



SPECIAL EVENT PERMIT APPLICATION

Community Development Department
P.O. Box 756, Bunnell, FL 32110
Phone (386) 437-7516 Fax (386) 437-8253

APPLICANT/ORGANIZATION INFORMATION

Name of Activity/Event _____

Description of Event _____

Sponsoring Organization Name _____

Primary Contact Person:

Name _____

Address _____

Phone _____ E-mail _____

EVENT INFORMATION

Location of Event _____

Date(s) of Event _____

Hours of Operation _____ Will be gated Yes No

Set-up date(s)/time(s) _____

Expected Number of Attendees _____

Parking Details: location of all parking, traffic flow, and points of ingress/egress shown on dimensionally accurate sketch

Utility Services Needed: Yes No

Electrical Water

Parade: Yes No (sketch of route will be needed; closing of State Roads requires FDOT permission)

Route _____

Start/End Times _____ Number of Participants _____

Staging location _____ Staging Start Time _____

Vendors: Yes No (vendors will need to obtain an appropriate Bunnell business tax receipt prior to the event)

Beer, Wine, or Alcohol being sold: Yes No (additional information needs to be provided- see last page of application)

Street Closings Needed: Yes No

Street Names: _____

Need for City Barricades will be determined by the Special Event Review Committee and rates charged according to fees established by the City Commission.

Entertainment Details: (show location on dimensionally accurate sketch)

Stage being used Yes No

Speakers/Microphone Yes No

Electrical Hook-ups needed Yes No

Performance Time(s) _____

Clean-up/Litter Control:

_____ Number of Trash Cans

_____ Number of Recycle Bins

Requesting City Solid Waste Service for dumpster and pick-up Yes No

Security: (if using or N/A)

Name of Company _____

Contact Name and Number _____

_____ Number being hired

Requesting Off-duty Law Enforcement Officers Yes No (personnel rates will apply)

Providing internal Security with Event Staff Yes No Number _____

Emergency Medical Services/Fire Services: (show location on dimensionally accurate sketch)

Department of Health (64E-6.0101 FAC compliance):

Potable Water Source: _____

Method of Sewage Disposal: _____

Food service vendors proposed: Yes No Handwash Stations (number): _____

Camping proposed: Yes No

Approved by: _____ Date: _____

Indemnification Agreement: The applicant assumes full responsibility and liability for and indemnifies, defends, and saves the City harmless against all liability, claims for damages, and suits for or by reason of any injury to any person, including death, and damage to any property, connected to the holding of the special event. Initial_____

Insurance: No later than 2 days prior to the event, I agree to provide a copy of the insurance certificate as required by Code of Ordinance Sec. 2-204. Insurance—Review insurance amounts considering major/minor event. Initial_____

By signing this application I certify that the information contained herein and submitted along with this application is true and accurate to the best of my knowledge and belief.

Applicant Signature: _____ Date: _____

Applying as Re-Occurring Special Event Yes No

SPECIAL EVENT CHECKLIST

(must accompany application)

Documents below must accompany the Special Event Application or the application will be considered incomplete.

- Completed Application
- Application Review fee
- Performance Deposit (if applicable)
- If using City facility, documentation of completed Facility Reservation form
- Dimensionally Accurate Sketch of Event
 - Sketch must show the following (if applicable)
 - Parking location and traffic flow pattern
 - Gate locations or ingress/egress points
 - Tent and booth locations; Vendor locations
 - Permanent structures or buildings on site
 - Light fixtures/Utility poles/Electrical hook-ups
 - Stage location(s)
 - Restroom/portable toilet locations
 - Hand wash/sanitizer locations
 - Refreshment stand locations
 - Established eating areas/tables
 - EMS/Fire Services station(s)
 - Location of Security (if applicable)
 - First-Aid station location (if applicable)
- Vendor List- all vendors must have appropriate business tax receipts
- Parade Route information and sketch
 - Documentation of FDOT approval for closure of State Roads (if applicable)
- Beer, Wine, or Alcohol Information- detailed proposal for sales, including vendor name, and whether vendor presently holds any type of license for on-premises consumption of alcoholic beverages; times beer, wine, or alcohol will be available for purchase
- List of Entertainment/Performers
- Internal Security Details
- Insurance certificate

NOTE: The Special Event Review Committee may provide additional feedback regarding other requirements which must be met in order for the Special Event Permit to be issued. Documentation of Insurance must be provided prior to any permit being issued.