

## MYRTLE BEACH SHRINE CLUB "SMOKE ON THE BEACH"

- Applicant: Rusty Watson  
Beachcombers Shrine Club
- When: April 2 - 3, 2021
- Time: 8:00 a.m. - 11:00 p.m.
- Where: Burroughs & Chapin Pavilion Place
- Set-up: April 2, 2021
- Take Down: April 3, 2021  
BBQ contest with beer garden
- Expected Attendance: 2000 People
- Road Closures: None
- SE Committee Vote: Approved

APPLICATION FOR SPECIAL EVENTS PERMIT  
Within the City of Myrtle Beach, SC  
(Please print legibly or type)  
(Must be submitted 30 days prior to the event)

1. Name of Activity/Event: MBSC Snake on the Beach
2. Type and Purpose of Event: BBQ Competition to benefit Myrtle Beach Shrine Club and Omar Shriners
3. Location of Event: 9th Ave. N. and Ocean Blvd
4. Organization: Myrtle Beach Shrine Club and Omar Shrine
5. Applicant: Myrtle Beach Shrine Club
6. Rusty Watson  
Primary contact person Alternate contact person's name  
P.O. Box 786  
Myrtle Beach, SC 29578  
Primary address Alternate address  
843-685-5540  
Primary telephone/fax number Alternate telephone/fax number  
arustyshrine@yahoo.com  
Primary email address Alternate email address
7. Date(s) of event: 4/2/2021-4/3/2021 Hours of operation: 8AM - Until
8. Date of set-up: 4/2/2021 Take Down Completed By: 4/3/2021
9. Expected attendance: 2000
10. Charitable Benefactor (if applicable): Shriners International  
Is group a non-profit organization: ☒ Yes ☐ No If yes, attach copy of 501 IRS letter. ✓  
If no, what portion of proceeds will go to charitable organizations: ?
11. How will you publicize the event?  
SBN Network, Website, Flyers, press, social media
12. Are public funds being used? ☐ Yes ☒ No
13. Does the applicant intend to gate the event and charge an admission fee: ☒ Yes ☐ No  
If so, please detail the amount of the fee and describe as to how the event will be gated:  
with barricades and policed by off duty Myrtle Beach law enforcement personnel
14. Entertainment Description (show on site plan): Band and DJ
- Speakers/microphone needed: ☐ Yes ☒ No Electrical hook-ups needed: ☒ Yes ☐ No
15. Is a fireworks display planned in conjunction with this event? ☐ Yes ☒ No  
(Fireworks displays require a SC State Permit obtained by a SC Licensed Pyrotechnician.)

The fee of approximately \$300 - \$600 is based upon when the permit is issued.  
(15 or more days prior to the event \$300; 14 days or less \$600).

16. To what extent has the applicant communicated with adjacent property owners, and what responses have been received? Kick off date 2018 with no complaints from adjacent business owners.  
We observe the rules of the city and do not leave the site disorderly.

17. Signage: Will any signs, banners or pennants be posted or hung? Describe the proposed location(s) and include specific details on site plan. \_\_\_\_\_

Self supporting banners

18. Parking requirements:(show on site plan): No. of spaces available \_\_\_\_\_ No. of handicap \_\_\_\_\_  
If required, has permission been granted for use of Event location by entity other than the City of Myrtle Beach? ☐ Yes ☒ No If yes, please attached proof of authorization.

19. Alcohol:

Will alcoholic beverages be made available to the public? ☒ Yes ☐ No

If yes, provide the following information:

What type of alcohol will be made available? ☐ Spirituous Liquor ☒ Beer ☐ Wine

List the exact locations and times for alcohol sales:

Location: In gated area on site map Times: Fri - 6pm-10pm Sat Noon-6pm

Have the City and State permits been applied for and/or obtained? ☐ Yes ☐ No

\*Permits approved for the events will be amended if ABC permits are not granted. Applicants are required to provide proof of issuance before the event.

Do the alcohol vendors presently hold a license for on-premise consumption? ☐ Yes ☐ No

If so, Name \_\_\_\_\_ Address \_\_\_\_\_  
Telephone \_\_\_\_\_

If alcohol will be sold or given away, and the vendor is not a license holder for on-site consumption, list the person(s) who will apply for the alcoholic beverage license:

If so, Name Rusty Watson Omar Address P.O. Box 784  
Telephone 843-685-5540 Myrtle Beach, SC 29578

The applicant agrees that all alcohol sales at the event will cease no later than one hour before the scheduled end of each day of the festival. ☒ Yes ☐ No

20. Parades:

Is there a parade planned with this event? ☐ Yes ☒ No

If yes, please state the day, time, location, and anticipated number of participants, routes, times, staging area, disbanding area, review stand, and alternate dates: \_\_\_\_\_

(If the parade is planned for state or municipal roads, please provide written permission or approval from SCDOT and/or the City of Myrtle Beach.)

21. Vendors:

Will vendors be present at this event? ☒ Yes ☐ No

If yes, describe in detail on a separate sheet the number of vendors involved, specify the goods or services being vended and indicate whether the vendors are specifically contracted or regularly

licensed. Please indicate exact location of vendors on the site plan.

**22. FOOD SERVICE:**

Will food be prepared at this event? ☒ Yes ☐ No

If yes, describe in detail on a separate sheet how the food will be prepared, type and location of cooking appliances and type of fuel to be used for cooking.

Propane, wood and charcoal cookers for  
competition

**23. Prior Events:**

Is this a first time event? ☐ Yes ☒ No

Has this event occurred five (5) or more times in the preceding years? ☐ Yes ☒ No

If so, please list the years: 2017, 2018, 2019

**24. Emergency Medical Services:**

An approved EMS plan is required to receive a permit for the event.

Please attach appropriate documentation (attach additional pages as necessary).

(Call City of Myrtle Beach Fire Department at 918-1109 for questions.)

**25. Security Plan:**

(Call City of Myrtle Beach Police Department at 918-1366 for questions.)

Has the Police Department approved a security plan? ☐ Yes ☒ No

Detail your security plans during event. (attach additional pages as necessary).

(The plan shall specify

- a. The number of POST-certified off-duty law enforcement personnel and private security guards which the applicant plans to hire -- where the number of off-duty law enforcement personnel shall be the same or more than the number of private security guards.
- b. The arrangements the applicant has made for hiring them.
- c. Details of the plan for payment.

If no, you must engage qualified security consultants to provide the Police Department with a security plan for approval. A security plan must be approved in order to receive a permit for this event.

If yes, please attach appropriate documentation.

**26. Cleanup of Event Area:**

Detail your plan to keep site and adjacent public and private property free of trash and debris generated by this activity: Port-o-lets, dumpsters will be utilized with

personnel to police area

If using a private sanitation company, give name, contact person and telephone number: \_\_\_\_\_

Will additional trash receptacles need to be placed in the event area? ☒ Yes ☐ No If Yes, please contact the City of Myrtle Beach Solid Waste Division (843-918-2160), and they will assist in determining the number of receptacles needed as well as the cost for providing the additional service. If this service is used, payment is due five (5) days before the event.

**27. Street Closings:**

(Please attach documents from SCDOT and/or City of Myrtle Beach authorizing this closure.)

Streets to be closed: \_\_\_\_\_

Day/Dates: \_\_\_\_\_

Closing Time: \_\_\_\_\_

Opening Time: \_\_\_\_\_

**28. Insurance:** (Certificate of Insurance to be sent to City of Myrtle Beach Risk Department; for questions call 918-1007.)

- 1) Coverage shall be written on an occurrence basis and provide Premises/Operations: Independent Contractors: Products/Completed Operations: Contractual and Broad Form Property Damage.
- 2) Minimum Limits of Liability will be \$1,000,000 combined single limit per occurrence for bodily injury and property damage.
- 3) The City of Myrtle Beach shall be named as "additional insured" and the policy endorsed to require that the City be provided thirty (30) days written notice of coverage modification or cancellation.
- 4) A certificate of Insurance will be provided to the City ten (10) days prior to the beginning date of the event permitted herein.
- 5) Additional limits or coverages may be required by the Risk Manager to address specific special or unusual hazards.

**29. Special Requirements:**

Are there any special or unusual requirements that may be imposed or created by virtue of the proposed event activity? ☐ Yes ☒ No

If Yes, please explain: \_\_\_\_\_

## **SITE PLAN**

(The site plan must accompany your Special Event application or the application will be considered incomplete and returned to the applicant.)

**Site Plan Size Requirement:**

The City may be able to provide a base map of the area upon request.

Must be presented on 8 1/2" x 11" letter size paper

**Site Plan must include the following:**

- 1) Location and number of all structures with respect to the existing buildings, property lines, roads and walkways, to include
  - ☐ Tents/detail description of size/state if tent is fully or partially enclosed/number of tents; Indicate activity in each tent.
  - ☐ Grandstands/size/capacity
  - ☐ Stage -- include electrical hook-ups and engineer certification
  - ☐ All electrical hook-ups/generators
  - ☐ All speakers/hook-ups
  - ☐ Vendor booths, size and description of goods sold
  - ☐ Refreshment stands
  - ☐ Restroom accommodations (include number of handicap accessible); please advise if you will require a source of potable water.
  - ☐ Tables
  - ☐ Trash and recycling receptacles
  - ☐ Signs with size indicated (must identify all signs visible from public roadway)
  - ☐ Parking areas/include handicap spaces available and number
  - ☐ Vehicle/trailer locations
  - ☐ Perimeter fencing, barricades, barriers, and all entry/exit points.

**Additional applications/licenses or permits required:**

- 1) Tent permit from City Construction Services Department (843-918-1111).
- 2) Business licenses from City Business Office for all vendors (843-918-1151). (The business license form is also available on the City website.
- 3) Liquor license and/or beer/wine license from the State of South Carolina.
- 4) Street closure permits from SCDOT and/or the City of Myrtle Beach.

**REVIEW YOUR APPLICATION PRIOR TO SUBMITTAL !!**

Please fill out the application completely. All applications are considered new and "same as last year" is not an appropriate answer. A complete application includes the required site plan of the correct size and security plans described herein.

By my signature below, I certify that I have actual authority to make this application, and to bind the organization, if any, sponsoring the event, and that I, or the organization, will be financially responsible for any costs or fees that may be imposed for the Event.

Date Submitted: 2/7/2020 Signature of Applicant: 



**INTERNAL REVENUE SERVICE**

*Ogden, IRS Center*

**Department of the Treasury**

*P.O. Box 9941, Ogden, Utah 84409*

*MS 6273*

**Refer Reply To: 0423208240**  
**Date: April 13, 2015 3910C**

**SHRINERS INTERNATIONAL  
OMAR SHRINERS  
% OMAR SHRINERS  
176 PATRIOTS POINT RD  
MT PLEASANT SC 29464**

**Taxpayer Identification Number: 57-0111960**

**Dear Taxpayer:**

**We received your request dated April 13, 2015, asking us to verify your Employer Identification Number [EIN] and name.**

**This letter confirms the parent and subordinate organization are exempt under Section 501(c) 10 of the Internal Revenue Code.**

**Parent Organization**

**Name: Shriners International**

**Subordinate Organization**

**EIN: 57-0111960**

**Name: Omar Shriners**

**The EIN and Name on our records is 57-0111960 and Omar Shriners as a subordinate unit of Shriners International.**

**Please provide a copy of this letter to your subordinate. A separate letter will not be mailed to the subordinate organization.**

**If you have any questions, please call us toll free at 1-877-829-5500. or you can write to us at the address shown at the top of this letter. If you write, please include:**

- 1. A copy of this letter ,**
- 2. Your telephone number and**
- 3. The best hours you can be reached in the spaces below.**

**You should keep a copy of this letter for your records.**

**Telephone Number \_\_\_\_\_ Hours \_\_\_\_\_**

**Sincerely Yours,**

***Ogden Entity Department***



