            | _____              | Miscellaneous  |
| <input type="checkbox"/>            | _____              | Ready to be placed on the DMS  |

# TREASURER DEPARTMENT

## BILLING

Summer Nites Dine Party  
Name of Event

Sat 8-12-23  
Date of Event

Application Fee

\$

50.00 ~~Pl 4-14-23~~

Non-Profit \$25.00

For-Profit \$50.00

Police Dept.

\$

Fire Dept.

\$

Public Works Dept.

\$

Buildings, Grounds, Electric-Parks

\$

Clerk's Office

\$

Construction, Fire & Housing

\$

Beach Patrol

\$

Recreation & Tourism Dept.

\$

Stage Rental

\$

Special Event Parking Passes

\$

Miscellaneous Costs

\$

TOTAL

\$





# City of North Wildwood Special Event Application Form

Name of Event: "Live Like Bolle" 5K Run & 1-Mile Walk

Date of Event: 8/12/23 Sat Date of Application: 7/20/23

Type of Event (check one)

- ☐ Parade / Procession ☐ Festival ☐ 1Day ☐ multi-day ☐ Block Party ☐ Bonfire
- ☐ Craft Show ☐ 1Day ☐ multi-day ☒ Walk / Run (1K-~~5K~~10K) / Triathlon / Bike / Marathon / Race
- ☐ Ceremony / Celebration / Demonstration ☐ Polar Plunge / Water Event ☐ Car Show
- ☐ Film / Photography ☐ Stage Request Only ☐ Other: \_\_\_\_\_

The City of North Wildwood requires all organizations, corporations, and/or individuals planning to stage an event file an official application with the Recreation & Tourism Department. **This application must be fully completed, signed, and forwarded to the Recreation & Tourism Department 90 days in advance of the event date unless waived by the Mayor and/or governing body.**

(City Code 382-23) A "special event" is an event sponsored by an organization who desires to use portion of the public streets or other public property, or avail itself of public facilities. Such event must be sponsored by a corporation (nonprofit or for profit), authorized to do business in the State of New Jersey, a nonprofit civic association, a charitable association, a religious association or any other association of persons. Special events shall include, by way of example and not by way of limitation, such events as parades, festivals, craft fairs, art shows, athletic contests, running races, bicycle races, fund raising events and similar events of which may include entertainment.

(City Code 382-24) There shall be an application fee charged to each organization, excluding municipal operations, operating a special event in the sum of **\$25.00 for non-profit and \$50.00 for for-profit** entities.

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

## SECTION 1 – ORGANIZATION INFORMATION

- 1) Name of Organization: StepBack Foundation
- 2) Address of Organization: 101 E Cardinal Road, Wildwood Crest, NJ 08260
- 3) Purpose of Organization: provide athletic equipment to local student athletes
- 4) How many members are in your organization: 10
- 5) Is your organization tax exempt: (please circle) YES NO Is this a non-profit event YES NO
- 6) NJ Registered Charitable Organization#: \_\_\_\_\_ Tax ID#: 83-4646007

## SECTION 1 – ORGANIZATION INFORMATION CONT

### 1) Organizer Contact Information:

Name of Event Chairperson / Organizer Maddie McCracken	
Title Founder	Cell Phone (609) 972-8910
Address / City / State / Zip 322 W Chestnut Ave, Wildwood, NJ 08260	
Email maddiemccracken2@gmail.com      thestepbackfoundation@gmail.com	

Name of Event Chairperson / Organizer Dennis Dool	
Title Board Member	Cell Phone 215-990-8689
Address / City / State / Zip 520 Andover Dr N. Wildwood, NJ 08260	
Email doolandsea@aol.com	

## SECTION 2 – APPLICATION AUTHORIZATION

I, Maddie McCracken, the undersigned state that I am the duly  
Name of Applicant

authorized representative of the Step Back Foundation  
Name of Organization

in addition, the information provided in this application is correct to the best of my knowledge. I understand that some of the information is preliminary in nature and I will provide updated information as it becomes available. I further agree to abide by changes made to the proposed event as indicated when so granted.

Maddie McCracken  
Applicant Signature

7/20/23  
Date

## SECTION 3 – EVENT INFORMATION

1) Official Name of Event: "Live Like Bulls" 5K Run & 1-Mile Walk

2) Location of Event (please list city venue requirements by day/date): 15th Street Beach

3) Describe Event Activities: 5K Run & 1-Mile Walk

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) Will alcohol be served or sold by event organizers or others: YES ☐ NO ☒

A) Do you have a ABC/Social Affairs Permit: YES ☐ NO ☐

B) Are you requesting approval for open display of alcohol: YES ☐ NO ☐

C) Designated Hours for open display of alcohol: \_\_\_\_\_

D) Designated Location of open display of alcohol: \_\_\_\_\_

E) Other Conditions: \_\_\_\_\_

**If alcohol is being sold at the event, the organizer is responsible to identify patrons of legal age to consume alcohol and provide the patron with a wristband after identification was properly checked.**

8) Rain Date or Delayed Starting Time: 8/13/23 @ 8:30 AM

9) Schedule Details: (Include a copy of program schedule/timeline/description of events)

	1 <sup>st</sup> Day	2 <sup>nd</sup> Day	3 <sup>rd</sup> Day	4 <sup>th</sup> Day
Day of the Week (SU,M,TU,W,TH,F,SA)				
Date (MM/DD/YY)	08/12/23			
Set-Up (00:00AM/PM)	06:30 AM			
Event Starts (00:00 AM/PM)	07:30 AM registration			
Event Ends (00:00 AM/PM)	10:00 AM			
Clean-Up (00:00 AM/PM)	10:00 AM			

### SECTION 3 – EVENT INFORMATION CONTINUE

10) Will the event require site to remain in place overnight, or will the site be broken down each night (partially or completely) Explain: no

11) Describe how you plan to provide security for the event: no

a) Private Security Company (name/address/contact person/phone): none

12) If an event management company is contracted to handle the event, please provide the following information:

Company Name: none

Address: \_\_\_\_\_

City/ST/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

Portion/s of event that the company is responsible for: \_\_\_\_\_

### **ALL EVENTS MUST SUBMIT A DETAILED SITE PLAN**

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

### SECTION 4 – INSURANCE REQUIREMENTS

1) Name of Insurance Company: J Byrne

Policy Number: NBP1566696

Limits of Liability: \_\_\_\_\_

(attached)

Events are required to provide the City of North Wildwood with a Certificate of Insurance indicating the continuation of insurance coverage and designating the City of North Wildwood as an **"Additionally Insured."**

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

# CERTIFICATE OF INSURANCE

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Evidence of financial responsibility from event chairperson, organization and others with whom the City of North Wildwood does business is required. Evidence should be in the form of a document that is issued by an insurance company or their authorized representative, which spells out the insurance coverage in force at the dates and times the special event will occur. It does not serve as a binder and does not confer rights upon the holder. The policy must be current and not expire before or on the dates of the event. The City of North Wildwood reserves the right to require complete, certified copies of all required insurance policies, including endorsements affecting the coverage required by these specifications at any time.

The Director of Tourism and Special Events, City Administrator or City of North Wildwood Mayor and Council may refuse to grant the use of permission to execute the Special Event whenever in their judgment there is good reason why permission should be refused. They shall not be required to give a reason for such refusal.

**Individuals** – Block Parties or any other oriented parties

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

**Commercial Rental** – Any organization that is for profit (i.e. Associations, Corporations, Partnerships, etc. ...)

## I. INDIVIDUALS

A. General Liability Limit \$500,000

Evidence that the individual has comprehensive personal liability insurance in force is required to use any City of North Wildwood 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.

B. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or to use the City of North Wildwood until it has been 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

## II. NON-PROFIT/CHARITABLE GROUPS

A. General Liability Limit (Per Occurrence) \$1,000,000

B. Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000

C. City of North Wildwood, N.J. named as "**Additional Insured**" with Endorsement page(s) to read as follows:

**The City of North Wildwood  
901 Atlantic Avenue  
North Wildwood, NJ 08260**

D. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

E. Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.

### **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.** Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000
- C.** City of North Wildwood, N.J. named as **"Additional Insured"** with Endorsement page(s) to read as follows:  

**The City of North Wildwood**  
**901 Atlantic Avenue**  
**North Wildwood, NJ 08260**
- D.** Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.
- E.** Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.



## HOLD HARMLESS

NAME OF ORGANIZATION/USER StepBack Foundation will be referred to as **USER** from this point forward. **USER** shall indemnify, save harmless and defend the **City of North Wildwood**, its elected and appointed officials, its employees, agents, volunteers and others working on behalf of the **City of North Wildwood**, 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 **Facility(ies)/Equipment**, including all suits or actions of every kind or description brought against the **City of North Wildwood**, 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 **City of North Wildwood** 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. Where indicated, the **USER** shall be required to name the **City of North Wildwood** 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 **City of North Wildwood** 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 **City of North Wildwood** 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. On or before the renewal date of said policy, **USER** shall be required to provide the **City of North Wildwood** with a Certificate of Insurance indicating the continuation of insurance coverage and designating the **City of North Wildwood** as an "Additional Insured" for the duration of this agreement. The schedule of insurance and the limits of liability for the insurance shall provide coverage for not less than the amounts listed in the attached schedule or greater where required by law.

### COVID-19

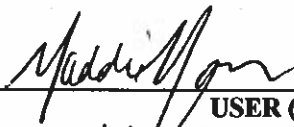
**USER** verifies and asserts that all activities conducted at the **FACILITY(IES)** shall be in full compliance with the CDC, DOH Guidelines and the State of New Jersey Governor's Executive Orders applicable to public pools, summer camps, sports leagues, and recreation programs with can be reviewed at:


[https://nj.gov/infobank/eo/056murphy/approved/eo\\_archive.html](https://nj.gov/infobank/eo/056murphy/approved/eo_archive.html)

**USER** shall be responsible for all participants or guests complying with any social distancing or masks/face covering requirements of the state or Federal government which are in effect.

Signed by an authorized representative of the **USER** and the **City of North Wildwood** on

this 25 day of July, 2022.

  
\_\_\_\_\_  
USER (SIGNATURE)  
Maddie McNacken  
\_\_\_\_\_  
USER (PRINT NAME)

  
\_\_\_\_\_  
CITY REPRESENTATIVE  
Steve DeLong  
\_\_\_\_\_  
CITY REPRESENTATIVE (PRINT)



# WALK / RUN (1K-5K-10K) / TRIATHLON / BIKE / MARATHON / RACE

1) Proposed Route (include turn-by-turn directions): attached

2) List Any Street Closings (identify on site-plan): \_\_\_\_\_

3) Entrance Fee Charged: YES NO Amount: \$ 25 / runner \$15 / walker

4) Beneficiary: \_\_\_\_\_

5) Event Distance(s): 31 miles (run) ; 4 mile (walk)

6) Do participants complete a registration form: YES (online) NO  
(Please include a registration form with application)

7) Number of Participants: 250 How many volunteers will staff the event: 20

8) Starting & Ending Location (identify on site-plan): 15th Street beach

9) Assembly & Disbanding Area (identify on site-plan): (attached)

10) Location(s) of Water Stations (identify on site-plan): (attached)

11) Location of First Aid Tent (identify on site-plan): (attached)

12) Explain your First Aid / Medical Plan: (attached)

13) Special Guests (i.e., Mascot, Politician, Musician, Controversial, Actor, Actress, Media Person):  
none

## PUBLIC WORKS

1) Are NW trash/recycling receptacles and removal requested:

YES

~~NO~~  
~~NO~~

Is the event organization ordering the Dumpsters:

YES

Number Requested: Trash- \_\_\_\_\_ Recycling can/bottles- \_\_\_\_\_

Dumpsters- \_\_\_\_\_

### VENDOR COORDINATOR PLEASE ATTACH A RECLYING/TRASH PLAN

- All trash from set-up to clean-up must be removed and placed in the dumpsters provided. No stockpiling of trash behind space.
- Walkways behind vendors must be kept clear of all obstructions at all times.
- In cooking areas, the complete floor space must be covered with approved material to protect the ground surface, for example, tar paper.
- Water is available at the sink location. All grey water must be contained and disposed of in containers at the sink location. No dumping of any water in the event area is allowed.
- Before festivals, maps will be provided indicating locations of trash and recycle dumpsters, grey water, and grease disposal.
- Cardboard boxes intended for disposal must be broken down. All cardboard must be put into dumpsters designated for cardboard.

**Improper disposal of any material (including grey water, trash, garbage, and recyclables) – will be subject to legal action for violations under Ordinance #374-19.5.**

The information above needs to be distributed by the Event Organizer to all vendors prior to and during the event on their own stationary.

Name of person responsible for distributing information to vendors: \_\_\_\_\_

2) Do you request the use of any portable equipment from Public Works:

YES

~~NO~~

(Please write an amount next to each requested item)

Traffic Cones- \_\_\_\_\_ Fencing- \_\_\_\_\_ Trash/Recycle Cans- \_\_\_\_\_ Eating Tables- \_\_\_\_\_

Grease Drums- \_\_\_\_\_ Ash Drums- \_\_\_\_\_ Grey Water Tanks- \_\_\_\_\_ Sinks- \_\_\_\_\_

Additional Equipment Requested \_\_\_\_\_

3) Restrooms/Port-a-Pots: Will your event direct people to public restrooms-

YES

~~NO~~  
~~NO~~  
~~NO~~

Will your event use portable toilets/trailers-

YES

Is the event organizer ordering toilets/trailers-

YES

If yes, how many will be used: \_\_\_\_\_

Cleaning schedule will be \_\_\_\_\_ cleaning(s) per day or as directed NW Officials

Name of company: \_\_\_\_\_

Contact Person/Cell: \_\_\_\_\_

**Note: One toilet for every 500 people is requested for events lasting over 2 hours – an appropriate number of these toilets should be handicapped accessible.**

4) Will your event have any temporary structures, fences, or fixtures:

YES

~~NO~~

Anchors, pins, spikes or other materials are strictly prohibited in asphalt, boardwalk, and/or concrete to secure objects.

If so, please describe in detail: \_\_\_\_\_

Event Organizer is required to contact the Construction office for permits. 609 522 2030 ext. 1560

The City of North Wildwood will not allow any markings and/or painting of the streets, sidewalks, boardwalks, and parking lots, except those made by approved marking devices. Call the Dept. of Public Works to arrange for an appointment with the Director of Public Works prior to the event to submit marking devices for approval. If unapproved marking devices are used, the event/organization will be charged with the cost of removing and restoring to prior to event status. In addition, this department will likely not approve this organization's future events.

Respectfully,

Doug Nordberg, Director of Public Works

# RECREATION & TOURISM DEPARTMENT

1) Do you anticipate the need for Rec/Tour Dept. staff to support your event: YES NO  
 If yes, how many- \_\_\_\_\_  
 Purpose: \_\_\_\_\_

2) Will you require the use of Recreation Dept. Facilities (Rec Center/Parks): YES NO  
 If yes, please describe in detail (include dates/times)- \_\_\_\_\_  
 \_\_\_\_\_

3) Will you require the use of Recreation Dept. portable equipment: YES NO  
 (Please write an amount next to each requested item)

Bleachers- \_\_\_\_\_ Coolers- \_\_\_\_\_ Chairs (folding)- 12 Tables- 6 Chairs (ceremony)- \_\_\_\_\_

Sound System 2 or 4 speakers) w/ microphone- 2 Podium- \_\_\_\_\_ Tents- \_\_\_\_\_ Signs- \_\_\_\_\_  
 circle one

Additional Equipment- \_\_\_\_\_  
 \_\_\_\_\_

	1 <sup>ST</sup> DAY	2 <sup>ND</sup> DAY	3 <sup>RD</sup> DAY
Day of the Week (SU,M,TU,W,TH,F,SA)			
Date (MM/DD/YY)	08/12/23		
Equipment Requested			
Set-Up (00:00 AM/PM)	0630 AM		
Break-Down (00:00 AM/PM)	10:00 AM		
Location:	15th Street Beach		

4) Does the publicity plan for this event include any of the below: YES NO  
☐ Posters ☒ Website ☒ Social Media ☒ Radio ☐ TV ☐ Newspaper/Publication ☐ Other

5) List any planned Print/Radio/TV Advertising: 98.7 ad maybe

Include copies of any direct mail/invitations/email/internet/posters/press releases/media kit being sent out

# NORTH WILDWOOD BEACH PATROL

1) What location(s) of the beach/ocean will be used and for what purpose: yes, route  
attached (5k run & 1-mile walk)

2) Do you anticipate the need for NWBP staff to support your event: YES NO  
 If yes, how many- \_\_\_\_\_ Purpose: no, but Chan always supports  
& brings them

3) Will you require the use of NWBP Facilities, Vehicles, or Equipment: YES NO  
 (If yes, please describe in detail; include dates and times)

	1 <sup>st</sup> DAY	2 <sup>nd</sup> DAY	3 <sup>rd</sup> DAY
Day of the Week (SU,M,TU,W,TH,F,SA)			
Date (MM/DD/YY)			
Equipment Requested			
Set-Up (00:00 AM/PM)			
Break-Down (00:00 AM/PM)			
Location:			

## CITY CLERK OFFICE

1) Number of Non-Food Vendor Spaces: 0 Number of Food Vendor Spaces: 0  
 (Final Vendor list must be turned in 1 week prior to event date)  
 (Organizer is responsible for obtaining vendor permits from Clerk's office & distributing vendor permits to vendors before inspection)

Vendor Fees	1 Day	2 Day	3 Day
First Year Fee	\$ 10.00	\$ 20.00	\$ 40.00
Second Year Fee	\$ 20.00	\$ 40.00	\$ 80.00
Third & Fourth Year Fee	\$ 50.00	\$ 100.00	\$ 150.00
Fifth & Plus Year Fee	\$ 75.00	\$ 150.00	\$ 200.00

2) Will your event require bulk special event parking passes: YES NO  
**FOR 3-DAY OR MORE EVENTS ONLY**

3) If yes, how many: \_\_\_\_\_ List dates for passes: \_\_\_\_\_  
**\*Minimum 250 for out of season events and 500 for in season events; \$5 per day/per vehicle**  
 (Must be paid for 30 days prior to date of event) (In season is Memorial Day to Labor Day of each calendar year)

## BUILDINGS, GROUNDS & PARKS DEPARTMENT

1) Will any object, such as tent posts or signs be driven into the ground: YES ☒ NO  
(If yes, please consult with B.G. & P. Dept. to avoid damaging the irrigation system)

2) Will the event require the closure of any park / City area to the general public: YES ☒ NO

If yes, please describe in detail: \_\_\_\_\_

3) Will the boardwalk be used to secure any items (tents, signs or any other type of structure): YES ☒ NO

If yes, please describe in detail: \_\_\_\_\_

4) Will you have any vehicles on the boardwalk (Weight limit of 5000 lbs.): YES ☒ NO  
(Vehicles are restricted to the Tram Path only)

If yes, please describe in detail: \_\_\_\_\_

5) Will your event have any electrical needs: YES ☒ NO  
(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

Will you have any sound / lighting equipment: YES ☒ NO

Will you be using a lighting or sound contractor: YES ☒ NO

Contractor Information: \_\_\_\_\_

6) Overhead banners, banner flags and/or signs installed on City property

(Please request a banner specifications sheet with your application. All banners need City approval before being created and displayed.  
Organizer is responsible to collect banners following the event)

- a) Overhead Banners should be professionally made and measure 40 feet in length by 3 feet in width
- b) To get maximum display use; heavy duty grommets should be 16 inches apart and wind flaps cut and stitched in banner, should be constructed to last 2-4 weeks of display in the wind
- c) Banner Flags (10 poles) should be 5 feet in length by 30 inches wide (display should be 53" long)
- d) Welcome Area Billboard is 8 feet in length by 12 feet in width

7) Describe banners/signs in detail with proper wording (please attach a photo/layout): \_\_\_\_\_

8) Electrical service fees shall be paid by the vendor:

(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

- A) \$35 per event for ONE twenty-amp      \$50 per event for ONE thirty-amp
- \$75 per event for ONE fifty-amp

B) Extra circuits will be provided only if there is a surplus of circuits after all vendors who have paid for electrical service have been provided with electrical service and thereafter will be provided on a first-requested and paid/first-provided basis.

C) Any service calls to a vendor that is necessitated by an overloaded circuit will result in the vendor being assessed an additional \$70 fee, which sum is payable in the advance of the restoration of electrical service to the vendor.

# POLICE DEPARTMENT

1) Contact information of person in charge of event: Maddie McGracken (609) 972-5910

2) Contact information of person on-site of event: Maddie McGracken (609) 972-5910

3) Street or sidewalk closure(s): YES ☒ NO  
Plan approved: YES ☒ NO

4) Barricade request (fencing/barrels/cones) YES ☒ NO  
Plan submitted: YES ☒ NO  
Plan approved: YES ☒ NO

5) Responsible party for barricade set-up (Federal Fencing-Atlas-Police, etc.): \_\_\_\_\_

Contact information: \_\_\_\_\_

6) Signage requested "NO PARKING", Other (describe below): \_\_\_\_\_ Post Time: \_\_\_\_\_

7) Equipment stored overnight: YES ☒ NO

Location: \_\_\_\_\_ Contact Info: \_\_\_\_\_

8) Site Plan – Detour/Traffic plan submitted: YES ☒ NO  
Police Approval: YES ☒ NO

9) Police requested or required for event: YES ☒ NO Start time: \_\_\_\_\_  
(Please write amount next to request) Finish time: \_\_\_\_\_

Officers- \_\_\_\_\_ Traffic Posts- \_\_\_\_\_ Overnight Security- \_\_\_\_\_

10) Music: YES ☒ NO Start time: \_\_\_\_\_ Finish time: \_\_\_\_\_  
Location: \_\_\_\_\_

11) Alcohol being served at event: YES ☒ NO Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
State ABC Approval: YES ☒ NO  
City Approval: YES ☒ NO

12) Staging Area: YES ☒ NO  
Plan Submitted: YES ☒ NO  
Plan Approved: YES ☒ NO

13) First-Aid/EMS on site: YES ☒ NO

14) Large Events: Command Post being utilized: YES ☒ NO

Location of Command Post: \_\_\_\_\_ Phone #: \_\_\_\_\_

List of Department representatives and contact numbers:  
(Please put on a separate sheet)



## FIRE & EMS DEPARTMENT

- 1) Do you anticipate the need for Fire / EMS staff / equipment to support your event: YES NO ☒  
*Fire Chief will determine the amount of staff and/or equipment needed for your request. attendance - \_\_\_\_\_*

3) Purpose: \_\_\_\_\_

- 4) Will you require the use of Fire Dept. Facilities or portable equipment: YES NO ☒

5) If yes, please describe in detail, including dates and times: \_\_\_\_\_

## CONSTRUCTION, FIRE & HOUSING DEPARTMENT

- 1) Will there be a bonfire, open flame, lighting, cooking, extinguishing, or burning of any material: YES NO ☒

2) If yes, please describe in detail: \_\_\_\_\_

- 3) Will there be any tents used larger than 900 square feet and more than 30 feet in any direction: YES NO ☒

4) If yes, please describe in detail: \_\_\_\_\_

- 5) Permit #: \_\_\_\_\_ (Will be issued after Mayor & Council Approval)

**\*\*The number of bonfire permits are limited and based on the availability of fire personnel\*\***

a) Application for a permit required by this code shall be made to the fire official in such form and detail as the fire official shall prescribe. Applications for permits shall be accompanied by plans or drawings as required by the fire official for evaluation of the application.

b) Type 1 Permit: PERMIT FEE - \$54.00 (non-refundable)

1) The use of any open flame or flame-producing device, in connection with any public gathering for purpose of entertainment, amusement, or recreation.

2) The erection, operation or maintenance of any tent or canopy that is greater than 900 square feet and more than 30 feet in any direction.



## Stephen DeHorsey

---

**From:** Casey Byrne <cbyrne@jbyrneagency.com>  
**Sent:** Tuesday, July 25, 2023 10:00 AM  
**To:** Stephen DeHorsey  
**Cc:** Ann Devlin  
**Subject:** EXTERNALRE: Step Back Foundation 5K COI

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Steve,

This is approved!

Thank you,

**Casey Byrne, ACSR**  
**President**



5200 New Jersey Ave.  
Wildwood NJ 08260  
609-522-3406 Ext. 160  
609-224-1672 Direct  
609-522-2844 Fax  
[cbyrne@jbyrneagency.com](mailto:cbyrne@jbyrneagency.com)  
[www.jbyrneagency.com](http://www.jbyrneagency.com)



**[Click HERE to check out our Agency Newsletter!](#)**

**\*\*A REFERRAL IS THE BEST COMPLIMENT\*\***



**From:** Stephen DeHorsey <sdehorsey@northwildwood.com>  
**Sent:** Tuesday, July 25, 2023 9:22 AM

**To:** Casey Byrne <cbyrne@jbyrneagency.com>  
**Cc:** Ann Devlin <adevlin@northwildwood.com>  
**Subject:** Step Back Foundation 5K COI

Good Morning Casey – Is this COI approved for a 5K race on Saturday 8/12? Thanks.

Steve DeHorsey Jr., C.P.M., R.A.

**Assistant Superintendent of Recreation - Director of Tourism**



**CONFIDENTIALITY NOTICE:** This email may contain privileged and confidential information intended only for the use of the individual(s) or entity(s) named above. If you are not the intended recipient you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you receive this message in error, please notify N.W.R.T.D. by telephone at 609.522.2955. Thank you!

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/06/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> <b>J. Byrne Agency, Inc.</b> <b>5200 New Jersey Avenue</b> <b>PO Box 1409</b> <b>Wildwood, NJ 08260</b>	<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext): 609 522-3406</b> <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> <b>PRODUCER CUSTOMER ID #:</b>														
<b>INSURED</b> <b>The Step Back Foundation Corporation</b> <b>c/o Maddie McCracken</b> <b>101 E Cardinal Road</b> <b>Wildwood Crest, NJ 08260</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td><b>INSURER A : United States Liability Ins.</b></td> <td></td> </tr> <tr> <td><b>INSURER B :</b></td> <td></td> </tr> <tr> <td><b>INSURER C :</b></td> <td></td> </tr> <tr> <td><b>INSURER D :</b></td> <td></td> </tr> <tr> <td><b>INSURER E :</b></td> <td></td> </tr> <tr> <td><b>INSURER F :</b></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A : United States Liability Ins.</b>		<b>INSURER B :</b>		<b>INSURER C :</b>		<b>INSURER D :</b>		<b>INSURER E :</b>		<b>INSURER F :</b>	
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<b>INSURER C :</b>															
<b>INSURER D :</b>															
<b>INSURER E :</b>															
<b>INSURER F :</b>															

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL SUBROGATION	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS														
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> <b>CLAIMS-MADE</b> <input checked="" type="checkbox"/> <b>OCCUR</b>  <b>GEN'L AGGREGATE LIMIT APPLIES PER:</b> <input type="checkbox"/> <b>POLICY</b> <input type="checkbox"/> <b>PROJECT</b> <input type="checkbox"/> <b>LOC</b>	X	NBP1566696	02/22/2023	02/22/2024	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><b>EACH OCCURRENCE</b></td> <td style="text-align: right;"><b>\$1,000,000</b></td> </tr> <tr> <td><b>DAMAGE TO RENTED PREMISES (Ea occurrence)</b></td> <td style="text-align: right;"><b>\$100,000</b></td> </tr> <tr> <td><b>MED EXP (Any one person)</b></td> <td style="text-align: right;"><b>\$5,000</b></td> </tr> <tr> <td><b>PERSONAL &amp; ADV INJURY</b></td> <td style="text-align: right;"><b>\$1,000,000</b></td> </tr> <tr> <td><b>GENERAL AGGREGATE</b></td> <td style="text-align: right;"><b>\$2,000,000</b></td> </tr> <tr> <td><b>PRODUCTS - COMP/OP AGG</b></td> <td style="text-align: right;"><b>\$2,000,000</b></td> </tr> <tr> <td></td> <td style="text-align: right;"><b>\$</b></td> </tr> </table>	<b>EACH OCCURRENCE</b>	<b>\$1,000,000</b>	<b>DAMAGE TO RENTED PREMISES (Ea occurrence)</b>	<b>\$100,000</b>	<b>MED EXP (Any one person)</b>	<b>\$5,000</b>	<b>PERSONAL &amp; ADV INJURY</b>	<b>\$1,000,000</b>	<b>GENERAL AGGREGATE</b>	<b>\$2,000,000</b>	<b>PRODUCTS - COMP/OP AGG</b>	<b>\$2,000,000</b>		<b>\$</b>
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	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> <b>ANY AUTO</b> <input type="checkbox"/> <b>ALL OWNED AUTOS</b> <input type="checkbox"/> <b>SCHEDULED AUTOS</b> <input type="checkbox"/> <b>HIRED AUTOS</b> <input type="checkbox"/> <b>NON-OWNED AUTOS</b>					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><b>COMBINED SINGLE LIMIT (Ea accident)</b></td> <td style="text-align: right;"><b>\$</b></td> </tr> <tr> <td><b>BODILY INJURY (Per person)</b></td> <td style="text-align: right;"><b>\$</b></td> </tr> <tr> <td><b>BODILY INJURY (Per accident)</b></td> <td style="text-align: right;"><b>\$</b></td> </tr> <tr> <td><b>PROPERTY DAMAGE (Per accident)</b></td> <td style="text-align: right;"><b>\$</b></td> </tr> <tr> <td></td> <td style="text-align: right;"><b>\$</b></td> </tr> <tr> <td></td> <td style="text-align: right;"><b>\$</b></td> </tr> </table>	<b>COMBINED SINGLE LIMIT (Ea accident)</b>	<b>\$</b>	<b>BODILY INJURY (Per person)</b>	<b>\$</b>	<b>BODILY INJURY (Per accident)</b>	<b>\$</b>	<b>PROPERTY DAMAGE (Per accident)</b>	<b>\$</b>		<b>\$</b>		<b>\$</b>		
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	<b>\$</b>																			
	<b>\$</b>																			
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> <b>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)</b> <input type="checkbox"/> <b>Y/N</b> <b>If yes, describe under DESCRIPTION OF OPERATIONS below</b>	N/A				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><b>WC STATUTORY LIMITS</b></td> <td><b>OTHER</b></td> </tr> <tr> <td><b>E.L. EACH ACCIDENT</b></td> <td style="text-align: right;"><b>\$</b></td> </tr> <tr> <td><b>E.L. DISEASE - EA EMPLOYEE</b></td> <td style="text-align: right;"><b>\$</b></td> </tr> <tr> <td><b>E.L. DISEASE - POLICY LIMIT</b></td> <td style="text-align: right;"><b>\$</b></td> </tr> </table>	<b>WC STATUTORY LIMITS</b>	<b>OTHER</b>	<b>E.L. EACH ACCIDENT</b>	<b>\$</b>	<b>E.L. DISEASE - EA EMPLOYEE</b>	<b>\$</b>	<b>E.L. DISEASE - POLICY LIMIT</b>	<b>\$</b>						
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**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)**

**Certificate Holder is listed as an additional insured in respects to insureds general liability operations in regards to Live Like Bolle 5K & 1 Mile Walk on 8/12/23**

**CERTIFICATE HOLDER****CANCELLATION**

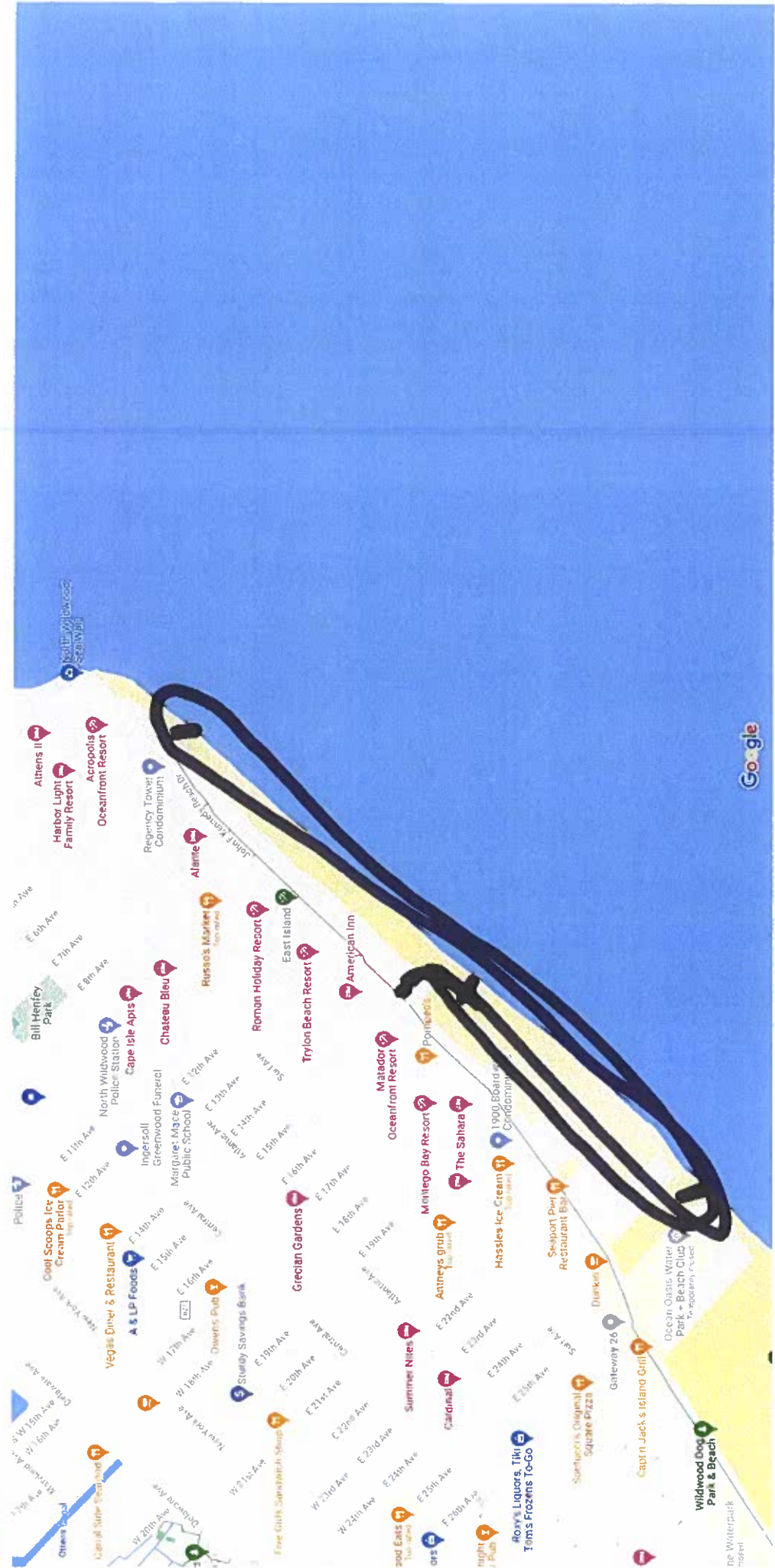
**City of North Wildwood**  
**901 Atlantic Avenue**  
**Wildwood, NJ 08260**

**SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.**

**AUTHORIZED REPRESENTATIVE**

*John P. Byrne*







Bulle Step Back 5K

~~RUN TO REMEMBER~~

## **5K ROUTE**

**START AT 16<sup>TH</sup> BY THE**

**LIFEGUARD STATION**

**DOWN THE RAMP TO BEACH AT 16<sup>TH</sup> ST**

**16TH ST BEACH GO SOUTH TO 25<sup>TH</sup> ST BEACH**

**TURN AND GO NORTH TO 6<sup>TH</sup> ST BEACH**

**AT 6<sup>TH</sup> , TURN AND GO BACK TO 25<sup>TH</sup> ST BEACH**

**AT 25<sup>TH</sup>, TURN BACK , GO TO 16<sup>TH</sup> ST BEACH,**

**HEAD BACK UP THE RAMP AND TO FINISH LINE**

**AT THE LIFEGUARD STATION.**



1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

## PERMIT / APPROVAL / AUTHORIZATION

Event Name: Step Back Live Like Bull STS

Date(s) of Event: Sat 8-12-22

Mayor & Council: \_\_\_\_\_

Date: \_\_\_\_\_

City Clerk: \_\_\_\_\_

Date: \_\_\_\_\_

Director of Tourism: \_\_\_\_\_

Date: \_\_\_\_\_

Application Fee waived: ☒ YES ☐ NO

Service Fees waived: ☒ YES ☐ NO

☐ Approved as submitted.

☐ Approved with the following conditions:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

### Office use only:

Final Date of Approval: \_\_\_\_\_ Projected Total Costs for this event: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Permit Cost: \_\_\_\_\_ Total City Departmental Projected Costs: \_\_\_\_\_



## FOR OFFICIAL USE ONLY

Date of Preliminary Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

Date of Pre-event Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

### EVENT CHECKLIST

- |                                     |            |                |  |
|-------------------------------------|------------|----------------|--|
| <input checked="" type="checkbox"/> | <u>SAD</u> | <u>7-25-12</u> | Application Fee Paid   |
| <input checked="" type="checkbox"/> | <u>SAD</u> | <u>7-25-12</u> | Certificate of Insurance listing N.W. as Additionally Insured                |
| <input checked="" type="checkbox"/> | <u>SAD</u> | <u>7-25-12</u> | Additional Insured Endorsement Page(s) attached                              |
| <input checked="" type="checkbox"/> | <u>SAD</u> | <u>7-25-12</u> | Hold Harmless completed & signed   |
| <input checked="" type="checkbox"/> | <u>SAD</u> | <u>7-25-12</u> | Detailed Site Plan defining the logistics of the event                       |
| <input type="checkbox"/>            | <u>N/A</u> |                | Vendor list submitted to Clerk's Office                                      |
| <input type="checkbox"/>            |            |                | Copy of extra materials such as schedule, agenda, flyers, timeline, etc.     |
| <input type="checkbox"/>            | <u>N/A</u> |                | Additional applications (State Police-BOH-NJDOT-Fire Permit-ABC-Tent Permit) |
| <input type="checkbox"/>            | <u>N/A</u> |                | Special Event Parking Passes Paid  |
| <input type="checkbox"/>            |            |                | Miscellaneous  |
| <input type="checkbox"/>            |            |                | Ready to be placed on the DMS  |



# TREASURER DEPARTMENT

## BILLING

Step Back Ball SK

Name of Event

Sat 8-12-73

Date of Event

Application Fee

\$ 0.00

Non-Profit \$25.00

For-Profit \$50.00

Police Dept.

\$ \_\_\_\_\_

Fire Dept.

\$ \_\_\_\_\_

Public Works Dept.

\$ \_\_\_\_\_

Buildings, Grounds, Electric-Parks

\$ \_\_\_\_\_

Clerk's Office

\$ \_\_\_\_\_

Construction, Fire & Housing

\$ \_\_\_\_\_

Beach Patrol

\$ \_\_\_\_\_

Recreation & Tourism Dept.

\$ \_\_\_\_\_

Stage Rental

\$ \_\_\_\_\_

Special Event Parking Passes

\$ \_\_\_\_\_

Miscellaneous Costs

\$ \_\_\_\_\_

TOTAL

\$ 0.00







## City of North Wildwood Special Event Application Form

Name of Event: 48th Annual North Wildwood Flea Market

Date of Event: August 13, 2023 Date of Application: 6/1/23

Type of Event (*check one*)

- ☐ Parade / Procession    ☐ Festival ☐ 1Day ☐ multi-day    ☐ Block Party    ☐ Bonfire  
☒ Craft Show ☒ 1Day ☐ multi-day    ☐ Walk / Run (1K-5K-10K) / Triathlon / Bike / Marathon / Race  
☐ Ceremony / Celebration / Demonstration    ☐ Polar Plunge / Water Event    ☐ Car Show  
☐ Film / Photography    ☐ Stage Request Only    ☐ Other: \_\_\_\_\_

The City of North Wildwood requires all organizations, corporations, and/or individuals planning to stage an event file an official application with the Recreation & Tourism Department. **This application must be fully completed, signed, and forwarded to the Recreation & Tourism Department 90 days in advance of the event date unless waived by the Mayor and/or governing body.**

(City Code 382-23) A "special event" is an event sponsored by an organization who desires to use portion of the public streets or other public property, or avail itself of public facilities. Such event must be sponsored by a corporation (nonprofit or for profit), authorized to do business in the State of New Jersey, a nonprofit civic association, a charitable association, a religious association or any other association of persons. Special events shall include, by way of example and not by way of limitation, such events as parades, festivals, craft fairs, art shows, athletic contests, running races, bicycle races, fund raising events and similar events of which may include entertainment.

(City Code 382-24) There shall be an application fee charged to each organization, excluding municipal operations, operating a special event in the sum of **\$25.00 for non-profit and \$50.00 for for-profit** entities.

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

### SECTION 1 – ORGANIZATION INFORMATION

- 1) Name of Organization: North Wildwood Flea Market
- 2) Address of Organization: P.O. Box 959 Wildwood NJ 08260
- 3) Purpose of Organization: Donate to local charities, schools
- 4) How many members are in your organization: 3
- 5) Is your organization tax exempt: (please circle) YES NO Is this a non-profit event (YES) NO
- 6) NJ Registered Charitable Organization#: \_\_\_\_\_ Tax ID#: \_\_\_\_\_

## SECTION 1 – ORGANIZATION INFORMATION CONT

### 1) Organizer Contact Information:

|   |                            |
|---|----------------------------|
| Name of Event Chairperson / Organizer<br>Vicki Rozanski         |                            |
| Title<br>Chairwoman   | Cell Phone<br>215-694-7232 |
| Address / City / State / Zip<br>P.O. Box 959 Wildwood, NJ 08260 |                            |
| Email<br>nwflcamarket@gmail.com                                 |                            |

|                                       |            |
|---------------------------------------|------------|
| Name of Event Chairperson / Organizer |            |
| Title                                 | Cell Phone |
| Address / City / State / Zip          |            |
| Email                                 |            |

## SECTION 2 – APPLICATION AUTHORIZATION

I, Vicki Rozanski, the undersigned state that I am the duly  
Name of Applicant

authorized representative of the North Wildwood Flea Market  
Name of Organization

in addition, the information provided in this application is correct to the best of my knowledge. I understand that some of the information is preliminary in nature and I will provide updated information as it becomes available. I further agree to abide by changes made to the proposed event as indicated when so granted.

Vicki Rozanski  
Applicant Signature

6/2/23  
Date

SECTION 3 – EVENT INFORMATION

1) Official Name of Event: North Wildwood Flea Market

2) Location of Event (please list city venue requirements by day/date): JFK Blvd. 3rd to 13th Avenues

3) Describe Event Activities: Vendors put wares/goods to sell out on display.  
Shoppers walk past and make purchases.

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) Will alcohol be served or sold by event organizers or others: YES ☐ NO ☒

A) Do you have a ABC/Social Affairs Permit: YES ☐ NO ☒

B) Are you requesting approval for open display of alcohol: YES ☐ NO ☒

C) Designated Hours for open display of alcohol: \_\_\_\_\_

D) Designated Location of open display of alcohol: \_\_\_\_\_

E) Other Conditions: \_\_\_\_\_

**If alcohol is being sold at the event, the organizer is responsible to identify patrons of legal age to consume alcohol and provide the patron with a wristband after identification was properly checked.**

8) Rain Date or Delayed Starting Time: \_\_\_\_\_

9) Schedule Details: (Include a copy of program schedule/timeline/description of events)

|  | 1 <sup>st</sup> Day | 2 <sup>nd</sup> Day | 3 <sup>rd</sup> Day | 4 <sup>th</sup> Day |
|--|---------------------|---------------------|---------------------|---------------------|
| Day of the Week<br>(SU,M,TU,W,TH,F,SA) | Sunday              |                     |                     |                     |
| Date<br>(MM/DD/YY)                     | 8/13/23             |                     |                     |                     |
| Set-Up<br>(00:00AM/PM)                 | 6am-8am             |                     |                     |                     |
| Event Starts<br>(00:00 AM/PM)          | 8am                 |                     |                     |                     |
| Event Ends<br>(00:00 AM/PM)            | 4pm                 |                     |                     |                     |
| Clean-Up<br>(00:00 AM/PM)              | 4pm-5pm             |                     |                     |                     |

### SECTION 3 – EVENT INFORMATION CONTINUE

10) Will the event require site to remain in place overnight, or will the site be broken down each night (partially or completely) Explain: \_\_\_\_\_

No

11) Describe how you plan to provide security for the event: Normally SLEO II officers are on bikes.

a) Private Security Company (name/address/contact person/phone): \_\_\_\_\_

12) If an event management company is contracted to handle the event, please provide the following information:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Portion/s of event that the company is responsible for: \_\_\_\_\_

### **ALL EVENTS MUST SUBMIT A DETAILED SITE PLAN**

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

### SECTION 4 – INSURANCE REQUIREMENTS

1) Name of Insurance Company: K & K Insurance

Policy Number: \_\_\_\_\_

Limits of Liability: \$1,000,000

Events are required to provide the City of North Wildwood with a Certificate of Insurance indicating the continuation of insurance coverage and designating the City of North Wildwood as an “Additionally Insured.”

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

# CERTIFICATE OF INSURANCE

Evidence of financial responsibility from event chairperson, organization and others with whom the City of North Wildwood does business is required. Evidence should be in the form of a document that is issued by an insurance company or their authorized representative, which spells out the insurance coverage in force at the dates and times the special event will occur. It does not serve as a binder and does not confer rights upon the holder. The policy must be current and not expire before or on the dates of the event. The City of North Wildwood reserves the right to require complete, certified copies of all required insurance policies, including endorsements affecting the coverage required by these specifications at any time.

The Director of Tourism and Special Events, City Administrator or City of North Wildwood Mayor and Council may refuse to grant the use of permission to execute the Special Event whenever in their judgment there is good reason why permission should be refused. They shall not be required to give a reason for such refusal.

**Individuals** – Block Parties or any other oriented parties

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

**Commercial Rental** – Any organization that is for profit (i.e. Associations, Corporations, Partnerships, etc. ...)

## I. INDIVIDUALS

**A. General Liability Limit**

**\$500,000**

Evidence that the individual has comprehensive personal liability insurance in force is required to use any City of North Wildwood 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.

**B. Executed Hold Harmless Agreement** required with Special Event Application. The Special Event shall not be allowed to occur or to use the City of North Wildwood until it has been 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

## II. NON-PROFIT/CHARITABLE GROUPS

**A. General Liability Limit (Per Occurrence)**

**\$1,000,000**

**B. Liquor Liability Limit (Per Occurrence) (If alcohol is present)**

**\$1,000,000**

**C. City of North Wildwood, N.J. named as "Additional Insured" with Endorsement page(s) to read as follows:**

**The City of North Wildwood  
901 Atlantic Avenue  
North Wildwood, NJ 08260**

**D. Executed Hold Harmless Agreement** required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

**E. Sports Associations** must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.

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. Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000
- C. City of North Wildwood, N.J. named as “Additional Insured” with Endorsement page(s) to read as follows:

The City of North Wildwood  
901 Atlantic Avenue  
North Wildwood, NJ 08260

- D. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.
- E. Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant’s Medical Policy.



## HOLD HARMLESS

NAME OF ORGANIZATION/USER North Wildwood Flea Market will be referred to as **USER** from this point forward. **USER** shall indemnify, save harmless and defend the **City of North Wildwood**, its elected and appointed officials, its employees, agents, volunteers and others working on behalf of the **City of North Wildwood**, 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 **Facility(ies)/Equipment**, including all suits or actions of every kind or description brought against the **City of North Wildwood**, 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 **City of North Wildwood** 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. Where indicated, the **USER** shall be required to name the **City of North Wildwood** 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 **City of North Wildwood** 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 **City of North Wildwood** 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. On or before the renewal date of said policy, **USER** shall be required to provide the **City of North Wildwood** with a Certificate of Insurance indicating the continuation of insurance coverage and designating the **City of North Wildwood** as an "Additional Insured" for the duration of this agreement. The schedule of insurance and the limits of liability for the insurance shall provide coverage for not less than the amounts listed in the attached schedule or greater where required by law.

### COVID-19

**USER** verifies and asserts that all activities conducted at the **FACILITY(IES)** shall be in full compliance with the CDC, DOH Guidelines and the State of New Jersey Governor's Executive Orders applicable to public pools, summer camps, sports leagues, and recreation programs with can be reviewed at:

[https://nj.gov/infobank/eo/056murphy/approved/eo\\_archive.html](https://nj.gov/infobank/eo/056murphy/approved/eo_archive.html)

**USER** shall be responsible for all participants or guests complying with any social distancing or masks/face covering requirements of the state or Federal government which are in effect.

Signed by an authorized representative of the **USER** and the **City of North Wildwood** on

this 2 day of June, 20 23

Vicki Rozanski  
USER (SIGNATURE)  
VICKI ROZANSKI  
USER (PRINT NAME)

[Signature]  
CITY REPRESENTATIVE  
Steve D'Amico  
CITY REPRESENTATIVE (PRINT)



## FESTIVAL 1 DAY OR MULTIPLE DAYS

1) Location (list any street closing): 3rd to 13th Aves along JFK Blvd  
Ocean side of JFK Blvd - 3rd to 13th Aves closed

2) Number of Non-Food Vendor Spaces: \_\_\_\_\_ Number of Food Vendor Spaces: \_\_\_\_\_

3) List of Vendors and Contact Numbers—fully updated list must be turned in one week prior to event.

(NOTE: All vendor applications, fire permits and fees should be collected by the event organizer and distributed to appropriate department(s) at one time.

Food Vendors must meet the requirements of the Cape May County Board of Health)

4) Location of Stages / Performance Areas (site plan): N/A

5) Type of Entertainment / Music: N/A

a program schedule—may submit draft version—final version must be turned in 1 week prior to event \*Attach

6) Are Vendor fees charged: YES NO Amount: \$ 100<sup>00</sup> per spot

7) Purpose of the fees and beneficiary: local charities/schools

8) Special Guests (i.e., Mascot, Politician, Musician, Controversial, Actor, Actress, etc.):

9) These items are **PROHIBITED** in the Festival Area:

- Any Glass Bottles and Glass Containers served at festival sites
- Any type of Back Packs
- Any type of Coolers

## PUBLIC WORKS

1) Are NW trash/recycling receptacles and removal requested:

Is the event organization ordering the Dumpsters:

Number Requested: Trash- 5 Recycling can/bottles- 5

☒ YES

☐ YES

Dumpsters- \_\_\_\_\_

☐ NO

☒ NO

### VENDOR COORDINATOR PLEASE ATTACH A RECLYING/TRASH PLAN

- All trash from set-up to clean-up must be removed and placed in the dumpsters provided. No stockpiling of trash behind space.
- Walkways behind vendors must be kept clear of all obstructions at all times.
- In cooking areas, the complete floor space must be covered with approved material to protect the ground surface, for example, tar paper.
- Water is available at the sink location. All grey water must be contained and disposed of in containers at the sink location. No dumping of any water in the event area is allowed.
- Before festivals, maps will be provided indicating locations of trash and recycle dumpsters, grey water, and grease disposal.
- Cardboard boxes intended for disposal must be broken down. All cardboard must be put into dumpsters designated for cardboard.

**Improper disposal of any material (including grey water, trash, garbage, and recyclables) – will be subject to legal action for violations under Ordinance #374-19.5.**

The information above needs to be distributed by the Event Organizer to all vendors prior to and during the event on their own stationary.

Name of person responsible for distributing information to vendors: Vicki Rozanski

2) Do you request the use of any portable equipment from Public Works:

YES

☒ NO

(Please write an amount next to each requested item)

Traffic Cones- \_\_\_\_\_ Fencing- \_\_\_\_\_ Trash/Recycle Cans- \_\_\_\_\_ Eating Tables- \_\_\_\_\_

Grease Drums- \_\_\_\_\_ Ash Drums- \_\_\_\_\_ Grey Water Tanks- \_\_\_\_\_ Sinks- \_\_\_\_\_

Additional Equipment Requested \_\_\_\_\_

3) Restrooms/Port-a-Pots: Will your event direct people to public restrooms-

☒ YES

☐ NO

Will your event use portable toilets/trailers-

☒ YES

☒ NO

Is the event organizer ordering toilets/trailers-

YES

☒ NO

If yes, how many will be used: \_\_\_\_\_

Cleaning schedule will be \_\_\_\_\_ cleaning(s) per day or as directed NW Officials

Name of company: \_\_\_\_\_

Contact Person/Cell: \_\_\_\_\_

**Note: One toilet for every 500 people is requested for events lasting over 2 hours – an appropriate number of these toilets should be handicapped accessible.**

4) Will your event have any temporary structures, fences, or fixtures:

YES

☒ NO

Anchors, pins, spikes or other materials are strictly prohibited in asphalt, boardwalk, and/or concrete to secure objects.

If so, please describe in detail: \_\_\_\_\_

Event Organizer is required to contact the Construction office for permits. 609 522 2030 ext. 1560

The City of North Wildwood will not allow any markings and/or painting of the streets, sidewalks, boardwalks, and parking lots, except those made by approved marking devices. Call the Dept. of Public Works to arrange for an appointment with the Director of Public Works prior to the event to submit marking devices for approval. If unapproved marking devices are used, the event/organization will be charged with the cost of removing and restoring to prior to event status. In addition, this department will likely not approve this organization's future events.

Respectfully,

Doug Nordberg, Director of Public Works

RECREATION & TOURISM DEPARTMENT

1) Do you anticipate the need for Rec/Tour Dept. staff to support your event: YES NO  
If yes, how many-  
Purpose:

2) Will you require the use of Recreation Dept. Facilities (Rec Center/Parks): YES NO  
If yes, please describe in detail (include dates/times)-

3) Will you require the use of Recreation Dept. portable equipment: YES NO  
(Please write an amount next to each requested item)

Bleachers- Coolers- Chairs (folding)- Tables- Chairs (ceremony)-

Sound System (2 or 4 speakers) w/ microphone- Podium- Tents- Signs-  
circle one

Additional Equipment-

|  | 1 <sup>ST</sup> DAY | 2 <sup>ND</sup> DAY | 3 <sup>RD</sup> DAY |
|--|---------------------|---------------------|---------------------|
| Day of the Week<br>(SU,M,TU,W,TH,F,SA) |                     |                     |                     |
| Date<br>(MM/DD/YY)                     |                     |                     |                     |
| Equipment Requested                    |                     |                     |                     |
| Set-Up<br>(00:00 AM/PM)                |                     |                     |                     |
| Break-Down<br>(00:00 AM/PM)            |                     |                     |                     |
| Location:                              |                     |                     |                     |

4) Does the publicity plan for this event include any of the below: YES NO  
Posters Website Social Media Radio TV Newspaper/Publication Other

5) List any planned Print/Radio/TV Advertising: Wildwood Sun by the Sea Magazine  
Include copies of any direct mail/invitations/email/internet/posters/press releases/media kit being sent out

## BUILDINGS, GROUNDS & PARKS DEPARTMENT

1) Will any object, such as tent posts or signs be driven into the ground: YES ☐ NO ☒  
(If yes, please consult with B.G. & P. Dept. to avoid damaging the irrigation system)

2) Will the event require the closure of any park / City area to the general public: YES ☒ NO ☐

If yes, please describe in detail: Ocean Side of JFK Blvd

3) Will the boardwalk be used to secure any items (tents, signs or any other type of structure): YES ☐ NO ☒

If yes, please describe in detail: \_\_\_\_\_

4) Will you have any vehicles on the boardwalk (Weight limit of 5000 lbs.): YES ☐ NO ☒

(Vehicles are restricted to the Tram Path only)

If yes, please describe in detail: \_\_\_\_\_

5) Will your event have any electrical needs: YES ☐ NO ☒  
(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

Will you have any sound / lighting equipment: YES ☐ NO ☒

Will you be using a lighting or sound contractor: YES ☐ NO ☒

Contractor Information: \_\_\_\_\_

6) Overhead banners, banner flags and/or signs installed on City property

(Please request a banner specifications sheet with your application. All banners need City approval before being created and displayed.  
Organizer is responsible to collect banners following the event)

- a) Overhead Banners should be professionally made and measure 40 feet in length by 3 feet in width
- b) To get maximum display use; heavy duty grommets should be 16 inches apart and wind flaps cut and stitched in banner, should be constructed to last 2-4 weeks of display in the wind
- c) Banner Flags (10 poles) should be 5 feet in length by 30 inches wide (display should be 53" long)
- d) Welcome Area Billboard is 8 feet in length by 12 feet in width

7) Describe banners/signs in detail with proper wording (please attach a photo/layout): \_\_\_\_\_

8) Electrical service fees shall be paid by the vendor:

(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

- A) \$35 per event for ONE twenty-amp      \$50 per event for ONE thirty-amp  
\$75 per event for ONE fifty-amp

B) Extra circuits will be provided only if there is a surplus of circuits after all vendors who have paid for electrical service have been provided with electrical service and thereafter will be provided on a first-requested and paid/first-provided basis.

C) Any service calls to a vendor that is necessitated by an overloaded circuit will result in the vendor being assessed an additional \$70 fee, which sum is payable in the advance of the restoration of electrical service to the vendor.

NORTH WILDWOOD BEACH PATROL

N/A

1) What location(s) of the beach/ocean will be used and for what purpose:

2) Do you anticipate the need for NWBP staff to support your event: YES NO  
If yes, how many- Purpose:

3) Will you require the use of NWBP Facilities, Vehicles, or Equipment: YES NO  
(If yes, please describe in detail; include dates and times)

|  | 1 <sup>st</sup> DAY | 2 <sup>nd</sup> DAY | 3 <sup>rd</sup> DAY |
|--|---------------------|---------------------|---------------------|
| Day of the Week<br>(SU,M,TU,W,TH,F,SA) |                     |                     |                     |
| Date<br>(MM/DD/YY)                     |                     |                     |                     |
| Equipment Requested                    |                     |                     |                     |
| Set-Up<br>(00:00 AM/PM)                |                     |                     |                     |
| Break-Down<br>(00:00 AM/PM)            |                     |                     |                     |
| Location:                              |                     |                     |                     |

CITY CLERK OFFICE

1) Number of Non-Food Vendor Spaces: TRD Number of Food Vendor Spaces: TRD  
(Final Vendor list must be turned in 1 week prior to event date)  
(Organizer is responsible for obtaining vendor permits from Clerk's office & distributing vendor permits to vendors before inspection)

| Vendor Fees             | 1 Day    | 2 Day     | 3 Day     |
|-------------------------|----------|-----------|-----------|
| First Year Fee          | \$ 10.00 | \$ 20.00  | \$ 40.00  |
| Second Year Fee         | \$ 20.00 | \$ 40.00  | \$ 80.00  |
| Third & Fourth Year Fee | \$ 50.00 | \$ 100.00 | \$ 150.00 |
| Fifth & Plus Year Fee   | \$ 75.00 | \$ 150.00 | \$ 200.00 |

2) Will your event require bulk special event parking passes: YES NO  
FOR 3-DAY OR MORE EVENTS ONLY

3) If yes, how many: List dates for passes:  
\*Minimum 250 for out of season events and 500 for in season events; \$5 per day/per vehicle  
(Must be paid for 30 days prior to date of event) (In season is Memorial Day to Labor Day of each calendar year)

## POLICE DEPARTMENT

1) Contact information of person in charge of event: 215-694-7232 / 609-827-7982

2) Contact information of person on-site of event: Vicki Rozanski / Ann Devlin

3) Street or sidewalk closure(s): ☒ YES ☐ NO  
Plan approved: ☒ YES ☐ NO

4) Barricade request (fencing/barrels/cones) ☐ YES ☒ NO  
Plan submitted: ☐ YES ☐ NO  
Plan approved: ☐ YES ☐ NO

5) Responsible party for barricade set-up (Federal Fencing-Atlas-Police, etc.): \_\_\_\_\_

Contact information: \_\_\_\_\_

6) Signage requested "NO PARKING", Other (describe below): \_\_\_\_\_ Post Time: \_\_\_\_\_

Ocean Side of JFK Blvd.

7) Equipment stored overnight: ☐ YES ☒ NO

Location: \_\_\_\_\_ Contact Info: \_\_\_\_\_

8) Site Plan – Detour/Traffic plan submitted: ☐ YES ☐ NO  
Police Approval: ☐ YES ☐ NO

9) Police requested or required for event: ☒ YES ☐ NO Start time: 8am  
(Please write amount next to request) Finish time: 4pm

Officers- \_\_\_\_\_ Traffic Posts- \_\_\_\_\_ Overnight Security- \_\_\_\_\_

10) Music: ☐ YES ☒ NO Start time: \_\_\_\_\_ Finish time: \_\_\_\_\_  
Location: \_\_\_\_\_

11) Alcohol being served at event: ☐ YES ☒ NO Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
State ABC Approval: ☐ YES ☐ NO  
City Approval: ☐ YES ☐ NO

12) Staging Area: ☐ YES ☒ NO  
Plan Submitted: ☐ YES ☐ NO  
Plan Approved: ☐ YES ☐ NO

13) First-Aid/EMS on site: ☐ YES ☒ NO

14) Large Events: Command Post being utilized: ☐ YES ☒ NO

Location of Command Post: \_\_\_\_\_ Phone #: \_\_\_\_\_

List of Department representatives and contact numbers:  
(Please put on a separate sheet)



## FIRE & EMS DEPARTMENT

1) Do you anticipate the need for Fire / EMS staff / equipment to support your event: YES

NO

*Fire Chief will determine the amount of staff and/or equipment needed for your request. attendance - \_\_\_\_\_*

3) Purpose: \_\_\_\_\_

4) Will you require the use of Fire Dept. Facilities or portable equipment: YES

NO

5) If yes, please describe in detail, including dates and times: \_\_\_\_\_

## CONSTRUCTION, FIRE & HOUSING DEPARTMENT

1) Will there be a bonfire, open flame, lighting, cooking, extinguishing, or burning of any material: YES NO

2) If yes, please describe in detail: \_\_\_\_\_

3) Will there be any tents used larger than 900 square feet and more than 30 feet in any direction: YES NO

4) If yes, please describe in detail: \_\_\_\_\_

5) Permit #: \_\_\_\_\_ (Will be issued after Mayor & Council Approval)

**\*\*The number of bonfire permits are limited and based on the availability of fire personnel\*\***

a) Application for a permit required by this code shall be made to the fire official in such form and detail as the fire official shall prescribe. Applications for permits shall be accompanied by plans or drawings as required by the fire official for evaluation of the application.

b) Type 1 Permit: PERMIT FEE - \$54.00 (non-refundable)

1) The use of any open flame or flame-producing device, in connection with any public gathering for purpose of entertainment, amusement, or recreation.

2) The erection, operation or maintenance of any tent or canopy that is greater than 900 square feet and more than 30 feet in any direction.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/10/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|  |   |
|--|---|
| <b>PRODUCER</b><br>K&K Insurance Group, Inc.<br>1712 Magnavox Way<br>Fort Wayne IN 46804   | <b>CONTACT NAME:</b> Mass Merchandising<br><b>PHONE (A/C, No, Ext):</b> 1-877-648-6404<br><b>FAX (A/C, No):</b> 1-260-459-5502<br><b>E-MAIL ADDRESS:</b> info@eventinsurance-kk.com<br><b>PRODUCER CUSTOMER ID:</b> |
| <b>INSURED</b><br>4171760 CP# 267<br>North Wildwood Flea Market<br>P.O. Box 959<br>Wildwood, NJ 08260<br>A Member of the Sports, Leisure & Entertainment RPG | <b>INSURER(S) AFFORDING COVERAGE</b><br><b>INSURER A:</b> Markel Insurance Company<br><b>INSURER B:</b><br><b>INSURER C:</b><br><b>INSURER D:</b><br><b>INSURER E:</b><br><b>INSURER F:</b>                         |
|  | <b>NAIC #</b><br>38970  |

COVERAGES CERTIFICATE NUMBER: 2000585256 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE  | ADDL INSD | SUBR WVD | POLICY NUMBER      | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|--|-----------|----------|--------------------|-------------------------|-------------------------|--|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC<br><input type="checkbox"/> OTHER: | X         |          | M1RPG0000000130700 | 08/13/23<br>12:01 AM    | 08/14/23<br>12:01 AM    | EACH OCCURRENCE \$1,000,000<br>DAMAGE TO RENTED PREMISES (Ea Occurrence) \$1,000,000<br>MED EXP (Any one person) \$5,000<br>PERSONAL & ADV INJURY \$1,000,000<br>GENERAL AGGREGATE \$5,000,000<br>PRODUCTS - COMP/OP AGG \$1,000,000<br>PROFESSIONAL LIABILITY<br>LEGAL LIAB TO PARTICIPANTS |
|          | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY  |           |          |                    |                         |                         | COMBINED SINGLE LIMIT (Ea accident)<br>BODILY INJURY (Per person)<br>BODILY INJURY (Per accident)<br>PROPERTY DAMAGE (Per accident)  |
|          | <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br><b>DED</b> <input type="checkbox"/> RETENTION  |           |          |                    |                         |                         | EACH OCCURRENCE<br>AGGREGATE   |
|          | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/><br>If yes, describe under DESCRIPTION OF OPERATIONS below   | N/A       |          |                    |                         |                         | <input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER<br>E.L. EACH ACCIDENT<br>E.L. DISEASE - EA EMPLOYEE<br>E.L. DISEASE - POLICY LIMIT   |
|          | <b>MEDICAL PAYMENTS FOR PARTICIPANTS</b>   |           |          |                    |                         |                         | PRIMARY MEDICAL<br>EXCESS MEDICAL  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Event Name: North Wildwood Flea Market Attendance: 3000  
Event Dates: 08/13/2023 Event Location: North Wildwood Flea Market JFK Blvd 2nd Ave to 13th Avenue North Wildwood NJ 08260  
The certificate holder is added as an additional insured, but only for liability caused, in whole or in part, by the acts or omissions of the named insured.

|   |  |
|---|--|
| <b>CERTIFICATE HOLDER</b><br>City of North Wildwood<br>901 Atlantic Ave<br>North Wildwood, NJ 08260<br>Owner/Manager/Lessor of Premises | <b>CANCELLATION</b><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|---|--|

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Coverage is only extended to U.S. events and activities.  
\*\* NOTICE TO TEXAS INSUREDS: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas.  
ACORD 25 (2016/03) The ACORD name and logo are registered marks of ACORD

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

### ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

**This endorsement modifies insurance provided under the following:**

## COMMERCIAL GENERAL LIABILITY COVERAGE PART

## SCHEDULE

| Name Of Additional Insured Person(s) Or Organization(s)  |  |
|--|--|
| City of North Wildwood<br>901 Atlantic Ave<br>North Wildwood, NJ 08260                                 |  |
| Named Insured: North Wildwood Flea Market<br>CP# 267   |  |
| Information required to complete this Schedule, if not shown above, will be shown in the Declarations. |  |

- A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
1. In the performance of your ongoing operations; or
  2. In connection with your premises owned by or rented to you.
- However:
1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
  2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B.** With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance**:
- If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:
1. Required by the contract or agreement; or
  2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.
- This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

# NORTH WILDWOOD



Sunday, August 13, 2023

8AM-4PM

*2nd to 13th Aves. along JFK Blvd.*

Featuring Collectibles, varied crafts, books, home decor and much more.

Over 80 vendors participating!

All proceeds benefit various local charities.

Whatever you're looking for... You'll find it at the  
North Wildwood Flea Market.

For info, email [nwfleamarket@gmail.com](mailto:nwfleamarket@gmail.com)

The map displays a grid of streets in the 26th Ward. The vertical streets (Avenues) are labeled from left to right: MULBERRY AVENUE, PINE AVENUE, CENTRAL AVE, SPRUCE AVENUE, WALNUT PARK AVE, CHESTNUT AVENUE, ATLANTIC AVE, 1ST AVENUE, 2ND AVENUE, 3RD AVENUE, 4TH AVENUE, 5TH AVENUE, 6TH AVENUE, 7TH AVENUE, 8TH AVENUE, 9TH AVENUE, 10TH AVENUE, 11TH AVENUE, 12TH AVENUE, 13TH AVENUE, 14TH AVENUE, 15TH AVENUE, 16TH AVENUE, 17TH AVENUE, 18TH AVENUE, 19TH AVENUE, 20TH AVENUE, 21ST AVENUE, 22ND AVENUE, 23RD AVENUE, 24TH AVENUE, and 25TH AVENUE. The horizontal streets (Streets) are labeled from top to bottom: 1ST, 2ND, 3RD, 4TH, 5TH, 6TH, 7TH, 8TH, 9TH, 10TH, 11TH, 12TH, 13TH, 14TH, 15TH, 16TH, 17TH, 18TH, 19TH, 20TH, 21ST, 22ND, 23RD, 24TH, and 25TH. Handwritten pink notes provide additional context: 'West side of JFK Blvd. open for driving south only - vendor parking' and 'East side of JFK Blvd closed to vehicles - open to pedestrians on'. A compass rose indicates North is towards the top right.

W3 - side of JFK Bldg. open for driving south only - vendor parking

~~Vendors set up on sidewalks only on East side of JFK Blvd.~~

PORTION OF CITY EAST OF  
NEW JERSEY AVENUE  
CITY OF NORTH WILDWOOD  
CAPE MAY COUNTY, NEW JERSEY

van note-harvey associates, p.c.  
CONSULTING ENGINEERS, PLANNERS, LAND SURVEYORS  
211 N. MAIN STREET CAPE MAY COURT HOUSE, N.J. 08210

ATLANTIC OCEAN

PERMIT / APPROVAL / AUTHORIZATION

Event Name: N. Wildwood Flea Market

Date(s) of Event: Sun 8-13-23

Mayor & Council: Date:

City Clerk: Date:

Director of Tourism: Date:

Application Fee waived: YES NO

Service Fees waived: YES NO

- Approved as submitted.
- Approved with the following conditions:

- 1.
- 2.
- 3.
- 4.

Office use only:

Final Date of Approval: Projected Total Costs for this event:

Date Permit Issued: Permit Number:

Permit Cost: Total City Departmental Projected Costs:

Date of Preliminary Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

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Date of Pre-event Meeting: \_\_\_\_\_

Meeting Notes:

[illegible]

## EVENT CHECKLIST

|                                     |              |  |
|-------------------------------------|--------------|--|
| <input checked="" type="checkbox"/> | <u>SND</u>   | Application Fee Paid   |
| <input type="checkbox"/>            | <u>_____</u> | Certificate of Insurance listing N.W. as Additionally Insured                |
| <input type="checkbox"/>            | <u>_____</u> | Additional Insured Endorsement Page(s) attached                              |
| <input checked="" type="checkbox"/> | <u>SND</u>   | Hold Harmless completed & signed   |
| <input checked="" type="checkbox"/> | <u>SND</u>   | Detailed Site Plan defining the logistics of the event                       |
| <input type="checkbox"/>            | <u>_____</u> | Vendor list submitted to Clerk's Office                                      |
| <input checked="" type="checkbox"/> | <u>SND</u>   | Copy of extra materials such as schedule, agenda, flyers, timeline, etc.     |
| <input type="checkbox"/>            | <u>N/A</u>   | Additional applications (State Police-BOH-NJDOT-Fire Permit-ABC-Tent Permit) |
| <input type="checkbox"/>            | <u>N/A</u>   | Special Event Parking Passes Paid  |
| <input type="checkbox"/>            | <u>_____</u> | Miscellaneous  |
| <input type="checkbox"/>            | <u>_____</u> | Ready to be placed on the DMS  |



TREASURER DEPARTMENT

BILLING

N. Willard Plac New  
Name of Event

Sun 8-13-23  
Date of Event

|                                    |                                   |                    |                    |
|------------------------------------|-----------------------------------|--------------------|--------------------|
| Application Fee                    | \$ <u>25.00</u> <i>pl 6-21-23</i> | Non-Profit \$25.00 | For-Profit \$50.00 |
| Police Dept.                       | \$ _____                          |                    |                    |
| Fire Dept.                         | \$ _____                          |                    |                    |
| Public Works Dept.                 | \$ _____                          |                    |                    |
| Buildings, Grounds, Electric-Parks | \$ _____                          |                    |                    |
| Clerk's Office                     | \$ _____                          |                    |                    |
| Construction, Fire & Housing       | \$ _____                          |                    |                    |
| Beach Patrol                       | \$ _____                          |                    |                    |
| Recreation & Tourism Dept.         | \$ _____                          |                    |                    |
| Stage Rental                       | \$ _____                          |                    |                    |
| Special Event Parking Passes       | \$ _____                          |                    |                    |
| Miscellaneous Costs                | \$ _____                          |                    |                    |
| TOTAL                              | \$ _____                          |                    |                    |

NORTH WILDWOOD



## City of North Wildwood Special Event Application Form

Name of Event: Kelly's Kidz SK & Family WalkDate of Event: SAT 8/19/23 Date of Application: Fri 7-21-23

Type of Event (check one)

- ☐ Parade / Procession    ☐ Festival ☐ 1 Day ☐ multi-day    ☐ Block Party    ☐ Bonfire  
☐ Craft Show ☐ 1 Day ☐ multi-day    ☒ Walk / Run (1K-5K-10K) / Triathlon / Bike / Marathon / Race  
☐ Ceremony / Celebration / Demonstration    ☐ Polar Plunge / Water Event    ☐ Car Show  
☐ Film / Photography    ☐ Stage Request Only    ☐ Other: \_\_\_\_\_

The City of North Wildwood requires all organizations, corporations, and/or individuals planning to stage an event file an official application with the Recreation & Tourism Department. This application must be fully completed, signed, and forwarded to the Recreation & Tourism Department 90 days in advance of the event date unless waived by the Mayor and/or governing body.

(City Code 382-23) A "special event" is an event sponsored by an organization who desires to use portion of the public streets or other public property, or avail itself of public facilities. Such event must be sponsored by a corporation (nonprofit or for profit), authorized to do business in the State of New Jersey, a nonprofit civic association, a charitable association, a religious association or any other association of persons. Special events shall include, by way of example and not by way of limitation, such events as parades, festivals, craft fairs, art shows, athletic contests, running races, bicycle races, fund raising events and similar events of which may include entertainment.

(City Code 382-24) There shall be an application fee charged to each organization, excluding municipal operations, operating a special event in the sum of \$25.00 for non-profit and \$50.00 for for-profit entities.

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

### SECTION 1 - ORGANIZATION INFORMATION

- 1) Name of Organization: Kelly's Kidz
- 2) Address of Organization: 178 Shilling Ave Malvern PA 19355
- 3) Purpose of Organization: SK Fundraiser
- 4) How many members are in your organization: 4
- 5) Is your organization tax exempt: (please circle) ☒ YES ☐ NO this a non-profit event ☒ YES ☐ NO
- 6) NJ Registered Charitable Organization#: \_\_\_\_\_ Tax ID#: \_\_\_\_\_



## SECTION 1 - ORGANIZATION INFORMATION CONT

### 1) Organizer Contact Information:

|   |                            |
|---|----------------------------|
| Name of Event Chairperson / Organizer<br>DANA Dougherty     |                            |
| Title<br>ORGANIZER  | Cell Phone<br>215-300-8103 |
| Address / City / State / Zip<br>434 E. 19th Street Wildwood |                            |
| Email<br>KTeach03@gmail.com                                 |                            |

|                                       |            |
|---------------------------------------|------------|
| Name of Event Chairperson / Organizer |            |
| Title                                 | Cell Phone |
| Address / City / State / Zip          |            |
| Email                                 |            |

## SECTION 2 - APPLICATION AUTHORIZATION

I, Bob Kelly, the undersigned state that I am the duly  
Name of Applicant  
authorized representative of the Kelly's Kids  
Name of Organization

in addition, the information provided in this application is correct to the best of my knowledge. I understand that some of the information is preliminary in nature and I will provide updated information as it becomes available. I further agree to abide by changes made to the proposed event as indicated when so granted.

Bob Kelly  
Applicant Signature

7/24/23  
Date



### SECTION 3 - EVENT INFORMATION

- 1) Official Name of Event: Kelly's Kidz 5K and Family WALK
- 2) Location of Event (please list city venue requirements by day/date): Seaport Pier  
NORTH WILLOW
- 3) Describe Event Activities: 5K RUN plus FAMILY WALK to RAISE  
Funds and Awareness For ST. CHRISTOPHER'S Hosp.

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) Will alcohol be served or sold by event organizers or others: YES NO

A) Do you have a ABC/Social Affairs Permit: YES NO

B) Are you requesting approval for open display of alcohol: YES NO

C) Designated Hours for open display of alcohol: \_\_\_\_\_

D) Designated Location of open display of alcohol: \_\_\_\_\_

E) Other Conditions:

If alcohol is being sold at the event, the organizer is responsible to identify patrons of legal age to consume alcohol and provide the patron with a wristband after identification was properly checked.

8) Rain Date or Delayed Starting Time: N/A

9) Schedule Details: (include a copy of program schedule/timeline/description of events)

|  | 1 <sup>st</sup> Day | 2 <sup>nd</sup> Day | 3 <sup>rd</sup> Day | 4 <sup>th</sup> Day |
|--|---------------------|---------------------|---------------------|---------------------|
| Day of the Week<br>(SU,M,TU,W,TH,F,SA) | <u>SAT</u>          |                     |                     |                     |
| Date<br>(MM/DD/YY)                     | <u>8/19/23</u>      |                     |                     |                     |
| Set-Up<br>(00:00AM/PM)                 | <u>7 AM</u>         |                     |                     |                     |
| Event Starts<br>(00:00 AM/PM)          | <u>8 AM</u>         |                     |                     |                     |
| Event Ends<br>(00:00 AM/PM)            | <u>10 AM</u>        |                     |                     |                     |
| Clean-Up<br>(00:00 AM/PM)              | <u>11 AM</u>        |                     |                     |                     |



### SECTION 3 – EVENT INFORMATION CONTINUE

10) Will the event require site to remain in place overnight, or will the site be broken down each night (partially or completely) Explain: \_\_\_\_\_

11) Describe how you plan to provide security for the event: \_\_\_\_\_

a) Private Security Company (name/address/contact person/phone) \_\_\_\_\_

12) If an event management company is contracted to handle the event, please provide the following information:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/ST/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

Portion/s of event that the company is responsible for: \_\_\_\_\_

### ALL EVENTS MUST SUBMIT A DETAILED SITE PLAN

Site plan should include port-a-pots, vendors, stage(s), 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 City of North Wildwood with a Certificate of Insurance indicating the continuation of insurance coverage and designating the City of North Wildwood as an "Additionally Insured."

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

\* Row F/JTF  
will send  
via email

## **CERTIFICATE OF INSURANCE**

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Evidence of financial responsibility from event chairperson, organization and others with whom the City of North Wildwood does business is required. Evidence should be in the form of a document that is issued by an insurance company or their authorized representative, which spells out the insurance coverage in force at the dates and times the special event will occur. It does not serve as a binder and does not confer rights upon the holder. The policy must be current and not expire before or on the dates of the event. The City of North Wildwood reserves the right to require complete, certified copies of all required insurance policies, including endorsements affecting the coverage required by these specifications at any time.

The Director of Tourism and Special Events, City Administrator or City of North Wildwood Mayor and Council may refuse to grant the use of permission to execute the Special Event whenever in their judgment there is good reason why permission should be refused. They shall not be required to give a reason for such refusal.

**Individuals** – Block Parties or any other oriented parties

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

**Commercial Rental** – Any organization that is for profit (i.e. Associations, Corporations, Partnerships, etc. ...)

### **I. INDIVIDUALS**

A. General Liability Limit \$500,000

Evidence that the individual has comprehensive personal liability insurance in force is required to use any City of North Wildwood 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.

B. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or to use the City of North Wildwood until it has been 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

### **II. NON-PROFIT/CHARITABLE GROUPS**

A. General Liability Limit (Per Occurrence) \$1,000,000

B. Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000

C. City of North Wildwood, N.J. named as "**Additional Insured**" with Endorsement page(s) to read as follows:

**The City of North Wildwood  
901 Atlantic Avenue  
North Wildwood, NJ 08260**

D. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.

E. Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.

### 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. Liquor Liability Limit (Per Occurrence) (If alcohol is present) \$1,000,000
- C. City of North Wildwood, N.J. named as **"Additional Insured"** with Endorsement page(s) to read as follows:  

**The City of North Wildwood**  
**901 Atlantic Avenue**  
**North Wildwood, NJ 08260**
- D. Executed Hold Harmless Agreement required with Special Event Application. The Special Event shall not be allowed to occur or use the City of North Wildwood 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 City of North Wildwood. If the organization/individual contracts with a vendor, evidence of adequate insurance coverage will need to be secured from them.
- E. Sports Associations must show evidence that their General Liability Policy will respond to injuries sustained by athletic participants, and/or show a Certificate of Insurance evidencing an Athletic Participant's Medical Policy.



## HOLD HARMLESS

NAME OF ORGANIZATION/USER Kelly's KIDZ will be referred to as USER from this point forward. USER shall indemnify, save harmless and defend the City of North Wildwood, its elected and appointed officials, its employees, agents, volunteers and others working on behalf of the City of North Wildwood, 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 Facility(ies)/Equipment, including all suits or actions of every kind or description brought against the City of North Wildwood, 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 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 City of North Wildwood 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. Where indicated, the USER shall be required to name the City of North Wildwood 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 City of North Wildwood 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 City of North Wildwood 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. On or before the renewal date of said policy, USER shall be required to provide the City of North Wildwood with a Certificate of Insurance indicating the continuation of insurance coverage and designating the City of North Wildwood as an "Additional Insured" for the duration of this agreement. The schedule of insurance and the limits of liability for the insurance shall provide coverage for not less than the amounts listed in the attached schedule or greater where required by law.

### COVID-19

USER verifies and asserts that all activities conducted at the FACILITY(IES) shall be in full compliance with the CDC, DOH Guidelines and the State of New Jersey Governor's Executive Orders applicable to public pools, summer camps, sports leagues, and recreation programs with can be reviewed at:

[https://nj.gov/infobank/eo/056murphy/approved/eo\\_archive.html](https://nj.gov/infobank/eo/056murphy/approved/eo_archive.html)

USER shall be responsible for all participants or guests complying with any social distancing or masks/face covering requirements of the state or Federal government which are in effect.

Signed by an authorized representative of the USER and the City of North Wildwood on this 24 day of July, 2023.



USER (SIGNATURE)

Bob Kelly  
USER (PRINT NAME)

  
CITY REPRESENTATIVE

Steve A. Hays  
CITY REPRESENTATIVE (PRINT)



**WALK / RUN (1K-5K-10K) / TRIATHLON / BIKE / MARATHON / RACE**

1) Proposed Route (include turn-by-turn directions): Sergo RT Pier - N to 13<sup>th</sup> Turn Around  
South to Conv Ctr Turn Around N to Sergo RT Pier

2) List Any Street Closings (identify on site-plan): N/A

3) Entrance Fee Charged: YES NO Amount: \$ 35<sup>00</sup>

4) Beneficiary: Kelly's Kidz

5) Event Distance(s): 5K

6) Do participants complete a registration form: YES NO  
(Please include a registration form with application)

7) Number of Participants: 200 How many volunteers will staff the event: 30

8) Starting & Ending Location (identify on site-plan): Sergo RT Pier

9) Assembly & Disbanding Area (identify on site-plan):

10) Location(s) of Water Stations (identify on site-plan): Sergo RT Pier

11) Location of First Aid Tent (identify on site-plan):

12) Explain your First Aid / Medical Plan:

13) Special Guests (i.e., Mascot, Politician, Musician, Controversial, Actor, Actress, Media Person):



## PUBLIC WORKS

1) Are NW trash/recycling receptacles and removal requested:

Is the event organization ordering the Dumpsters:

Number Requested: Trash- \_\_\_\_\_ Recycling can/bottles- \_\_\_\_\_

YES

YES

Dumpsters- \_\_\_\_\_

NO

NO

### VENDOR COORDINATOR PLEASE ATTACH A RECYCLING/TRASH PLAN

- All trash from set-up to clean-up must be removed and placed in the dumpsters provided. No stockpiling of trash behind space.
  - Walkways behind vendors must be kept clear of all obstructions at all times.
  - In cooking areas, the complete floor space must be covered with approved material to protect the ground surface, for example, tar paper.
  - Water is available at the sink location. All grey water must be contained and disposed of in containers at the sink location. No dumping of any water in the event area is allowed.
  - Before festivals, maps will be provided indicating locations of trash and recycle dumpsters, grey water, and grease disposal.
  - Cardboard boxes intended for disposal must be broken down. All cardboard must be put into dumpsters designated for cardboard.
- Improper disposal of any material (including grey water, trash, garbage, and recyclables) - will be subject to legal action for violations under Ordinance #374-19.5.**

The information above needs to be distributed by the Event Organizer to all vendors prior to and during the event on their own stationary.

Name of person responsible for distributing information to vendors: \_\_\_\_\_

2) Do you request the use of any portable equipment from Public Works:

YES

NO

(Please write an amount next to each requested item)

Traffic Cones- \_\_\_\_\_

Fencing-   2  

Trash/Recycle Cans- \_\_\_\_\_

Eating Tables-   2  

Grease Drums-   2  

Ash Drums-   2  

Grey Water Tanks-   2  

Sinks-   2  

Additional Equipment Requested \_\_\_\_\_

3) Restrooms/Port-a-Pots: Will your event direct people to public restrooms-

YES

NO

Will your event use portable toilets/trailers-

YES

NO

Is the event organizer ordering toilets/trailers-

YES

NO

If yes, how many will be used: \_\_\_\_\_

Cleaning schedule will be \_\_\_\_\_ cleaning(s) per day or as directed NW Officials

Name of company: \_\_\_\_\_

Contact Person/Cell: \_\_\_\_\_

Note: One toilet for every 500 people is requested for events lasting over 2 hours - an appropriate number of these toilets should be handicapped accessible.

4) Will your event have any temporary structures, fences, or fixtures:

YES

NO

Anchors, pins, spikes or other materials are strictly prohibited in asphalt, boardwalk, and/or concrete to secure objects.

If so, please describe in detail: \_\_\_\_\_

Event Organizer is required to contact the Construction office for permits. 609 522 2030 ext. 1560

The City of North Wildwood will not allow any markings and/or painting of the streets, sidewalks, boardwalks, and parking lots, except those made by approved marking devices. Call the Dept. of Public Works to arrange for an appointment with the Director of Public Works prior to the event to submit marking devices for approval. If unapproved marking devices are used, the event/organization will be charged with the cost of removing and restoring to prior to event status. In addition, this department will likely not approve this organization's future events.

Respectfully,

Doug Nordberg, Director of Public Works



## RECREATION & TOURISM DEPARTMENT

1) Do you anticipate the need for Rec/Tour Dept. staff to support your event: YES ☒ NO  
 If yes, how many- \_\_\_\_\_  
 Purpose: \_\_\_\_\_

2) Will you require the use of Recreation Dept. Facilities (Rec Center/Parks): YES ☒ NO  
 If yes, please describe in detail (include dates/times)- \_\_\_\_\_

3) Will you require the use of Recreation Dept. portable equipment: YES ☒ NO  
 (Please write an amount next to each requested item)

Bleachers- \_\_\_\_\_ Coolers- \_\_\_\_\_ Chairs (folding)- \_\_\_\_\_ Tables- \_\_\_\_\_ Chairs (ceremony)- \_\_\_\_\_

Sound System (2 or 4 speakers) w/ microphone- \_\_\_\_\_ Podium- \_\_\_\_\_ Tents- \_\_\_\_\_ Signs- \_\_\_\_\_  
 circle one

Additional Equipment- \_\_\_\_\_

|  | 1 <sup>ST</sup> DAY | 2 <sup>ND</sup> DAY | 3 <sup>RD</sup> DAY |
|--|---------------------|---------------------|---------------------|
| Day of the Week<br>(SU,M,TU,W,TH,F,SA) |                     |                     |                     |
| Date<br>(MM/DD/YY)                     |                     |                     |                     |
| Equipment Requested                    |                     |                     |                     |
| Set-Up<br>(00:00 AM/PM)                |                     |                     |                     |
| Break-Down<br>(00:00 AM/PM)            |                     |                     |                     |
| Location:                              |                     |                     |                     |

4) Does the publicity plan for this event include any of the below: YES ☒ NO  
☐ Posters ☐ Website ☐ Social Media ☐ Radio ☐ TV ☐ Newspaper/Publication ☐ Other

5) List any planned Print/Radio/TV Advertising: \_\_\_\_\_

Include copies of any direct mail/invitations/email/internet/posters/press releases/media kit being sent out



## BUILDINGS, GROUNDS & PARKS DEPARTMENT

- 1) Will any object, such as tent posts or signs be driven into the ground:  
(If yes, please consult with B.G. & P. Dept. to avoid damaging the irrigation system)

YES ☐ NO ☒

- 2) Will the event require the closure of any park / City area to the general public:

YES ☐ NO ☒

If yes, please describe in detail: \_\_\_\_\_

- 3) Will the boardwalk be used to secure any items (tents, signs or any other type of structure):

YES ☐ NO ☒

If yes, please describe in detail: \_\_\_\_\_

- 4) Will you have any vehicles on the boardwalk (Weight limit of 3000 lbs.):  
(Vehicles are restricted to the Tram Path only)

YES ☐ NO ☒

If yes, please describe in detail: \_\_\_\_\_

- 5) Will your event have any electrical needs:

YES ☐ NO ☒

(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

Will you have any sound / lighting equipment:

YES ☐ NO ☒

Will you be using a lighting or sound contractor:

YES ☐ NO ☒

Contractor Information: \_\_\_\_\_

- 6) Overhead banners, banner flags and/or signs installed on City property

(Please request a banner specifications sheet with your application. All banners need City approval before being created and displayed. Organizer is responsible to collect banners following the event)

- a) Overhead Banners should be professionally made and measure 40 feet in length by 3 feet in width
- b) To get maximum display use; heavy duty grommets should be 16 inches apart and wind flaps cut and stitched in banner, should be constructed to last 2-4 weeks of display in the wind
- c) Banner Flags (10 poles) should be 5 feet in length by 30 inches wide (display should be 53" long)
- d) Welcome Area Billboard is 8 feet in length by 12 feet in width

- 7) Describe banners/signs in detail with proper wording (please attach a photo/layout): \_\_\_\_\_

- 8) Electrical service fees shall be paid by the vendor:

(Please attach a separate page for number of hook-ups needed at vendor locations and the electrical layout)

A) \$35 per event for ONE twenty-amp

\$50 per event for ONE thirty-amp

\$75 per event for ONE fifty-amp

B) Extra circuits will be provided only if there is a surplus of circuits after all vendors who have paid for electrical service have been provided with electrical service and thereafter will be provided on a first-requested and paid/first-provided basis.

C) Any service calls to a vendor that is necessitated by an overloaded circuit will result in the vendor being assessed an additional \$70 fee, which sum is payable in the advance of the restoration of electrical service to the vendor.



## NORTH WILDWOOD BEACH PATROL

1) What location(s) of the beach/ocean will be used and for what purpose:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2) Do you anticipate the need for NWBP staff to support your event:

YES

NO

If yes, how many-

Purpose:

3) Will you require the use of NWBP Facilities, Vehicles, or Equipment:

YES

NO

(If yes, please describe in detail. Include dates and times)

|  | 1 <sup>st</sup> DAY | 2 <sup>nd</sup> DAY | 3 <sup>rd</sup> DAY |
|--|---------------------|---------------------|---------------------|
| Day of the Week<br>(SU,M,TU,W,TH,F,SA) |                     |                     |                     |
| Date<br>(MM/DD/YY)                     |                     |                     |                     |
| Equipment Requested                    |                     | N/A                 |                     |
| Set-Up<br>(00:00 AM/PM)                |                     |                     |                     |
| Break-Down<br>(00:00 AM/PM)            |                     |                     |                     |
| Location:                              |                     |                     |                     |

## CITY CLERK OFFICE

1) Number of Non-Food Vendor Spaces: 0

Number of Food Vendor Spaces: 0

(Final Vendor list must be turned in 1 week prior to event date)

(Organizer is responsible for obtaining vendor permits from Clerk's office & distributing vendor permits to vendors before inspection)

| Vendor Fees             | 1 Day    | 2 Day     | 3 Day     |
|-------------------------|----------|-----------|-----------|
| First Year Fee          | \$ 10.00 | \$ 20.00  | \$ 40.00  |
| Second Year Fee         | \$ 20.00 | \$ 40.00  | \$ 80.00  |
| Third & Fourth Year Fee | \$ 50.00 | \$ 100.00 | \$ 150.00 |
| Fifth & Plus Year Fee   | \$ 75.00 | \$ 150.00 | \$ 200.00 |

2) Will your event require bulk special event parking passes:

YES

NO

**FOR 3-DAY OR MORE EVENTS ONLY**

3) If yes, how many:

List dates for passes:

\*Minimum 250 for out of season events and 500 for in season events; \$5 per day/per vehicle

(Must be paid for 30 days prior to date of event) (In season is Memorial Day to Labor Day of each calendar year)



## POLICE DEPARTMENT

- 1) Contact information of person in charge of event: Bob Kelly 610 842-8715
- 2) Contact information of person on-site of event: DANA Dougherty 215-300-8103
- 3) Street or sidewalk closure(s): YES ☒ NO ☐ ?  
Plan approved: YES ☒ NO ☐
- 4) Barricade request (fencing/barrels/cones) YES ☒ NO ☐  
Plan submitted: YES ☒ NO ☐  
Plan approved: YES ☒ NO ☐
- 5) Responsible party for barricade set-up (Federal Fencing-Atlas-Police, etc.): N/A  
Contact information: \_\_\_\_\_
- 6) Signage requested "NO PARKING", Other (describe below): \_\_\_\_\_ Post Time: \_\_\_\_\_
- 7) Equipment stored overnight: YES ☒ NO ☐  
Location: \_\_\_\_\_ Contact Info: \_\_\_\_\_
- 8) Site Plan - Detour/Traffic plan submitted: YES ☒ NO ☐ ?  
Police Approval: YES ☒ NO ☐
- 9) Police requested or required for event: YES ☐ NO ☐ Start time: \_\_\_\_\_ ?  
(Please write amount next to request) Finish time: \_\_\_\_\_
- Officers- \_\_\_\_\_ Traffic Posts- \_\_\_\_\_ Overnight Security- \_\_\_\_\_
- 10) Music: YES ☐ NO ☐ Start time: \_\_\_\_\_ Finish time: \_\_\_\_\_ ?  
Location: \_\_\_\_\_
- 11) Alcohol being served at event: YES ☐ NO ☐ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
State ABC Approval: YES ☐ NO ☐  
City Approval: YES ☐ NO ☐
- 12) Staging Area: YES ☒ NO ☐  
Plan Submitted: YES ☒ NO ☐  
Plan Approved: YES ☒ NO ☐
- 13) First-Aid/EMS on site: YES ☐ NO ☐ ?
- 14) Large Events: Command Post being utilized: YES ☐ NO ☒  
Location of Command Post: \_\_\_\_\_ Phone #: \_\_\_\_\_
- List of Department representatives and contact numbers:  
(Please put on a separate sheet)



### FIRE & EMS DEPARTMENT

1) Do you anticipate the need for Fire / EMS staff / equipment to support your event: YES ☐ NO ☒  
*Fire Chief will determine the amount of staff and/or equipment needed for your request attendance - \_\_\_\_\_*

3) Purpose: \_\_\_\_\_

4) Will you require the use of Fire Dept. Facilities or portable equipment: YES ☐ NO ☒

5) If yes, please describe in detail, including dates and times: \_\_\_\_\_

### CONSTRUCTION, FIRE & HOUSING DEPARTMENT

1) Will there be a bonfire, open flame, lighting, cooking, extinguishing, or burning of any material: YES ☐ NO ☒

2) If yes, please describe in detail: \_\_\_\_\_

3) Will there be any tents used larger than 900 square feet and more than 30 feet in any direction: YES ☐ NO ☒

4) If yes, please describe in detail: \_\_\_\_\_

5) Permit #: \_\_\_\_\_ (Will be issued after Mayor & Council Approval)

\*\*The number of bonfire permits are limited and based on the availability of fire personnel\*\*

a) Application for a permit required by this code shall be made to the fire official in such form and detail as the fire official shall prescribe. Applications for permits shall be accompanied by plans or drawings as required by the fire official for evaluation of the application.

b) Type I Permit: PERMIT FEE - \$54.00 (non-refundable)

1) The use of any open flame or flame-producing device, in connection with any public gathering for purpose of entertainment, amusement, or recreation.

2) The erection, operation or maintenance of any tent or canopy that is greater than 900 square feet and more than 30 feet in any direction.



Kelly's  
Kidz



**SATURDAY, SEAPORT  
AUGUST 19TH PIER**

**5k & Family Fun Walk for Parents & Kids**



**5K Starts at 8am • Family Fun Walk Starts at 8:15am  
Begin and End at Seaport Pier • DJ & Fun for kids!**

## PERMIT / APPROVAL / AUTHORIZATION

Event Name: Kellys Kids SK & Family Walk

Date(s) of Event: Sat 8-19-23

Mayor & Council: \_\_\_\_\_ Date: \_\_\_\_\_

City Clerk: \_\_\_\_\_ Date: \_\_\_\_\_

Director of Tourism: \_\_\_\_\_ Date: \_\_\_\_\_

Application Fee waived: ☒ YES ☐ NO

Service Fees waived: ☒ YES ☐ NO

☐ Approved as submitted.

☐ Approved with the following conditions:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

### Office use only:

Final Date of Approval: \_\_\_\_\_ Projected Total Costs for this event: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Permit Cost: \_\_\_\_\_ Total City Departmental Projected Costs: \_\_\_\_\_



## TREASURER DEPARTMENT

### BILLING

Kellys Kids Sk & Family Walk  
Name of Event

Sat 8-19-23  
Date of Event

Application Fee

\$ 0.00 <sup>hand 725-73</sup>

Non-Profit \$25.00

For-Profit \$50.00

Police Dept.

\$ \_\_\_\_\_

Fire Dept.

\$ \_\_\_\_\_

Public Works Dept.

\$ \_\_\_\_\_

Buildings, Grounds, Electric-Parks

\$ \_\_\_\_\_

Clerk's Office

\$ \_\_\_\_\_

Construction, Fire & Housing

\$ \_\_\_\_\_

Beach Patrol

\$ \_\_\_\_\_

Recreation & Tourism Dept.

\$ \_\_\_\_\_

Stage Rental

\$ \_\_\_\_\_

Special Event Parking Passes

\$ \_\_\_\_\_

Miscellaneous Costs

\$ \_\_\_\_\_

TOTAL

\$ 0.00

## FOR OFFICIAL USE ONLY

Date of Preliminary Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Pre-event Meeting: \_\_\_\_\_

Meeting Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### EVENT CHECKLIST

- ☐ N/A *hand 7-25-23* Application Fee Paid
- ☐ \_\_\_\_\_ Certificate of Insurance listing N.W. as Additionally Insured
- ☐ \_\_\_\_\_ Additional Insured Endorsement Page(s) attached
- ☒ SM *7-25-23* Hold Harmless completed & signed
- ☐ \_\_\_\_\_ Detailed Site Plan defining the logistics of the event
- ☐ N/A *7-25-23* Vendor list submitted to Clerk's Office
- ☒ SM *7-25-23* Copy of extra materials such as schedule, agenda, flyers, timeline, etc.
- ☐ N/A Additional applications (State Police-BOH-NJDOT-Fire Permit-ABC-Tent Permit)
- ☐ N/A Special Event Parking Passes Paid
- ☐ \_\_\_\_\_ Miscellaneous
- ☐ \_\_\_\_\_ Ready to be placed on the DMS



City of North Wildwood  
Cape May County, New Jersey

RESOLUTION

AUTHORIZING AN APPLICATION TO  
THE USDOT FHWA PROMOTING RESILIENT OPERATIONS FOR  
TRANSFORMATIVE, EFFICIENT, AND COST-SAVING TRANSPORTATION  
(PROTECT) DISCRETIONARY GRANT PROGRAM  
TO RECONSTRUCT THE BOARDWALK, AUTHORIZE MATCHING FUNDS,  
AND APPOINT AUTHORIZED REPRESENTATIVES FOR MATTERS  
INVOLVING DOCUMENTATION FOR THE SAME

WHEREAS, portions of the Boardwalk in the City of North Wildwood are in need of repair or reconstruction to better serve the residents and businesses of the City, including the tourism industry; and

WHEREAS, the City, through its engineering professionals, has developed a scope of work for reconstruction activities; and

WHEREAS, the City desires to pursue funding from the United States Department of Transportation (USDOT) PROTECT Grants program to assist with the cost of completing these reconstruction activities.

NOW, THEREFORE, BE IT RESOLVED by the City Council that the City of North Wildwood, County of Cape May in the State of New Jersey, that:

- 1. All of the statements of the preamble are repeated and incorporated herein by this reference thereto as though the same were set forth at length.
- 2. The City of North Wildwood will apply for a USDOT PROTECT Grant in the amount of up to \$35,000,000 for the reconstruction of the Boardwalk.
- 3. The City of North Wildwood commits to a local share in the amount of 20% of the project cost to match the requested funding should the USDOT award this grant request, as required by the program.
- 4. The persons whose names, titles, and signatures appear below are authorized to sign the application and that they or their successors in said titles are authorized to sign the agreement and any other document in connection therewith:

SIGNED: \_\_\_\_\_  
Patrick T. Rosenello, Mayor

ATTEST: \_\_\_\_\_  
(SEAL) W. Scott Jett, City Clerk

OFFERED BY: \_\_\_\_\_      SECONDED BY: \_\_\_\_\_

\*\*\*\*\*  
I, W. Scott Jett, City Clerk of the City of North Wildwood, in the County of Cape May, State of New Jersey, do hereby certify that the foregoing is a correct and true copy of a Resolution adopted by the Mayor and Council of the City of North Wildwood at a meeting duly held on the 1<sup>st</sup> day of August 2023.

Dated: August 1, 2023      Signed: \_\_\_\_\_  
W. Scott Jett, City Clerk

Approved: \_\_\_\_\_  
Patrick T. Rosenello, Mayor

|           | Aye | Naye | Abstain | Absent |          | Aye | Naye | Abstain | Absent |
|-----------|-----|------|---------|--------|----------|-----|------|---------|--------|
| Tolomeo   |     |      |         |        | Koehler  |     |      |         |        |
| Rullo     |     |      |         |        | Bishop   |     |      |         |        |
| Kane      |     |      |         |        | Zampirri |     |      |         |        |
| Del Conte |     |      |         |        |          |     |      |         |        |

**CITY OF NORTH WILDWOOD**  
Cape May County, New Jersey

**RESOLUTION**  
**APPROVING MUNICIPAL PUBLIC ACCESS PLAN**

**WHEREAS**, the North Wildwood Municipal Public Access Plan was submitted to Council and reviewed at its regular meeting held on August 1, 2023; and

**WHEREAS**, the North Wildwood Planning Board has previously determined that said Plan is consistent with the City of North Wildwood Master Plan; and

**WHEREAS**, Council deems it prudent and appropriate to approve said Plan as submitted.

**NOW, THEREFORE, BE IT RESOLVED**, by the Mayor and Council of the City of North Wildwood, in the County of Cape May, State of New Jersey as follows:

- 1) All of the statements of the preamble are repeated and incorporated herein by this reference thereto as though the same were set forth at length.
- 2) The Municipal Public Access Plan of the City of North Wildwood, annexed hereto as part of this Resolution, is hereby approved.
- 3) A true copy of said Plan shall be forwarded to the New Jersey Department of Environmental Protection for review and approval pursuant to New Jersey Coastal Zone Management Rules.

**OFFERED BY:** \_\_\_\_\_ **SECONDED BY:** \_\_\_\_\_  
**STATE OF NEW JERSEY** **COUNTY OF CAPE MAY**

I, W. Scott Jett, City Clerk of the City of North Wildwood, in the County of Cape May, State of New Jersey, do hereby certify that the foregoing is a correct and true copy of a Resolution adopted by the Mayor and Council of the City of North Wildwood at a meeting duly held on the 1<sup>st</sup> day of August, 2023.

Dated: August 1, 2023  
Signed: \_\_\_\_\_  
W. Scott Jett, City Clerk  
Approved: \_\_\_\_\_  
Patrick T. Rosenello, Mayor

|           |     |     |         |        |          |     |     |         |        |
|-----------|-----|-----|---------|--------|----------|-----|-----|---------|--------|
|           | Aye | Nay | Abstain | Absent |          | Aye | Nay | Abstain | Absent |
| Tolomeo   |     |     |         |        | Koehler  |     |     |         |        |
| Rullo     |     |     |         |        | Bishop   |     |     |         |        |
| Kane      |     |     |         |        | Zampirri |     |     |         |        |
| Del Conte |     |     |         |        |          |     |     |         |        |

CITY OF NORTH WILDWOOD  
Cape May County, New Jersey

RESOLUTION

NATIONAL LIGHTHOUSE DAY

WHEREAS, on August 7, 1789 Congress adopted the first legislation authorizing the establishment of lighthouses, beacons, buoys and public piers; and

WHEREAS, the 200<sup>th</sup> Anniversary of the first Lighthouse legislation, August 7, 1989, was designated by Congress as National Lighthouse Day; and

WHEREAS, although August 7 has never been officially designated as an annual Lighthouse Day, many Lighthouses and their surrounding communities throughout the nation celebrate August 7 each year as National Lighthouse Day; and

WHEREAS, the City of North Wildwood continues to have an excellent relationship with the United States Coast Guard, which maintains the beacon in the Hereford Inlet Lighthouse as an active Aid to Navigation, and which is invited each year to take part in the National Lighthouse Day activities of the City; and

WHEREAS, in 2023 the North Wildwood Historical Commission has requested that Captain Warren D. Judge, Commanding Officer of the United States Coast Guard Training Center in Cape May, be our honored guest and speaker; and

WHEREAS, Captain Judge has served in numerous leadership positions in the Coast Guard, including a Presidential Response Officer Communications Lead for President Obama in the White House Communications Agency, and currently oversees the training of approximately 3,800 new Coast Guard men and women each year; and

WHEREAS, Captain Judge completed his basic training in 1986 and has earned a bachelor’s degree and two master’s degrees in addition to having been awarded the Department of Defense Medal and three Coast Guard Meritorious Service Medals; and

WHEREAS, Council deems it appropriate, due to the City’s long-standing relationship with the United States Coast Guard, to honor Coast Guard Captain Warren D. Judge for his dedicated service to our nation.

NOW, THEREFORE, BE IT RESOLVED, by the Mayor and Council of the City of North Wildwood, in the County of Cape May, State of New Jersey as follows:

- 1) The City of North Wildwood hereby recognizes August 7, 2023 as National Lighthouse Day.
- 2) The City of North Wildwood is in full support of initiatives and activities which will create increased awareness of the importance of the Hereford Inlet Lighthouse and other lighthouses in our country.
- 3) The City of North Wildwood expresses support of legislation which would permanently designate August 7 each year as National Lighthouse Day.
- 4) In honor of his dedicated service to our nation and his example of leadership in carrying out the traditions of the United States Coast Guard throughout his career and specifically at the Training Center which is located in Cape May County, an officially designated ‘Coast Guard Community,’ August 7, 2023 is hereby designated as “Warren D. Judge Day” in the City of North Wildwood.

OFFERED BY: \_\_\_\_\_ SECONDED BY: \_\_\_\_\_

STATE OF NEW JERSEY COUNTY OF CAPE MAY  
I, W. Scott Jett, City Clerk of the City of North Wildwood, in the County of Cape May, State of New Jersey, do hereby certify that the foregoing is a correct and true copy of a Resolution adopted by the Mayor and Council of the City of North Wildwood at a meeting duly held on the 1<sup>st</sup> day of August, 2023.

Dated: August 1, 2023 Signed: \_\_\_\_\_  
W. Scott Jett, City Clerk

Approved: \_\_\_\_\_  
Patrick T. Rosenello, Mayor

|           | Aye | Nay | Abstain | Absent |          | Aye | Nay | Abstain | Absent |
|-----------|-----|-----|---------|--------|----------|-----|-----|---------|--------|
| Tolomeo   |     |     |         |        | Koehler  |     |     |         |        |
| Rullo     |     |     |         |        | Bishop   |     |     |         |        |
| Kane      |     |     |         |        | Zampirri |     |     |         |        |
| Del Conte |     |     |         |        |          |     |     |         |        |

July 27, 2023  
11:41 AM

CITY OF NORTH WILDWOOD  
Check Payment Batch Verification Listing

Page No: 1

Batch Id: RB1      Batch Type: C      Batch Date: 08/01/23      Checking Account: CREST      G/L Credit: Budget G/L Credit  
Generate Direct Deposit: N

| Check No. | Check Date | Vendor # Name                      | Payment Amt | Street 1 of Address to be printed on Check | Charge Account | Account Type | Status | Seq | Acct |
|-----------|------------|------------------------------------|-------------|--|----------------|--------------|--------|-----|------|
| PO #      | Enc Date   | Item Description                   |             | Description                                |                |              |        |     |      |
|           | 08/01/23   | 01050 ATLANTIC CTY MUNICIPAL JIF   |             | C\O JOHN HANSEN, ACTING TREAS.             |                |              |        |     |      |
| 23-01679  | 07/21/23   | 1 3rd Installment - 2023           | 65,795.81   | 3-01-23-210-010                            | Budget         | Aprv         | 65     | 1   |      |
|           |            |                                    |             | INSURANCE - LIABILITY                      |                |              |        |     |      |
| 23-01679  | 07/21/23   | 2 3rd Installment - 2023           | 152,020.17  | 3-01-23-215-010                            | Budget         | Aprv         | 66     | 1   |      |
|           |            |                                    |             | WORKERS COMPENSATION INSURANCE             |                |              |        |     |      |
| 23-01679  | 07/21/23   | 3 3rd Installment - 2023           | 23,371.02   | 3-01-23-210-090                            | Budget         | Aprv         | 67     | 1   |      |
|           |            |                                    |             | PROPERTY AND AUTO LIABILITY                |                |              |        |     |      |
|           |            |                                    | 241,187.00  |  |                |              |        |     |      |
|           | 08/01/23   | 01446 ADVANCED VIDEO & SOUND LLC   |             | 333 BLOSSOM CICLE                          |                |              |        |     |      |
| 23-01134  | 05/31/23   | 1 Install Camera                   | 720.00      | 3-01-25-240-029                            | Budget         | Aprv         | 3      | 1   |      |
|           |            |                                    |             | POLICE-CONTRACTUAL SERVICES                |                |              |        |     |      |
| 23-01670  | 07/21/23   | 1 MATERIALS TO UPDATE SONOS        | 60.00       | 3-01-28-370-065                            | Budget         | Aprv         | 62     | 1   |      |
|           |            |                                    |             | REC CTR - REC PROGRAM EQUIP & supplies     |                |              |        |     |      |
|           |            |                                    | 780.00      |  |                |              |        |     |      |
|           | 08/01/23   | 01479 AT&T MOBILITY                |             | PO BOX 6463                                |                |              |        |     |      |
| 23-01652  | 07/20/23   | 1 City Cell Phones - July 2023     | 415.58      | 3-01-31-440-010                            | Budget         | Aprv         | 55     | 1   |      |
|           |            |                                    |             | TELEPHONE COSTS                            |                |              |        |     |      |
|           |            |                                    | 415.58      |  |                |              |        |     |      |
|           | 08/01/23   | 01993 ADP, Inc.                    |             | PO BOX 842875                              |                |              |        |     |      |
| 23-01704  | 07/26/23   | 1 Time and Attendance - July 23    | 234.55      | 3-01-20-100-028                            | Budget         | Aprv         | 97     | 1   |      |
|           |            |                                    |             | GEN ADM - PROF/ CONSULTANT                 |                |              |        |     |      |
|           |            |                                    | 234.55      |  |                |              |        |     |      |
|           | 08/01/23   | 02021 BURLEIGH STORAGE             |             | 633 SHUN PIKE                              |                |              |        |     |      |
| 23-01712  | 01/03/23   | 1 off Site Storage - 3rd Qtr       | 6,375.00    | 3-01-26-290-060                            | Budget         | Aprv         | 102    | 1   |      |
|           |            |                                    |             | PUB WRKS- VEHICLE STORAGE & MAINTENANCE    |                |              |        |     |      |
|           |            |                                    | 6,375.00    |  |                |              |        |     |      |
|           | 08/01/23   | 02035 BOB'S AUTO BODY              |             | 401 W RIO GRANDE AVENUE                    |                |              |        |     |      |
| 23-01648  | 07/19/23   | 1                                  | 375.00      | 3-01-26-290-027                            | Budget         | Aprv         | 53     | 1   |      |
|           |            |                                    |             | PUB WKS MAINT CITY FLEET UNDER 1 TON       |                |              |        |     |      |
|           |            |                                    | 375.00      |  |                |              |        |     |      |
|           | 08/01/23   | 02490 Bailey Training & Consulting |             | 4 Roma Court                               |                |              |        |     |      |
| 23-01625  | 07/19/23   | 1 Speaker's Fee                    | 1,000.00    | 3-01-25-240-042                            | Budget         | Aprv         | 36     | 1   |      |
|           |            |                                    |             | POLICE - EDUCATION & TRAINING              |                |              |        |     |      |
|           |            |                                    | 1,000.00    |  |                |              |        |     |      |
|           | 08/01/23   | 02719 Blaney, Donohue, Weinberg PC |             | 2123 DUNE DRIVE, SUITE 11                  |                |              |        |     |      |
| 23-01616  | 07/19/23   | 1 Legal Services                   | 1,827.00    | 3-01-20-155-027                            | Budget         | Aprv         | 30     | 1   |      |
|           |            |                                    |             | LEGAL SERV-PROF SERVICES                   |                |              |        |     |      |
| 23-01706  | 01/03/23   | 1 City Solicitor - 3rd Qtr         | 18,750.00   | 3-01-20-155-027                            | Budget         | Aprv         | 100    | 1   |      |
|           |            |                                    |             | LEGAL SERV-PROF SERVICES                   |                |              |        |     |      |
|           |            |                                    | 20,577.00   |  |                |              |        |     |      |
|           | 08/01/23   | 03050 C.M.C.M.U.A.                 |             | 1523 route 9 north                         |                |              |        |     |      |



| Check No.<br>PO # | Check Date<br>Enc Date | Vendor # Name<br>Item Description | Payment Amt      | Street 1 of Address to be printed on Check<br>Charge Account<br>Description | Account Type | Status | Seq | Acct |
|-------------------|------------------------|-----------------------------------|------------------|---|--------------|--------|-----|------|
| 23-01602          | 07/17/23               | 1 Tipping Fees - June 2023        | 46,129.68        | 3-01-31-467-099<br>CMC TIPPING FEES   | Budget       | Aprv   | 21  | 1    |
| 23-01602          | 07/17/23               | 2 Tipping Fees - June 2023        | 1,282.82         | 3-01-26-310-066<br>BLDGS & GRNDS LANDSCAPING                                | Budget       | Aprv   | 22  | 1    |
|                   |                        |                                   | <u>47,412.50</u> |   |              |        |     |      |
|                   | 08/01/23               | 03159 COASTAL LANDSCAPING         |                  | 102-D N, RAILROAD AVE   |              |        |     |      |
| 23-01593          | 07/17/23               | 1 Sprinkler Activations City      | 5,071.14         | 3-01-26-310-021<br>BLDGS & GRNDS - CONTR SVCS                               | Budget       | Aprv   | 11  | 1    |
| 23-01594          | 07/17/23               | 1 Sprinkler Repairs               | 458.73           | 3-01-26-310-021<br>BLDGS & GRNDS - CONTR SVCS                               | Budget       | Aprv   | 12  | 1    |
| 23-01595          | 07/17/23               | 1 Sprinkler Repairs Henfey        | 56.00            | 3-01-26-310-021<br>BLDGS & GRNDS - CONTR SVCS                               | Budget       | Aprv   | 13  | 1    |
| 23-01687          | 07/25/23               | 1 Healthy Lawn Program #4 of 5    | 131.28           | 3-01-26-310-021<br>BLDGS & GRNDS - CONTR SVCS                               | Budget       | Aprv   | 79  | 1    |
|                   |                        |                                   | <u>5,717.15</u>  |   |              |        |     |      |
|                   | 08/01/23               | 03348 COMCAST                     |                  | PO BOX 37601  |              |        |     |      |
| 23-01683          | 07/25/23               | 1 8499050130118769                | 528.63           | 3-01-28-370-026<br>REC CNTR- MAINT OF OTHER EQUIP                           | Budget       | Aprv   | 72  | 1    |
| 23-01683          | 07/25/23               | 2 8499050130148675                | 757.20           | 3-01-25-240-036<br>POLICE - OFFICE SUPPLIES                                 | Budget       | Aprv   | 73  | 1    |
| 23-01683          | 07/25/23               | 3 8499050130035690                | 429.78           | 3-01-25-265-036<br>FIRE - OFFICE SUPPLIES                                   | Budget       | Aprv   | 74  | 1    |
| 23-01683          | 07/25/23               | 4 8499050130147107                | 362.74           | 3-01-25-240-036<br>POLICE - OFFICE SUPPLIES                                 | Budget       | Aprv   | 75  | 1    |
| 23-01683          | 07/25/23               | 5 8499050130112879                | 104.85           | 3-01-25-252-036<br>EM MGT- OFFICE SUPPLIES                                  | Budget       | Aprv   | 76  | 1    |
|                   |                        |                                   | <u>2,183.20</u>  |   |              |        |     |      |
|                   | 08/01/23               | 03361 COMCAST                     |                  | P.O. BOX 70219  |              |        |     |      |
| 23-01682          | 07/25/23               | 1 177350186                       | 395.00           | 3-01-20-100-036<br>GEN ADM - OFFICE SUPPLIES                                | Budget       | Aprv   | 71  | 1    |
|                   |                        |                                   | <u>395.00</u>    |   |              |        |     |      |
|                   | 08/01/23               | 03383 ATLANTIC CITY ELECTRIC      |                  | P.O.BOX 13610   |              |        |     |      |
| 23-01696          | 07/25/23               | 1 55007982568                     | 74.89            | 3-01-31-435-010<br>STREET LIGHTING COSTS                                    | Budget       | Aprv   | 82  | 1    |
| 23-01696          | 07/25/23               | 2 55011875782                     | 194.70           | 3-01-31-430-010<br>ELECTRICITY COSTS  | Budget       | Aprv   | 83  | 1    |
|                   |                        |                                   | <u>269.59</u>    |   |              |        |     |      |
|                   | 08/01/23               | 03674 CLEGG'S GARAGE INC          |                  | 200 WOODLAND AVE  |              |        |     |      |
| 23-01647          | 07/19/23               | 1 Switch + Freight                | 330.80           | 3-01-26-290-026<br>PUB WKS-MAINT OF EQUIPT OVER 1 TON                       | Budget       | Aprv   | 52  | 1    |
|                   |                        |                                   | <u>330.80</u>    |   |              |        |     |      |
|                   | 08/01/23               | 039002 CORELOGIC                  |                  | REFUND UNIT   |              |        |     |      |
| 23-01705          | 07/26/23               | 1 Refund of Tax Overpayments      | 436.67           | 3-01-55-100-002<br>REAL ESTATE TAX REFUNDS                                  | Budget       | Aprv   | 98  | 1    |
| 23-01705          | 07/26/23               | 2 Refund of Tax Overpayments      | 556.59           | 3-01-55-100-002<br>REAL ESTATE TAX REFUNDS                                  | Budget       | Aprv   | 99  | 1    |

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CITY OF NORTH WILDWOOD  
Check Payment Batch Verification Listing

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| Check No. | Check Date           | Vendor #   | Name  | Payment Amt | Street 1 of Address to be printed on Check | Charge Account  | Account Type | Status | Seq | Acct |
|-----------|----------------------|------------|---|-------------|--|-----------------|--------------|--------|-----|------|
| PO #      | Enc Date             | Item       | Description   |             | Description                                |                 |              |        |     |      |
|           |                      |            |   | 993.26      |  |                 |              |        |     |      |
| 23-01694  | 08/01/23<br>07/25/23 | 04635<br>1 | Drug Impairment Consulting                            | 300.00      | And Experts LLC                            | 3-01-25-240-042 | Budget       | Aprv   | 81  | 1    |
|           |                      |            |   | 300.00      | POLICE - EDUCATION & TRAINING              |                 |              |        |     |      |
| 23-01619  | 08/01/23<br>07/19/23 | 05255<br>1 | ONSOLVE, LLC<br>Code Red Emer Notification Ser        | 2,912.72    | PO Box 945672                              | 3-01-25-252-058 | Budget       | Aprv   | 32  | 1    |
|           |                      |            |   | 2,912.72    | EM MGT -OTHER EQUIP & SUPPLIES             |                 |              |        |     |      |
| 23-01623  | 08/01/23<br>07/19/23 | 07297<br>1 | GTBM INC<br>E-Tickets                                 | 820.16      | PO BOX 305                                 | 3-01-25-240-029 | Budget       | Aprv   | 34  | 1    |
|           |                      |            |   | 820.16      | POLICE-CONTRACTUAL SERVICES                |                 |              |        |     |      |
| 23-01311  | 08/01/23<br>06/13/23 | 07963<br>3 | GRASSY SOUNDS MARINA OPERATION<br>NWFD Boat Fuel      | 300.00      | 13 OLD NORTH WILDWOOD BLVD                 | 3-01-31-460-010 | Budget       | Aprv   | 7   | 1    |
|           |                      |            |   | 300.00      | GASOLINE COSTS                             |                 |              |        |     |      |
| 23-01671  | 08/01/23<br>07/21/23 | 08013<br>1 | CAPE MAY COUNTY HERALD<br>HERALD LEGAL ADS            | 658.29      | 1508 ROUTE 47 SOUTH                        | 3-01-20-120-021 | Budget       | Aprv   | 63  | 1    |
|           |                      |            |   | 658.29      | MUN CLK- LEGAL ADVERTISING                 |                 |              |        |     |      |
| 23-01598  | 08/01/23<br>07/17/23 | 08243<br>1 | RICHARD HAAS<br>RECREATION PETTY CASH - REC#2         | 93.42       | PETTY CASH                                 | T-03-56-190-011 | Budget       | Aprv   | 16  | 1    |
| 23-01598  | 08/01/23<br>07/17/23 | 08243<br>2 | RICHARD HAAS<br>RECREATION PETTY CASH - REC #1        | 5.00        | RECREATION CENTER                          | 3-01-28-370-036 | Budget       | Aprv   | 17  | 1    |
|           |                      |            |   | 98.42       | REC CTR - OFFICE SUPPLIES                  |                 |              |        |     |      |
| 23-01636  | 08/01/23<br>07/19/23 | 08556<br>1 | Owen Hurley<br>NW SOCCER CAMP - COACH                 | 475.00      | 26 Crestmont Drive                         | T-03-56-190-011 | Budget       | Aprv   | 38  | 1    |
| 23-01636  | 08/01/23<br>07/19/23 | 08556<br>2 | Owen Hurley<br>NW SOCCER CAMP - COACH                 | 475.00      | RECREATION CENTER                          | T-03-56-190-011 | Budget       | Aprv   | 39  | 1    |
|           |                      |            |   | 950.00      | RECREATION CENTER                          |                 |              |        |     |      |
| 23-01607  | 08/01/23<br>07/18/23 | 08665<br>1 | HORIZON BLUE SHIELD<br>Refund Overpayment - Ambulance | 100.44      | OUT OF STATE                               | 3-01-20-132-099 | Budget       | Aprv   | 25  | 1    |
|           |                      |            |   | 100.44      | AMBULANCE BILLING COSTS                    |                 |              |        |     |      |
| 23-01638  | 08/01/23<br>07/19/23 | 08755<br>1 | Sean Thomas Hurley<br>NW SOCCER CAMP ASST. DIRECTOR   | 675.00      | 26 Grandview Ave                           | T-03-56-190-011 | Budget       | Aprv   | 42  | 1    |
| 23-01638  | 08/01/23<br>07/19/23 | 08755<br>2 | Sean Thomas Hurley<br>NW SOCCER CAMP ASST. DIRECTOR   | 675.00      | RECREATION CENTER                          | T-03-56-190-011 | Budget       | Aprv   | 43  | 1    |
|           |                      |            |   | 1,350.00    | RECREATION CENTER                          |                 |              |        |     |      |

| Check No. | Check Date | Vendor # Name                       | Payment Amt | Street 1 of Address to be printed on Check | Charge Account | Account Type | Status | Seq | Acct |
|-----------|------------|-------------------------------------|-------------|--|----------------|--------------|--------|-----|------|
| PO #      | Enc Date   | Item Description                    |             | Description                                |                |              |        |     |      |
|           |            |                                     |             |  |                |              |        |     |      |
|           | 08/01/23   | 09011 INST. FOR PROFESSIONAL DEV.   |             | 17 Hathaway Place                          |                |              |        |     |      |
| 23-01612  | 07/19/23   | 1 Webinar                           | 50.00       | 3-01-26-290-042                            | Budget         | Aprv         | 28     | 1   |      |
|           |            |                                     |             | PUB WKS-EDUCATION & TRAINING               |                |              |        |     |      |
| 23-01721  | 07/27/23   | 1 WEBINAR 7262023 WSJ ZB            | 100.00      | 3-01-20-120-041                            | Budget         | Aprv         | 110    | 1   |      |
|           |            |                                     |             | MUN CLK - CONF AND MEETINGS                |                |              |        |     |      |
|           |            |                                     | 150.00      |  |                |              |        |     |      |
|           |            |                                     |             |  |                |              |        |     |      |
|           | 08/01/23   | 10203 JOHN E REID & ASSOCIATES      |             | 209 W. JACKSON BLVD. STE 400               |                |              |        |     |      |
| 23-01715  | 07/27/23   | 1 Investigative Interviewing        | 1,260.00    | 3-01-25-240-042                            | Budget         | Aprv         | 105    | 1   |      |
|           |            |                                     |             | POLICE - EDUCATION & TRAINING              |                |              |        |     |      |
|           |            |                                     | 1,260.00    |  |                |              |        |     |      |
|           |            |                                     |             |  |                |              |        |     |      |
|           | 08/01/23   | 11048 K.O. SPORTS                   |             | 2001 E. MOYAMENSING AVE                    |                |              |        |     |      |
| 23-01654  | 07/21/23   | 1 BUCKETS CAMP STAFF SHIRTS         | 240.00      | T-03-56-190-011                            | Budget         | Aprv         | 57     | 1   |      |
|           |            |                                     |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01654  | 07/21/23   | 2 STAFF UNIFORMS                    | 598.00      | 3-01-28-370-043                            | Budget         | Aprv         | 58     | 1   |      |
|           |            |                                     |             | REC CTR - UNIFORMS                         |                |              |        |     |      |
| 23-01654  | 07/21/23   | 3 STAFF UNIFORMS                    | 360.00      | 3-01-28-370-043                            | Budget         | Aprv         | 59     | 1   |      |
|           |            |                                     |             | REC CTR - UNIFORMS                         |                |              |        |     |      |
| 23-01716  | 07/27/23   | 1 Hats for B&G                      | 420.00      | 3-01-26-310-043                            | Budget         | Aprv         | 106    | 1   |      |
|           |            |                                     |             | BLDGS & GRNDS - UNIFORMS                   |                |              |        |     |      |
|           |            |                                     | 1,618.00    |  |                |              |        |     |      |
|           |            |                                     |             |  |                |              |        |     |      |
|           | 08/01/23   | 12555 Legacy Treatment Services Inc |             | 1 East Stow Road                           |                |              |        |     |      |
| 23-01651  | 07/19/23   | 1 Dispatcher Program Training       | 400.00      | 3-01-25-240-042                            | Budget         | Aprv         | 54     | 1   |      |
|           |            |                                     |             | POLICE - EDUCATION & TRAINING              |                |              |        |     |      |
|           |            |                                     | 400.00      |  |                |              |        |     |      |
|           |            |                                     |             |  |                |              |        |     |      |
|           | 08/01/23   | 13019 MARINE RESCUE PRODUCTS        |             | P.O. BOX 3484                              |                |              |        |     |      |
| 23-01725  | 07/27/23   | 1 ASSORTED FLAGS, ETC.              | 332.10      | T-03-56-190-014                            | Budget         | Aprv         | 113    | 1   |      |
|           |            |                                     |             | REC TRUST-JUNIOR LIFEGUARDS                |                |              |        |     |      |
| 23-01725  | 07/27/23   | 2 RESCUE BOARDS                     | 2,100.00    | T-03-56-190-014                            | Budget         | Aprv         | 114    | 1   |      |
|           |            |                                     |             | REC TRUST-JUNIOR LIFEGUARDS                |                |              |        |     |      |
| 23-01725  | 07/27/23   | 3 RESCUE BOARDS - SH & HANDLING     | 330.00      | T-03-56-190-014                            | Budget         | Aprv         | 115    | 1   |      |
|           |            |                                     |             | REC TRUST-JUNIOR LIFEGUARDS                |                |              |        |     |      |
| 23-01725  | 07/27/23   | 4 COMPETITION BOARD                 | 1,395.00    | T-03-56-190-014                            | Budget         | Aprv         | 116    | 1   |      |
|           |            |                                     |             | REC TRUST-JUNIOR LIFEGUARDS                |                |              |        |     |      |
| 23-01725  | 07/27/23   | 5 COMPETITION BOARD - SH & HAND.    | 165.00      | T-03-56-190-014                            | Budget         | Aprv         | 117    | 1   |      |
|           |            |                                     |             | REC TRUST-JUNIOR LIFEGUARDS                |                |              |        |     |      |
|           |            |                                     | 4,322.10    |  |                |              |        |     |      |
|           |            |                                     |             |  |                |              |        |     |      |
|           | 08/01/23   | 13278 Emma McCarthy                 |             | 12 Stony Brook Ct                          |                |              |        |     |      |
| 23-01637  | 07/19/23   | 1 NW SOCCER CAMP COACH              | 190.00      | T-03-56-190-011                            | Budget         | Aprv         | 40     | 1   |      |
|           |            |                                     |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01637  | 07/19/23   | 2 NW SOCCER CAMP COACH              | 475.00      | T-03-56-190-011                            | Budget         | Aprv         | 41     | 1   |      |
|           |            |                                     |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |                                     | 665.00      |  |                |              |        |     |      |
|           |            |                                     |             |  |                |              |        |     |      |
|           | 08/01/23   | 14160 NJSACOP                       |             | 751 ROUTE 73 NORTH                         |                |              |        |     |      |
| 23-01720  | 07/27/23   | 1 2023 Membership Dues              | 275.00      | 3-01-25-240-042                            | Budget         | Aprv         | 109    | 1   |      |
|           |            |                                     |             | POLICE - EDUCATION & TRAINING              |                |              |        |     |      |

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CITY OF NORTH WILDWOOD  
Check Payment Batch Verification Listing

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| Check No. | Check Date           | Vendor # Name   | Payment Amt | Street 1 of Address to be printed on Check | Charge Account  | Account Type | Status | Seq | Acct |
|-----------|----------------------|---|-------------|--|-----------------|--------------|--------|-----|------|
| PO #      | Enc Date             | Item Description  |             | Description                                |                 |              |        |     |      |
|           |                      |   | 275.00      |  |                 |              |        |     |      |
| 23-01617  | 08/01/23<br>07/19/23 | 14306 GEN DIGITAL, INC.<br>1 Monthly Subscription                 | 76.33       | 60 E RIO SALADO PKWY                       | 3-01-20-100-028 | Budget       | Aprv   | 31  | 1    |
|           |                      |   | 76.33       | GEN ADM - PROF/ CONSULTANT                 |                 |              |        |     |      |
| 23-01596  | 08/01/23<br>07/17/23 | 16825 Maurice A Pierce<br>1 June 28,2023 Language                 | 226.24      | 16 Torresdale Street                       | 3-01-43-490-028 | Budget       | Aprv   | 14  | 1    |
|           |                      |   | 226.24      | MUN CT - OTHER PROF, CONSULT               |                 |              |        |     |      |
| 23-01622  | 08/01/23<br>07/19/23 | 18009 Rowan University<br>1 Fall 2023 Career Fair                 | 200.00      | Office of Career Advancement               | 3-01-25-240-041 | Budget       | Aprv   | 33  | 1    |
|           |                      |   | 200.00      | POLICE - CONFERENCES AND MTGS              |                 |              |        |     |      |
| 23-01711  | 08/01/23<br>02/21/23 | 19023 SHORE ANIMAL CONTROL SERVICES<br>1 Animal Control - 3rd Qtr | 3,900.00    | P.O. BOX 597                               | 3-01-27-340-099 | Budget       | Aprv   | 101 | 1    |
|           |                      |   | 3,900.00    | ANIMAL CONTROL COSTS                       |                 |              |        |     |      |
| 23-01719  | 08/01/23<br>07/27/23 | 19051 SUNBELT RENTALS, INC<br>1 POLARIS RENTAL - 4 WEEKS          | 1,872.25    | po box 409211                              | 3-01-28-380-058 | Budget       | Aprv   | 108 | 1    |
|           |                      |   | 1,872.25    | LFGDS - OTHER EQUIP & SUPPLIES             |                 |              |        |     |      |
| 23-01713  | 08/01/23<br>07/27/23 | 19216 SOUTH JERSEY GAS CO<br>1 2951140000                         | 123.57      | P.O. BOX 6091                              | 3-01-31-446-010 | Budget       | Aprv   | 103 | 1    |
|           |                      |   | 123.57      | NATURAL GAS COSTS                          |                 |              |        |     |      |
| 23-01629  | 08/01/23<br>07/19/23 | 19335 STATE TOXICOLOGY LABORATORY<br>1 Applicant Testing          | 495.00      | DIVISION OF CRIMINAL JUSTICE               | 3-01-25-240-093 | Budget       | Aprv   | 37  | 1    |
|           |                      |   | 495.00      | POLICE - MEDICAL EXPENSES                  |                 |              |        |     |      |
| 23-01653  | 08/01/23<br>07/21/23 | 19340 CHIEF JOHN STEVENSON<br>1                                   | 298.61      | PETTY CASH                                 | 3-01-25-240-026 | Budget       | Aprv   | 56  | 1    |
|           |                      |   | 298.61      | POLICE - MAINT OF OTHER EQUIP              |                 |              |        |     |      |
| 23-01597  | 08/01/23<br>07/17/23 | 19505 SHERWOOD LOCK SHOP<br>1 Storeroom Lock                      | 550.00      | 161 W RIO GRANDE AVE                       | 3-01-26-310-038 | Budget       | Aprv   | 15  | 1    |
|           |                      |   | 550.00      | BLDGS & GRNDS-HDWRE/MINOR TOOLS            |                 |              |        |     |      |
| 23-01170  | 08/01/23<br>06/01/23 | 19594 SHOREWAY LANDSCAPING INC.<br>1 PLAYGROUND MULCH-HENFEY PARK | 2,250.00    | 45 indian trail rd                         | T-03-56-190-011 | Budget       | Aprv   | 4   | 1    |
| 23-01170  | 06/01/23             | 2 PLAYGROUND MULCH- 16TH AVENUE                                   | 1,500.00    | RECREATION CENTER                          | T-03-56-190-011 | Budget       | Aprv   | 5   | 1    |
|           |                      |   |             | RECREATION CENTER                          |                 |              |        |     |      |

| Check No.<br>PO # | Check Date<br>Enc Date | Vendor # Name<br>Item Description | Payment Amt      | Street 1 of Address to be printed on Check<br>Charge Account Description | Account Type | Status | Seq | Acct |
|-------------------|------------------------|-----------------------------------|------------------|--|--------------|--------|-----|------|
| 23-01170          | 06/01/23               | 3 PLAYGROUND MULCH- ALLEN PARK    | 2,250.00         | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 6   | 1    |
|                   |                        |                                   | <u>6,000.00</u>  |  |              |        |     |      |
|                   | 08/01/23               | 19664 Stefankiewicz & Belasco LLC |                  | 111 e 17th st suite 100  |              |        |     |      |
| 23-01615          | 07/19/23               | 1 PB Solicitor dues               | 1,418.00         | 3-01-21-185-028<br>PLANNING & ZONING- LEGAL/PROF SERVICES                | Budget       | Aprv   | 29  | 1    |
| 23-01639          | 07/19/23               | 1 PB Solicitor escrow             | 28.00            | P-23-5-2<br>221 W 19TH AVENUE  | Project      | Aprv   | 44  | 1    |
| 23-01639          | 07/19/23               | 2 PB Solicitor escrow             | 406.00           | P-23-4-1<br>300 W SPRUCE AVENUE  | Project      | Aprv   | 45  | 1    |
| 23-01639          | 07/19/23               | 3 PB Solicitor escrow             | 252.00           | P-23-3-1<br>211 E 16TH AVENUE  | Project      | Aprv   | 46  | 1    |
| 23-01639          | 07/19/23               | 4 PB Solicitor escrow             | 406.00           | Z-22-11-1<br>431 E 25TH STREET   | Project      | Aprv   | 47  | 1    |
|                   |                        |                                   | <u>2,510.00</u>  |  |              |        |     |      |
|                   | 08/01/23               | 19877 Gracie Sullivan             |                  | 406 Grandview Ave  |              |        |     |      |
| 23-01640          | 07/19/23               | 1 NW SOCCER CAMP TRAINER          | 500.00           | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 48  | 1    |
| 23-01640          | 07/19/23               | 2 NW SOCCER CAMP TRAINER          | 500.00           | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 49  | 1    |
|                   |                        |                                   | <u>1,000.00</u>  |  |              |        |     |      |
|                   | 08/01/23               | 20250 TAYLOR OIL COMPANY          |                  | P.O. BOX 974   |              |        |     |      |
| 23-01701          | 07/26/23               | 1 REG GAS W427981                 | 3,053.35         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 86  | 1    |
| 23-01701          | 07/26/23               | 2 UNLEADED GAS W443006            | 3,598.27         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 87  | 1    |
| 23-01701          | 07/26/23               | 3 UNLEADED GAS W443065            | 4,661.82         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 88  | 1    |
| 23-01701          | 07/26/23               | 4 UNLEADED GAS W443387            | 7,353.86         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 89  | 1    |
| 23-01701          | 07/26/23               | 5 UNLEADED GAS W443411            | 4,892.34         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 90  | 1    |
| 23-01701          | 07/26/23               | 6 DIESEL W429182                  | 2,358.54         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 91  | 1    |
| 23-01701          | 07/26/23               | 7 DIESEL W426856                  | 2,021.67         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 92  | 1    |
| 23-01701          | 07/26/23               | 8 DIESEL W461954                  | 1,000.66         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 93  | 1    |
| 23-01701          | 07/26/23               | 9 DIESEL W461955                  | 1,193.91         | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 94  | 1    |
| 23-01701          | 07/26/23               | 10 DIESEL W462136                 | 670.83           | 3-01-31-460-010<br>GASOLINE COSTS  | Budget       | Aprv   | 95  | 1    |
|                   |                        |                                   | <u>30,805.25</u> |  |              |        |     |      |
|                   | 08/01/23               | 20845 Treasurer, State of NJ      |                  | Office of Weights and Measures   |              |        |     |      |
| 23-00176          | 01/30/23               | 1 Application Radar Tuning Forks  | 140.00           | 3-01-25-240-026<br>POLICE - MAINT OF OTHER EQUIP                         | Budget       | Aprv   | 1   | 1    |
|                   |                        |                                   | <u>140.00</u>    |  |              |        |     |      |

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|---|------------|----------------------------------|-------------|--|----------------|--------------|--------|-----|------|
| PO #  | Enc Date   | Item Description                 |             | Description                                |                |              |        |     |      |
| 08/01/23 20987 State of New Jersey Division of Pensions & Benefit |            |                                  |             |  |                |              |        |     |      |
| 23-01680  | 07/21/23   | 1 PERS Retroactive Payments      | 541.15      | 3-01-20-130-109                            | Budget         | Aprv         | 68     | 1   |      |
|   |            |                                  |             | FIN ADM- PAYROLL EXPENSE                   |                |              |        |     |      |
| 23-01680  | 07/21/23   | 2 PERS Retroactive Payments      | 1,949.60    | 3-01-20-130-109                            | Budget         | Aprv         | 69     | 1   |      |
|   |            |                                  |             | FIN ADM- PAYROLL EXPENSE                   |                |              |        |     |      |
|   |            |                                  | 2,490.75    |  |                |              |        |     |      |
| 08/01/23 21053 UNITED RENTALS 740 W DELILAH RD                    |            |                                  |             |  |                |              |        |     |      |
| 23-00932  | 05/05/23   | 1 Quote for BBQ Fest supplies    | 4,314.00    | 3-01-26-310-058                            | Budget         | Aprv         | 2      | 1   |      |
|   |            |                                  |             | Buildings&Grounds Other Equip/Supplies     |                |              |        |     |      |
|   |            |                                  | 4,314.00    |  |                |              |        |     |      |
| 08/01/23 21095 UNITED UNIFORMS 1050 RT 47                         |            |                                  |             |  |                |              |        |     |      |
| 23-01672  | 07/21/23   | 1 UNIFORMS                       | 146.00      | T-03-56-195-011                            | Budget         | Aprv         | 64     | 1   |      |
|   |            |                                  |             | HEREFORD LIGHTHOUSE TRUST                  |                |              |        |     |      |
|   |            |                                  | 146.00      |  |                |              |        |     |      |
| 08/01/23 22035 VERIZON WIRELESS P.O. BOX 408                      |            |                                  |             |  |                |              |        |     |      |
| 23-01703  | 07/26/23   | 1 City Cell Phones - July 2023   | 646.17      | 3-01-31-440-010                            | Budget         | Aprv         | 96     | 1   |      |
|   |            |                                  |             | TELEPHONE COSTS                            |                |              |        |     |      |
|   |            |                                  | 646.17      |  |                |              |        |     |      |
| 08/01/23 22037 VERIZON P.O. BOX 16801                             |            |                                  |             |  |                |              |        |     |      |
| 23-01697  | 07/25/23   | 1                                | 7.18        | 3-01-25-252-036                            | Budget         | Aprv         | 84     | 1   |      |
|   |            |                                  |             | EM MGT- OFFICE SUPPLIES                    |                |              |        |     |      |
|   |            |                                  | 7.18        |  |                |              |        |     |      |
| 08/01/23 23026 CITY OF WILDWOOD - WATER 3416 Park Boulevard       |            |                                  |             |  |                |              |        |     |      |
| 23-01592  | 07/14/23   | 1 City Water due 7/28/23         | 36,730.55   | 3-01-31-445-010                            | Budget         | Aprv         | 10     | 1   |      |
|   |            |                                  |             | WATER COSTS                                |                |              |        |     |      |
| 23-01681  | 07/24/23   | 1 CITY WATER DUE 7/28/23         | 373.00      | 3-01-31-445-010                            | Budget         | Aprv         | 70     | 1   |      |
|   |            |                                  |             | WATER COSTS                                |                |              |        |     |      |
|   |            |                                  | 37,103.55   |  |                |              |        |     |      |
| 08/01/23 23236 WIRELESS ELECTRONICS, INC 153 COOPER ROAD          |            |                                  |             |  |                |              |        |     |      |
| 23-01496  | 07/11/23   | 1                                | 690.00      | 3-01-25-240-029                            | Budget         | Aprv         | 8      | 1   |      |
|   |            |                                  |             | POLICE-CONTRACTUAL SERVICES                |                |              |        |     |      |
|   |            |                                  | 690.00      |  |                |              |        |     |      |
| 08/01/23 23281 CHRISTOPHER J.WINTER SR. 7 MONARCH STREET          |            |                                  |             |  |                |              |        |     |      |
| 23-01624  | 07/19/23   | 1 Accreditation Consultant - Jun | 416.00      | 3-01-25-240-029                            | Budget         | Aprv         | 35     | 1   |      |
|   |            |                                  |             | POLICE-CONTRACTUAL SERVICES                |                |              |        |     |      |
|   |            |                                  | 416.00      |  |                |              |        |     |      |
| 08/01/23 24005 XEROX CORPORATION P.O. Box 827598                  |            |                                  |             |  |                |              |        |     |      |
| 23-01700  | 07/26/23   | 1 City Copier Lease - July 2023  | 1,597.20    | 3-01-25-240-026                            | Budget         | Aprv         | 85     | 1   |      |
|   |            |                                  |             | POLICE - MAINT OF OTHER EQUIP              |                |              |        |     |      |
|   |            |                                  | 1,597.20    |  |                |              |        |     |      |
| 08/01/23 30002 KAYDENCE OAKLEY 432 WEST OAK AVE                   |            |                                  |             |  |                |              |        |     |      |
| 23-01646  | 07/19/23   | 1 NW SOCCER CAMP COACH           | 500.00      | T-03-56-190-011                            | Budget         | Aprv         | 50     | 1   |      |
|   |            |                                  |             | RECREATION CENTER                          |                |              |        |     |      |

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CITY OF NORTH WILDWOOD  
Check Payment Batch Verification Listing

Page No: 8

| Check No. | Check Date | Vendor # Name                    | Payment Amt | Street 1 of Address to be printed on Check | Charge Account | Account Type | Status | Seq | Acct |
|-----------|------------|----------------------------------|-------------|--|----------------|--------------|--------|-----|------|
| PO #      | Enc Date   | Item Description                 |             | Description                                |                |              |        |     |      |
| 23-01646  | 07/19/23   | 2 NW SOCCER CAMP COACH           | 525.00      | T-03-56-190-011                            | Budget         | Aprv         | 51     | 1   |      |
|           |            |                                  | 1,025.00    | RECREATION CENTER                          |                |              |        |     |      |
|           | 08/01/23   | 30107 Timothy Gough              |             | 322 W. Pine Avenue                         |                |              |        |     |      |
| 23-01590  | 07/13/23   | 1 NW SOCCER CAMP REFUND          | 330.00      | T-03-56-190-011                            | Budget         | Aprv         | 9      | 1   |      |
|           |            |                                  | 330.00      | RECREATION CENTER                          |                |              |        |     |      |
|           | 08/01/23   | 30108 Vanessa Thornton Thomas    |             | 36 Beaver Run Rd.                          |                |              |        |     |      |
| 23-01599  | 07/17/23   | 1 REFUND - BUCKETS BBALL CAMP    | 175.00      | T-03-56-190-011                            | Budget         | Aprv         | 18     | 1   |      |
|           |            |                                  | 175.00      | RECREATION CENTER                          |                |              |        |     |      |
|           | 08/01/23   | 30109 Ella woehlcke              |             | 3009 Fairhill Drive                        |                |              |        |     |      |
| 23-01600  | 07/17/23   | 1 NW SOCCER CAMP COACH           | 475.00      | T-03-56-190-011                            | Budget         | Aprv         | 19     | 1   |      |
|           |            |                                  | 475.00      | RECREATION CENTER                          |                |              |        |     |      |
|           | 08/01/23   | 30110 Annie Mailey               |             | 204 Abbey Ln                               |                |              |        |     |      |
| 23-01601  | 07/17/23   | 1 NW SOCCER CAMP COACH           | 380.00      | T-03-56-190-011                            | Budget         | Aprv         | 20     | 1   |      |
|           |            |                                  | 380.00      | RECREATION CENTER                          |                |              |        |     |      |
|           | 08/01/23   | 30111 Noelle Jaromsky            |             | 6 Eisenhower Drive                         |                |              |        |     |      |
| 23-01605  | 07/18/23   | 1 Refund Overpayment - Ambulance | 90.70       | 3-01-20-132-099                            | Budget         | Aprv         | 23     | 1   |      |
|           |            |                                  | 90.70       | AMBULANCE BILLING COSTS                    |                |              |        |     |      |
|           | 08/01/23   | 30113 Edna Nevil                 |             | 3216 Lake Ave                              |                |              |        |     |      |
| 23-01606  | 07/18/23   | 1 Refund Overpayment - Ambulance | 994.00      | 3-01-20-132-099                            | Budget         | Aprv         | 24     | 1   |      |
|           |            |                                  | 994.00      | AMBULANCE BILLING COSTS                    |                |              |        |     |      |
|           | 08/01/23   | 30114 Harry Murray               |             | 139 1st Avenue                             |                |              |        |     |      |
| 23-01608  | 07/19/23   | 1 Return of Escrow               | 1,416.00    | Z-21-9-1                                   | Project        | Aprv         | 26     | 1   |      |
|           |            |                                  | 1,416.00    | 139 1ST AVE                                |                |              |        |     |      |
|           | 08/01/23   | 30115 Joseph & Eileen Conroy     |             | 500 Atlantic Avenue                        |                |              |        |     |      |
| 23-01609  | 07/19/23   | 1 Return of Escrow               | 956.80      | P-22-7-1                                   | Project        | Aprv         | 27     | 1   |      |
|           |            |                                  | 956.80      | 500 ATLANTIC AVENUE                        |                |              |        |     |      |
|           | 08/01/23   | 30116 Jennifer Middleton         |             | 263 Avis Mill Road                         |                |              |        |     |      |
| 23-01685  | 07/25/23   | 1 BBALL LEAGUE REFUND - WHEELER  | 40.00       | T-03-56-190-011                            | Budget         | Aprv         | 77     | 1   |      |
|           |            |                                  |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01685  | 07/25/23   | 2 BBALL LEAGUE REFUND - TRIMARCO | 40.00       | T-03-56-190-011                            | Budget         | Aprv         | 78     | 1   |      |
|           |            |                                  | 80.00       | RECREATION CENTER                          |                |              |        |     |      |
|           | 08/01/23   | 30117 Robert Corliss             |             | 1300 Bayshore Road                         |                |              |        |     |      |



| Check No.<br>PO # | Check Date<br>Enc Date | Vendor # Name<br>Item Description | Payment Amt                 | Street 1 of Address to be printed on Check<br>Charge Account<br>Description | Account Type | Status | Seq | Acct |
|-------------------|------------------------|-----------------------------------|-----------------------------|---|--------------|--------|-----|------|
| 23-01714          | 07/27/23               | 1 BBALL LEAGUE REFUND - HS        | 40.00<br>40.00              | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 104 | 1    |
|                   |                        |                                   |                             |   |              |        |     |      |
| 23-01690          | 07/25/23               | 1 BUCKETS BBALL CAMP COACH        | 400.00<br>400.00            | 15 King St.<br>T-03-56-190-011<br>RECREATION CENTER                         | Budget       | Aprv   | 80  | 1    |
|                   |                        |                                   |                             |   |              |        |     |      |
| 23-01717          | 07/27/23               | 1 BUCKETS BASKETBALL CAMP REFUND  | 175.00<br>175.00            | 201 E. Pine Street<br>T-03-56-190-011<br>RECREATION CENTER                  | Budget       | Aprv   | 107 | 1    |
|                   |                        |                                   |                             |   |              |        |     |      |
| 23-01722          | 07/27/23               | 1 BUCKETS BBALL CAMP REFUND       | 175.00<br>175.00            | 3811 Brookview Rd.<br>T-03-56-190-011<br>RECREATION CENTER                  | Budget       | Aprv   | 111 | 1    |
|                   |                        |                                   |                             |   |              |        |     |      |
| 23-01723          | 07/27/23               | 1 BUCKETS BBALL CAMP REFUND       | 175.00<br>175.00            | 1248 Porter Ave.<br>T-03-56-190-011<br>RECREATION CENTER                    | Budget       | Aprv   | 112 | 1    |
|                   |                        |                                   |                             |   |              |        |     |      |
| 23-01665          | 07/21/23               | 1 NW SOCCER CAMP COACH            | 500.00                      | 310 E ST LOUIS AVE<br>T-03-56-190-011<br>RECREATION CENTER                  | Budget       | Aprv   | 60  | 1    |
| 23-01665          | 07/21/23               | 2 NW SOCCER CAMP COACH            | 500.00<br>1,000.00          | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 61  | 1    |
|                   |                        |                                   |                             |   |              |        |     |      |
| checks:           | <u>Count</u><br>70     | <u>Line Items</u><br>117          | <u>Amount</u><br>447,921.36 |   |              |        |     |      |

There are NO errors or warnings in this listing.

| Totals by Year-Fund |      |              |               |           |            |
|---------------------|------|--------------|---------------|-----------|------------|
| Fund Description    | Fund | Budget Total | Revenue Total | G/L Total | Total      |
|                     | 3-01 | 425,260.04   | 0.00          | 0.00      | 425,260.04 |
|                     | T-03 | 19,196.52    | 0.00          | 0.00      | 19,196.52  |
| Total of All Funds: |      | 444,456.56   | 0.00          | 0.00      | 444,456.56 |

| Project Description    | Project No. | Project Total   |
|------------------------|-------------|-----------------|
| 500 ATLANTIC AVENUE    | P-22-7-1    | 956.80          |
| 211 E 16TH AVENUE      | P-23-3-1    | 252.00          |
| 300 W SPRUCE AVENUE    | P-23-4-1    | 406.00          |
| 221 W 19TH AVENUE      | P-23-5-2    | 28.00           |
| 139 1ST AVE            | Z-21-9-1    | 1,416.00        |
| 431 E 25TH STREET      | Z-22-11-1   | 406.00          |
| Total of All Projects: |             | <u>3,464.80</u> |

G/L Posting Summary

| Account             | Description                          | Debits            | Credits           |
|---------------------|--------------------------------------|-------------------|-------------------|
| 3-01-101-01-100-011 | CASH-CURRENT FUND                    | 0.00              | 425,260.04        |
| 3-01-201-20-000-000 | CURRENT YEAR APPROPRIATIONS          | 424,266.78        | 0.00              |
| 3-01-205-55-101-002 | TAX OVERPAYMENTS                     | <u>993.26</u>     | <u>0.00</u>       |
|                     | Totals for Fund 3-01 :               | 425,260.04        | 425,260.04        |
| 3-03-101-01-000-012 | CASH-DEVELOPER DEPOSITS              | 0.00              | 3,464.80          |
| 3-03-101-01-000-024 | CASH - RECREATION CTR TRUST FD       | 0.00              | 14,728.42         |
| 3-03-101-01-000-026 | CASH - HEREFORD LIGHTHOUSE FD        | 0.00              | 146.00            |
| 3-03-101-01-000-027 | CASH-RECREATION TRUST-JR LIFEGUARDS  | 0.00              | 4,322.10          |
| 3-03-286-56-856-801 | RESERVE FOR DEVELOPERS DEPOSIT       | 3,464.80          | 0.00              |
| 3-03-286-56-862-801 | RESERVE FOR RECREATION CTR           | 14,728.42         | 0.00              |
| 3-03-286-56-863-801 | RESERVE FOR HEREFORD LIGHTHSE        | 146.00            | 0.00              |
| 3-03-286-56-863-804 | RESERVE FOR RECREATION-JR LIFEGUARDS | <u>4,322.10</u>   | <u>0.00</u>       |
|                     | Totals for Fund 3-03 :               | 22,661.32         | 22,661.32         |
|                     | Grand Total:                         | <u>447,921.36</u> | <u>447,921.36</u> |

Batch Id: RB2 Batch Type: C Batch Date: 08/01/23 Checking Account: CREST G/L Credit: Budget G/L Credit  
Generate Direct Deposit: Y

| Check No.<br>PO # | Check Date<br>Enc Date | Vendor # Name<br>Item Description | Payment Amt     | Street 1 of Address to be printed on Check<br>Charge Account<br>Description | Account Type | Status | Seq | Acct |
|-------------------|------------------------|-----------------------------------|-----------------|---|--------------|--------|-----|------|
| Dir Dep           | 08/01/23               | 01434 AUTUMN CONWAY               |                 | 2 EAST BROOK HILL CT  |              |        |     |      |
| 23-01643          | 07/19/23               | 1 NW SOCCER CAMP COACH            | 500.00          | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 50  | 1    |
| 23-01643          | 07/19/23               | 2 NW SOCCER CAMP COACH            | 525.00          | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 51  | 1    |
|                   |                        |                                   | <u>1,025.00</u> |   |              |        |     |      |
| Dir Dep           | 08/01/23               | 01465 JOHN ADAIR                  |                 | 3013 Derry Place  |              |        |     |      |
| 23-01644          | 07/19/23               | 1 NW SOCCER CAMP TRAINER          | 625.00          | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 52  | 1    |
| 23-01644          | 07/19/23               | 2 NW SOCCER CAMP TRAINER          | 625.00          | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 53  | 1    |
|                   |                        |                                   | <u>1,250.00</u> |   |              |        |     |      |
| Dir Dep           | 08/01/23               | 02756 Rebecca Benichou            |                 | 425 East 9th Avenue   |              |        |     |      |
| 23-01693          | 07/25/23               | 1 BUCKETS BBALL CAMP COACH        | 400.00          | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 92  | 1    |
|                   |                        |                                   | <u>400.00</u>   |   |              |        |     |      |
| Dir Dep           | 08/01/23               | 02757 Daniel Benichou             |                 | 425 East 9th Avenue   |              |        |     |      |
| 23-01691          | 07/25/23               | 1 BUCKETS BBALL CAMP COACH        | 400.00          | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 90  | 1    |
|                   |                        |                                   | <u>400.00</u>   |   |              |        |     |      |
| Dir Dep           | 08/01/23               | 03370 CAROLYN COLLIER             |                 |   |              |        |     |      |
| 23-01620          | 07/19/23               | 1 YOGA FLOW INSTRUCTOR            | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 6   | 1    |
| 23-01620          | 07/19/23               | 2 SLOW FLOW YOGA INSTRUCTOR       | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 7   | 1    |
| 23-01620          | 07/19/23               | 3 YOGA SCULPT INSTRUCTOR          | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 8   | 1    |
| 23-01620          | 07/19/23               | 4 YOGA FLOW INSTRUCTOR            | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 9   | 1    |
| 23-01620          | 07/19/23               | 5 YOGA FLOW INSTRUCTOR            | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 10  | 1    |
| 23-01620          | 07/19/23               | 6 SLOW FLOW YOGA INSTRUCTOR       | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 11  | 1    |
| 23-01620          | 07/19/23               | 7 SLOW FLOW YOGA INSTRUCTOR       | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 12  | 1    |
| 23-01620          | 07/19/23               | 8 GO W/ THE FLOW YOGA INSTRUCTOR  | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 13  | 1    |
| 23-01620          | 07/19/23               | 9 GO W/ THE FLOW YOGA INSTRUCTOR  | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 14  | 1    |
| 23-01620          | 07/19/23               | 10 CHILL OUT YOGA INSTRUCTOR      | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 15  | 1    |
| 23-01620          | 07/19/23               | 11 YOGA SCULPT INSTRUCTOR         | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 16  | 1    |
| 23-01620          | 07/19/23               | 12 GO W/ THE FLOW YOGA INSTRUCTOR | 40.00           | T-03-56-190-011<br>RECREATION CENTER  | Budget       | Aprv   | 17  | 1    |

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CITY OF NORTH WILDWOOD  
Check Payment Batch Verification Listing

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| Check No. | Check Date | Vendor # | Name                           | Payment Amt | Street 1 of Address to be printed on Check | Charge Account | Account Type | Status | Seq | Acct |
|-----------|------------|----------|--------------------------------|-------------|--|----------------|--------------|--------|-----|------|
| PO #      | Enc Date   | Item     | Description                    |             | Description                                |                |              |        |     |      |
| 23-01620  | 07/19/23   | 13       | GO W/ THE FLOW YOGA INSTRUCTOR | 40.00       | T-03-56-190-011                            | Budget         | Aprv         | 18     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01620  | 07/19/23   | 14       | GO W/ THE FLOW YOGA INSTRUCTOR | 40.00       | T-03-56-190-011                            | Budget         | Aprv         | 19     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01620  | 07/19/23   | 15       | YOGA SCULPT INSTRUCTOR         | 40.00       | T-03-56-190-011                            | Budget         | Aprv         | 20     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 600.00      |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 04216    | STEPHEN DE HORSEY JR           |             | 12 JULIA COURT                             |                |              |        |     |      |
| 23-01669  | 07/21/23   | 1        | POPSICLES FOR SOCCER CAMP      | 112.60      | T-03-56-190-011                            | Budget         | Aprv         | 82     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 112.60      |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 04387    | DAVE GREENLAND                 |             | 122 E Wildwood Ave                         |                |              |        |     |      |
| 23-01710  | 01/03/23   | 1        | Vehicle Maintenance - 3rd Qtr  | 1,500.00    | 3-01-26-290-026                            | Budget         | Aprv         | 99     | 1   |      |
|           |            |          |                                |             | PUB WKS-MAINT OF EQUIPT OVER 1 TON         |                |              |        |     |      |
|           |            |          |                                | 1,500.00    |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 04560    | CHARLSIE DEHORSEY              |             | 12 JULIA COURT                             |                |              |        |     |      |
| 23-01663  | 07/21/23   | 1        | NW SOCCER CAMP COACH 1/2 DAY   | 297.50      | T-03-56-190-011                            | Budget         | Aprv         | 72     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01663  | 07/21/23   | 2        | NW SOCCER CAMP COACH 1/2 DAY   | 297.50      | T-03-56-190-011                            | Budget         | Aprv         | 73     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 595.00      |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 04741    | Daniel Ortiz                   |             | 1332 W. Central Ave                        |                |              |        |     |      |
| 23-01635  | 07/19/23   | 1        | SUMMER BBALL REFEREE - MEN'S   | 90.00       | T-03-56-190-011                            | Budget         | Aprv         | 44     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01635  | 07/19/23   | 2        | SUMMER BBALL REFEREE - MEN'S   | 90.00       | T-03-56-190-011                            | Budget         | Aprv         | 45     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 180.00      |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 05177    | BRYAN EKSTROM                  |             | 311 Main St.                               |                |              |        |     |      |
| 23-01658  | 07/21/23   | 1        | NW SOCCER CAMP COACH 1/2 DAYS  | 350.00      | T-03-56-190-011                            | Budget         | Aprv         | 63     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 350.00      |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 06281    | SETH FUSCELLARO                |             | 200 EAST ROSEMARY ROAD                     |                |              |        |     |      |
| 23-01708  | 01/03/23   | 1        | Public Defender - 3rd Qtr      | 4,400.00    | 3-01-43-495-027                            | Budget         | Aprv         | 97     | 1   |      |
|           |            |          |                                |             | PUB DEF - PROF SERVICES                    |                |              |        |     |      |
|           |            |          |                                | 4,400.00    |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 06881    | Imene Fathi                    |             | 115 Seaview Court                          |                |              |        |     |      |
| 23-01688  | 07/25/23   | 1        | BUCKETS BBALL CAMP COACH       | 425.00      | T-03-56-190-011                            | Budget         | Aprv         | 89     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 425.00      |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 07330    | RONALD GELZUNAS                |             | 7009 Park Ave                              |                |              |        |     |      |
| 23-01707  | 01/03/23   | 1        | Municipal Prosecutor - 3rd Qtr | 10,226.75   | 3-01-25-275-027                            | Budget         | Aprv         | 96     | 1   |      |
|           |            |          |                                |             | MUNIC PROS - PROF SERVICES                 |                |              |        |     |      |
|           |            |          |                                | 10,226.75   |  |                |              |        |     |      |

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CITY OF NORTH WILDWOOD  
Check Payment Batch Verification Listing

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| Check No. | Check Date | Vendor # | Name                           | Payment Amt | Street 1 of Address to be printed on Check | Charge Account | Account Type | Status | Seq | Acct |
|-----------|------------|----------|--------------------------------|-------------|--|----------------|--------------|--------|-----|------|
| PO #      | Enc Date   | Item     | Description                    |             | Description                                |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 07854    | Alexandra Gonzalez             |             | 2405 Delaware Ave                          |                |              |        |     |      |
| 23-01684  | 07/25/23   | 1        | Lunch Reimbursement            | 27.78       | 3-01-25-240-058                            | Budget         | Aprv         | 83     | 1   |      |
|           |            |          |                                | 27.78       | POLICE-OTHER EQUIP & SUPPLIES              |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 08082    | KERRY HALL                     |             | 509 W. MULBERRY AVENUE                     |                |              |        |     |      |
| 23-01633  | 07/19/23   | 1        | BBALL LEAGUE REF 6TH-8TH GRADE | 175.00      | T-03-56-190-011                            | Budget         | Aprv         | 40     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01633  | 07/19/23   | 2        | BBALL LEAGUE REF 6TH-8TH GRADE | 175.00      | T-03-56-190-011                            | Budget         | Aprv         | 41     | 1   |      |
|           |            |          |                                | 350.00      | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 08256    | SKIP HOPPING                   |             | 109 W TOLEDO AVENUE                        |                |              |        |     |      |
| 23-01655  | 07/21/23   | 1        | MEN'S BBALL LEAGUE REFEREE     | 90.00       | T-03-56-190-011                            | Budget         | Aprv         | 57     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01655  | 07/21/23   | 2        | MEN'S BBALL LEAGUE REFEREE     | 90.00       | T-03-56-190-011                            | Budget         | Aprv         | 58     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01655  | 07/21/23   | 3        | MEN'S BBALL LEAGUE REFEREE     | 90.00       | T-03-56-190-011                            | Budget         | Aprv         | 59     | 1   |      |
|           |            |          |                                | 270.00      | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 08288    | WILLIAM T HELM                 |             | 313 W 20TH AVE                             |                |              |        |     |      |
| 23-01664  | 07/21/23   | 1        | NW SOCCER CAMP TRAINER         | 575.00      | T-03-56-190-011                            | Budget         | Aprv         | 74     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01664  | 07/21/23   | 2        | NW SOCCER CAMP TRAINER         | 575.00      | T-03-56-190-011                            | Budget         | Aprv         | 75     | 1   |      |
|           |            |          |                                | 1,150.00    | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 09107    | JARED M. IRWIN                 |             | 3125 S Route 9                             |                |              |        |     |      |
| 23-01662  | 07/21/23   | 1        | NW SOCCER CAMP TRAINER         | 575.00      | T-03-56-190-011                            | Budget         | Aprv         | 70     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01662  | 07/21/23   | 2        | NW SOCCER CAMP TRAINER         | 575.00      | T-03-56-190-011                            | Budget         | Aprv         | 71     | 1   |      |
|           |            |          |                                | 1,150.00    | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 09123    | Ian Johnson                    |             | 3874 Jonny Circle                          |                |              |        |     |      |
| 23-01659  | 07/21/23   | 1        | NW SOCCER CAMP COACH           | 500.00      | T-03-56-190-011                            | Budget         | Aprv         | 64     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01659  | 07/21/23   | 2        | NW SOCCER CAMP COACH           | 500.00      | T-03-56-190-011                            | Budget         | Aprv         | 65     | 1   |      |
|           |            |          |                                | 1,000.00    | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 10482    | Joseph Reteneller              |             | 806 Densmore Road                          |                |              |        |     |      |
| 23-01661  | 07/21/23   | 1        | NW SOCCER CAMP TRAINER         | 550.00      | T-03-56-190-011                            | Budget         | Aprv         | 68     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01661  | 07/21/23   | 2        | NW SOCCER CAMP TRAINER         | 550.00      | T-03-56-190-011                            | Budget         | Aprv         | 69     | 1   |      |
|           |            |          |                                | 1,100.00    | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 10579    | JOSHUA PHILLIPS                |             | 1352 EYRE                                  |                |              |        |     |      |
| 23-01645  | 07/19/23   | 1        | NW SOCCER CAMP TRAINER 1/2 DAY | 350.00      | T-03-56-190-011                            | Budget         | Aprv         | 54     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |



July 27, 2023  
11:42 AM

CITY OF NORTH WILDWOOD  
Check Payment Batch Verification Listing

Page No: 4

| Check No. | Check Date | Vendor # | Name                           | Payment Amt | Street 1 of Address to be printed on Check | Charge Account | Account Type | Status | Seq | Acct |
|-----------|------------|----------|--------------------------------|-------------|--|----------------|--------------|--------|-----|------|
| PO #      | Enc Date   | Item     | Description                    |             |  | Description    |              |        |     |      |
|           |            |          |                                | 350.00      |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 10664    | JAXON TOMLIN                   |             | 8504 SEAVIEW AVE                           |                |              |        |     |      |
| 23-01666  | 07/21/23   | 1        | NW SOCCER CAMP TRAINER         | 575.00      | T-03-56-190-011                            | Budget         | Aprv         | 76     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01666  | 07/21/23   | 2        | NW SOCCER CAMP TRAINER         | 575.00      | T-03-56-190-011                            | Budget         | Aprv         | 77     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 1,150.00    |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 11085    | KELTEX IMPRINTED APPAREL INC   |             | 428A WOODBINE OCEANVIEW RD                 |                |              |        |     |      |
| 23-01718  | 07/27/23   | 1        | CHRISTMAS IN JULY SHIRTS(ATIR) | 1,758.50    | T-03-56-190-011                            | Budget         | Aprv         | 100    | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01718  | 07/27/23   | 2        | AROUND THE ISLAND ROW SHIRTS   | 583.50      | T-03-56-190-011                            | Budget         | Aprv         | 101    | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01718  | 07/27/23   | 3        | AROUND THE ISLAND ROW L/S      | 3,984.00    | T-03-56-190-011                            | Budget         | Aprv         | 102    | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01718  | 07/27/23   | 4        | AROUND THE ISLAND ROW TANKS    | 3,598.00    | T-03-56-190-011                            | Budget         | Aprv         | 103    | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01718  | 07/27/23   | 5        | AROUND THE ISLAND ROW TEES     | 2,873.00    | T-03-56-190-011                            | Budget         | Aprv         | 104    | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 12,797.00   |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 11425    | Katherine Dougherty            |             | 168 Forest Trail Drive                     |                |              |        |     |      |
| 23-01641  | 07/19/23   | 1        | NW SOCCER CAMP COACH           | 500.00      | T-03-56-190-011                            | Budget         | Aprv         | 46     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01641  | 07/19/23   | 2        | NW SOCCER CAMP COACH           | 500.00      | T-03-56-190-011                            | Budget         | Aprv         | 47     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 1,000.00    |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 12433    | LORI RYAN                      |             | 650 STREAM RIDGE LANE                      |                |              |        |     |      |
| 23-01621  | 07/19/23   | 1        | BBALL LEAGUE REF 6TH-8TH GRADE | 175.00      | T-03-56-190-011                            | Budget         | Aprv         | 21     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01621  | 07/19/23   | 2        | BBALL LEAGUE REF HIGH SCHOOL   | 160.00      | T-03-56-190-011                            | Budget         | Aprv         | 22     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01621  | 07/19/23   | 3        | BBALL LEAGUE REF 5TH-8TH GRADE | 175.00      | T-03-56-190-011                            | Budget         | Aprv         | 23     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01621  | 07/19/23   | 4        | BBALL LEAGUE REF HIGH SCHOOL   | 160.00      | T-03-56-190-011                            | Budget         | Aprv         | 24     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01621  | 07/19/23   | 5        | BBALL LEAGUE REF 6TH-8TH GRADE | 175.00      | T-03-56-190-011                            | Budget         | Aprv         | 25     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 845.00      |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 12877    | Luke Centinaro                 |             | 2130 Chestnut Lane                         |                |              |        |     |      |
| 23-01668  | 07/21/23   | 1        | NW SOCCER CAMPE COACH          | 500.00      | T-03-56-190-011                            | Budget         | Aprv         | 80     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01668  | 07/21/23   | 2        | NW SOCCER CAMPE COACH          | 500.00      | T-03-56-190-011                            | Budget         | Aprv         | 81     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
|           |            |          |                                | 1,000.00    |  |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 130035   | LEONA MACRINA                  |             | 430 W BURK AVE                             |                |              |        |     |      |
| 23-01656  | 07/21/23   | 1        | NW SOCCER CAMP TRAINER         | 575.00      | T-03-56-190-011                            | Budget         | Aprv         | 60     | 1   |      |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |

| Check No.<br>PO # | Check Date<br>Enc Date | Vendor # Name<br>Item Description    | Payment Amt | Street 1 of Address to be printed on Check<br>Charge Account Description | Account Type | Status | Seq | Acct |
|-------------------|------------------------|--------------------------------------|-------------|--|--------------|--------|-----|------|
|                   |                        |                                      | 575.00      |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 13175 EDWARD MAGAN                   |             | 121 WEST SWEET BRIAR ROAD  |              |        |     |      |
| 23-01630          | 07/19/23               | 1 BBALL LEAGUE REF 6TH-8TH GRADE     | 175.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 36  | 1    |
| 23-01630          | 07/19/23               | 2 BBALL LEAGUE REFEREE - MEN'S       | 90.00       | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 37  | 1    |
| 23-01630          | 07/19/23               | 3 BBALL LEAGUE REF 6TH-8TH GRADE     | 175.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 38  | 1    |
| 23-01630          | 07/19/23               | 4 BBALL LEAGUE REFEREE - MEN'S       | 90.00       | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 39  | 1    |
|                   |                        |                                      | 530.00      |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 13410 MAUREEN SWEENEY                |             | 633 PARMENTIER RD  |              |        |     |      |
| 23-01657          | 07/21/23               | 1 NW SOCCER CAMP COACH               | 500.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 61  | 1    |
| 23-01657          | 07/21/23               | 2 NW SOCCER CAMP COACH               | 500.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 62  | 1    |
|                   |                        |                                      | 1,000.00    |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 13432 MCSHAFFRY MASONRY CONTRACTORS  |             | 967 TECUMSEH RD  |              |        |     |      |
| 23-01618          | 07/19/23               | 1 Est for Moores Inlet               | 3,250.00    | 3-01-26-310-021<br>BLDGS & GRNDS - CONTR SVCS                            | Budget       | Aprv   | 5   | 1    |
|                   |                        |                                      | 3,250.00    |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 13633 MASTER DJ AND SOUND            |             | PO BOX 2381  |              |        |     |      |
| 23-01695          | 07/25/23               | 1 Sound Check #1 Summer Concerts     | 4,437.50    | T-03-56-200-011<br>TOURIST DEVELOPMENT COMMISSION                        | Budget       | Aprv   | 93  | 1    |
|                   |                        |                                      | 4,437.50    |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 13934 JOHN P MCCORMICK JR            |             | 6 carter braxton building  |              |        |     |      |
| 23-01626          | 07/19/23               | 1 BBALL LEAGUE REF 3RD-5TH GRADE     | 150.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 26  | 1    |
| 23-01626          | 07/19/23               | 2 BBALL LEAGUE REF 3RD-5TH GRADE     | 150.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 27  | 1    |
| 23-01626          | 07/19/23               | 3 BBALL LEAGUE REF 3RD-5TH GRADE     | 150.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 28  | 1    |
| 23-01626          | 07/19/23               | 4 BBALL LEAGUE REF 3RD-5TH GRADE     | 150.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 29  | 1    |
| 23-01626          | 07/19/23               | 5 BBALL LEAGUE REF 3RD-5TH GRADE     | 150.00      | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 30  | 1    |
|                   |                        |                                      | 750.00      |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 14121 NORTH WILDWOOD BD OF EDUCATION |             | 1201 ATLANTIC AVENUE   |              |        |     |      |
| 23-01604          | 07/18/23               | 1 School Tax - July 2023             | 50.17       | 3-01-55-100-006<br>LOCAL SCHOOL TAX                                      | Budget       | Aprv   | 1   | 1    |
| 23-01604          | 07/18/23               | 2 School Tax - July 2023             | 638,260.00  | 3-01-55-100-006<br>LOCAL SCHOOL TAX                                      | Budget       | Aprv   | 2   | 1    |
|                   |                        |                                      | 638,310.17  |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 14392 NEHMAD DAVIS & GOLDSTIEN PC    |             | 4030 OCEAN HEIGHTS AVE   |              |        |     |      |
| 23-01614          | 07/19/23               | 1 Seaport Pier Redevelopment         | 420.00      | 3-01-20-155-027  | Budget       | Aprv   | 4   | 1    |

| Check No. | Check Date | Vendor # | Name                           | Payment Amt | Street 1 of Address to be printed on Check | Charge Account | Account Type | Status | Seq | Acct |
|-----------|------------|----------|--------------------------------|-------------|--|----------------|--------------|--------|-----|------|
| PO #      | Enc Date   | Item     | Description                    |             | Description                                |                |              |        |     |      |
|           |            |          |                                | 420.00      | LEGAL SERV-PROF SERVICES                   |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 15245    | ONE CALL CONCEPTS, INC         |             | 7223 PARKWAY DRIVE                         |                |              |        |     |      |
| 23-01613  | 07/19/23   | 1        | Locates - June                 | 80.08       | 3-01-26-290-058                            | Budget         | Aprv         |        | 3   | 1    |
|           |            |          |                                | 80.08       | PUB WKS - OTHER EQUIP & SUPPL              |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 17023    | JOE QUATTRONE                  |             | 1402 RTE 9 S Lot #93                       |                |              |        |     |      |
| 23-01709  | 01/03/23   | 1        | Events Coordinator - 3rd Qtr   | 4,350.00    | 3-01-31-420-200                            | Budget         | Aprv         |        | 98  | 1    |
|           |            |          |                                | 4,350.00    | CEL OF PE - EVENTS                         |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 190056   | MICHAEL RACHUBINSKI            |             | 1426 S. 3RD STREET                         |                |              |        |     |      |
| 23-01692  | 07/25/23   | 1        | BUCKETS BBALL CAMP COACH       | 400.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 91  | 1    |
|           |            |          |                                | 400.00      | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 19517    | KIMBERLY STOCKS                |             | 6712 CINNAMINSON COURT                     |                |              |        |     |      |
| 23-01628  | 07/19/23   | 1        | BBALL LEAGUE REF 3RD-5TH GRADE | 150.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 31  | 1    |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01628  | 07/19/23   | 2        | BBALL LEAGUE REF 3RD-5TH GRADE | 150.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 32  | 1    |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01628  | 07/19/23   | 3        | BBALL LEAGUE REF 3RD-5TH GRADE | 150.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 33  | 1    |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01628  | 07/19/23   | 4        | BBALL LEAGUE REF 3RD-5TH GRADE | 150.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 34  | 1    |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01628  | 07/19/23   | 5        | BBALL LEAGUE REF 3RD-5TH GRADE | 150.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 35  | 1    |
|           |            |          |                                | 750.00      | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 19689    | STARR GENERAL CONTRACTORS      |             | 3017 DELSEA DR                             |                |              |        |     |      |
| 23-01649  | 07/19/23   | 1        | May 2023                       | 3,655.50    | 3-01-26-290-052                            | Budget         | Aprv         |        | 55  | 1    |
|           |            |          |                                |             | PUB WKS-JANITORIAL EQUIP                   |                |              |        |     |      |
| 23-01650  | 07/19/23   | 1        | Portable Toilets - BBQE Fest   | 3,112.00    | 3-01-26-290-052                            | Budget         | Aprv         |        | 56  | 1    |
|           |            |          |                                | 6,767.50    | PUB WKS-JANITORIAL EQUIP                   |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 20463    | THOMAS J RAIMO                 |             | 103 W. 26th Ave                            |                |              |        |     |      |
| 23-01686  | 07/25/23   | 1        | SUMMER BBALL LEAGUE REF - HS   | 160.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 84  | 1    |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01686  | 07/25/23   | 2        | SUMMER BBALL LEAGUE REF - HS   | 160.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 85  | 1    |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01686  | 07/25/23   | 3        | SUMMER BBALL LEAGUE REF - HS   | 160.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 86  | 1    |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01686  | 07/25/23   | 4        | SUMMER BBALL LEAGUE REF - 6-8  | 175.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 87  | 1    |
|           |            |          |                                |             | RECREATION CENTER                          |                |              |        |     |      |
| 23-01686  | 07/25/23   | 5        | SUMMER BBALL LEAGUE REF - 6-8  | 160.00      | T-03-56-190-011                            | Budget         | Aprv         |        | 88  | 1    |
|           |            |          |                                | 815.00      | RECREATION CENTER                          |                |              |        |     |      |
| Dir Dep   | 08/01/23   | 23071    | WILLIAMS SCOTSMAN, INC         |             | PO BOX 91975                               |                |              |        |     |      |

| Check No.<br>PO # | Check Date<br>Enc Date | Vendor # Name<br>Item Description | Payment Amt     | Street 1 of Address to be printed on Check<br>Charge Account Description | Account Type | Status | Seq | Acct |
|-------------------|------------------------|-----------------------------------|-----------------|--|--------------|--------|-----|------|
| 23-01699          | 07/26/23               | 1 Trailer Rental - July 2023      | 5,120.00        | 3-01-26-315-025<br>FLEET MAINT - LEASE PAYMENTS                          | Budget       | Aprv   | 94  | 1    |
| 23-01699          | 07/26/23               | 2 Trailer Rental - July 2023      | 553.30          | 3-01-26-315-025<br>FLEET MAINT - LEASE PAYMENTS                          | Budget       | Aprv   | 95  | 1    |
|                   |                        |                                   | <u>5,673.30</u> |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 23748 William Rubin               |                 | 3409 Susquahanna Ave   |              |        |     |      |
| 23-01634          | 07/19/23               | 1 BBALL LEAGUE REF 6TH-8TH GRADE  | 175.00          | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 42  | 1    |
| 23-01634          | 07/19/23               | 2 BBALL LEAGUE REF 6TH-8TH GRADE  | 175.00          | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 43  | 1    |
|                   |                        |                                   | <u>350.00</u>   |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 31201 GRACE RETENELLER            |                 | 806 DEBSNIRE RD  |              |        |     |      |
| 23-01667          | 07/21/23               | 1 NW SOCCER CAMP COACH            | 500.00          | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 78  | 1    |
| 23-01667          | 07/21/23               | 2 NW SOCCER CAMP COACH            | 500.00          | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 79  | 1    |
|                   |                        |                                   | <u>1,000.00</u> |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 31202 ANNALIESE STEINER           |                 | 10932 KIPLING LN   |              |        |     |      |
| 23-01642          | 07/19/23               | 1 NW SOCCER CAMP COACH            | 500.00          | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 48  | 1    |
| 23-01642          | 07/19/23               | 2 NW SOCCER CAMP COACH            | 500.00          | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 49  | 1    |
|                   |                        |                                   | <u>1,000.00</u> |  |              |        |     |      |
| Dir Dep           | 08/01/23               | 31203 JASON GONZALEZ-MERICHE      |                 | 7 School Lane  |              |        |     |      |
| 23-01660          | 07/21/23               | 1 NW SOCCER CAMP COACH            | 500.00          | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 66  | 1    |
| 23-01660          | 07/21/23               | 2 NW SOCCER CAMP COACH            | 500.00          | T-03-56-190-011<br>RECREATION CENTER                                     | Budget       | Aprv   | 67  | 1    |
|                   |                        |                                   | <u>1,000.00</u> |  |              |        |     |      |

|                 |              |                   |               |
|-----------------|--------------|-------------------|---------------|
|                 | <u>Count</u> | <u>Line Items</u> | <u>Amount</u> |
| Direct Deposit: | 45           | 104               | 715,112.68    |

There are NO errors or warnings in this listing.

| Totals by Year-Fund |      |                   |               |             |                   |
|---------------------|------|-------------------|---------------|-------------|-------------------|
| Fund Description    | Fund | Budget Total      | Revenue Total | G/L Total   | Total             |
|                     | 3-01 | 675,005.58        | 0.00          | 0.00        | 675,005.58        |
|                     | T-03 | 40,107.10         | 0.00          | 0.00        | 40,107.10         |
| Total of All Funds: |      | <u>715,112.68</u> | <u>0.00</u>   | <u>0.00</u> | <u>715,112.68</u> |

G/L Posting Summary

| Account             | Description                    | Debits            | Credits           |
|---------------------|--------------------------------|-------------------|-------------------|
| 3-01-101-01-100-011 | CASH-CURRENT FUND              | 0.00              | 675,005.58        |
| 3-01-201-20-000-000 | CURRENT YEAR APPROPRIATIONS    | 36,695.41         | 0.00              |
| 3-01-207-55-000-000 | SCHOOL TAX PAYABLE             | <u>638,310.17</u> | <u>0.00</u>       |
|                     | Totals for Fund 3-01 :         | 675,005.58        | 675,005.58        |
| 3-03-101-01-000-024 | CASH - RECREATION CTR TRUST FD | 0.00              | 35,669.60         |
| 3-03-101-01-000-028 | CASH - TOURIST DEV COMMISSION  | 0.00              | 4,437.50          |
| 3-03-286-56-862-801 | RESERVE FOR RECREATION CTR     | 35,669.60         | 0.00              |
| 3-03-286-56-864-801 | RESERVE FOR TOURIST DEVLPMT    | <u>4,437.50</u>   | <u>0.00</u>       |
|                     | Totals for Fund 3-03 :         | 40,107.10         | 40,107.10         |
|                     | Grand Total:                   | <u>715,112.68</u> | <u>715,112.68</u> |

Batch Id: RB      Batch Type: C      Batch Date: 07/26/23      Checking Account: CREST      G/L Credit: Budget G/L Credit  
Generate Direct Deposit: N

| Check No. | Check Date | Vendor # | Name                           | Payment Amt     | Street 1 of Address to be printed on Check | Charge Account | Account Type | Status | Seq | Acct |
|-----------|------------|----------|--------------------------------|-----------------|--|----------------|--------------|--------|-----|------|
| PO #      | Enc Date   | Item     | Description                    |                 | Description                                |                |              |        |     |      |
|           | 07/26/23   | 15239    | ALLEGRA MARKETING,PRINT & MAIL |                 | 533 ROUTE US 9 S.                          |                |              |        |     |      |
| 23-01702  | 07/26/23   | 1        | Postage for Tax Bills          | 2,592.40        | 3-01-20-120-022                            |                | Budget       | Aprv   | 1   | 1    |
|           |            |          |                                | <u>2,592.40</u> | MUN CLK - POSTAGE                          |                |              |        |     |      |

|         | Count | Line Items | Amount   |
|---------|-------|------------|----------|
| checks: | 1     | 1          | 2,592.40 |

There are NO errors or warnings in this listing.



| Totals by Year-Fund |      |                 |               |             |                 |
|---------------------|------|-----------------|---------------|-------------|-----------------|
| Fund Description    | Fund | Budget Total    | Revenue Total | G/L Total   | Total           |
|                     | 3-01 | 2,592.40        | 0.00          | 0.00        | 2,592.40        |
| Total of All Funds: |      | <u>2,592.40</u> | <u>0.00</u>   | <u>0.00</u> | <u>2,592.40</u> |

| G/L Posting Summary |                             |                 |                 |
|---------------------|-----------------------------|-----------------|-----------------|
| Account             | Description                 | Debits          | Credits         |
| 3-01-101-01-100-011 | CASH-CURRENT FUND           | 0.00            | 2,592.40        |
| 3-01-201-20-000-000 | CURRENT YEAR APPROPRIATIONS | <u>2,592.40</u> | <u>0.00</u>     |
|                     | Grand Total:                | <u>2,592.40</u> | <u>2,592.40</u> |