



# Special Event Permit Application

Thank you for choosing the City of Sanford, the *Friendly City*, to host your Special Event! We look forward to working with you! Please review the Special Event Policies & General Instructions before beginning this Application and ask any questions that you may have. Please complete this Application in its entirety and submit it with the **\$50** nonrefundable application fee to the address below. Applications will be not be accepted if the event date is less than **60 days** from the date it is submitted.

City of Sanford, Special Events  
Parks & Recreation Department  
300 North Park Avenue, Sanford, FL 32771  
407.688.5120

**A. Name of Event:** \_\_\_\_\_

**B. Facility / Location Requested:** \_\_\_\_\_

**C. Type of Event?**

- Carnival/Circus/Fair/Parade
  - Exhibit/Festival
  - Reception / Wedding
  - Picnic/Party\_\_\_\_\_
  - Charity Walk/ Run \_\_\_\_\_
  - Tournament or Competition \_\_\_\_\_
  - Other: \_\_\_\_\_
- (Explain)

**D. Event Dates/Times: (Provide detailed timeline separately) (if multiple days, please list on separate paper)**

Event Date: \_\_\_\_\_ Event Hours: From \_\_\_\_\_ AM / PM To \_\_\_\_\_ AM / PM

Set-Up Date: \_\_\_\_\_ Set-Up Hours: From \_\_\_\_\_ AM / PM To \_\_\_\_\_ AM / PM

Break-Down Date: \_\_\_\_\_ Break-Down Hours: From \_\_\_\_\_ AM / PM To \_\_\_\_\_ AM / PM

**E. Applicant / Organization Name:** \_\_\_\_\_

(Sponsor required if not a City of Sanford Business)

Address: \_\_\_\_\_  
Street Address City State Zip Code

Type of Organization:  Profit \_\_\_\_\_  Not For Profit \_\_\_\_\_  Individual \_\_\_\_\_  
Federal Tax ID # Attach "Consumer's Certificate of Exemption"

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

- Applicant understands that the submission of an Application does not guarantee the event will be approved.
- Applicant shall not publicize or promote the event until the Application has been approved.

**F. Sponsor Information, if required:** A Sanford event Sponsor may accept full responsibility for your event and actively work with you and city staff to execute a desirable event in Sanford. If required, attached Sponsor letter to application and provide their contact information below:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip Code

**G. Estimated Number of Participants:** Spectators: \_\_\_\_\_ Vendors: \_\_\_\_\_ Vehicles: \_\_\_\_\_

**H. Your Event will be:**  Private,  Public; Cost is \$\_\_\_\_\_ or  is free;  Annual (specify changes);  Family-Friendly (if not, explain) \_\_\_\_\_

**I. Your Event will feature:**

- |                                                                           |                                                         |                                                                   |
|---------------------------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> Food/beverage/catering                           | <input type="checkbox"/> Pyrotechnic / Special Effects  | <input type="checkbox"/> Alcohol sales (Liability Ins. required): |
| <input type="checkbox"/> Merchandise sales                                | <input type="checkbox"/> Aeronautical / Aquatic Vessels | <input type="checkbox"/> by extending license(s) on DBPR 6029     |
| <input type="checkbox"/> Inflatables / Climbing Walls / Dunk tanks / etc. | <input type="checkbox"/> Banners / Signage: _____       | <input type="checkbox"/> with Special Sales license DBPR 6003     |
|                                                                           |                                                         | <input type="checkbox"/> with Sponsor's license & insurance       |
|                                                                           |                                                         | Sponsor's Name: _____                                             |

**J. Your event will have the following special equipment such as** (5' clearance required by each fire hydrant):

- |                                                      |                                                        |                                      |
|------------------------------------------------------|--------------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Large trailers ( _____ lbs) | <input type="checkbox"/> Tents (Size: _____)           | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Lighting / Sound Equipment  | <input type="checkbox"/> Generator(s)                  | _____                                |
| <input type="checkbox"/> Fencing / Barricades        | <input type="checkbox"/> Stages / Production Equipment | _____                                |

**K. Event Promotion:** Provide event description that the City may share on its event calendar describing the event and how to obtain additional information (website, social media page(s), etc.) regarding the event \_\_\_\_\_

Telephone number to be released for public's reference: \_\_\_\_\_

Website / Facebook page for public's reference: \_\_\_\_\_

**L. City Services Requested:**

- |                                                      |                                                               |                                                            |
|------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Potable water               | <input type="checkbox"/> Trash Cans _____                     | <input type="checkbox"/> Streets/Avenues/Parks (map) _____ |
| <input type="checkbox"/> Electrical Connections*     | <input type="checkbox"/> Dumpsters 8-yard or 20-yard          | _____                                                      |
| <input type="checkbox"/> Emergency Medical Personnel | <input type="checkbox"/> Security / Police Officers (explain) | _____                                                      |

Additional Information / Requests: \_\_\_\_\_

**Certification:** I certify that I fully understand the Special Event Policies & Guidelines and have provided true and correct information on this Special Event Permit Application as well as any and all additional attachments that are submitted as part of this Application (site plan, parking maps, property use agreement letters). I further certify that I am authorized by the organization named under 'Section E. Applicant' to act as tis agent for the herein described activity.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Special Event Considerations:** Applicants shall consider those directly affected by their event to minimize any negative effects that the event may have on affected businesses and residences in the potential impact area of 2-3 blocks in each direction of your event footprint including parking availability, noise, trash, etc. Such consideration is unique to each event and may include such enticements such as special sponsorship packages, marketing, signage, designated parking, but also thoughtful placement of staging, speakers, vendors, and maintaining cleanliness of the event footprint and the surrounding area. Please explain, below, your plan to handle the community inconveniences that a special event may bring upon the immediate area where the event will occur:

1. Trash / Litter: How will you ensure cleanliness during and after your event? \_\_\_\_\_  
\_\_\_\_\_
2. Noise: How will you ensure that any amplified music stays under 95 dBA and 100 dBC? If an event has multiple stages, applicant shall provide entertainment schedules by stage with alternating performances to ensure noise does not compact guests and that guests will rotate through the event space. \_\_\_\_\_  
\_\_\_\_\_
3. Portable Restrooms: Provide information on the number, type, placement, delivery & pickup dates. Show placement on map: \_\_\_\_\_  
\_\_\_\_\_
4. Other Considerations: Explain additional considerations provided to neighbors (businesses and residences). \_\_\_\_\_  
\_\_\_\_\_

**Parking/Transit Plan:** Most events will require a Parking / Transit map showing a thoughtful parking plan. If acquired, attach permission letters and/or agreements for any private property usage for parking or event space. Your Plan or Map should include:

- 1) parking lots that you will advertise for guest parking
- 2) designated vendor parking lots
- 3) transit plans for golf cart or trolley transport from parking to event site
- 4) loading and unloading zones

**Site Map:** The site map is a visual representation of all the operational elements of your event and must be submitted along with the Special Event Application. Without a site map, an application will be deemed incomplete, and the review process will not begin. A detailed timeline of event load-in, load-out, entertainment schedules, etc. shall also be included.

- If applicable, the following must be shown on the site plan as part of the activated event footprint:
- Stages (location and dimensions), speakers, platforms, scaffolding, bleachers, and/or grandstands
  - Canopies, tents, portable toilets, booths, beer gardens, and/or other temporary structures
  - Vendor, Merchandise, Food booths and cooking areas, grills, and any flammable gases
  - Generator locations and/or sources of electricity
  - Placement of display vehicles, food trucks, and/or trailers
  - Barriers, Fencing height and type along with entrance and exit locations
  - Passenger loading and unloading areas for valet, transport vehicles, ride providers, and/or shuttles
  - Tables, chairs, bars, furniture, seating, activities, and/or games
  - Signs, banners, and elaborate decorations such as inflatables, balloon arches, etc



**CITY OF SANFORD ESTOPPEL NOTICE, INDEMNIFICATION,  
COVENANT AND HOLD HARMLESS AGREEMENT  
(PART OF ALL SPECIAL EVENT APPLICATIONS)**

The City of Sanford hereby advises the applicant that the activities that are part of the \_\_\_\_\_ special event plans of the applicant filed with the city on \_\_\_\_\_  
(Special Event Name) (Date)

may give rise to liability of diverse types and natures. The City of Sanford is not responsible for any events that are not specifically sponsored by the City of Sanford. Approval of a special event is not acceptance of the event as a City of Sanford-sponsored event. Thus, the applicant is advised to ensure that, beyond providing for insurance relative to its own activities, it would be prudent for the applicant to resolve all insurance needs with the participants, vendors, etc., that relate to the event in all respects.

The applicant shall take all precautions for the safety of and will provide reasonable protection to prevent damage, injury or loss to all persons and property in association with the special event.

The applicant shall comply with all laws, ordinances, rules, regulations and other orders regarding the safety of persons or property, or their protection from damage, injury or loss with regard to the special event.

The applicant shall be responsible to ensure that all trademark and copyright laws and all other laws relating to intellectual property rights are adhered to in every respect.

In any emergency affecting the safety of persons or property, the applicant shall act with care and discretion to prevent threatened damage, injury, loss or death.

The applicant shall indemnify and hold harmless the City of Sanford and its officials, officers, employees, agents, servants, invitees and guests from and against all claims, damages, losses and expenses, including reasonable attorneys' fees arising out of or resulting from the event. Accordingly, the undersigned for the applicant and her/himself and any and all derivative claimants, of whatsoever type or nature or relationship, understands that the City of Sanford and its officials, officers, agents and employees, assume no liability whatsoever for any loss that may result from the special event in any way whatsoever to include, but not be limited to, any personal injury or property damage or loss that the undersigned, or any of its agents, employees, participants, vendors, or derivative claimants, may cause or suffer, of whatsoever type or nature or cause, as a result of, or associated with, the special event.

In consideration of, and as an inducement for, the City of Sanford approving the special event application, the undersigned, as an individual and for the applicant and any and all derivative claimants including, but not limited to, any and all heirs, assigns, executors, beneficiaries, administrators, and any and all other claimants or legal representatives of whatsoever nature or relationship, do hereby forever fully release, remiss, indemnify, acquit, forever discharge, and hold harmless and blameless, the City of Sanford and its officials, officers, employees, agents, servants, invitees and guests from, against and for any claims relating to losses described above or otherwise contemplated by law in any respect; the activities that relate, in any way, to the special event; personal injury or property damage, of whatsoever type or nature, that arise, in any way from the special event; and any all damages or losses however claimed or asserted or cognizable under law that any claimant may suffer or cause as a result of, directly

or indirectly, the special event. I recognize and assume any and all risks, known or unknown, relating to the special event and covenant on behalf of myself and all derivative claimants, as aforementioned in every respect, not to sue the City of Sanford or its officials, officers, employees, agents, servants, invitees and guests, or any one of them or combination of them.

Should the City of Sanford be sued as a result of the special event in any way or manner, the applicant shall be notified of such suit and, thereupon, the applicant shall have the duty to defend the suit and the City of Sanford. Should judgment be awarded against the City of Sanford in any such case, the applicant shall forthwith pay the same and relieve the City of Sanford of any obligations relating thereto. The City of Sanford shall not be liable in any respect or in any nature.

Should the applicant receive notice, in any way, of any suit or claim arising from the special event, the applicant shall promptly advise the City of Sanford in writing.

The undersigned represents that he/she has the right, authority and legal power to execute this document and bind the applicant and her/himself to each and every matter set forth herein.

\_\_\_\_\_  
Applicant Signature

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

Date: \_\_\_\_\_

**STATE OF FLORIDA)  
COUNTY OF SEMINOLE)**

**I HEREBY CERTIFY** that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared \_\_\_\_\_ { } who is personally known to me or { } who produced \_\_\_\_\_ as identification and acknowledged before me that s/he executed the same. Sworn and subscribed before me, by \_\_\_\_\_ by means of { } physical presence or { } online notarization on the \_\_\_\_\_ day of \_\_\_\_\_, 2024, the said person did take an oath and was first duly sworn by me, on oath, said person, further, deposing and saying that s/he has read the foregoing and that the statements and allegations contained herein are true and correct.

**WITNESS** my hand and official seal in the County and State last aforesaid this \_\_\_\_ day of \_\_\_\_\_, 2024.

\_\_\_\_\_  
Notary Public; State of Florida  
(Affix Notarial Seal)  
Printed Name: \_\_\_\_\_