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 ii	Hormation	
Applicant:	Tin Roof Delray Beach Organization/Corporation	Website:	Tin Deuf Delray Brachico
Address:	8 E Atlantic Ave	An advanced to the	
	Street Address	Apartment/Unit #	
	Delray Beach, Ed.	FL 3	33444
	City	State	Zip
Phone:	561-265-5310	Email: Veffrey O.	through byrs. com
Event Producer:	Jeff Krammer First Last	Cell Phone: 9	154-261-4083
Type of Eve	ent (<u>check</u> event type and <u>circle</u> organization t	ype):	
☑ Commer	cial (For-Profit/Non-Profit) Community (For-Profit)	or-Profit/Non-Profit)	etic (For-Profit/Non-Profit)
SUNBIZ #_	L17000212871 PI	ease submit IRS non-profit letter	with application.
	Event Info	ormation	
Event Name	e/Title: NYE		
Request Ev	ent Location: Tin Roof Delray	Beach	
		y for Community	
	EVENT DATE DAY O	F WEEK START TIME	END TIME
DAY 1 DAY 2	12/31/24 Tuesda	9:00 PM	4:00 AM
DAY 3			
Set-up will t	begin on. 1+1>-1- at 0	Time AM / PM	
Breakdown	will be completed by: 1 2 25	at	AM)/ PM
	Date	Time	



Event Details						
Attendance Estimates: Total Event Attendance: 250	Daily Attendance: F	eak Hourly Attendance:				
	☑ Yes □ No					
If yes, # of Years Held: 6 If yes, # of Years Held in Delray Beach: 6 Last Held: 2023						
Is this event produced in other cities: ☐ Yes ☐ No						
If yes, please list what cities:						
Is the event open to the public?						
Is there an Admission Fee/Ticket Fee? If yes, provide fees/ticket prices: Adult/		nior: \$Child: \$				
Is fencing to be used (i.e. gated event)? X Yes No						
ROAD CLOSURES						
Will your event require road closures?	☐ Yes ✓ No					
If YES, please describe the streets and i		sed				
STREET/INTERSECTION	CLOSURE Date / Time	RE-OPEN OF ROAD Date / Time				
Example: SW 9 th Ave from SW 1 st St	Date / Time	Date / Time				
to Atlantic Ave.	Nov 21, 2021 / 7:00am	Nov 21, 2021 / 4:00pm				
	1	1				
	1	1				
	V-10104					
GENERAL EVENT COMPON	ENTS WHICH MAY REQUIRE A 1	EMP 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	sic / Sounds (99.03(a)/99.05)				
☐ Animals (101.27/LDR 2.4.6(f)(8))	☐ Merchandise Vendors (1	18.04/110.15)				
☐ Cooking on Site/Open Flame (96.04)	☐ 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	oter 316 & 318)				
☐ Food Trucks (120.01(c))	☐ 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 lof Agriculture and Consumer Services (FD. be provided to the City.						
Other						

Tents: ☑ Yes ☐ No If yes, how many total tents? Size of tents: 40 × 40
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 Please specify method: (Fire Marshal inspections are required) Gas/Compressed Gas Electric Fryers
> Name of grease removal contractor:Date & time of pickup at end of event:
Fireworks / Pyrotechnics:
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 No 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:
Merchandise Vendors:
Performance Platform (30" high or less):
Portable Toilets: Yes No If yes, how many?Vendor providing service?(Note locations on submitted site map)
Use of Onsite City Restrooms during event: Yes No If yes, location of requested restrooms & times being used: (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:
Access to City Power:

EVENT PURPOSE & COMMUNITY BENEFITS

community needs, provide community benefits/promote activities within a neighborhood or the Central Business		, stimulate broad	economic or cu	
Celebrate New Years Eve			,	
EVENT SITE MAP, PARKING	PLAN, & SUSTA	INABLE PRA	CTICES	
 Please attach a <u>clear and detailed map</u> depi- stages, performance platforms, portable toi stations, emergency access points, etc. Als 	lets, tents, vendor			
Parking Plan for Attendees, Vendors, etc.:	Yes 🛮 No (If ye	es, please indicat	e locations on s	ite map)
Use of City Owned-Metered Parking Spaces: Yes, indicated how many and locations. (City fees and	/	urred with this re	quest.)	
Are Valet Parking Services being Used? Indicate the name of the service provider.)	Yes 💆 No (If ye	es, indicate Valet	location on site	map and
Trash Removal Plan to be determined by the City (Please initial here) Per City of Delray Beach			ve aro hannod	
Single-use plastics, including Styrofoam, are disc	couraged. This in			
	couraged. This induction composting.	cludes plastic o		
Single-use plastics, including Styrofoam, are discutensils. Please address locations for recycling a APPLICATION CHOOSE To ensure timely processing of your event application, the following must be submitted at time of application. Please ensure that you have included	couraged. This income and composting. IECK LIST & DE	ADLINES Deadline to Submit Application (days prior to event date)	SEO/SETAC Processing Time (days prior to event date)	Approval Authority
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