



# **CITY OF NEW SMYRNA BEACH SPECIAL EVENT APPLICATION**

OFFICE USE ONLY  
DATE RECEIVED:  
RECEIVED BY:  
REVIEW DATE:

## **SPECIAL EVENTS:**

A **Special Event** is an event which, by itself or in conjunction with other events occurring during the same time (such as during a community wide event), is likely to have an impact on the community, including but not limited to factors such as traffic, noise, or other aspects of public health, safety and welfare. Special Events must be approved in advance by the City Commission at which time staff will make their recommendation.

Application for Special Events must be submitted at least thirty (30) days in advance of the requested event.

*This application is **not** a permit to conduct a special event.*

### **1.0 REQUIRED INFORMATION:**

- 1.1 Name of Event \_\_\_\_\_
- 1.2 Name of Producer and/or Promoter \_\_\_\_\_
- 1.2 Type of Organization  Non-Profit  For-Profit  Charitable  Government
- 1.3 Contact Person \_\_\_\_\_
- 1.4 Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
- 1.5 Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Fax Number \_\_\_\_\_  
Email Address \_\_\_\_\_ Website \_\_\_\_\_

### **2.0 BILLING INFORMATION:**

- 2.1 Is the party responsible for billing the same as above?  Yes  No

If no, please provide the proper information below:

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### **3.0 EVENT INFORMATION:**

- 3.1 Date(s)  
Requested: \_\_\_\_\_
- 3.2 Location of Event: \_\_\_\_\_

3.3 Description of Event: \_\_\_\_\_  
\_\_\_\_\_

3.4 Site Plans are required and must include:  
 Pedestrian Access  Parking and Vehicular Access  Location of Port-o-Lets (if any)  
 Dumpsters and/ or Trash Cans  Number and Location of Vendor Display Areas Venue/  
Stage (if any)  Tents  Barricades/ Cones

3.5 Insurance: An insurance policy naming the City of New Smyrna Beach additionally insured for a minimum of \$1,000,000 must be provided no later than five days prior to the scheduled event. Proof of insurance is required for all events if applicable.

3.6 Will an admission fee be charged for the event?  Yes  No  
Will an admission fee be charged prior to the event?  Yes  No  
Will fees be collected on-site before/ during event?  Yes  No

3.7 Event time: Date: \_\_\_\_\_ Start: \_\_\_\_\_ a.m./ p.m. End: \_\_\_\_\_ a.m./ p.m.  
Set-up: Date: \_\_\_\_\_ Start: \_\_\_\_\_ a.m./ p.m. End: \_\_\_\_\_ a.m./ p.m.  
Breakdown: Date: \_\_\_\_\_ Start: \_\_\_\_\_ a.m./ p.m. End: \_\_\_\_\_ a.m./ p.m.  
Rain date: Date: \_\_\_\_\_ Start: \_\_\_\_\_ a.m./ p.m. End: \_\_\_\_\_ a.m./ p.m.

How will the general public be notified about a cancellation/ postponement of the event?  
\_\_\_\_\_ Anticipated number of attendees: \_\_\_\_\_

3.8 Have you held this event in the City of New Smyrna Beach previously?  Yes  No  
If yes, previous date(s): \_\_\_\_\_ Location(s): \_\_\_\_\_  
Have you held this event in another City?  Yes  No If yes, list location \_\_\_\_\_

3.9 Will the special event require the use of watercraft for competition, servicing, maintenance, safety, or any other reason?  Yes  No  
NOTE: Temporary buoys and markers may be placed with approval from the U.S. Coast Guard. Also, water rescue and lifesaving personnel and equipment shall be on-duty and prepared to act to protect competitors and spectators during all competition and practice.

3.10 Will the special event involve the use of aircraft?  Yes  No  
NOTE: All aircraft flight operations shall conform to FAA regulations and meet minimum pilot qualifications for the given type of operation intended. Also, all operators of any type of aircraft being used shall provide the city with a certificate of insurance coverage. Insurance coverage shall provide liability insurance protection for the City in the amount of not less than \$1,000,000 per person for bodily injury or death, \$2,000,000 per occurrence of death, and \$500,000 per occurrence for property damage, naming the City of New Smyrna Beach as "additionally insured."

3.11 Will the special event involve the use of motorcycles?  Yes  No

4.0 **ENTERTAINMENT:**

4.1 Will there be entertainment?  Yes  No If yes, a complete list of entertainers, contracts, licenses, and schedules must be provided.

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4.2 Will you be using a sound system?  Yes  No

NOTE: The City's Ordinances regarding noise must be complied with during the event, or receive City Commission approval to generate excessive noise outside the accepted hours.

4.3 Name of Contractor: \_\_\_\_\_ Type of System: \_\_\_\_\_

4.4 Sound Time: Start: \_\_\_\_\_ a.m./ p.m. End: \_\_\_\_\_ a.m./ p.m.

4.5 Will there be carnival games and/or rides?  Yes  No If yes, please describe the types of games and/or rides \_\_\_\_\_

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4.6 Name of Contractor: \_\_\_\_\_

4.7 Proof of insurance is required for all carnival games and rides. The City must be listed as additionally insured on the insurance policy.

4.8 Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

5.0 **SPECIAL EFFECTS:**

5.1 Will there be any special effects used?  Yes  No If yes, complete below.

5.2 Type of effects:  Fireworks  Laser light show  Special effect balloons/hot air devices  
 Signs, special lighting, wind operated devices including pennants or banners or any devices intended to catch the eye of passers by.  Other

5.3 Effect time: Date: \_\_\_\_\_ Start: \_\_\_\_\_ a.m./p.m. End: \_\_\_\_\_ a.m./p.m

5.4 Location of Special Effects: \_\_\_\_\_

5.5 Effects Producer/ Company Name: \_\_\_\_\_

5.6 Address: \_\_\_\_\_

5.7 Phone Number: \_\_\_\_\_ Fax Number \_\_\_\_\_

5.8 Proof of insurance is required for all special events.

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

NOTE: A permit from the New Smyrna Beach Fire Department will be required.

6.0 **PARADES:**

- 6.1 Will this be considered a parade?  Yes  No If yes, complete below.
- 6.2 How many will participate? \_\_\_\_\_
- 6.3 Plan of route attached?  Yes  No
- 6.4 Parade Time: Date: \_\_\_\_\_ Start: \_\_\_\_\_ a.m./ p.m. End: \_\_\_\_\_ a.m./ p.m.
- 6.5 Breakdown: Date: \_\_\_\_\_ Start: \_\_\_\_\_ a.m./ p.m End: \_\_\_\_\_ a.m./ p.m.
- 6.6 Rain Date: Date: \_\_\_\_\_ Start: \_\_\_\_\_ a.m./ p.m End: \_\_\_\_\_ a.m/ p.m.
- 6.7 Will the parade require any road closures?  Yes  No  
If yes, City Commission approval will be required.

7.0 **PROPOSED RETAIL SALES**

- 7.1 Will there be any retail sales?  Yes  No If yes, complete below.
- 7.2 How many vendor locations do you hope to accommodate? \_\_\_\_\_
- 7.3 Type of vending (including number of each): (1 – 49) Vendors = \$150 (50+) Vendors = \$250  
 Clothing \_\_\_\_\_  Food/ Beverage \_\_\_\_\_  Jewelry \_\_\_\_\_  
 Other (describe) \_\_\_\_\_

8.0 **PROPOSED SPONSORS:**

- 8.1 Will there be any sponsors?  Yes  No If yes, complete below.
- 8.2 How many commercial sponsors with on-site visibility do you anticipate (including product sampling, giveaways, exhibits, and advertising).  
\_\_\_\_\_  
\_\_\_\_\_

9.0 **ALCOHOLIC BEVERAGES/ LIQUOR LIABILITY:**

- 9.1 Will alcoholic beverages be dispensed, provided, or served?  
 Yes  No If yes, complete below.
- 9.2 Name of organization licensed to sell alcohol at the event: \_\_\_\_\_
- 9.3 Limit of liquor liability coverage, if required, will not be less than \$500,000.
- 9.4 The organization hosting the event is:  For-Profit  Non-Profit/ 501C-3 (see below)
- 9.5 A copy of the liquor license must be submitted five business days prior to the event.
- 9.6 Beer Gardens- An applicant who is requesting beer gardens for an event must provide a copy of a liquor license and special event alcohol license issued by the State of Florida. The Police Department will evaluate the security measures to determine the amount of police officers that must be hired.

10.0 **PROMOTION:**

10.1 At what level will the event be promoted?  Local  Regional  National  International

10.2 What type of publicity will be used?  Newspaper  Radio  Television  Internet  
 Direct Mail  Billboard  Other \_\_\_\_\_

10.3 Telephone number to be released for public information: \_\_\_\_\_

11.0 **SIGNS:**

11.1 Will you be using signs at your event?  Yes  No If yes, complete below.

11.2 How many signs and what dimensions? \_\_\_\_\_

11.3 It is the applicant's responsibility to request utility line location from Sunshine State ONE CALL of Florida (1-800-432-4770) before digging.

NOTE: Signs may be erected no more than 14 days prior to the special event on private property. All signs shall be removed no later than the day after the event, and must conform to the requirements in the City's Code of Ordinances.

12.0 **FACILITY REQUIREMENTS:**

12.1 Will you use temporary structures?  Yes  No If yes, complete below.

Stages  Tents  Scaffolding  Booths  Fences  Barricades  Cones  
 Other \_\_\_\_\_

12.2 How many tents exceeding 120 square feet or greater? \_\_\_\_\_  
(Tents 120 square feet or greater will require tent permits.)

12.3 Tent locations and sizes must be included on the site plan. \_\_\_\_\_  
\_\_\_\_\_

12.4 List the state-certified electrical contractor that will accept responsibility for the quality and code compliance of electrical work performed on behalf of the applicant?  
\_\_\_\_\_

12.5 It is the applicant's responsibility to request utility line location from Sunshine State ONE CALL of Florida (1-800-432-4770) a minimum of 48 hours in advance of any special event activity or setup.

13.0 **TRAFFIC AND PARKING:**

13.1 Will normal traffic patterns be altered by the event?  Yes  No

13.2 Will there be any road closures?  Yes  No Road Name: \_\_\_\_\_  
(If a road is requested to be closed, City Commission approval is required.)

- 13.3 Cones, barricades, and fencing are to be provided by the applicant and can be rented from a barricade or rental company.
- 13.4 Will public parking areas, streets, sidewalks, etc., be restricted or obstructed?  Yes  No
- 13.5 Will the event have on-site parking?  Yes  No
- 13.6 Will the event require off-site parking?  Yes  No
- 13.7 Will a shuttle be used to transport people to the off-site parking area?
- 13.8 Handicapped parking must meet the requirements of Florida Statute 553.5041
- 13.9 A detailed parking plan is required for all parking areas, indicating how all security, fire protection, and emergency vehicles can access a site.

14.0 **PORT-O-LETS:**

- 14.1 The applicant shall be required to provide adequate facilities to cover the amount of participants.
- 14.2 How many Port-O-Lets will be on-site? \_\_\_\_\_
- 14.3 The location of the Port-O-Lets must be included on the site plan.

RECOMMENDATION: One toilet is recommended for every 300 people attending an event. If public toilets are not available at the event site, one ADA accessible toilet is required for the first 300 people, and a minimum of 5% of the restrooms must be ADA accessible. If there is a beer/ alcohol being served at the event, the recommended ratio for toilets per is 1:150 people. Existing park toilets count towards the toilet per anticipated attendee ratio.

15.0 **SANITATION:**

- 15.1 If dumpster service is needed it is required that refuse service be provided through the City's Public Works Department. The dumpster service, fee schedule, and information pertaining to recycling can be obtained by contacting the Public Works Department at 386-424-2212.
- 15.2 Payment arrangements should be made prior to the event through the Public Works Department.
- 15.3 Trash receptacles and recycling containers are to be provided by the applicant and must be located not only on event grounds, but in parking areas as well.
- 15.4 Event grounds must be completely cleared of trash and all receptacles removed by the end of the event and is the sole responsibility of the applicant.

16.0 **SECURITY/ EMERGENCY FIRE/ MEDICAL SERVICES:**

- 16.1 What are your plans for providing security at the event? \_\_\_\_\_
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The New Smyrna Beach Police and Fire Department will evaluate the events security measures to determine if the measures are sufficient to run a safe event. The New Smyrna Beach Police and Fire Department reserve the right to require additional security measures. There will be a minimum requirement of five (5) business days to evaluate the event requirements.

NOTE: All events held on City/Public property require the use of City Police and Fire personnel if additional security measures are required.

17.0 **CONFIRMATION:**

I understand that this is an application only and does not obligate the City in any fashion to reserve any facility or approve any event.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_ Title of Applicant: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Event Contact Information:

Please provide the name of the contact person who will be available on-site at all times.

Depending on the length of the event, this may require several people. Please list the contact person for each period of time. (Please Print)

<u>Contact Name</u>	<u>Contact on-site phone number</u>	<u>Time Period</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

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THE *BANNER FORM* AND *FACILITY USAGE FORM* ARE ATTACHED FOR YOUR CONVENIENCE. IF YOU NEED TO UTILIZE A FACILITY OR REQUEST BANNER SPACE RESERVATION, IT IS *YOUR RESPONSIBILITY TO TURN THESE FORMS INTO THE PARKS & RECREATION DEPARTMENT* SEPARATELY FROM THIS APPLICATION.



# New Smyrna Beach Fire - Rescue

## Office of the Fire Chief

238 Industrial Park Drive, New Smyrna Beach, FL 32168

Phone: 386-402-8125 Fax: 386-424-2166

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### Special Events Comments

Event Name/Date:

1. During all special events the fire department shall require adherence to all applicable Florida Fire Prevention Code standards by all event organizers and vendors and make site inspections as needed
2. The event coordinator(s) shall take all necessary measures to ensure continuous access and egress for emergency vehicles throughout the entire event and this shall include response routes along secondary roads to the event to ensure event parking does not impede emergency vehicle access or victim transport away from the incident at any time
3. Events requiring road closures should organize tents, stages, and displays so that an emergency vehicle can drive equipment down the centerline of all streets and measures must be taken to ensure that no intersections or access roads are blocked and at all times are accessible and useable by large fire apparatus
4. The event coordinator(s) shall ensure the Volusia County Sheriffs Dispatch Center has been notified of any road closings related to the event no less than 24 hours prior to the start of the event at (386) 248 1777 or 423 3888, and provide notification as soon as the roads have been re-opened
5. Anytime the transportation shuttles are required, or any other event with unique characteristics that may impede the most expeditious provision of fire/rescue/emergency medical services to event participants, regularly staffed fire and rescue services will be supplemented to meet the additional demand caused by the event and will be funded by the event organizers

Additional Requirements:

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\_\_\_\_\_  
Applicant Print & Sign

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fire Chief/Designee

\_\_\_\_\_  
Date

April 23, 2013

**GENERAL INFORMATION-PROPOSED EVENT**

MEETING DATE \_\_\_\_\_

EVENT NAME \_\_\_\_\_

EVENT LOCATION \_\_\_\_\_

EVENT DATE \_\_\_\_\_

EVENT TIME \_\_\_\_\_

WHAT ORGANIZATION IS ORGANIZING THIS EVENT?

\_\_\_\_\_

WHO SHALL WE CONTACT FOR MORE INFORMATION?

CONTACT NAME \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

E-MAIL \_\_\_\_\_

WEBSITE ADDRESS FOR THIS EVENT:

\_\_\_\_\_

IS AN OUTSIDE BUSINESS BEING PAID TO RUN, ORGANIZE OR MARKET THIS EVENT?

YES \_\_\_\_\_ NO \_\_\_\_\_

ARE YOU A NON-PROFIT, NOT-FOR-PROFIT OR A GOVERNMENTAL AGENCY?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF "YES", WHAT IS THE FULL NAME UNDER WHICH THE ENTITY IS REGISTERED WITH THE STATE OF FLORIDA?

\_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CITY OF NEW SMYRNA BEACH  
FACILITY USE AGREEMENT**

210 SAMS AVENUE, NEW SMYRNA BEACH FL 32168 \* PHONE – 386-424-2175 / FAX – 386-424-2177  
**CALL 386-424-2000 FOR ANY EMERGENCIES AFTER HOURS**

1. Name of Applicant: \_\_\_\_\_ Today's Date \_\_\_\_\_
2. Facility Requested: \_\_\_\_\_ Room: \_\_\_\_\_
3. Organization: \_\_\_\_\_ **Non-Profit Tax I.D. – Attach Certificate for Discount**
4. Phone: (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_
5. E-mail Address: \_\_\_\_\_ Mailing Address \_\_\_\_\_
6. City/State/Zip: \_\_\_\_\_
7. Type of Event: \_\_\_\_\_ Estimated Attendance: \_\_\_\_\_
8. Are You Charging Admission, Donation or Fees? \_\_\_\_\_
9. If Yes, How Much: \_\_\_\_\_ What For: \_\_\_\_\_
10. Will You be Serving Food and/or Beverage \_\_\_\_\_ Will You Be Serving Alcohol: \_\_\_\_\_
11. Date of Event: \_\_\_\_\_ Day of Week: \_\_\_\_\_
12. Hours of Event: \_\_\_\_\_ AM/PM to \_\_\_\_\_ AM/PM ( Must include set-up and clean-up time )

**PLEASE BE ADVISED THAT PARKING FOR CITY FACILITIES IS NOT GUARANTEED**

FEE SCHEDULE:

Rental Fee: \$ \_\_\_\_\_ per \_\_\_\_\_ \$ \_\_\_\_\_  
\$ \_\_\_\_\_ per \_\_\_\_\_ \$ \_\_\_\_\_  
SUBTOTAL \$ \_\_\_\_\_  
Sales Tax at 6.5 % \$ \_\_\_\_\_  
TOTAL RENT \$ \_\_\_\_\_

Date Rental Paid: \_\_\_\_\_ Receipt # \_\_\_\_\_

Damage Deposit: \$ \_\_\_\_\_

Booked: \_\_\_\_\_ **IT IS THE RENTERS RESPONSIBILITY TO OBTAIN THE KEY FOR THE RENTAL**

**VENUE PRIOR TO THE EVENT AT THE RECREATION OFFICE DURING RECREATION HOURS!**

Given: \_\_\_\_\_ Key Returned: \_\_\_\_\_

Date Damage Deposit Processed for Refund \_\_\_\_\_

APPROVALS:

Parks & Recreation Director \_\_\_\_\_

Police Department \_\_\_\_\_

City Manager \_\_\_\_\_

City Commission: \_\_\_\_\_

**SMOKING IS NOT PERMITTED AT THIS FACILITY**

COMMENTS:

It is understood that the organization will be responsible for the building and/or grounds to be in good condition upon leaving and that all damage will be reported to the Recreation Department immediately. It is also understood that the organization is responsible for payment of all scheduled dates in advance. The Recreation Department must be notified in advance of all cancellations; otherwise, the organization shall be responsible for the rental fee.

In consideration of the privilege herein granted, Licensee will not claim any damages from Licensor in connection with or on account of any injuries or damages arising in or on the above-described property while being used by the Licensee and Licensee's members, guests, or invitees, and Licensee further agrees to indemnify and save harmless Licensor from all claims or damages in connection with the use of the property by Licensee and Licensee's members, guests, or invitees.

**I have read and understand the rules, regulations and refund policy given to me at the time of this contract.**

\_\_\_\_\_  
Group/Organization Representative or Individual

\_\_\_\_\_  
Date

**City of NSB**  
**Recreation & Special Events**  
**Banner Reservation Form**

Booked: \_\_\_\_\_

Name \_\_\_\_\_

Organization \_\_\_\_\_

Phone Day \_\_\_\_\_ Evening \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Dates Requested \_\_\_\_\_

Event Date \_\_\_\_\_

Event Name \_\_\_\_\_

There is a 2 week maximum time for banners to stay up. Location of banner placement is not guaranteed. Due to increase in demand, the Recreation & Special Events Department will do its best to accommodate special requests. The Recreation Department cannot guarantee two spaces for the entire two weeks.

**Your banner must meet our requirements:**

1. Banner size should be 4x6 with a 3" hem on top and bottom along with a grommet on each corner just above the hem.
2. Banners must be built to withstand a minimum of 25 MPH winds.
3. Number of banners and placement are based on availability with a maximum of two banners per event.
4. Banners are only installed and taken down on Mondays. They must be delivered to the Recreation Department the Friday before they are scheduled to go up. After the banners are taken down, they must be picked up at the Recreation office at 1000 Live Oak Street within two days. If the banners are not delivered on time, you may forfeit your reservation.

I have read and understand the requirements for the banner size. I understand it is the discretion of the Recreation Department for the number and placement of the banners and the City of NSB will not be held responsible for any damage incurred to the Banners.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_