

## City of Belle Isle

1600 Nela Avenue, Belle Isle, FL 32809 Tel 407-851-7730 \* Fax 407-240-2222 \* www.belleislefl.gov

Special Events Application							
City Code Chapter 26, Art II Section 26-20 through 26-30							
Name of Event Date of Event							
Organization Represented							
Organization Address (City, State, Zip)							
Specific Location of Private	Public						
Event:							
Applicants Name							
Date Approved:	ts Contact Number						
A	e Emergency Contact Number						
A	Applican	nts Email					
Event permits are required for any occasion or event including but not limited to exhibitions, celebrations, festivals, shows							
including firework displays and any event that is not a normal function of any location or zoning district. If applicant does							
not meet city-designated deadlines required for approvals (alcohol, tents, cooking, food trucks, etc.) as outlined in event							
permit application, the city may deny or cancel the event permit.							
per experience years of experience	,						
Describe the type and size of event	(locatio	n, how much a	rea to be used,	stages, entertainme	nt, etc.) Ple	ease provide a	
simple sketch showing streets to be closed, placement of tents, etc.							
Event Start Time (includes setup tin				nd Time (includes cl	eanup)		
(	,		1 - 1 - 1 - 1	(			
Please answer all questions (no bla	anks)						
Is your organization a charity or non-pro		Yes	No				
If so, what is the name of the							
charitable or non-profit organization?							
Do you anticipate serving or seeling alco		Yes	No				
Will you be using amplified sound?		Yes	No				
Does your event carry liability insurance		Yes	No				
(required-please attach)  • If so, who is the carrier							
Expected Number of:		Participants		Spectators			
Will tents be used for the event?		Yes	No	•	How Many?		
Will any signs or banners be erected		Yes	No	How Many?	- <b>'</b> .		
Will generators be used		Yes	No	Location of Sou			
Arrangement for restroom facilities		Yes	No	Location	วท		
Will there be food items distributed/sold		Yes	No	Any fire hazaro	Any fire hazards?		
Will there be mechanical rides, space w	/alk or	Yes	No	Explain:			
other attractions?							
Pain Policy for Event							
Rain Policy for Event							
Do you need the City of Belle Isle to provide the following (Note, reimbursement to the City will be required for these services?							
Roll Carts		'es	No	How many?			
Barricades	١	′es	No	How many?			
pad Closures Start Time			Fnd Time				



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List locations and dates of prior events held	1					
over the past five years	2					
•	3					
What type of arrangements has been made						
for medical assistance if needed?						
Number of police officers needed for crowd		Paid, per officer, at a rate of \$ per hour.				
and traffic control:		(4-hour minimum per officer) See Fee Schedule.				
HOLD HARMLESS CLAUSE		OTHER REQUIREMENTS				
Permittee/organization hereby shall assume al	l risks incident to or	ALL FEES ARE NON-REFUNDABLE				
in connection with the permitted activity and s		Hiring of off-duty police officers and EMT's or security				
responsible for damage or injury, of whatever	·	personnel may be required. (When hiring off-duty police				
person or property, directly or indirectly, arisin		officers there is a 2 police officer minimum at 3 hours each.)				
connection with the permitted activity or the o		Arrangements must be made through the City of Belle Isle				
permitee(s) operation. Permittee hereby expr		Police Department.				
defend and save the City harmless from any pe	enalties for violation	The outdoor release of balloons is prohibited by Florida law,				
of law, ordinance or regulation affecting its act	ivity and from any	in accordance with Florida Statute 379.233 and is punishable				
and all claims, suits, losses, damages or injurie	s directly or	by a fine.				
indirectly arising out of or in connection with t	he permitted	<ul> <li>Use of the City's official seal on any marketing, promotional</li> </ul>				
activity or conduct of its operation or resulting	from the negligence	or like materials without approval by the City of Belle Isle is in				
or intentional acts or omissions of permittee o	r its officers, agents	violation of City Charter Section 2-1. Please direct all matters				
and employees.		and inquiries related to using the City seal on event materials				
Applicant Signature		to the City Manager at <u>407-851-7730</u> or email <u>bfrancis@belleislefl.gov</u> .				
Date						
EVENT CHECK LIST	_	<ul> <li>Special events which are subject to this article and are being held without having obtained a permit as provided in this</li> </ul>				
-	advartising vour	article are prohibited. Any violation shall be punished as				
We recommend that you do not proceed with event until you have received your permit app		provided by law.				
application is not a guarantee of event approve		The City of Belle Isle may seek legal or equitable relief against				
applications will not be accepted and applicati	-	any person or entity violating the provisions of this article. To				
submitted no less than 14 days prior to the rec		the extent not inconsistent with Florida Law, a violation of				
the application has been submitted with all rec		this article may be subject to an injunction, temporary or				
allow 14 days for processing. If City Commission		permanent, without the necessity of showing an actual				
required, processing may take 30 additional da		irreparable harm.				
71 6 7	•	Unless otherwise provided, any person violating any of the				
The following items must be submitted in orde	r for your permit to	provisions or failing to comply with any of the mandatory				
be processed:		requirements of this code is guilty of a misdemeanor. Any				
<ul> <li>Completed Permit Application</li> </ul>		person convicted of a misdemeanor under this code shall be				
<ul> <li>Check made out to the City of Belle Isle</li> </ul>		punished by a fine not to exceed \$5,000 or by imprisonment				
If applicable, sketch or diagram of the events of the	ent and/or roads to	not to exceed one year, or by both such fine and				
be closed		imprisonment.				
The following items must be submitted before	e your permit will be					
issued:						
Proof of liability insurance listing the City of Belle Isle as co-						
insured.						
Notification letter to residents and busi	ness it there will be					
roads closed.						
Event Diagram						
FOR OFFICE USE ONLY: REFER TO FEE SCHEDU	JLE	City Manager Approval				
		,				
FEE PAID CHK/CAS	H/CC	DOLICE DEDARTMENT ADDROVAL				
DATE		POLICE DEPARTMENT APPROVAL				