## **CITY OF DELRAY BEACH**

## **Parks and Recreation Department**



## **APPLICATION FOR SPECIAL EVENT**

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

**Applicant Information** 

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:	Downtown Development A	uthority	Website	Website: <u>DowntownDelrayBeach.com</u>				
	Organization/Corporation							
Address:	350 SE 1st Street							
Address:	Street Address		Apartment/Uni	it #				
	Delray Beach	FL	_	33483				
	City	Sta	ate	Zip				
Phone:	561-243-1077		Email: <u>lsimon@dow</u>	ntowndelraybeach.com				
Event			Cell					
Producer:	Laura	Simon		Phone: <u>561-573-3672</u>				
	First	Last						
Type of Eve	ent ( <b>check event type and c</b>							
☐ Comme	rcial (For-Profit/Non-Profit)	X Community (For-Profi	t/Non-Profit) $\Box$ At	hletic (For-Profit/Non-Profit)				
SUNBIZ#		Please su	bmit IRS non-profit lette	er with application				
CONDIZ #_			•	ег или аррисаноп.				
		Event Informati	on					
Event Name	e/Title: <u>Art &amp; Jazz on</u>	the Avenue 2025						
		the Avenue 2025	et Atlantia & Reachaide N	aighbarbaada				
Request Ev	vent Location: E. Atlantic Av	the Avenue 2025 enue, Pineapple Grove, Wes						
Request Ev	rent Location: E. Atlantic Av	the Avenue 2025  enue, Pineapple Grove, Wes	Village by the Sea. The	Delray Beach Downtown				
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	Event Dataile	
Attendance Estimates:	Event Details	
	Daily Attendance: 6,000 P	Peak Hourly Attendance: 6,000
Is this an Annual Event?	X Yes 🗆 No	
If yes, # of Years Held:If yes		Last Held: 2024
Is this event produced in other cities:	☐ Yes X No	
If yes, please list what cities:		
Is the event open to the public?	X Yes 🗆 No	
Is there an Admission Fee/Ticket Fee?	☐ Yes X No	
If yes, provide fees/ticket prices: Adult/		\$Child: \$
Is fencing to be used (i.e. gated event)?	☐ Yes X No	
ROAD CLOSURES		
Will your event require road closures?	X Yes 🗆 No	
If YES, please describe the streets and in	ntersection you are requesting to be clos	sed
STREET/INTERSECTION	CLOSURE Date / Time	RE-OPEN OF ROAD Date / Time
1-22-25 - Pineapple Grove	Date / Time	Date / Time
- (NE 2nd Avenue from E. Atlantic Ave.	Wed., January 22 at 2:00pm	Wed., January 22 at 11:30pm
to NE 3rd Street before City Walk Parking Ramp. Music and Vendors	2.505111	
2-26-25 - West Atlantic Ave. from W 3 <sup>rd</sup> Ave. to W 6 <sup>th</sup> Ave. will be closed to	Wed., February 26 at 2:00pm	Wed., February 26 at 11:30pm
vehicular traffic. (both sides of Atlantic	2.00 p.m.	
Ave.) Music and vendors		
7-23-25 – East Atlantic Ave. from Swinton to 5 <sup>th</sup> Avenue will be closed to	Wed., July 23 at 2:00 pm	Wed., July 23 at 11:30 pm
vehicular traffic Music and Vendors		
10-22-25 – Beachside – from E. Atlantic Ave. from Seabreeze Ave. to A1A ( <i>Pop</i>	Wed., October 22 at 2:00 pm	Wed., October 22 at 11:30 pm
up music & live art)		
GENERAL EVENT COMPON	ENTS WHICH MAY REQUIRE A 1	TEMP USE PERMIT/WAIVER
General Event Components which ma (please select all that may apply and a		e/LDR waiver
☐ Alcohol (113.02) (May 25, 2022 only	X Live Music /Amplified Mu	ısic / Sounds (99.03(a)/99.05)
☐ Animals (101.27/LDR 2.4.6(f)(8))	X Merchandise Vendors (1	18.04/110.15)
X 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)	X Road Closure (F.S. Char	oter 316 & 318)
X Food Trucks (120.01(c))	X 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 Rides must be inspected on-site after installation by the Florida Department of Agriculture and Consumer Services (FDACS) and a copy of the temporary amusement ride inspection letter must

be provided to the City.
X Other Vehicle Displays
Tents: X Yes □ No If yes, how many total tents? Size of tents:
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 X 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: X Yes
Please specify method: (Fire Marshal inspections are required)  X Gas/Compressed Gas X Electric NO Fryers
Name of grease removal contractor: _Restaurants responsible for own grease removal  Date & time of pickup at end of event: 1/24/24, 2/28/24, 7/27/24, 10/23/24 at the end of each event by 11:30 pm
Fireworks / Pyrotechnics:
Food and Beverage Vendors: X Yes \( \subseteq \) No If yes, number of vendors anticipated at event: Local restaurants. (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: X 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: X Yes $\square$ No  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 5-10 single performers
Merchandise Vendors: X Yes  No If yes, number of vendors anticipated at the event:
Performance Platform (30" high or less): X Yes □ No  If yes, number of platforms: 1 (TBA) (An additional stage permit may be required for anything over 30")
Portable Toilets: X Yes □ No If yes, how many? 2 Vendor providing service? JDP Waste (Location: TBA)
Use of Onsite City Restrooms during event: ☐ Yes X No  If yes, location of requested restrooms & times being used:
Roadway Signage/Pole Banners: X Yes   No (City fees and charges will be incurred with this reque
Trash Boxes & Bags: X Yes ☐ No If yes, the City will determine number needed / staffing
Access to City Power: X Yes $\square$ No If yes, where: City poles along Atlantic Avenue need to be live with power by 12pm for speakers.

## **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.

In support of downtown merchants and restaurants, The Downtown Development Authority (DDA, will reimagine the Art & Jazz Program for 2025. These themed evenings in each of the four (4) neighborhoods welcome guests to stroll the neighborhood enjoying live entertainment, performance artists, art exhibitions and dining in any of the many great restaurants. Special promotions by retailers and merchants will further showcase local businesses and help to drive business to the Downtown.

EVENT SITE MAP, PARK	ING I	PLAN	, & SUS	ΓΑΙΝ	IABLE PRAC	CTICES	
<ul> <li>Please attach a <u>clear and detailed map</u> stages, performance platforms, portab stations, emergency access points, etc</li> </ul>	le toil	ets, te	nts, vend	site ors, t	set-up and in food trucks, a	clude start/fini ctivities, first a	sh lines, iid
Parking Plan for Attendees, Vendors, etc.:	X	Yes	□ No (If	yes,	please indicate	e locations on s	ite map)
Use of City Owned-Metered Parking Spaces:  If yes, indicated how many and locations. (City fee E. Atlantic Avenue from Seabreeze Ave to A1A, E. Street before City Walk Parking Ramp.	XY es and Atlant	charg	☐ No les will be in from Swint	incur on th	red with this re e 5 <sup>th</sup> Ave, <i>NE 2i</i>	quest.) nd Avenue from .	<u>E. Atlantic Av</u> e. to
Are Valet Parking Services being Used? indicate the name of the service provider.)		Yes	X No (If	yes,	indicate Valet I	ocation on site	map and
Single-use plastics, including Styrofoam, are utensils. Please address locations for recycle.  APPLICATIO  To ensure timely processing of your event application, the following must be submitted at time.	ling a	ind co	mposting	). DEA		SEO/SETAC Processing Time (days prior to event date)	Approval Authority
of application. Please ensure that you have include all the following items with your application:	ieu		nercial Event (Fo ofit/Non-Profit)	or-	90	60	City Commission with SEO and SETAC recommendation
X Completed Application		Pre	nunity Event (Fo ofit/Non-Profit)		90	60	SEO with SETAC recommendation
X Site Map X Non-Refundable \$150.00 Applicable Fee X Detailed COVID-19 Safety Plan			letic Event (For- ofit/Non-Profit)		45	30	SEO with SETAC recommendation
I certify that I have read the City of Delray Beach true to the best of my knowledge and intentions. I	Special so u	unders	nts Policy a	be a	asked for additi	onal informatior	n relating to
this application. Additionally, I agree to conform to responsibility for the general cleaning and removato be accountable for any damage to the event sit permits, and other requirements must be submitted.	al of tra te. Fin	ash, re ally, I	ecycling, ar understand	nd all d that	other items from all necessary	om the premises fees, insurance	and agree







