June 4, 2025

AGENDA 8:30 A.M.

- I. Call to Order
- II. Business Meeting
 - A. Approval of Minutes
 - B. Old Business Recap of Upcoming Events
 - Approval of minutes
 - Hal & Mal's St. Paddy's Parade
 - Chris Pike JRA (future vendor market setups)

New Business - Special Events Agenda Items/ Presentations

June 7, 2025	Walk OF A MILLION FACES – Temica Morton
June 13, 2025	Cirque Du Luxe – Lila Watkin
June 21, 2025	Juneteenth Celebration – Monique Mapp
June 27, 2025	Children's Center Patriotic Parade – Sherry Brewer
November 7, 2025	National Folk Festival – Thabi Moyo

Special Events

Department Checklist Approvals

Event Date: June 21, 2025

Event: Juneteenth Celebration

Special Events Meeting Date: June 4, 2025

Permit Fee\$:_

Departments	Permits Required	Equipment	Approved By	N/X	Comments
	(BLDG, Elect,	(Stage,	,		
	Vendor)	Barricades,			
		Bagged Meters			
		etc)			
Planning					
Parks & Rec					
Police					
Fire					
Constituent Services					
Public Works					
(Traffic)					
Public Works (Facility Maint.)					
Solid Waste					
Finance					
Jatran					
Legal					



SPEC-25-40

Special Events Permit

Status: Active Submitted On: 4/2/2025 **Primary Location**

32.302498, -90.188527

Owner

No owner information

Applicant

Monique Mapp 5 601-405-4262

@ monique_mapp@yahoo.com

★ 5417 Wayneland Drive Jackson, MS 39211

Special Events Permit Application

Name of Organization Sponsoring Event*

Legacy Builders

Date of the Event*

06/21/2025

Event Information

Name of Event*

Juneteenth on Farish

Event Category*

Festival

Location of Event *

Farish Street

Event Setup /Start Date*

06/21/2025

Event Takedown /End Date *

06/21/2025

Event Start Time*

5pm

Event End Time *

10pm

Event Primary Point of Contact * @

Monique Mapp

Event Primary Point of Contact *

Brad Franklin

Estimated Crowd Size*

100

Please provide the type and estimated number of the following :

Vehicles*

5

Animals*

0

Structures*

0

Organization Information

Organization's Address*

Legacy Builders

Organization's Contact No.*

6014054262

Organization's Email Address*

juneteenthonfarish@gmail.com

Non-Profit

yes

Primary Organizer*	Contact No*
Monique Mapp	6014054262
Alternate Contact Name	Alternate Contact No.
Brad Franklin	6013175444
Email	Event Website Address - enter a valid website URL for example
juneteenthonfarish@gmail.com	https://www.google.com
Event Logistics (set-up; parking; street, lane, and side	walk closure):
Will monitors or private security be employed at the event? *	
No	
If yes, you are required to contact the City of Jackson Police Departm	nent.
Private security companies may be required to hire sworn off-duty	officers for the event
Food, Merchandise, and Vendor Sales:	
If "yes," you are required to contact the Fire Marshal @ 601-960-2018	3.
Will there be any food and beverage vendors?*	Will there be any merchandise vendors?*
Yes	Yes
Alcoholic Beverage Sale and Consumption:	
Will alcohol be served or sold at the event? *	Will the event involve any street closures? *
Yes	Yes
Will metered parking spaces need to be closed? *	
No	
Please describe any parking requirements and arrangements to the extent possible – (e.,	g. private parking, public parking, no parking arrangements)*
public parking	
public parking	
Will any part of this event be held on private property?*	
No sa	
Restrooms:	
Restrooms:	

Yes

Restroom Locations*	
portapotties on farish and griffith	
Will on-site first aid be provided? *	Location(s) of tent/vendor providing aid:*
No	none-amr
Will water be provided for event-goers and participants? *	
No	
Fireworks and Open Flames: If "yes," to any of the next two question	ns - you are required to contact the Fire Marshal @ 601-960-2018.
Will fireworks or open flames be used as part of the event?*	Will private grills be in use for food preparation?*
No	Yes
Tents, Canopies, and Structures:	
Will tents or canopies be used at the event? *	Quantity: *
Yes	70
Size (dimensions):	
10x10	
Electricity:	
Does your event require electricity? *	Electricity source (generator or existing exterior outlet):*
Yes	generator and existing exterior outlet
Sanitation:	
Are supplemental waste receptacles required? *	
No	

If you are seeking a special event permit for parades, races, or other events occurring along a route, please provide the following additional information.

is this is a parade?"	is this a walk/run?*
No	No
Please provide the following information for parade floats:	
Will there be any floats in the parade*	Estimated number:
0	0
Average size of floats (by feet or average car length):	

If your Special Event Permit is approved, you are required to pay the applicable permit fee and sanitation deposit. The sanitation fee is refundable upon satisfactory completion of the sanitation agreement.

Any special event requiring excess of extra personnel hours and city services shall reimburse the city for the cost of such excess personnel hours and services in addition to the initial permit fee. If the property used for the event is not properly cleaned or restored, the city shall do so and the permittee shall be billed for the cost incurred by the city.

The applicant or sponsor of an event must possess or obtain public liability insurance to protect against loss from liability imposed by law for damages on account of bodily injury and property damage arising from the event. The insurance policy shall name the City (in the policy or by endorsement) as additional insured, including its officers, employees, and agents. Insurance coverage must be maintained for the duration of the event. Coverage shall be a comprehensive general liability policy with the following minimum limits:

- 1. \$250,000 each person bodily injury; \$500,000 each occurrence-bodily injury; \$100,000 each occurrence-property damages; OR 2. \$500,000 each occurrence combined single limit liability and property damage.
- A copy of the policy or certificate of insurance along with necessary endorsements must be filed no less than 5 days before the date of the event, unless the coordinator, for good cause, waives the filing deadline.

Application Package Submittal Checklist:



I, the applicant, certify that the information provided in this application is true and correct to the best of my knowledge. I agree to abide by all applicable ordinances, rules, and policies of the City of Jackson. I understand that I must comply with all terms and conditions of the permit granted. I understand that it is unlawful to willfully violate any of the permit terms and conditions, and that violation of the permit is punishable by a fine of up to \$1,000.00 per violation. I fully understand that an event permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the City of Jackson.*

Monique Mapp
Apr 2, 2025

Special Events

Department Checklist Approvals

Event: Walk OF A MILLION FACES

Event Date: June 7, 2025

Special Events Meeting Date: June 4, 2025

Permit Fee\$:__

Y/N Comments											
N/X											
Approved By											
Equipment (Stage, Barricades, Bagged Meters etc)											
Permits Required (BLDG, Elect, Vendor)										,	
Departments	Planning	Parks & Rec	Police	Fire	Constituent Services	Public Works (Traffic)	Public Works (Facility Maint.)	Solid Waste	Finance	Jatran	Legai

4	<u>S</u>		



SPEC-25-65

Special Events Permit

Status: Active

Submitted On: 5/18/2025

Primary Location

607 Fondren Place Jackson, MS 39216

Owner

City of Jackson Jackson, Ms. 39216 **Applicant**

Temica Morton 601-316-1152

@ loveinsideforeveryoneinc@gmail.com

954 Berwood Dr Jackson, MS 39206

Special Events Permit Application

Name of Organization Sponsoring Event*

Love Inside For Everyone

Date of the Event*

06/07/2025

Event Information

Name of Event*

Walk OF A MILLION FACES

Event Category*

Walk/Run

Location of Event *

Fondren

Event Setup /Start Date*

06/07/2025

Event Takedown /End Date *

06/07/2025

Event Start Time*

4pm

Event End Time *

5pm

Event Primary Point of Contact * @

Temica Morton

Event Primary Point of Contact *

Temica Morton

Estimated Crowd Size*

100

Please provide the type and estimated number of the following:

Vehicles*

Animals*

5

0

Structures*

0

Organization Information

Organization's Address*

954 Berwood Dr

Organization's Contact No.*

601-316-1152

Organization's Email Address*

loveinsideforeveryoneinc@gmail.com

Non-Profit

yes

Primary Organizer*	Contact No*
Temica Morton	601-316-1152
Alternate Contact Name	Alternate Contact No.
Email	Event Website Address - enter a valid website URL for example https://www.google.com
	Www.thelifeinc.org
Event Logistics (set-up; parking; street, lane, and side	walk closure):
Will monitors or private security be employed at the event? * Yes	
If yes, you are required to contact the City of Jackson Police Departr	nent.
Private security companies may be required to hire sworn off-duty	officers for the event
Police or Security *	Contact person: *
Police	City of Jackson
Food, Merchandise, and Vendor Sales:	
If "yes," you are required to contact the Fire Marshal @ 601-960-201	8.
Will there be any food and beverage vendors?*	Will there be any merchandise vendors?*
No	No
Alcoholic Beverage Sale and Consumption:	
Will alcohol be served or sold at the event? *	Will the event involve any street closures? *
No	No
Will metered parking spaces need to be closed? *	Will any part of this event be held on private property?*
No	No
Restrooms:	
Restroom Facilities*	
Yes	
Restroom Locations*	
At the park grounds	

Will on-site first aid be provided? *	Location(s) of tent/vendor providing aid:*
Yes	At the Fondren Park
Will water be provided for event-goers and participants? *	Location(s) of water sites/fountains:*
Yes	At the Park
Fireworks and Open Flames: If "yes," to any of the next two question	s - you are required to contact the Fire Marshal @ 601-960-2018.
rileworks and open mariles. If yes, to any of the next two question	you are required to contact the rive management of
100 a 1 a 1 a 1 a 1 a 1 a 1 a 1 a 1 a 1	Will private grills be in use for food preparation?*
Will fireworks or open flames be used as part of the event?*	
No	No
Tents, Canopies, and Structures:	
Will tents or canopies be used at the event? *	Quantity: *
Yes	7
Size (dimensions):	
Electricity:	
Electricity.	
Dage years event require electricity? *	Electricity source (generator or existing exterior outlet):*
Does your event require electricity? *	
Yes	Existing exterior
Sanitation:	
Are supplemental waste receptacles required? *	
No	
If you are seeking a special event permit for parades,	races, or other events occurring along a route, please
provide the following additional information.	
Is this is a parade?*	Is this a walk/run?*
No	Yes
Please provide the following information for parade floats:	
Will there be any floats in the parade*	Estimated number:
No	100
Average size of floats (by feet or average car length):	
0	

If your Special Event Permit is approved, you are required to pay the applicable permit fee and sanitation deposit. The sanitation fee is refundable upon satisfactory completion of the sanitation agreement.

Any special event requiring excess of extra personnel hours and city services shall reimburse the city for the cost of such excess personnel hours and services in addition to the initial permit fee. If the property used for the event is not properly cleaned or restored, the city shall do so and the permittee shall be billed for the cost incurred by the city.

The applicant or sponsor of an event must possess or obtain public liability insurance to protect against loss from liability imposed by law for damages on account of bodily injury and property damage arising from the event. The insurance policy shall name the City (in the policy or by endorsement) as additional insured, including its officers, employees, and agents. Insurance coverage must be maintained for the duration of the event. Coverage shall be a comprehensive general liability policy with the following minimum limits:

1. \$250,000 each person – bodily injury; \$500,000 each occurrence-bodily injury; \$100,000 each occurrence-property damages; OR 2. \$500,000 each occurrence combined single limit liability and property damage.

A copy of the policy or certificate of insurance along with necessary endorsements must be filed no less than 5 days before the date of the event, unless the coordinator, for good cause, waives the filing deadline.

Application Package Submittal Checklist:





No File Uploaded

Proof of General Liability Insurance



No File Uploaded

Map Route



No File Uploaded

Neighborhood Petition



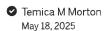
No File Uploaded

Business Documentation



No File Uploaded

I, the applicant, certify that the information provided in this application is true and correct to the best of my knowledge. I agree to abide by all applicable ordinances, rules, and policies of the City of Jackson. I understand that I must comply with all terms and conditions of the permit granted. I understand that it is unlawful to willfully violate any of the permit terms and conditions, and that violation of the permit is punishable by a fine of up to \$1,000.00 per violation. I fully understand that an event permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the City of Jackson.*



Special Events

Department Checklist Approvals

Event Date: November 7, 2025 **Event:** National Folk Festival

Special Events Meeting Date: June 4, 2025

Permit Fee\$:__

Departments	Permits Required	Equipment (Stage,	Approved By	I/N	Comments
	(BLDG, Elect,	Barricades, Bagged			
	Vendor)	Meters			
		etc)			
Planning					
Parks & Rec					
Police					
Fire					
Constituent					
Services					
Public Works					
(Traffic)					
Public Works					
(Facility Maint.)					
Solid Waste					
Finance					
Jatran					
Legal					



SPEC-25-73

Special Events Permit

Status: Active

Submitted On: 5/28/2025

Primary Location

200 S PRESIDENT ST Unit 223 Jackson, MS 39201

Owner

No owner information

Applicant

Yika Hoover 601-960-1611

@ thoover@jacksonms.gov

♠ 200 S President St

Suite 223

Jackson, MS 39201

Special Events Permit Application

Name of Organization Sponsoring Event*

City of Jackson

Date of the Event*

11/07/2025

Event Information

Name of Event*

National Folk Festival

Event Category*

Festival

Location of Event *

Downtown Jackson

Event Setup /Start Date*

11/07/2025

Event Takedown /End Date *

11/09/2025

Event Start Time*

6 pm

Event End Time *

6 pm

Event Primary Point of Contact * @

Yika Hoover

Event Primary Point of Contact *

Yika Hoover

Estimated Crowd Size*

60000

Please provide the type and estimated number of the following:

Vehicles*

Animals*

10

0

Structures*

6

Organization Information

Organization's Address*

200 S President St, Jackson, MS 39201

Organization's Contact No.*

601-960-1611

Organization's Email Address*

Thoover@jacksonms.gov

Non-Profit

no

Primary Organizer*	Contact No*
City of Jackson - Planning Department	601-960-1611
Alternate Contact Name	Alternate Contact No.
Thabi Moyo	601-278-3615
Email	Event Website Address - enter a valid website URL for example https://www.google.com
tmoyo@nationalfolkfestival.com	https://www.nationalfolkfestival.com/
	https://www.nationalioixiestival.com/
Event Logistics (set-up; parking; street, lane, and side	ewalk closure):
Will monitors or private security be employed at the event? *	
No	
If yes, you are required to contact the City of Jackson Police Depart	ment.
Private security companies may be required to hire sworn off-dut	y officers for the event
Food, Merchandise, and Vendor Sales:	
If "yes," you are required to contact the Fire Marshal @ 601-960-201	18.
Will there be any food and beverage vendors?*	Will there be any merchandise vendors?*
Will there be any food and beverage vendors?* Yes	Will there be any merchandise vendors?* Yes
•	
•	
Yes	
Yes	
Yes Alcoholic Beverage Sale and Consumption:	Yes
Yes Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? *	Yes Will the event involve any street closures? *
Yes Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? *	Yes Will the event involve any street closures? *
Yes Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes	Yes Will the event involve any street closures? *
Yes Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes	Yes Will the event involve any street closures? * Yes
Yes Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? *	Yes Will the event involve any street closures? * Yes
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes Please describe any parking requirements and arrangements to the extent possible – (extends of the extent possible of the extent possible – (extends of the extent possible of the extent p	Yes Will the event involve any street closures? * Yes e.g. private parking, public parking, no parking arrangements)*
Yes Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes	Yes Will the event involve any street closures? * Yes e.g. private parking, public parking, no parking arrangements)*
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes Please describe any parking requirements and arrangements to the extent possible – (each of the festival) on the outside of the festival security periments.	Yes Will the event involve any street closures? * Yes e.g. private parking, public parking, no parking arrangements)*
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes Please describe any parking requirements and arrangements to the extent possible – (e) On-Street parking nearby on the outside of the festival's security perime	Yes Will the event involve any street closures? * Yes e.g. private parking, public parking, no parking arrangements)*
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes Please describe any parking requirements and arrangements to the extent possible – (each of the festival) on the outside of the festival security periments.	Yes Will the event involve any street closures? * Yes e.g. private parking, public parking, no parking arrangements)*
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes Please describe any parking requirements and arrangements to the extent possible – (e On-Street parking nearby on the outside of the festival's security perime Will any part of this event be held on private property?* Yes	Yes Will the event involve any street closures? * Yes e.g. private parking, public parking, no parking arrangements)*
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes Please describe any parking requirements and arrangements to the extent possible – (e) On-Street parking nearby on the outside of the festival's security perime	Yes Will the event involve any street closures? * Yes e.g. private parking, public parking, no parking arrangements)*
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * Yes Will metered parking spaces need to be closed? * Yes Please describe any parking requirements and arrangements to the extent possible – (e On-Street parking nearby on the outside of the festival's security perime Will any part of this event be held on private property?* Yes	Yes Will the event involve any street closures? * Yes e.g. private parking, public parking, no parking arrangements)*

Yes

 $Peppered\ throughout\ the\ festival\ perimeter\ which\ includes\ Capital\ Street,\ State\ Street,\ and\ Amite\ Street.$

Will on-site first aid be provided? *	Location(s) of tent/vendor providing aid:*
Yes	TBD
Will water be provided for event-goers and participants? *	Location(s) of water sites/fountains:*
Yes	TBD
Fireworks and Open Flames: If "yes," to any of the next two question	s - you are required to contact the Fire Marshal @ 601-960-2018.
Will fireworks or open flames be used as part of the event?*	Will private grills be in use for food preparation?*
No	No
Tents, Canopies, and Structures:	
Will tents or canopies be used at the event? *	Quantity: *
Yes	6
Size (dimensions):	
Various	
Electricity:	
Does your event require electricity? *	Electricity source (generator or existing exterior outlet):*
Yes	Generators
Sanitation:	
Are supplemental waste receptacles required? *	
Yes	
If you are seeking a special event permit for parades, I	races, or other events occurring along a route, please
provide the following additional information.	
Is this is a parade?*	Is this a walk/run?*
No	No
Please provide the following information for parade floats:	
Will there be any floats in the parade*	Estimated number:
No	

If your Special Event Permit is approved, you are required to pay the applicable permit fee and sanitation deposit. The sanitation fee is refundable upon satisfactory completion of the sanitation agreement.

Any special event requiring excess of extra personnel hours and city services shall reimburse the city for the cost of such excess personnel hours and services in addition to the initial permit fee. If the property used for the event is not properly cleaned or restored, the city shall do so and the permittee shall be billed for the cost incurred by the city.

The applicant or sponsor of an event must possess or obtain public liability insurance to protect against loss from liability imposed by law for damages on account of bodily injury and property damage arising from the event. The insurance policy shall name the City (in the policy or by endorsement) as additional insured, including its officers, employees, and agents. Insurance coverage must be maintained for the duration of the event. Coverage shall be a comprehensive general liability policy with the following minimum limits:

- 1. \$250,000 each person bodily injury; \$500,000 each occurrence-bodily injury; \$100,000 each occurrence-property damages; OR 2. \$500,000 each occurrence combined single limit liability and property damage.
- A copy of the policy or certificate of insurance along with necessary endorsements must be filed no less than 5 days before the date of the event, unless the coordinator, for good cause, waives the filing deadline.

Application Package Submittal Checklist:

Site Plan



NFF 2025 _V0.7.2_STATE- 2025-04-25-D LndScp - Ove rall Site-no GeoMap.pdf

Neighborhood Petition



No File Uploaded

Proof of General Liability Insurance



No File Uploaded

Business Documentation



No File Uploaded

I, the applicant, certify that the information provided in this application is true and correct to the best of my knowledge. I agree to abide by all applicable ordinances, rules, and policies of the City of Jackson. I understand that I must comply with all terms and conditions of the permit granted. I understand that it is unlawful to willfully violate any of the permit terms and conditions, and that violation of the permit is punishable by a fine of up to \$1,000.00 per violation. I fully understand that an event permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the City of Jackson.*

Yika Hoover May 28, 2025



Special Events

Department Checklist Approvals

Event Date: June 27, 2025

Event: Children's Center Patriotic Parade

Special Events Meeting Date: $\mathsf{JUn} \in 4,2025$

Permit Fee\$:___

Departments	Permits Required (BLDG, Elect,	Equipment (Stage,	Approved By	Y/N	Comments
	Vendor)	Barricades,			
		etc)			
Planning					
Parks & Rec					
Police					
Fire					
Constituent					
Services					
Public Works					
(Traffic)					
Public Works					
(Facility Maint.)					
Solid Waste					
Finance					
Jatran					
Legal					



SPEC-25-75

Special Events Permit

Status: Active

Submitted On: 5/30/2025

Primary Location

305 N CONGRESS ST Jackson, MS 39201

Owner

GALLOWAY MEM UNITED METHODIST CH 305 NORTH CONGRESS ST, JACKSON, MS. 39201, 305 Jackson, Ms 39215

Applicant

Sherry Brewer **3** 601-360-1792

@ ecdc@gallowayumc.org 305 North Congress Street

Jackson , Ms 39215

Special Events Permit Application

Name of Organization Sponsoring Event*

Date of the Event*

Galloway Children's Center

06/27/2025

Event Information

Name of Event*

Childern's Center Patriotic Parade

Event Category*

Parade

Location of Event *

305 North Congress Street

Event Setup /Start Date*

06/27/2025

Event Takedown /End Date *

06/27/2025

Event Start Time*

9:30

Event End Time *

10:30

Event Primary Point of Contact * ②

Church parking lot

Event Primary Point of Contact *

Church parking lot

Estimated Crowd Size*

150

Please provide the type and estimated number of the following:

Vehicles*

Animals*

12

Structures*

0

Organization Information

Organization's Address*

305 North Congress Street

Organization's Contact No.*

Sherry Brewer

Organization's Email Address*

Non-Profit

ECDC@gallowayumc.org

yes

Primary Organizer*	Contact No*
Sherry Brewer	601-213-7349
Alternate Contact Name	Alternate Contact No.
Sherry Brewer	6013601792
•	
Email	Event Website Address - enter a valid website URL for example
ECDC@gallowayumc.org	https://www.google.com
200 o e ganoria y annotor y	https://www.gallowayumc.org/children-s-center
Event Logistics (cot up parking atreat length and aidea	well, alone way
Event Logistics (set-up; parking; street, lane, and side	walk closure):
Will monitors or private security be employed at the event? *	
Yes	
les	
If yes, you are required to contact the City of Jackson Police Departr	nent.
Private security companies may be required to hire sworn off-duty	officers for the event
Police or Security *	Contact person: *
Security (Law)	Lee Smith 6012016990
Food, Merchandise, and Vendor Sales:	
If "yes," you are required to contact the Fire Marshal @ 601-960-201	8
yes, you are required to contact the time Marshall & OUT 500 ZOII	
Will there be any food and beverage vendors?*	Will Above by a manufacture of the state of
	Will there be any merchandise vendors?*
No	No
Alcoholic Beverage Sale and Consumption:	
Will alcohol be served or sold at the event? *	Will the event involve any street closures? *
No	Yes
Will metered parking spaces need to be closed? *	
No	
Please describe any parking requirements and arrangements to the extent possible – (e.	g. private parking, public parking, no parking arrangements)*
Private parking	
Will any part of this event be held on private property?*	
Yes	

Restrooms:

Restroom Facilities*	
Yes	
Restroom Locations*	
t Charles to sub-	
Inside the church	
Will on-site first aid be provided? *	Location(s) of tent/vendor providing aid:*
Yes	Inside church
Will water be provided for event-goers and participants? *	Location(s) of water sites/fountains:*
Yes	Inside church
Fireworks and Open Flames: If "yes," to any of the next two questions	s - you are required to contact the Fire Marshal @ 601-960-2018.
Will fireworks or open flames be used as part of the event?*	Will private grills be in use for food preparation?*
No	No
Tents, Canopies, and Structures:	
Will tents or canopies be used at the event? *	Size (dimensions):
No	
Electricity:	
Does your event require electricity? *	
No	
Sanitation:	
Are supplemental waste receptacles required? *	
No	
	And Address of the State of the
If you are seeking a special event permit for parades, I	races, or other events occurring along a route, please
provide the following additional information.	
Is this is a parade?*	Is this a walk/run?*
Yes	No
Location of event assembly (pre and post event assembly if different)*	Time of assembly:*
Parking lot	9:15

Please provide the following information for parade floats:

Will there be any floats in the parade*

No

O

Average size of floats (by feet or average car length):
O

Please describe and the material and maximum size of any signs or banners to be carried along the route.

Small poster (one person will hold)

If your Special Event Permit is approved, you are required to pay the applicable permit fee and sanitation deposit. The sanitation fee is refundable upon satisfactory completion of the sanitation agreement.

Any special event requiring excess of extra personnel hours and city services shall reimburse the city for the cost of such excess personnel hours and services in addition to the initial permit fee. If the property used for the event is not properly cleaned or restored, the city shall do so and the permittee shall be billed for the cost incurred by the city.

The applicant or sponsor of an event must possess or obtain public liability insurance to protect against loss from liability imposed by law for damages on account of bodily injury and property damage arising from the event. The insurance policy shall name the City (in the policy or by endorsement) as additional insured, including its officers, employees, and agents. Insurance coverage must be maintained for the duration of the event. Coverage shall be a comprehensive general liability policy with the following minimum limits:

1. \$250,000 each person – bodily injury; \$500,000 each occurrence-bodily injury; \$100,000 each occurrence-property damages; OR 2. \$500,000 each occurrence combined single limit liability and property damage.

A copy of the policy or certificate of insurance along with necessary endorsements must be filed no less than 5 days before the date of the event, unless the coordinator, for good cause, waives the filing deadline.

Application Package Submittal Checklist:

Site Plan



No File Uploaded

Proof of General Liability Insurance



20250530_110936.jpg

Neighborhood Petition



No File Uploaded

Business Documentation



No File Uploaded

I, the applicant, certify that the information provided in this application is true and correct to the best of my knowledge. I agree to abide by all applicable ordinances, rules, and policies of the City of Jackson. I understand that I must comply with all terms and conditions of the permit granted. I understand that it is unlawful to willfully violate any of the permit terms and conditions, and that violation of the permit is punishable by a fine of up to \$1,000.00 per violation. I fully understand that an event permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the City of Jackson.*

sherry M brewer May 30, 2025

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Special Events

Department Checklist Approvals

Event Date: June 13, 2025

Special Events Meeting Date: June 4, 2025

Event: Cirqu Du Luxe

Permit Fee\$:____

Departments	Permits Required	Equipment	Approved By	N/X	Y/N Comments
	(BLDG, Elect,	(Stage,			
	Vendor)	Barricades,			
		Bagged Meters			
Digagina		etc)			
rialling					
Parks & Rec					
Police					
Fire					
Constituent					
Services					
Public Works					
(Traffic)					
Public Works					
(Facility Maint.)					
Solid Waste					
Finance					
Jatran					
Legal					



SPEC-25-76

Special Events Permit

Status: Active

Submitted On: 5/30/2025

Primary Location

32.336365, -90.153586

Owner

No owner information

Applicant

Lila Watkins 941-600-6739

cirqueduluxe@gamîl.com

★ 8835 52 St N Pinellas Park, FI 33782

Special Events Permit Application

Name of Organization Sponsoring Event*

Cirque Du Luxe

Date of the Event*

06/13/2025

Event Information

Name of Event*

Cirque Du Luxe (Circus)

Location of Event *

Smith-Willis Stadium

Event Takedown /End Date *

06/22/2025

Event End Time *

9:30pm

Event Primary Point of Contact *

Frank Diaz

Event Category*

Performance

Event Setup /Start Date*

06/13/2025

Event Start Time*

Weekday shows 7:30pm, weekend show 1:30, 4:30 7:30pm

Event Primary Point of Contact * @

Lila Watkins

Estimated Crowd Size*

100

Please provide the type and estimated number of the following:

Vehicles*

15

Structures*

1

Animals*

0

Organization Information

Organization's Address*

8835 52 St N Pinellas Park FI, 33782

Organization's Contact No.*

(941)600-6739

Organization's Email Address*

Cirqueduluxe@gmail.com

Non-Profit

no

	Contact No*
Frank Diaz	(786)384-1645
Alternate Contact Name	Alternate Contact No.
Lila Watkins	(941)600-6739
Email	Event Website Address - enter a valid website URL for example
lcw3539@gmail.com	https://www.google.com https://cirqueduluxe.com/city/jackson-ms/
	Fittps.// cirqueutiune.com/city/jackson=ms/
Event Logistics (set-up; parking; street, lane, and side	walk closure):
Will as a site or a majority or a smith, by a small or of a kidde account? *	
Will monitors or private security be employed at the event? *	
No	
If you you are required to content the City of Jackson Bolice Departs	nont.
If yes, you are required to contact the City of Jackson Police Departr	nent.
Private security companies may be required to hire sworn off-duty	v officers for the event
Frivate security companies may be required to fine sworm on-duty	officers for the event
Food, Merchandise, and Vendor Sales:	
rood, Merchandise, and Vendor Sales.	
16" as " year are very ired to contest the Fire Marchel @ 601 060 201	•
If "yes," you are required to contact the Fire Marshal @ 601-960-201	0.
Will there be any food and beverage vendors?*	Will there be any merchandise vendors?*
Yes	No
163	INU
	INU
Alcoholic Beverage Sale and Consumption:	NO .
Alcoholic Beverage Sale and Consumption:	
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? *	Will the event involve any street closures? *
Alcoholic Beverage Sale and Consumption:	
Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * No	Will the event involve any street closures? * No
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Alcoholic Beverage Sale and Consumption: Will alcohol be served or sold at the event? * No Will metered parking spaces need to be closed? *	Will the event involve any street closures? * No Will any part of this event be held on private property?*
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Ticket Office

Yes

Will water be provided for event-goers and participants? *	
No	
Fireworks and Open Flames: If "yes," to any of the next two question	s - you are required to contact the Fire Marshal @ 601-960-2018.
Will fireworks or open flames be used as part of the event?*	Will private grills be in use for food preparation?*
No	No
Tents, Canopies, and Structures:	
Will tents or canopies be used at the event? *	Quantity: *
Yes	1
Size (dimensions):	
30 meter	
Electricity:	
Does your event require electricity? *	Electricity source (generator or existing exterior outlet):*
Yes	Generator
Sanitation:	
Are supplemental waste receptacles required? *	
Yes	
If you are seeking a special event permit for parades,	races, or other events occurring along a route, please
provide the following additional information.	
p.ovido the felle mag deservation and the felle mag deservation an	
Is this is a parade?*	Is this a walk/run?*
No	No
Please provide the following information for parade floats:	
Will there be any floats in the parade*	Estimated number:
NA	NA
Average size of floats (by feet or average car length):	
NA	

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- 1. \$250,000 each person bodily injury; \$500,000 each occurrence-bodily injury; \$100,000 each occurrence-property damages; OR 2. \$500,000 each occurrence combined single limit liability and property damage.
- A copy of the policy or certificate of insurance along with necessary endorsements must be filed no less than 5 days before the date of the event, unless the coordinator, for good cause, waives the filing deadline.

Application Package Submittal Checklist:

Site Plan



ALERON DIMENSIONAMIENTO GENERAL CARPA INTE GRAL DE 26 CON DULCERIA DE 10 X 12.pdf

Neighborhood Petition



No File Uploaded

Proof of General Liability Insurance



CERTIFICATE OF LIABILITY INSURANCE GL-EXC THE EMPLOYEES.pdf

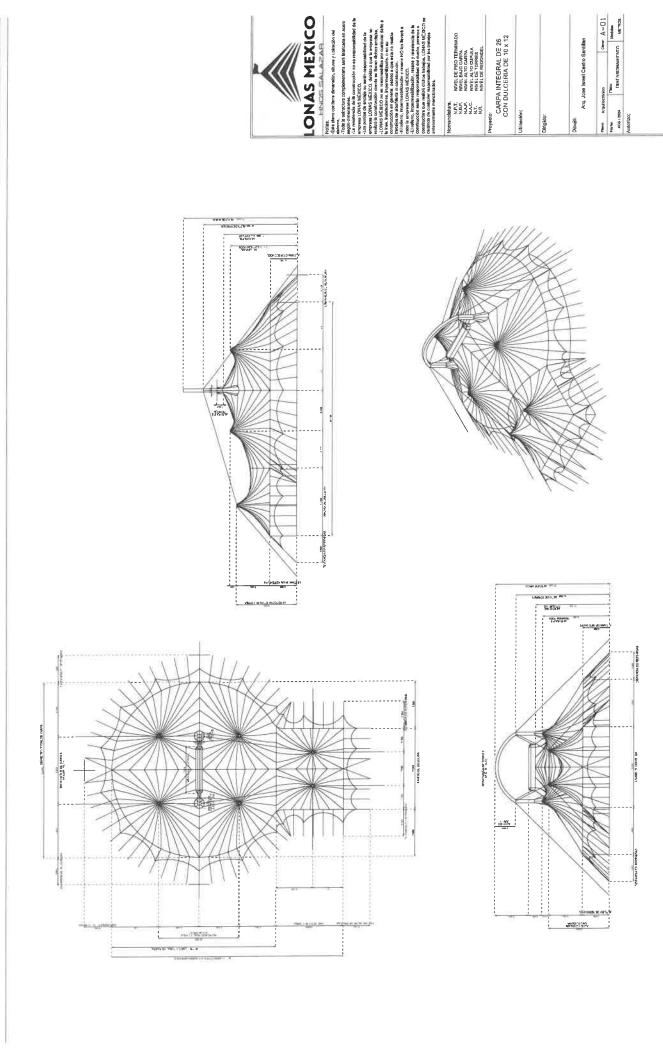
Business Documentation



No File Uploaded

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Frank Diaz May 30, 2025



CON DULCERIA 2 0 DE **SARPA INTEGRAL**



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/05/2025

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.

lf	SUBROGATION IS WAIVED, subject	to t	he te	rms and conditions of the	ne poli	cy, certain p	olicies may	require an endo	rsement.	A s	tatement on
this certificate does not confer rights to the certificate holder in lieu of s					CONTACT Valentine Harmone Landons						
SEBANDA INSURANCE #42 dba M&O Insurance Agency LLC					PHONE (054) 497 1644 FAX (954) 487-1643						
		urarı	Je Ay	ency LLO	E-MAIL						
54	14 Stirling Rd.				ADDRE			h			MAIO #
					MODILE (O) FAT OTOMO TO TELETO				NAIC# 38920		
Da				FL 33314	INSURER A: KINSALE INS CO 38				30320		
INSL	IRED				INSURER B:						
CIRQUE DU LUXE LLC						INSURER C:					
	8835 52ND ST N				INSURER D:						
					INSURER E:						
	PINELLAS PARK			FL 33782	INSURE	RF:					
CO	VERAGES CER	TIFI	CATE	NUMBER:				REVISION NUME			
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		SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS		
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED			00,000
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurre	ence) \$	100	
								MED EXP (Any one pe	rson) \$	5,00	00
Α		X		0100343150-0		01/02/2025	01/02/2026	PERSONAL & ADV IN.	JURY \$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGA			00,000
	POLICY PRO- JECT LOC							PRODUCTS - COMP/C	OP AGG \$	2,00	00,000
	OTHER:								\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE L (Ea accident)	.IMII \$		
	ANY AUTO							BODILY INJURY (Per p	person) \$		
	OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (Per a			
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							l'	\$		
	UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	3,00	00,000
Α	EXCESS LIAB CLAIMS-MADE			0100367364-0		04/30/2025	04/30/2026	2026 AGGREGATE \$		3,00	00,000
′`	DED RETENTION\$								\$		
	WORKERS COMPENSATION							PER STATUTE	OTH- ER		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT			
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA EM			
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - POLIC			
_	DÉSCRIPTION OF OPERATIONS below							ELLI DIOLI (OLI 1 OLI 1			
	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	EC (COPP	1404 Additional Pamerke Schadu	lo may h	e attached if mor	re enace is requir	ed)		-	
	cription of operations / Locations / Vehicl rtificate Holder Listed as Additional Insur		100KL	rioi, Auditional Remarks Schedu	so, may b	o attauneu n illur	- Space is reduit	37 1			
CE	fillicate Holder Listed as Additional Histor	Cu									
CERTIFICATE HOLDER CANCELLATION											
THE EMPLOYEES' RETIREMENT PLAN OF CONSOLIDATED ELECTRICAL DISTRIBUTORS, INC 3100 FM 365, PORT ARTHUR, TX 77642					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						
					10-2:6 10-20						