



SPECIAL EVENT APPLICATION/ PERMIT

Event Name: _____

Event Description: _____

Date(s) of Event: _____ Event Hours: _____

Name of applicant: _____

Address: _____ Telephone: _____

Location of Special Event (if different from above) _____

Property Owner: _____

Signature of applicant: _____

Florida Driver's License: _____

Does this event require street closings?: Yes: ____ No: ____

If yes, please describe which road(s) are to be closed.

Does this event require police services? Yes: ____ No: ____

If yes, please describe which police services have been contracted for this event.

NOTE: Applicant and owner hereby acknowledge that this permit is subject to the following conditions:

- AUCTION SALES ARE NOT CONSIDERED SPECIAL EVENTS.
• NO ALCHOLIC BEVERAGES MAY BE SOLD OR DISPENSED WITHOUT PROPER STATE LICENSE.
• ONLY ONE SIGN MAY BE POSTED ON THE PROPERTY.
• NO SIGNS ARE ALLOWED WITHIN THE PUBLIC RIGHT-OF-WAY.
• A DRAWING TO SCALE, MUST BE SUBMITTED LOCATING ALL IMPROVEMENTS ON THE PROPERTY, THE PROPOSED LOCATION OF THE SPECIAL EVENT, ANY TEMPORARY STRUCTURE PROPOSED, AND THE PARKING TO BE UTILIZED.
• A COMPLETED BUILDING PERMIT APPLICATION, REQUIRED IF tent is larger than 200 s.q. ft, generator, and/or electrical work.

OFFICE USE ONLY

Special Event Permit # _____ First _____

Second _____

Planning Division Signature: _____ Approved _____

Disapproved _____

Police Department Signature: _____ Approved _____

Disapproved _____