



City of National City ■ Neighborhood Services Department
1243 National City Boulevard ■ National City, CA 91950
(619) 336-4364 ■ fax (619) 336-4217
www.nationalcityca.gov

Special Event Application

Type of Event

- Fair/Festival, Parade/March, Walk or Run, Concert/Performance, TUP, Sporting Event, Other (specify) Custom Car Show

Event Name & Location

Event Title Groupe's Summer Showcase: Car Show
Event Location (list all sites being requested) 2400-3000 Transportation Ave, 91950

Event Times

Set-Up Starts Date July 19, 2025 Time 0600AM Day of Week Saturday
Event Starts Date July 19, 2025 Time 1000AM Day of Week Saturday
Event Ends Date July 19, 2025 Time 1600pm Day of Week Saturday
Breakdown Ends Date July 19, 2025 Time 1700pm Day of Week Saturday



Applicant Information

Applicant (Your name) Brian K. BahrAlmeida Sponsoring Organization Groupe Car Club
Event Coordinator (if different from applicant)
Mailing Address 2704 Transportation Ave Suite E
Day Phone After Hours Phone Cell Fax
Public Information Phone 619 855 5417 E-mail brian.groupesd@gmail.com

Applicant agrees to investigate, defend, indemnify and hold harmless the City, its officers, employees and agents from and against any and all loss, damage, liability, claims, demands, detriments, costs, charges, expense (including attorney's fees) and causes of action of any character which the City, its officers, employees and agents may incur, sustain or be subjected to on account of loss or damage to property or the loss of use thereof and for bodily injury to or death of any persons (including but not limited to the employees, subcontractors, agents and invitees of each party hereto) arising out of or in any way connected to the occupancy, enjoyment and use of any City premises under this agreement to the extent permitted by law.

Applicant understands this TUP/special event may implicate fees for City services, which will have to be paid in the City's Finance Department 48 hours prior to the event set-up. The undersigned also understands and accepts the City's refund policy for application processing and facility use and that fees and charges are adjusted annually and are subject to change.

Signature of Applicant: [Redacted] Date 3/11/25

Special Event Application (continued)

Please complete the following sections with as much detail as possible since fees and requirements are based on the information you provide us.

Fees/Proceeds/Reporting

Is your organization a "Tax Exempt, nonprofit" organization? Yes No

Are admission, entry, vendor or participant fees required? Yes No

If YES, please explain the purpose and provide amount (s):

Any vehicle to be displayed/ entering \$35

Any Vendors informational, food or merchandise \$50

\$ 5500 Estimated Gross Receipts including ticket, product and sponsorship sales from this event.

\$ 4500 Estimated Expenses for this event.

\$ 1000 What is the projected amount of revenue that the Nonprofit Organization will receive as a result of this event?

Description of Event

First time event Returning Event include site map with application

Note that this description may be published in our City Public Special Events Calendar:

Over 50 years National City has been known for cruising & exhibiting the hottest custom cars from all over San Diego county.

In conjunction with National City founders by the Kimball Family back in July of 1868. Groupe Car Club plans to celebrate on July 19, 2025, by having a custom bike, car, and classic car show. We believe this would bring the esprit DE corps to the community.

We thank the industrious people that have made National City home & what it is today. We will also thank local sponsors from the

mile of cars and the surrounding area for what they have contributed to National City and its constituents. We will also raise

awareness of vocational job training that is still much needed. Most importantly, continue the Art on wheels tradition that

has been woven into custom car culture and beyond.

Estimated Attendance

Anticipated # of Participants: 200 Anticipated # of Spectators: in & out, roughly 300

Traffic Control, Security, First Aid and Accessibility

Requesting to close street(s) to vehicular traffic? Yes No

List any streets requiring closure as a result of the event (provide map): All of Transportation Ave.
in National City, Ca. 91950 2400 block down to 3000 block

Date and time of street closure: 07/19/25 0600 Date and time of street reopening: 07/19/25@1700

Other (explain) _____

Requesting to post "no parking" notices? Yes No

Requested "No Parking" on city streets and/or parking lots (list streets/parking lots) (provide map):

All of Transportation Ave between the Mile of Cars way down to 30th St. on Transportation Ave, 91950.

Other (explain) _____

Security and Crowd Control

Depending on the number of participants, your event may require Police services.

Please describe your procedures for both Crowd Control and Internal Security: Groupe Car Club feels
that along side its volunteers, the National City Police Department can help us show professionalism and
help with Crowd Control. We feel that 2 roving officers for 5 hours (10am-3pm) will help us tremendously.

Have you hired Professional Security to handle security arrangements for this event?

Yes No If YES, name and address of Security Organization _____

Security Director (Name): _____ Phone: _____

If using the services of a professional security firm and the event will occur on City property, please provide a copy of its insurance certificate, evidencing liability with limits of at least \$1 Million dollars per occurrence/\$2 Million dollars aggregate, as well as an additional insured endorsement naming the City of National City, its officers, employees, and agents as additional insureds. Evidence of insurance must be provided by the vendor or its insurer to the Neighborhood Services Department at the time of submission.

Is this a night event? Yes No If YES, please state how the event and surrounding area will be illuminated to ensure safety of the participants and spectators: _____

First Aid

Depending on the number of participants, your event may require specific First Aid services. First aid station to be staffed by event staff? Yes No First aid/CPR certified? Yes No

First aid station to be staffed by professional company. ▶ Company Coastal Medix 619-922-5414

If using the services of a professional medical organization/company and the event will occur on City property, please provide a copy of its insurance certificate, evidencing liability with limits of at least \$1 Million dollars per occurrence/\$2 Million dollars aggregate, as well as and additional insured endorsement naming the City of National City, its officers, employees, and agents as additional insureds. Evidence of insurance must be provided by the vendor or its insurer to the Neighborhood Services Department at the time of submission.

Accessibility

Please describe your Accessibility Plan for access at your event by individuals with disabilities:
Event will be held out in the open for individuals with disabilities. We always cater to those in need if they need a helping hand. Other wise, those with disabilities will be guided to reserved parking in towards the middle of the event. That area will be identified on our map.

Elements of your Event

Setting up a stage? Yes No

Requesting City's PA system

Requesting City Stage; if yes, which size? Dimensions (13x28) Dimensions (20x28)

Applicant providing own stage ▶ _____(Dimensions)

Setting up canopies or tents?

_____ # of canopies size _____

_____ # of tents size _____

No canopies/tents being set up

Setting up tables and chairs?

Furnished by Applicant or Contractor

5 _____ # of tables No tables being set up

20 _____ # of chairs No chairs being set up

(For City Use Only) Sponsored Events – Does not apply to co-sponsored events

_____ # of tables No tables being set up

_____ # of chairs No chairs being set up

Contractor Name Applicant

Contractor Contact Information Applicant
Address _____ City/State _____ Phone Number _____

Setting up other equipment?

Sporting Equipment (explain) _____

Other (explain) _____

Not setting up any equipment listed above at event

Having amplified sound and/or music? Yes No

PA System for announcements CD player or DJ music

Live Music ▶ Small 4-5 piece live band ▶ Large 6+ piece live band

Other (explain) If we get enough sponsors a live band for 4 hours.

If using live music or a DJ. ▶ Contractor Name Rock the world entertainment / Willington Wong

▶ 80 Connoley Circle Chula Vista CA 9191 6199552007
Address City/State Phone Number

Using lighting equipment at your event? Yes No

Bringing in own lighting equipment

Using professional lighting company ▶ Company Name N/A

Address City/State Phone Number

Using electrical power? Yes No

Using Kimball Park Bowl
Lighting (from _____ to _____)

Using on-site electricity For sound and/or lighting For food and/or refrigeration

Bringing in generator(s) For sound and/or lighting For food and/or refrigeration

Vendor Information

PLEASE NOTE: You may be required to apply for a temporary health permit if food or beverages are sold or given away during your special event. Also see 'Permits and Compliance' on page 8 in the Special Event Guide. For additional information on obtaining a temporary health permit, please contact the County of San Diego Environmental Health at (619) 338-2363.

Having food and non-alcoholic beverages at your event? Yes No

Vendors preparing food on-site ▶ # 4-6 ▶ Business License # Provided after approval

If yes, please describe how food will be served and/or prepared: Food will be sold & distributed via
Food Truck(s).

If you intend to cook food in the event area please specify the method:
 GAS ELECTRIC CHARCOAL OTHER (Specify): N/A

Vendors bringing pre-packaged food ▶ # 2-4 ▶ Business License # Provided after approval

Vendors bringing bottled, non-alcoholic beverages (i.e., bottled water, can soda, etc.) ▶ # 4-6

Vendors selling food # 4-6 ▶ Business License #(s) Provided after approval

Vendors selling merchandise # 6-8 ▶ Business License #(s) Provided after approval

Food/beverages to be handled by organization; no outside vendors

Vendors selling services # _____ ▶ Business License #(s) _____

▶ Explain services _____

Vendors passing out information only (no business license needed) # 6-8

▶ Explain type(s) of information Vocational Schools, Military Recruitment and educational

No selling or informational vendors at event

Having children activities? Yes No

PLEASE NOTE: In the event inflatable jumps are provided at the event, The City of National City requires commercial liability insurance with limits of at least \$1 Million dollars per occurrence/\$2 Million dollars aggregate. In addition, the City of National City must be named as an Additional Insured pursuant to a separate endorsement, which shall be provided by the vendor or its insurer to the City's Risk Manager, along with the Certificate of Insurance, for approval prior to the event. The application should be filed out at least one week prior to the event. For questions or to obtain a copy of the "Facility Use Application", please contact the Engineering/Public Works Department at (619) 336-4580.

Inflatable bouncer house # _____ Rock climbing wall Height _____

Inflatable bouncer slide # _____ Arts & crafts (i.e., craft making, face painting, etc.)

Carnival Rides _____ Other _____

Having fireworks or aerial display? Yes No

Vendor name and license # _____

Dimensions _____ Duration _____

Number of shells _____ Max. size _____

PLEASE NOTE: In the event fireworks or another aerial display is planned for your event, The City of National City requires commercial liability insurance with limits of at least \$2 Million dollars per occurrence/ \$4 Million dollars aggregate. In addition, the City of National City must be named as an Additional Insured pursuant to a separate endorsement, which shall be provided by the vendor or its insurer to the City's Risk Manager, along with the Certificate of Insurance, for approval prior to the event. Depending on the size and/or nature of the fireworks display, the City reserves the right to request higher liability limits. The vendor must also obtain a fireworks permit from the National City Fire Department and the cost is \$602.00

Arranging for media coverage? Yes No

Yes, but media will not require special set-up

Yes, media will require special set-up. Describe _____

Event Signage

PLEASE NOTE: For City sponsored or co-sponsored events, banners publicizing the event may be placed on the existing poles on the 1800 block and 3100 block of National City Boulevard. The banners must be made to the City's specifications. Please refer to the City's Special Event Guidebook and Fee Schedule for additional information.

Are you planning to have signage at your event? Yes No

Yes, we will post signage # _____ Dimensions _____

Yes, having inflatable signage # _____ ▶ (complete Inflatable Signage Request form)

Yes, we will have banners # _____

What will signs/banners say? _____

How will signs/banners be anchored or mounted? _____

Location of banners/signage _____

Waste Management

PLEASE NOTE: One toilet for every 250 people is required, unless the applicant can show that there are sufficient facilities in the immediate area available to the public during the event.

Are you planning to provide portable restrooms at the event? Yes No

If yes, please identify the following:

▶ Total number of portable toilets: 6 _____

▶ Total number of ADA accessible portable toilets: 1 _____

Contracting with portable toilet vendor. ▶ Diamond Portable Toilets (888) 744-7191
Company Phone

▶ Load-in Day & Time _____ Day of event ▶ Load-out Day & Time The following Monday.

Portable toilets to be serviced. ▶ Time _____

Set-up, Breakdown, Clean-up

Setting up the day before the event?

Yes, will set up the day before the event. ▶ # of set-up day(s) _____

No, set-up will occur on the event day

Requesting vehicle access onto the turf?

Yes, requesting access onto turf for set-up and breakdown (complete attached Vehicle Access Request form)

No, vehicles will load/unload from nearby street or parking lot.

NPDES-Litter Fence

City to install litter fence

Applicant to install litter fence

N/A

Breaking down set-up the day after the event?

Yes, breakdown will be the day after the event. ► # of breakdown day(s) _____

No, breakdown will occur on the event day.

How are you handling clean-up?

Using City crews

Using volunteer clean-up crew during and after event.

Using professional cleaning company during and after event.

Miscellaneous

Please list anything important about your event not already asked on this application:

Event is Free and open to the public. Move in and set up starts at 0600.

Vendors pay a set up at the same time. Vehicles get judged and winners announced by 1600.

**Please make a copy of this application for your records.
We do not provide copies.**



Special Events

Pre-Event Storm Water Compliance Checklist

I. Special Event Information

| | |
|--|--|
| Name of Special Event: <u>Summer Rumble: Car Show</u> | |
| Event Address: <u>2400-3000 Transportation Ave. NC CA.</u> | Expected # of Attendees: <u>350</u> |
| Event Host/Coordinator: <u>BRIAN BAHR-ALMEIDA</u> | Phone Number: XXXXXXXXXX |

II. Storm Water Best Management Practices (BMPs) Review

| | YES | NO | N/A |
|---|--------------------------|--------------------------|--------------------------|
| Will enough trash cans provided for the event? Provide number of trash bins: <u>20</u> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Will enough recycling bins provided for the event? Provide number of recycle bins: <u>20</u> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Will all portable toilets have secondary containment trays? (exceptions for ADA compliant portable toilets) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do all storm drains have screens to temporarily protect trash and debris from entering? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are spill cleanup kits readily available at designated spots? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

* A Post-Event Storm Water Compliance Checklist will be completed by City Staff.

City of National City

PUBLIC PROPERTY USE HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

Persons requesting use of City property, facilities or personnel are required to provide a minimum of \$1,000,000 combined single limit insurance for bodily injury and property damage which includes the City, its officials, agents and employees named as additional insured and to sign the Hold Harmless Agreement. Certificate of insurance must be attached to this permit. The insurance company issuing the insurance policy must have a A.M. Best's Guide Rating of A:VII and that the insurance company is a California admitted company; if not, then the insurance policy to the issuance of the permit for the event. The Certificate Holder must reflect:

City of National City
Risk Management Department
1243 National City Boulevard
National City, CA 91950

Organization: San Diego Association of Car Clubs
Person in Charge of Activity: Brian K. BahrAlmeida
Address: 2704 Transportation Ave. National City Ca. 91950
Telephone: [REDACTED] Date(s) of Use: 07/19/25

HOLD HARMLESS AGREEMENT

As a condition of the issuance of a temporary use permit to conduct its activities on public or private property, the undersigned hereby agree(s) to defend, indemnify and hold harmless the City of National City and the Parking Authority and its officers, employees and agents from and against any and all claims, demands, costs, losses, liability or, for any personal injury, death or property damage, or both, or any litigation and other liability, including attorney's fees and the costs of litigation, arising out of or related to the use of public property or the activity taken under the permit by the permittee or its agents, employees or contractors.

Signature of Applicant: [REDACTED]

Official Title: EVENT COORDINATOR Date: 3/11/25

For Office Use Only

Certificate of Insurance Approved _____ Date _____

City of National City BUSINESS TAX CERTIFICATE



2025

TO BE POSTED IN A CONSPICUOUS PLACE
AND
NOT TRANSFERABLE OR ASSIGNABLE

"For Services Provided in National City, California Only"

Business Name SOCAL TRANSPORT & LOGISTICS INC.
Business Location 2704 TRANSPORTATION AVE STE E
NATIONAL CITY, CA 91950-8785
Business Owner(s) SOCAL TRANSPORT & LOGISTICS INC.

Business Type Other
Account Number 09052835
Effective Date January 01, 2025
Expiration Date December 31, 2025

SOCAL TRANSPORT & LOGISTICS INC.
2704 TRANSPORTATION AVE STE E
NATIONAL CITY, CA 91950-8785

City Manager

**NOTE: IT IS YOUR OBLIGATION TO RENEW THIS
CERTIFICATE WHETHER OR NOT YOU RECEIVE A
RENEWAL NOTICE**

**THIS BUSINESS TAX CERTIFICATE DOES NOT PERMIT A BUSINESS
THAT IS OTHERWISE PROHIBITED.**

For all inquiries regarding this certificate, contact HdL
Business Tax Support Center at (619) 382-2596.

SOCAL TRANSPORT & LOGISTICS INC.

Thank you for your payment on your National City Business Tax Certificate. **ALL CERTIFICATES MUST BE AVAILABLE FOR INSPECTION UPON REQUEST.** If you have questions concerning your business license, contact the Business Support Center via email at: NationalCity@HdL.gov or by telephone at: (619) 382-2596

Keep this portion for your license separate in case you need a replacement for any lost, stolen, or destroyed license. A fee may be charged for a replacement or duplicate certificate.

This certificate does not entitle the holder to conduct business before complying with all requirements of the National City Municipal code and other applicable laws, nor to conduct business in a zone where conducting such business violates law.

If you have a fixed place of business within the National City, please display the Business Tax Certificate below in a conspicuous place at the premises. Otherwise, every Business Tax Certificate holder not having a fixed place of business in the City shall keep the Business Tax Certificate upon his or her person, or affixed in plain view any cart, vehicle, van or other movable structure or device at all times if required by the Collector.

Starting January 1, 2021, Assembly Bill 1607 requires the prevention of gender-based discrimination of business establishments. A full notice is available in English or other languages by going to: <https://www.dca.ca.gov/publications/>



BUSINESS TAX SUPPORT CENTER
8839 N CEDAR AVE #212
FRESNO, CA 93720-1832



City of National City BUSINESS TAX CERTIFICATE

SOCAL TRANSPORT & LOGISTICS INC.
2704 TRANSPORTATION AVE STE E
NATIONAL CITY, CA 91950-8785

Account Number: 09052835

Date of Issue: 01/01/2025



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/11/2025

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. 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).

| | | |
|--|---|---------------|
| PRODUCER HARDING INSURANCE AGENCY, INC. PO BOX 131360 Carlsbad, CA 92013-1360 License #: 0F09658 | CONTACT NAME: Carmelita Mata | |
| | PHONE (A/C, No, Ext): (760)603-1100 FAX (A/C, No): (760)603-1102 E-MAIL ADDRESS: csr@hardinginsuranceonline.com | |
| INSURED SAN DIEGO ASSOCIATION OF CAR CLUBS PO BOX 601384 San Diego, CA 92160 | INSURER(S) AFFORDING COVERAGE | NAIC # |
| | INSURER A: United States Liability Insurance Co. | 25895 |
| | INSURER B: | |
| | INSURER C: | |
| | INSURER D: | |
| | INSURER E: | |

COVERAGES **CERTIFICATE NUMBER:** 00006488-1694761 **REVISION NUMBER:** 46

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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | Y | | NBP1563718C | 04/20/2025 | 04/20/2026 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 |
| A | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> | Y | | NBP1563718C | 04/20/2025 | 04/20/2026 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ 0 | Y | | XL1626501C | 04/20/2025 | 04/20/2026 | EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N | N/A | | | | PER STATUTE OTH-ER 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)

Groupe S.D.

Type of Event: Car Show and Cruise

Event Dates: 07/19/25

Location of Event: 2400 Transportation Ave (Down 4 blocks to), 3000 Transportation Ave, National City, California 91950, United States

(continued on ACORD 101 Additional Remarks Schedule)

CERTIFICATE HOLDER

CANCELLATION

City of National City
 Risk Management Department
 1243 National City
 National City, CA 91950

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

(CMM)

© 1988-2015 ACORD CORPORATION. All rights reserved.



ADDITIONAL REMARKS SCHEDULE

| | | | |
|---|---------------------------|--|--|
| AGENCY HARDING INSURANCE AGENCY, INC. | | NAMED INSURED SAN DIEGO ASSOCIATION OF CAR CLUBS | |
| POLICY NUMBER NBP1563718C | | | |
| CARRIER United States Liability Insurance Co. | NAIC CODE 25895 | EFFECTIVE DATE: 04/20/2025 | |

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

(continued from Description of Operations)
 THE CITY OF NATIONAL CITY, ITS OFFICIALS, AGENTS, EMPLOYEES, AND VOLUNTEERS is listed as additional insured as it pertains to the written contract.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - DESIGNATED PERSON
OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

SCHEDULE

Name of Additional Insured Person(s) Or Organization(s):

Effective Date: 04/20/2025

THE CITY OF NATIONAL CITY, ITS OFFICIALS, AGENTS, EMPLOYEES, AND VOLUNTEERS

1243 NATIONAL CITY BLVD.

NATIONAL CITY, CA 91950

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph C. **Who is An Insured in Section II - Liability:**

3. Any person(s) or organization(s) shown in the Schedule is also an additional insured, 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 in the performance of your ongoing operations or in connection with your premises owned by or rented to you.



Entity Status Letter

Date: 3/11/2025

ESL ID: 5323551069

Why You Received This Letter

According to our records, the following entity information is true and accurate as of the date of this letter.

Entity ID: 3085422

Entity Name: SOCAL TRANSPORT & LOGISTICS, INC.

1. The entity is in good standing with the Franchise Tax Board.
2. The entity is **not** in good standing with the Franchise Tax Board.
3. The entity is currently exempt from tax under Revenue and Taxation Code (R&TC) Section 23701 .
4. We do not have current information about the entity.
5. The entity was administratively dissolved/cancelled on _____ through the Franchise Tax Board Administrative Dissolution process.

Important Information

- This information does not necessarily reflect the entity's current legal or administrative status with any other agency of the state of California or other governmental agency or body.
- If the entity's powers, rights, and privileges were suspended or forfeited at any time in the past, or if the entity did business in California at a time when it was not qualified or not registered to do business in California, this information does not reflect the status or voidability of contracts made by the entity in California during the period the entity was suspended or forfeited (R&TC Sections 23304.1, 23304.5, 23305a, 23305.1).
- The entity certificate of revivor may have a time limitation or may limit the functions the revived entity can perform, or both (R&TC Section 23305b).

Connect With Us

Web: ftb.ca.gov
Phone: 800-852-5711 from 7 a.m. to 5 p.m. weekdays, except state holidays
916-845-6500 from outside the United States

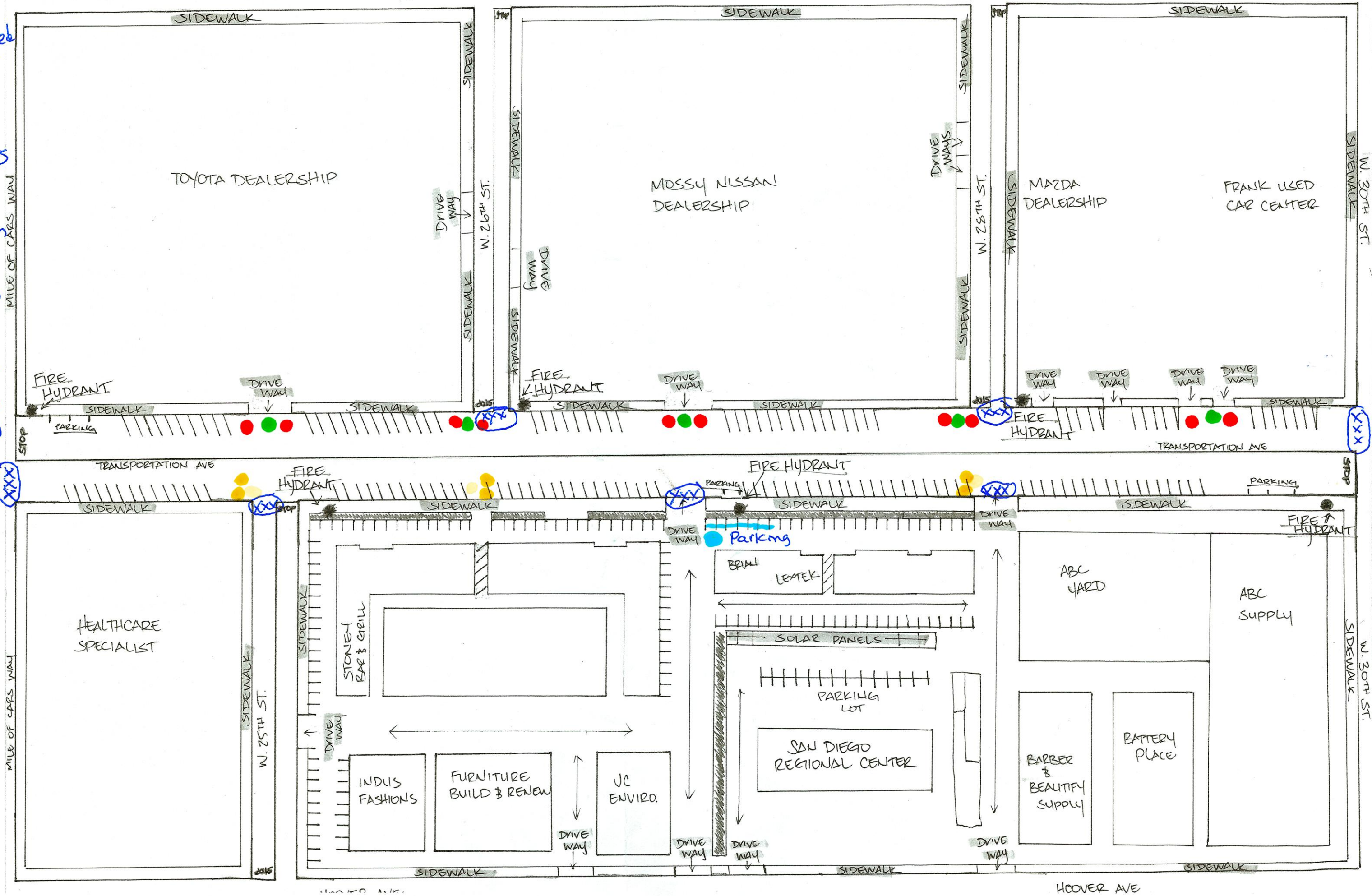
California
Relay Service: 711 or 800-735-2929 (For persons with hearing or speech impairments)

NATIONAL CITY BLVD

Group's Summer Showcase : CAR SHOW

NATIONAL CITY BLVD

- XXX = Blocked OFF
- = Food Truck
- = Vendors
- = Handi-cap Restroom
- = Classic Restroom
- = Hand wash station
- = Handicap Parking



MILE OF CARS WAY

MILE OF CARS WAY

W. 30TH ST.

W. 30TH ST.

XXX

STOP

2016

2016

HOOPER AVE.

HOOPER AVE