## CITY OF DELRAY BEACH

**Parks and Recreation Department** 



## **APPLICATION FOR SPECIAL EVENT**

Submittal of this application does not guarantee approval for the event.

Please make sure that you fill out this application completely. Do not forget to include a check for \$150.00 (non-refundable application fee) payable to the City of Delray Beach.

Applicant Information							
Applicant:	Achievement Centers for Children - Website: centers florg						
Address:	555 NW 4th Street. Street Address Apartment/Unit #						
	Delray Beach FL 33444  city State Zip						
	City State Zip						
Phone:	City State Zip (661)266-0003 Email: JCOrriss@delraychild.						
Event Producer:	JUIIA COYLISS Cell (561) 601-4804						
Type of Event (check event type and circle organization type):							
☐ Commercial (For-Profit/Non-Profit) ☐ Community (For-Profit/Non-Profit) ☐ Athletic (For-Profit/Non-Profit)							
	Accommon Acc						
SUNBIZ#_	Please submit IRS non-profit letter with application.						
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Event Nam Request Event Description + DAY 1 DAY 2 DAY 3	Please submit IRS non-profit letter with application.  Event Information  Event Information  Event Location: (end) Old School Square parillion  Event Location						
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5/7/24

Time

Date

	Event Details									
Attendance Estimates: Total Event Attendance: 300	Daily Attendance: 300	Peak Hourly Attendance	e: 300							
Is this an Annual Event? ☐ Yes ☐ No										
If yes, # of Years Held: 13 If yes, # of Years Held in Delray Beach: 13 Last Held: 202										
Is this event produced in other cities:   Yes Mo										
If yes, please list what cities:										
Is the event open to the public?										
Is there an Admission Fee/Ticket Fee? Yes No If yes, provide fees/ticket prices: Adult/General Admission; \$_50Senior: \$_50Child: \$										
Is fencing to be used (i.e. gated event)?	/									
ROAD CLOSURES  Will your event require road closures? Yes \( \subseteq \text{No} \) Politing Rd. Blocks  If YES, please describe the streets and intersection you are requesting to be closed										
STREET/INTERSECTION	CLOSURE Date / Time	RE-OPEN C								
Example: SW 9 <sup>th</sup> Ave from SW 1 <sup>st</sup> St to Atlantic Ave.	Nov 21, 2021 / 7:00am	Nov 21, 202								
NW 1 ST AVE-NN 3rd STR Swinton - Atlantic Ave	OCt 26,20241 8:00am	Oct 26, 20241	9: <b>6</b> 0am							
Allantic Ave (Swinten to 7+1 Ave) and back to	DC+ 26,2024 8:00am	OCt 26,20241	9:30am							
2nd Ave (OSS)										
ACTION STORY	ENTS WHOLL MAY BESTURE A									
GENERAL EVENT COMPONENTS WHICH MAY REQUIRE A TEMP USE PERMIT/WAIVER										
General Event Components which ma (please select all that may apply and a		e/LDR waiver								
☐ Alcohol (113.02)	Live Music /Amplified Mu	Live Music /Amplified Music / Sounds (99.03(a)/99.05)								
☐ Animals (101.27/LDR 2.4.6(f)(8))	☐ Merchandise Vendors (1	☐ Merchandise Vendors (118.04/110.15)								
☐ Cooking on Site/Open Flame (96.04)	☐ Offsite Parking (4.6.9(5)(	☐ Offsite Parking (4.6.9(5)(b)) & (2.4.6. (F)(7) (2.4.6.(3)(e))								
☐ Fireworks (99.05/101.20/96.25)	Road Closure (F.S. Chap	Road Closure (F.S. Chapter 316 & 318)								
☐ Food Trucks (120.01(c))	☐ Signs & Banners (LDR 4	☐ Signs & Banners (LDR 4.6.7(F)								
☐ Amusement Games/Rides/Carnival	(including inflatables/climbing walls, etc.	) (LDR 2.4.6(f)(1))								
Please note that if approved, Amusement of Agriculture and Consumer Services (FD be provided to the City.										
☐ Other										

Tents: $\square$ Yes $\square$ No If yes, how many total tents? $\underline{2}$ Size of tents: $\underline{10 \times 10}$
Please note that a tent permit is required for any tent that is over 10'x10'. Tent Permits are available through the City of Delray Beach Building Department and may take up to 30 days to process.
Consumption/Sale of Alcoholic Beverages:   Yes  No  If yes, what entity is obtaining the Alcohol License permit? List below. (Copy of License and Alcohol Liability Insurance required 30 days prior to event. License holder must provide Certificate of Insurance listing City of Delray Beach as Certificate Holder and Additional Insured.)
Onsite Cooking:    Yes   No
➤ Name of grease removal contractor:
Food and Beverage Vendors:   Yes No If yes, number of vendors anticipated at event:  (Health Department approval required along with City Business Tax Receipt or Vendor License. Full list will be required prior to event. Each vendor must provide Certificate of Insurance listing City of Delray Beach as Certificate Holder and Additional Insured.
Food Trucks:  Yes Mo If yes, number of food trucks  (Food trucks must have current Florida and Health Department permits and inspections and provide Certificate of Insurance listing City of Delray Beach as Certificate Holder and Additional Insured.)
Live Performances & Music:   Yes Mo  If yes, applicant agrees all entertainment will be family-friendly and contain no obscenities. List of all performers and DJs required before event permit is issued.  POSSIBILITY TOD.
Merchandise Vendors:
Performance Platform (30" high or less):  Yes No (OSS Stage)  If yes, number of platforms:(An additional stage permit may be required for anything over 30")
Portable Toilets: ☐ Yes ☐ No  If yes, how many? (Note locations on submitted site map)
Use of Onsite City Restrooms during event:  Yes  No If yes, location of requested restrooms & times being used:  Old SChool & quare (Please note that an additional cost may be incurred for use of City Restrooms which require an attendant.)
Roadway Signage/Pole Banners:
Trash Boxes & Bags:   Yes No If yes, the City will determine number needed / staffing.
Access to City Power:

## **EVENT PURPOSE & COMMUNITY BENEFITS**

Event Purpose and Community/Public Benefits: Describe the purpose of the event, how the event may meet local community needs, provide community benefits/promote community welfare, stimulate broad economic or cultural activities within a neighborhood or the Central Business District, and/or help build a sense of community.  To Laise funds for the Amrevement Centers for Children L										
families, A Deway Beach no			has been	provid	ing que					
EVENT SITE MAP, PARKING PLAN, & SUSTAINABLE PRACTICES										
<ul> <li>Please attach a <u>clear and detailed map</u> depicting your event site set-up and include start/finish lines, stages, performance platforms, portable toilets, tents, vendors, food trucks, activities, first aid stations, emergency access points, etc. Also include:</li> </ul>										
Parking Plan for Attendees, Vendors, etc.:	X Yes	□ No (If ye	es, please indicat	e locations on s	ite map)					
Use of City Owned-Metered Parking Spaces: Yes No If yes, indicated how many and locations. (City fees and charges will be incurred with this request.)										
Are Valet Parking Services being Used?  Indicate the name of the service provider.)										
Trash Removal Plan to be determined by the City based on each event.  (Please initial here) Per City of Delray Beach Ordinance 10-19, plastic straws are banned.  Single-use plastics, including Styrofoam, are discouraged. This includes plastic cups, plates, and utensils. Please address locations for recycling and composting.  APPLICATION CHECK LIST & DEADLINES										
To ensure timely processing of your event		vent Permit Type	Deadline to Submit	SEO/SETAC	Approval					
application, the following must be submitted at time of application. Please ensure that you have include all the following items with your application:	ed	mercial Event (For-	Application (days prior to event date)	Processing Time (days prior to event date) 60	Authority  Gity Commission					
Completed Application		rofit/Non-Profit)			with SEO and SETAC recommendation					
Site Map	P	munity Event (For- rofit/Non-Profit) hietic Event (For-	90 45	30	SEO with SETAC recommendation SEO with SETAC					
		rofit/Non-Profit)		<u>;</u>	recommendation					
□ Non-Refundable \$150.00 Applicable Fee										
☐ Detailed COVID-19 Safety Plan										
	Signa	ture								
I certify that I have read the City of Delray Beach Strue to the best of my knowledge and intentions. I this application. Additionally, I agree to conform to responsibility for the general cleaning and removat to be accountable for any damage to the event site permits, and other requirements must be submittee.	also unders all City, St I of trash, r e. Finally, I	stand I may be ate, Federal la ecycling, and a understand th	e asked for addition was and regulation all other items from at all necessary	onal information ins. I also accep im the premises fees, insurance,	relating to t and agree					
ADA Compliance: I am prepared and willing to graduate (Please initial here)  Signature:		4/1	sts for accommod	dations for this e	vent.					