



DATE/TIME RECEIVED:

TOWN OF LAKE PARK
COMMUNITY DEVELOPMENT DEPARTMENT
SPECIAL EVENT PERMIT APPLICATION

For Events being held on Town Property, Town services may be requested for an additional fee(s). Please schedule a pre-submittal meeting with the Community Development Director at least 60 days in advance of your event by calling 561-881-3319.
\*This Application must be completed and submitted by the Event Organizer ("Applicant")\*

Instructions:

This completed Special Event Permit Application and all relevant attachments must be submitted to the Community Development Department not less than twenty-one (21) calendar days prior to the date of the proposed Event.
For events being proposed wholly or partially on Town Property, the deadline to submit is sixty (60) calendar days prior to the date of the proposed Event.

Application Fee Due and Payable Upon Submittal: \$100.00 (\$50.00 for individuals or Non-profit organizations)

Non-Profit IRS Tax Identification Number (required if Applicant is a non-profit):

(If applicable)

Name of Applicant (i.e. Event Organizer):

\_\_\_\_\_

Name of Event:

\_\_\_\_\_

\_\_\_\_\_

Address/Location of Event:

\_\_\_\_\_

If this Event requires a Town facility rental, please contact our Special Events Department at 561-840-0160 regarding the completion of the Facility Usage Application PRIOR to submitting this application.

**Dates/Times of the event (as applicable):**

	Date	Day	Begin Time	End Time
Event Day 1	_____	_____	_____ ( ) AM ( ) PM	_____ ( ) AM ( ) PM
Event Day 2	_____	_____	_____ ( ) AM ( ) PM	_____ ( ) AM ( ) PM
Event Day 3	_____	_____	_____ ( ) AM ( ) PM	_____ ( ) AM ( ) PM
Event Day 4	_____	_____	_____ ( ) AM ( ) PM	_____ ( ) AM ( ) PM
Event Day 5	_____	_____	_____ ( ) AM ( ) PM	_____ ( ) AM ( ) PM
Event Day 6	_____	_____	_____ ( ) AM ( ) PM	_____ ( ) AM ( ) PM

**Additional Applicant Information:**

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

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

State/Zip \_\_\_\_\_

CONTACT PHONE: \_\_\_\_\_

Alternate Phone # \_\_\_\_\_

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

E-mail : \_\_\_\_\_

**Description and Purpose of the Event**


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Estimated number of participants? \_\_\_\_\_

Has this event ever occurred in the Town of Lake Park? Yes \_\_\_\_ No \_\_\_\_

Has this site had a Special Event Permit this calendar year? Yes \_\_\_\_ No \_\_\_\_

Will there be an admission fee for the Event? *If yes, how much?* Yes \_\_\_\_(\$\_\_\_\_)No\_\_\_\_

**\*\*THE FOLLOWING SECTIONS MAY NOT APPLY TO  
NON-COMMERCIAL EVENTS\*\***

Will your event require road closure? Yes \_\_\_\_ No \_\_\_\_

***If YES, describe the requested street segment closure and time and provide a Traffic Circulation Plan prepared by a Traffic Engineer, including a detour signage plan. You are responsible for notifying affected businesses/entities, including Palm Tran, regarding affected routes: \_\_\_\_\_***  
**(Initial to acknowledge statement)**

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**EVENT COMPONENTS** (Check the items that will be associated with your event.)

- \_\_\_\_\_ Road closure
- \_\_\_\_\_ Electric service hook-up required
- \_\_\_\_\_ Water service hook-up required
- \_\_\_\_\_ Sidewalks blocked
- \_\_\_\_\_ Municipal park(s) prepared
- \_\_\_\_\_ Booths or other temporary structures
- \_\_\_\_\_ Parking lots to be partially or completely closed
- \_\_\_\_\_ Food Vendors
- \_\_\_\_\_ Town litter pick-up or street sweeping
- \_\_\_\_\_ Tents (if yes, describe type and size \_\_\_\_\_)
- \_\_\_\_\_ Barricades ordered
- \_\_\_\_\_ Alcohol served
- \_\_\_\_\_ Security/Law Enforcement
- \_\_\_\_\_ Music, bands, DJ
- \_\_\_\_\_ Rides or other amusements
- \_\_\_\_\_ Animals
- \_\_\_\_\_ Fireworks
- \_\_\_\_\_ Bleachers
- \_\_\_\_\_ Designated parking area
- \_\_\_\_\_ Town Restroom (if yes, please describe \_\_\_\_\_)
- \_\_\_\_\_ Portable Restrooms (if yes, please describe \_\_\_\_\_)
- \_\_\_\_\_ Dumpsters/Trash Receptacles
- \_\_\_\_\_ Portable stage
- \_\_\_\_\_ Other (e.g., bounce house, etc.)

**EVENT VENDOR(S) LIST ALL NAMES (identify which ones are food trucks)**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Will the event require the use of electricity? Yes \_\_\_ No \_\_\_\_\_

Will the event require water hook-up? Yes \_\_\_ No \_\_\_\_\_

\*Will food and/or beverages be served? Yes \_\_\_ No \_\_\_\_\_

\*Will the event have vendors or concession sales, including food? Yes \_\_\_ No \_\_\_\_\_

***\*If the answer to the above question is YES, the Applicant/Event Organizer is responsible for securing all respective Palm Beach County and State of Florida Health Certificates for food vendors, as well as copies of all other commercial vendor licenses.***

**WILL THE EVENT INCLUDE FOOD TRUCKS?** Yes \_\_\_\_\_ No \_\_\_\_\_

***\*If the answer to the above question is YES, the Applicant/Event Organizer must ensure all food trucks have the proper State license and PBC Business Tax Receipt, and provide copies to the Town with the initial submittal of this Application (or at the very latest 14 calendar days in advance of the event).***

*For events on Town property, Applicants must also provide to the Town a Certificate of Insurance issued no more than thirty (30) days prior to the date of the event and naming the Town of Lake Park (and the CRA, if the event is taking place within the CRA area) as certificate holder and an additional insured with respect to commercial general liability. The required limits are \$1 million per occurrence and \$2 million aggregate. \$100,000 damage to rented premises must also be provided.*

***Applicants who are found to have attempted to circumvent this requirement by using another person/entity for the purposes of obtaining the required insurance coverage shall be barred from obtaining another special event permit within the Town for three years.***

***(Applicant initial to acknowledge statement)***

***The Applicant holds full responsibility and liability for its vendors.*** \_\_\_\_\_

***(Initial to acknowledge statement)***

\*\*Will alcoholic beverages be served? Yes \_\_\_ No \_\_\_\_\_

***\*\*If the answer to the above question is YES, additional liquor legal liability insurance usual to the insured's operations with a \$1million limit must be included on the Certificate of Insurance.***

\*\*\*Are you proposing signage? Yes \_\_\_ No \_\_\_\_\_

***\*\*\*If the answer to the above question is YES, please fill out the Signage Permit Application available in the Community Development Department. An additional \$100.00 application fee is required for this signage application. This application will be deemed incomplete if signage is proposed and a signage application is not submitted.***

Will the event have an official “Flyer” and/or promotional materials? Yes \_\_\_ No \_\_\_\_  
If yes, please provide a copy of the “Flyer”.

**Please provide a sketch of the Special Event site including: Proposed location of parking, tent(s), concession stand(s), booth(s), stage(s), etc. OR provide an attachment:**

**NOTE:** Public parking spaces are on a first-come, first-serve basis, and may be metered depending on where your event is being held.

**IF TENTS ARE BEING UTILIZED:**

**MAXIMUM ALLOWABLE TENT SIZE IS 35’ X 45’.**

**For ALL tents larger than 10 ft. x 10 ft. (pop-up style), a *Certificate of Flame Resistance* is required and must accompany this Special Event Permit Application.**

***(All requirements imposed by any of the reviewing entities below, will be communicated to the Applicant early-on and must be secured no later than 14 calendar days in advance of the event, with verification provided to the Town prior to the issuance of the Special Events permit)***

***(FOR OFFICE USE ONLY)***  
**SIGNATURES/APPROVALS:**

Please Sign and Date

**SPECIAL EVENTS DIRECTOR:** *(If applicable)*

\_\_\_\_\_ **DATE:** \_\_\_\_\_

**PUBLIC WORKS DIRECTOR:**

\_\_\_\_\_ **DATE:** \_\_\_\_\_

**MARINA DIRECTOR:** *(If applicable)*

\_\_\_\_\_ **DATE:** \_\_\_\_\_

**PALM BEACH COUNTY SHERIFF:**

\_\_\_\_\_ **DATE:** \_\_\_\_\_

**PALM BEACH COUNTY FIRE-RESCUE:**

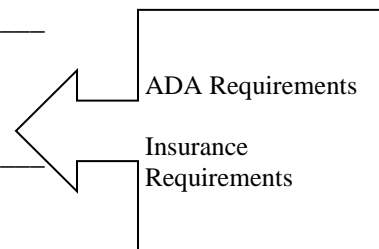
\_\_\_\_\_ **DATE:** \_\_\_\_\_

**RISK MANAGEMENT:** *(If applicable)*

\_\_\_\_\_ **DATE:** \_\_\_\_\_

**CODE COMPLIANCE OFFICER:**

\_\_\_\_\_ **DATE:** \_\_\_\_\_



**COMMUNITY DEVELOPMENT DIRECTOR:**

\_\_\_\_\_ **DATE:** \_\_\_\_\_

**Additional Comments (reviewers may include attachments):**

**APPLICANT SIGNATURE:** \_\_\_\_\_

**APPLICANT PRINTED NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PROPERTY OWNER: *(If Property Owner is not the Applicant)***

\_\_\_\_\_ **DATE:** \_\_\_\_\_

**PROPERTY OWNER PRINTED NAME:**

\_\_\_\_\_ **DATE:** \_\_\_\_\_