



Special Event Permit Application Form

SUBMIT COMPLETED APPLICATION AT
Maron.Chbat@talgov.com

Marketing/advertising of any kind may not take place until physical event permit is granted.

A. General Information

Date of Event:
Name of Event:
Start Time:
End Time:
Setup Start Time:
Teardown End Time:
Location of Event:
Facility Requested:
Date Application Submitted:

Name of Applicant/Applying Organization:		
Address:		
City:	State:	Zip:
Phone:		
Phone (Alt):		
Fax:		
Web Site:		
Non-Profit Status ID#:	Tax Exemption Certificate #:	

On-Site Event Coordinator Name:		
Address:		
City:	State:	Zip:
Day of Event Phone:		
E-mail Address:		

B. Event Information

Type of Event: (Please circle all that apply)		
Festival	Block Party	Public Assembly
Walk/Run	Concert/Performance	Parade/Procession/Motorcade
Other (Please List):		
Estimated attendance:		
Open to the Public:		
Will fireworks be a part of the event?		
If yes, who is responsible for displaying them:		
What type of entertainment will take place?		

C. Fees

Will there be an admission fee charged to the event?	Amount:
Will fees be charged to exhibitors/vendors?	Amount:
Will there be any additional activity fees charged?	Amount:
Please list all additional activities (if applicable):	
Will there be charge for parking?	Amount:

D. Vending / Concession

What type of vending will be present? (Crafts, Food, Exhibits, Beverage, etc.)
Do you request electrical services for vendors?
Do you request water services for vendors?
Are your vendors using generators?
Number of trash receptacles needed:
Will food and/or non-alcoholic beverages be served and/or sold?
Will alcoholic beverages be served and/or sold?
If caterers are being used, please list names and DBPR license number of each caterer:

E. Restroom Facilities:

How many port-o-lets will you have?
Where will they be located?
Who will be the vendor providing the restrooms?
How many handicap port-o-lets will you have?
How many wash stations will you have?
If port-o-lets are not used, what restroom facilities will your event be utilizing?

F. Medical Arrangement:

Will there be ambulance services on site?	Provided by:
Will there be first aid services on site?	Provided by:

G. Equipment

Will the event include tents?	
Please specify quantity of tents per each size.	
Will you be placing banners and/or signs at your event?	
How many?	Sizes?
Verbiage:	
Please list number and location of stages:	
Please list location of staff management command center:	

Note: Any tent (or grouping of tents) larger than 30 x 30, including vendor tents, must obtain a permit from the City of Tallahassee's Growth Management Department. Please refer to the tent guidelines. NO EQUIPMENT INCLUDING TENTS MAY BE STAKED INTO THE GROUND.

H. Sound and Lighting

Who will provide your audio and lighting?
Will electrical services be needed?
Please list locations and explain:

I. Street Closures and Security

Will the event require security (alcohol, monetary, overnight, etc.?)
Will the event require street closures?

Note: The sponsor/event planner will be required to provide police barricade service for events that require street closures. Street closures involving state roadways require Florida Department of Transportation review and permitting. If the event includes such a closure TPD will discuss options with the sponsor/event planner.

J. Special Event Payment Policy

Initial Payment must be made within 5 business days of receiving and accepting the Cost Estimate associated with your event. This payment must be at least 50% of the Cost Estimate amount. If initial payment is not received within 5 business days, your reservation will be cancelled and your date and location will be available to other event planners on a first come, first served basis.

Final payment must be paid no later than 10 business days prior to event date. This payment will be for the remaining balance of the Cost Estimate.

A final assessment of event fees will be provided by COT staff, and a determination will be made if there is an outstanding balance or if event planner/organization is entitled to a refund. Any post-event payment must be made within 10 business days after your event. If event planner/organization is due a refund, it will be processed within 10 business days.

K. Applicant Cancellation & Refund Policy

All notices of cancellation must be received in writing.

Special Event and/or Road Closure application fees are not refundable.

Cancellation notice received **45 or more calendar days** prior to the event date will receive a full refund of their initial payment, minus any Road Closure or Special Event Application fees.

Cancellation notice received between **44 -15 calendar days** prior to the event date will receive a refund of **50%** of the initial payment, **minus** any Road Closure or Special Event Application fees.

Cancellation notice received between **14 -10 calendar days** prior to the event date will receive a refund of **25%** of the initial payment, **minus** any Road Closure or Special Event Application fees.

Cancellation notice received **less than 10** calendar days prior to the event date will result in a forfeiture of **all** applicable fees.

L. City Cancellation

The City of Tallahassee reserves the right to cancel or relocate an event due to special circumstances including but not limited to the following: pandemic, weather conditions, misuse or abuse of facilities, non-compliance with City of Tallahassee event guidelines, and un-permitted/prohibited events.

M. Site Plans, Maps and Accessible Planner

Please attach a detailed site map to include the following: Tent locations, Port-o-let locations, all vendors, stages, and power requirements. Also please be prepared to include a parking plan if asked.

N. Insurance Requirements

General Liability Insurance is required for all public events. All General Liability Insurance must be provided by the event applicant, no exceptions. Liquor Liability can be provided by whichever business/organization/non-profit that is providing the alcohol services. The insurance limits are \$1,000,000 per occurrence. The certificate holder must be listed as City of Tallahassee, 300 S. Adams Street, Tallahassee, FL 32301. The certificate holder must also be listed as Additional Insured. Additionally, if any County owned and/or maintained roadway or County equipment is being utilized the County must also be listed as certificate holder. The certificate holder must be listed as Leon County, 301 S. Monroe Street, Tallahassee, FL 32301. All food vendors and caterers are also required to provide a current copy of their General Liability Insurance.

O. Additional Terms

The City reserves the right to revoke any permit granted for an activity, which is found to be in violation of any ordinance, law, or condition of approval. Failure of the City to timely invoke this right will act as a waiver to exercise such rights in the future. Prohibited Practices include; Games of Chance, Gambling, and Raffles are prohibited.

P. Bounce House Policy

Bounce houses are not permitted on City property. Other types of inflatables will be considered on a case by case basis. Please contact event staff to further discuss inflatables on City property.

Q. Processing

All applications must be submitted for review no less than 30 days prior to the date of the event to be held. Applications turned in with less than 30 days processing time will not be approved. **TPD will attempt to staff every request but staffing cannot be guaranteed. If the required TPD staffing is not secured two weeks before the event, the requestor will be given the option to cancel or modify the event to account for the available TPD staffing.**

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PRINT APPLICANT NAME

APPLICANT SIGNATURE

DATE

IMPORTANT: Save completed application to your device before submiting.