



Permit Number: PZ_____
Date Issued: _____
Receipt No: _____
Date Paid: _____

**Do Not Write Above Line**

**SPECIAL EVENT PROCEDURES AND APPLICATION**

***Please read and initial each section below***

1. All permit applications must be submitted a minimum of thirty (30) days prior to the Special Event; failure to submit thirty (30) days prior to the special event may result in disapproval of the Special Event. The application and all required documents must be returned to the Community Development Department for processing. Following are the processing procedures:

Initial \_\_\_\_\_

**Processing Procedures**

2. Upon receipt of application and confirmation of required documents, the Community Development Department will schedule a Special Event Meeting to review the application. The applicant or their representative must be present at the Special Event Meeting. Additional follow-up meetings may be required; you or your representative must attend these meetings.

Initial \_\_\_\_\_

3. The committee shall review the application and all accompanying documents to determine the completeness of the application; availability of the venue, and appropriateness of the application. You may request the City Manager waive some or all fees at this time. *Please be aware the approval process may take additional meetings.*

Initial \_\_\_\_\_

4. You will be required to post a \$300.00 cash bond in accordance with Chapter 18 - Businesses Article IV, Section 18-102 (a)(b)(c)(d) abridged below:

“(a) Any applicant who engages in any carnival, circus, show or exhibition, which activities are of a transient nature and are not intended to be permanent, shall . . . post with the city a \$300.00 cash bond to ensure against any damage, litter, trash or refuse accumulated and thrown into or upon publicly owned property by customers, invitees, or other persons utilizing, viewing and/or participating in any event sponsored by the applicant specifically designed to attract people thereto.

(b) The applicant required in this section to post bond shall request the return of the bond after the termination of the activities described in this section.

(c) . . . If no damage or litter, trash or refuse is in or upon the public property and no litter, trash or refuse exists upon the premises that will spread to and upon adjacent public property, then in that event the cash bond shall be returned to the applicant.

(d) If litter, refuse, trash or damage is sighted upon public property, caused by the applicant's activities, then the applicant shall be given written notice to repair any damage and/or remove all items of litter, refuse and trash from public property or that which will spread upon public property within ten days. Upon the applicant's failure to act within ten days, the city shall notify the applicant of the date and time wherein a hearing will be held to determine forfeiture of the bond. “

Initial \_\_\_\_\_

## SPECIAL EVENT APPLICATION

### **Applicant Information:**

Applicant Name:		
Organization Name:		
Organization Address:		
Phone:	Cell:	Fax:
Email Address		

### **Event Information:**

Event Name:		
Event Coordinator:		
Phone:	Cell:	Fax:
Email Address:		
Event Dates:	Event Times:	
Email Address		
Onsite Contact:		
Cell:	Phone:	

### **Location of Event:**

- Ernie Mills Park       Centennial Park (Boat Ramp)       Other \_\_\_\_\_
- Historic District  
Streets involved: \_\_\_\_\_
- City Wide  
Streets involved \_\_\_\_\_

### **Property Owner:**

Property Owner:		
Property Owner Address:		
Phone:	Cell:	Fax:
Email Address:		

### **Applicant Requests of City:**

- |  |  |
|--|--|
| <input type="checkbox"/> Electricity               | <input type="checkbox"/> Police Presence     |
| <input type="checkbox"/> Restroom Access           | <input type="checkbox"/> Fire Dept. Presence |
| <input type="checkbox"/> Internet Access           | <input type="checkbox"/> Other: _____        |
| <input type="checkbox"/> Barricades (Amount _____) | <input type="checkbox"/> Other: _____        |
| <input type="checkbox"/> Utilities/Water/Sewer     |  |

**Required Documents:**

- 1) Statement of Authorization (Form 'A') Attached?  
 Yes       No
- 2) Statement of Property/Business Owner Notification (Form 'B') attached?  
 Yes       No
- 3) Application for Special Event Vendor (Form 'C'), if required, attached?  
 Yes       No
- 4) Certificate of Flame Resistance?  
Required for all tents.  
 Yes       No
- 5) State Vendors License, if applicable?  
 Yes       No
- 6) Food Vendor Health Certificate?  
 Yes       No
- 7) Alcohol – State Authorizations?  
 Yes       No
- 8) Map of Event Route, including

- a. Route Beginning/Ending/Staging Area
- b. Location of Parking
- c. Barricade locations
- d. Contact Information during Event
- e. Restroom stations
- f. Information Station
- g. Food Service Stations
- h. Water Stations
- i. Alcohol Serving Station/Gardens
- j. Signage (including directional)
- k. Other: \_\_\_\_\_
- l. Other: \_\_\_\_\_

- 9) Other: \_\_\_\_\_
- 10) Other: \_\_\_\_\_
- 11) Other: \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW**

**Required Authorization:**

- \_\_\_\_\_  
**City Manager** **Date**
  
- \_\_\_\_\_  
**Community Development Department** **Date**
  
- \_\_\_\_\_  
**Fire Department** **Date**
  
- \_\_\_\_\_  
**Roads & Streets Division** **Date**
  
- \_\_\_\_\_  
**Utilities Department** **Date**
  
- \_\_\_\_\_  
**Police Department** **Date**
  
- \_\_\_\_\_  
**Communications Department** **Date**

**Approved:**             **Date:** \_\_\_\_\_

**Disapproved:**       **Date:** \_\_\_\_\_  
                                 **Reason:** \_\_\_\_\_  
                                 \_\_\_\_\_

**Condition(s):**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

<b>FEE SCHEDULE</b>	<b>AMOUNT</b>	<b>CODE</b>	<b>WAIVED</b> (when initialed)	<b>REMARKS</b>
Permit Fee	\$100.00	32202		
Building Insp. (if applicable)	\$75.00	32200		
Fire Inspection	Included	34290		
Police Department Patrol Services		36000		\$35.00 p/hour
Tent Fee (if applicable)	\$100.00	32202		
Utility Fee - Water Meter Fee & Set-up Fee (if applicable)				See attached Worksheet
Public Works Fee(s)				
Administrative Fee	\$50.00	32201		
<b>TOTAL</b>				
Refundable Trash Deposit	\$300.00	36000		Separate payment
<b>FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW</b>				
Date Paid:				
Receipt Number:				
Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card				
Received By:				Date:



# CITY OF DUNNELLOH

## STATEMENT OF AUTHORIZATION

Applicant Information	
Permit Number: (assigned by City)	Today's Date:
Applicant Name:	Owner/Agent Name:
Applicant Address:	Property Address:
Phone:	Phone:
I, _____, (owner/agent) hereby authorize _____, to use my property located at _____, for the following purposes:  _____ (Name of Event)  on the following dates: <input type="text"/>	
_____ SIGNATURE (Owner/Agent)	
STATE OF FLORIDA, COUNTY OF: _____	
The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, (owner/agent), who is personally known to me or produced _____ as identification.	
_____ <b>Notary Public</b> Printed Name: _____ Commission Number: _____ Expires: _____	



**CITY OF DUNNELLOH**

**STATEMENT OF PROPERTY/BUSINESS OWNER NOTIFICATION**

<b>Applicant Information</b>			
Permit Number:		Date:	
Applicant Name:		Event:	
Applicant Address:		Event	
		Location:	
Phone:		Event Dates:	
<b>Applicant Acknowledgment</b>			
<p>I, _____, representative for _____, do hereby acknowledge that the property/ business owners impacted by _____, have been notified in the following manner: <span style="float: right;">(Special Event)</span></p> <p><i>(please check all that apply)</i></p> <p><input type="checkbox"/> United States Mail (Include proof of mailing)</p> <p><input type="checkbox"/> United States Mail – Certified (Include proof of mailing)</p> <p><input type="checkbox"/> Hand-Delivery of Notification (Include proof of delivery)</p> <p>I have attached a copy of the property/business owner notification of the Special Event and its potential impact to their property/business; and proof of hand delivery and/or proof of mailing.</p> <p><i>Sign &amp; date below:</i></p>			



**CITY OF DUNNELLON  
COMMUNITY DEVELOPMENT DEPARTMENT  
(352) 465-8503  
APPLICATION FOR SPECIAL EVENT VENDOR PERMIT**

Special Event uses include the retail and/or wholesale of merchandise and/or produce and food products and shall obtain a temporary use permit for the duration of the Special Event. The Special Event permit is site specific and shall not exceed the duration of the Special Event.

**ALL FOOD VENDORS MUST HAVE A HEALTH CERTIFICATE**

Date: \_\_\_\_\_ Permit No. \_\_\_\_\_

Special Event: \_\_\_\_\_

Applicant Business Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Location of site: \_\_\_\_\_

Special Event Day(s) & Time(s): \_\_\_\_\_

Type of Merchandise Sold: \_\_\_\_\_

**Contact Information:**

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

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

Phone: \_\_\_\_\_  Home  Business  Cell

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Fees:**

Administrative Review \$50.00 (32201)

Payment is due upon approval of permit.

**Special Event Authorized Agent:**

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

(Print Name) \_\_\_\_\_ (Title) \_\_\_\_\_

Approved:  Disapproved:  Reason: \_\_\_\_\_

\_\_\_\_\_  
Community Development Department Date: \_\_\_\_\_