



City of Delray Beach
 Special Event Permit
 Application
 REVISED 11.2.11
 PLEASE TYPE OR PRINT



Event Name/Title: _____

Event Date(s): _____ Times: _____

Requesting street closure: yes _____ no _____
 (If yes, need time/date for closure and reopening) _____

Event Sponsor/Producer: _____

Event Contact/Coordinator: _____

Name: _____
 Address: _____
 Telephone Number: _____ Cellular Number: _____
 E-mail Address: _____

Event Description/Purpose: _____

Brief History of Event (If applicable): _____

Planned Activities (Outline of activities/number of activities, i.e. entertainment,
 children's rides, games, other programs): _____

Number of Individuals Served Previous Year (if applicable): _____

Describe the targeted population and expected attendance: _____

Describe how the program or project addresses community needs: _____

Describe your Marketing/Promotions Program (How will you market/promote, i.e. TV, radio, posters, flyers, web sites, other): _____

Sponsor Category (please check) City Non-Profit/Charitable Private
Co-Sponsor – Non-Profit/Private

(If Non-profit attach proof of 501c(3), c(4), c(6), C(10), or c(19) or (d)

Event Location (Describe area boundaries of event/location): _____

Site plan attached: yes _____ no _____

(Site plan required for entire event site. Include locations of tents, stage, portalets, dumpsters, portable lighting, and barricade location if applicable.)

Rental of Old School Square: yes _____ no _____
(If yes, attach proof of approval)

Rental of Old School Square Park: yes _____ no _____
(If yes, attach proof of rental agreement with Parks & Recreation)

Private Property Use: yes _____ no _____
(If yes, attach letter giving authorization from property owner)

Event budget Revenue & Expenses attached: yes _____ no _____
(Required for all events)

Previous year Revenue/Expense summary attached: yes _____ no _____
 (Required for all events)

Arts and Economic Impact Calculator attached: yes _____ no _____
 Obtained on line at www.AmericansForTheArts.org
 (Required for all events except minor events and 5K Runs)

Do you have cash sponsors for the event: yes _____ no _____
 (Indicated on budget)

Do you have in kind sponsors for the event: yes _____ no _____
 (Indicated on budget)

Serving or selling alcoholic beverages: yes _____ no _____
If yes, what entity is obtaining the Alcohol License permit? _____
(If yes, copy of license and alcohol liability insurance required two (2) weeks prior to event)

Event certificate of insurance attached: yes _____ no _____
(Required two (2) weeks prior to event naming the City as additional insured, also required for vendors)

Playing of amplified music: yes _____ no _____
(Waiver required)

Will there be entertainment: yes _____ no _____
 (If yes, attached list of Performers and/or DJ's)
 If yes, sponsor agrees all entertainment will be family oriented
 and contain no obscenities: yes _____ no _____

Requesting Police assistance: yes _____ no _____
 (traffic control/security)

Will supplement with private security: yes _____ no _____
(If yes, need plan attached)

Requesting Emergency Medical assistance: yes _____ no _____

Requesting barricade assistance: yes _____ no _____
 (If no, how are you handling?)

Requesting trash removal/clean up assistance: yes _____ no _____
 (If no, how are you handling?)

Requesting trash boxes/containers and liners: yes _____ no _____

Requesting stage use: yes _____ no _____
(If yes, check type)

Large stage (14' x 36') Small stage (16' x 21') Half small stage (8' x 21')

Requesting signage: yes _____ no _____
 Type: 4'x4' Event sign _____ Parking Signs _____
 Banner hanging _____ Indicate dates required _____
(Waiver required if more than two (2) week prior to event)

Requesting City Portable Generator: yes _____ no _____
 (If yes, size & power)

Food and beverage vendors: yes _____ no _____
 If yes, approximate number _____
 (Health Department approval required) yes _____ no _____

Other vendors: yes _____ no _____
 (Indicate type) _____

Tents: yes _____ no _____
 If yes, How many _____ What size or size required _____
(If yes, tent permits and fire inspections may be needed)

Will the event include amusement rides: yes _____ no _____
(If yes, type and location and copy of liability insurance required, also requires state license and inspection.)

Will the event be gated: yes _____ no _____
(Show on-site map)

Will there be a charge for the event: yes _____ no _____
(If yes, indicate ticket prices) \$ _____

Will there be fireworks or other pyrotechnics: yes _____ no _____
(If yes, contact Fire Marshal to obtain and complete permit application)

Will there be cooking with compressed gas: yes _____ no _____
(If yes, contact Fire Marshal for inspections)

Will you be providing port-a-lets for the event: yes _____ no _____
(If yes, locate on-site map. If no, indicate how you will handle restroom needs)

Is reserved parking requested: yes _____ no _____
(If yes, indicate locations and purpose for use)

Event Permit

Attachments:

- _____ Revenue/Expense Budget
- _____ Revenue/Expense Recap Last Years Event
- _____ Site Plan
- _____ Arts and Economic Impact Calendar
- _____ Letter Requesting Noise Ordinance Waiver
- _____ Letter Requesting Waiver Consumption Alcohol Beverages
- _____ Proof of Non-Profit Status
- _____ General Liability Insurance Certificate
- _____ Alcohol Beverage Liability Certificate
- _____ Proof of Rental Agreement or Authorization Letter from Private Property Owner
- _____ Hold Harmless Agreement, notarized.

Submittal Date Requirements:

- **Minor Event** 45 days prior to event
- **Intermediate Event** 90 days prior to event
- **Major Event** 120 days prior to event
- **Neighborhood Block Party** 30 days prior to event

Event Contractor/Coordinator

Date

Please print:_____

Please enclose the appropriate non-refundable application fee payable to the City of Delray Beach, 100 N.W. 1st Avenue, Delray Beach, Florida 33444. Required with permit application.

For Staff Use Only

Date Received _____

Application fee received \$ _____