



City of New Port Richey
Parks and Recreation Department Special
Event Application

*All applications must be submitted at least 45 days prior to the event, but no more than 12 months before the event.

* Do not advertise our event until you receive an approved event permit.

Submit original signed and notarized application along with \$100 application fee to the following:

City of New Port Richey
Parks and Recreation Department
6630 Van Buren Street
New Port Richey, FL 34653

APPLICANT

Name of Applicant:

The Red Apple

Title (if applicable):

Name of Organization:

n: The Red Apple

Is your organization tax exempt? Yes No If yes, please attach documentation.

Is your organization a non-profit? Yes NO If yes, please attach documentation.

Mailing Address: 6640 Kentucky Ave
Street Address

New Port Richey, FL FL 34653
City State Zip Code

Phone: 727-847-2555
Daytime Phone

Cell Phone 727-798-6255

Email: Kerry_Rondeau@redapple.adt.com

EVENT

Name of Event: Rock The Park

Description of Event (Include purpose):
Bands - food - vendors

Location of Event: Sims Park

Event/Organization Web Address: _____

Event Date(s) & Time(s):

Date	Day of the Week	Start Time	End Time
<u>Sept 8th</u>	<u>Frid</u>	<u>8am</u>	<u>11pm</u>
<u>Sept 9th</u>	<u>Sat</u>	<u>8am</u>	<u>11pm</u>
<u>Sept 10th</u>	<u>Sun</u>	<u>8am</u>	<u>6pm</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Setup Date(s): Sept 8th -

Setup Time(s): 8am to 5pm

Cleanup Date(s): Sept 10th & 11th

Cleanup Time(s): 5pm to 8pm

Will this be an annual event? Yes No If yes, next year's date(s) Sept 7, 8, 9

EVENT LOGISTICS

1. Estimated Attendance (Includes event crew, participants, and spectators):

1,000 This Year _____ Last year _____

Maximum number at peak time: 500

2. Will alcohol be served or sold? Served Sold No Alcohol

3. Approximate number of food vendors: 4

*Event promoter is responsible for obtaining copies of all licenses and insurance from each vendor and providing the same to the City. All vendors must be listed on the site plan.

4. Approximate number of all other vendors along with type i.e. crafts, sponsors, informational

*May need to provide copy of certificate of insurance in a form acceptable to the City for each vendor:

15

5. Will electricity be required?: Yes No Source _____

Location of electricity around Sims Park

*City electric is available around the Sims Park Circle, panel box near the river, and the North and South side of Orange Lake. If an event requires additional locations, the event must provide an alternative.

6. List event equipment (Include things such as seating, tents, booths, and trucks. These should all be listed on site map as well.) Tents - 8

7. List entertainment type (bands, DJ, dancers, clowns, etc.): Bands

8. List dates and times of music and/or amplified sound: Friday 5pm-11pm
Sat - 12pm-10pm
Sun - 1pm-4pm

9. Will private security be provided? Yes No
If yes, list organization: _____

10. Will portable restrooms be used? Yes No

If yes answer the following and list on site plan:
How many: _____ Installation Date: _____ Removal Date: _____

11. Event holders are responsible for trash removal, and must provide their own dumpsters.
Please list your plan. Dump Trailers

Will dumpsters be used? Yes No

If yes please include on site plan and answer the following:
How many: _____ Sizes: _____
Installation Date: _____ Removal Date: _____

12. Please list any admission charges, donations, parking, registration or other fee and how much.
N/A

13. Does the event require street closures? Yes No

If yes complete the following:

Date(s) of street closure: Begin N/A End _____

Time of street closure: Begin _____ End _____

List street(s) to be closed: N/A

*A letter must be delivered to all residents that will be directly impacted by a road closure. Attach letter along with addresses to this application.

14. Will there be a parade? Yes No

If yes complete the following:

Street(s) that will be utilized for parade route: N/A

Time assembly to begin: _____

Time parade starts: _____

Total number of units in parade: N/A

Number of people in the parade: _____

Number of vehicles in the parade: _____

Number of animals in parade: _____

Number of floats: _____

Number of bands: _____

*Attach parade route map to application.

15. Will there be a running/walking/biking/water event? Yes No

If yes answer the following:

Time assembly to begin: _____

Time event starts: _____

Estimated ending time: _____

Event will be conducted on Streets Sidewalks Body of water

*Attach route map to application

16. Will a City dock be used for the event? Yes No

If yes, hours of use: _____

Location of dock: _____

List vendors who will use the dock: _____

*Any dock used for the event will need to remain open to the public during the event.

17. Please check the additional facilities you plan on using.

- Pavillion(s)
- Gazebo
- Amphitheatre (requires an additional rental fee)
- Peace Hall (requires an additional rental fee)

As the applicant, I hereby accept and understand the responsibility to oversee all contractors, vendors, or parties affiliated with the event and to insure compliance with the event policy and procedure manual, the resolution and City ordinance pertaining to Special Events, the event rules, guidelines, requirements, for tents and all policies, rules, regulations, and code provisions of the City of New Port Richey. I understand that any violations may result in immediate cancellation and revocation of the Event Permit. I further certify that all facts contained in this request are accurate.

For events on public property, I agree to obtain and furnish the City of New Port Richey with a certificate of general liability insurance in the amount of \$1,000,000.00 or greater as deemed by the City Risk Manager. The insurance must name the City of New Port Richey as an additional insured.

I understand incomplete applications or any outstanding financial obligations with any department within the City of New Port Richey may result in a denial of my request.

Print Name of Applicant or Authorized Representative: Jing Farrell

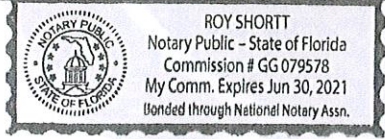
Signature of Applicant or Authorized Representative: [Handwritten Signature]

Date: 7-24-17

Subscribed and sworn to before me this 24th day of July, 2017
Who is personally known to me and/or produced as identification.

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public: [Handwritten Signature]



My Commission expires: June 30th 2021

AUTHORIZATION FOR OWNER'S REPRESENTATIVE(S):

I Red Apple School, the applicant, hereby authorize Tina Farrell to act as my representative(s) in all matters pertaining to the processing and approval of this application, including modifying the project. I agree to be bound by all representations and agreements made by the designated representative.

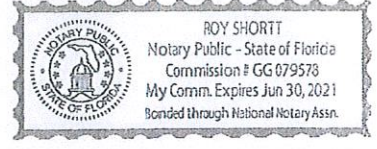
Signature of Applicant(s): Kerry Rondeau

Date: 7-24-17

Subscribed and sworn to before me this 24 day of July, 2017 who is personally known to me and/or produced as identification.

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public Roy Shortt



My Commission Expires: 6/30/21

APPLICANT'S AFFIDAVIT:

I Kerry Rondeau, applicant or authorized representative, have read and understand the contents of this application. The information contained in this application, attached exhibits and other information submitted is complete and in all aspects true and correct, to the best of my knowledge.

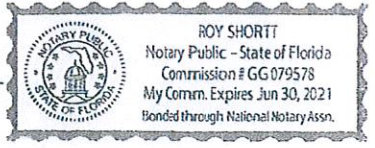
Signature of Applicant: Kerry Rondeau

Date: 7-24-17

Subscribed and sworn to before me this 24 day of July, 2017 who is personally known to me and/or produced as identification.

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public Roy Shortt



My Commission Expires: 6/30/21

FOR STAFF USE ONLY:

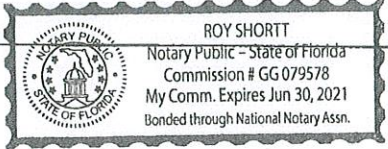
application, including modifying the project. I agree to be bound by all representatives and agreements made by the designated representative.

Signature of Applicant(s): Kenny Kndean

Date:

Subscribed ok and sworn to before me this 24th day of July, 2017 Who is personally known to me and/or produced as identification.

STATE OF FLORIDA, PASCO COUNTY

Notary Public: Roy Shortt 

My Commission expires: 6/30/21