



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.

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: Kristen King
Title (if applicable): Keep Pasco Beautiful Coordinator
Name of Organization: Keep Pasco Beautiful

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: 14230 Hays Road
Street Address

Spring Hill FL 34610
City State Zip Code

Phone: 7278567252 7275347481
Daytime Phone Cell Phone

Email: kking@pascocountyfl.net

EVENT

Name of Event: Pasco Upcycle and Art Festival

Description of Event (Include purpose):

There will be various upcycle vendors, food trucks, art vendors, and educational
activities. We also plan on using Peace Hall for the Art of Recycling. Art will be in peace
hall from 11/16 to 11/19. We will have craft be at the event in Sims on 11/17.

Location of Event: Sims Park

Event/Organization Web Address: www.keppascobebautiful.org

Event Date(s) & Time(s):

Date	Day of the Week	Start Time	End Time
<u>November 17</u>	<u>Saturday</u>	<u>10:00 am</u>	<u>4:00 pm</u>
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Setup Date(s): 11/16; 11/17 will start set up at 6 am

Setup Time(s): 8 am to 6 pm

Cleanup Date(s): 11/18 and 11/19

Cleanup Time(s): 8 am to 6 pm

Will this be an annual event? Yes No If yes, next year's date(s) 11/16/19

EVENT LOGISTICS

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

3,000 2,500
This Year Last year

Maximum number at peak time: 400

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

3. Approximate number of food vendors: 5

*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:

Upcycle vendors - 50; Educational vendors - 8; animal rescue vendors - 10;

animal related vendors - 5

5. Will electricity be required?: Yes No Source Park and food trucks

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.) _____

We will be bringing in sound, tables and chairs

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

3 bluegrass bands

8. List dates and times of music and/or amplified sound: _____

Bands will play from 10 am - 4 pm

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. We will take trash with us via truck.

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.

We will be charging vendors \$30.

13. Does the event require street closures? Yes No

If yes complete the following:

Date(s) of street closure: Begin _____ End _____

Time of street closure: Begin _____ End _____

List street(s) to be closed: _____

*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: _____

Time assembly to begin: _____

Time parade starts: _____

Total number of units in parade: _____

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)

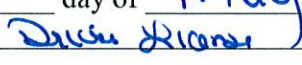
As the applicant, I hereby accept and understand the responsibility to oversee all contractors, vendors, or parties affiliated with the event and to insure compliance with the event policy and procedure manual, the resolution and City ordinance pertaining to Special Events, the event rules, guidelines, 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 \$500,000.00 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.


Signature of Applicant or Authorized Representative: 

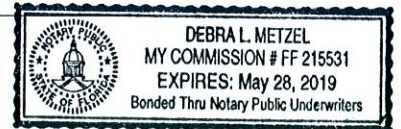
Date: 5/10/18

Subscribed and sworn to before me this 10th day of may, 2018
Who is personally known to me and/or produced  as identification.

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public:

Debra L. Metzler




My Commission expires:

May 28, 2019

Authorization for Applicant's Representative(s)

I Kristen King, applicant, hereby authorize Kristen King 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 representatives and agreements made by the designated representative.

Signature of Applicant(s): [Signature]

Date: 5/10/18

Subscribed and sworn to before me this 10th day of May, 20 18
Who is personally known to me and/or produced June 24 as identification.

STATE OF FLORIDA, PASCO COUNTY

Notary Public: Debra L. Metzler
Debra Metzler



My Commission expires: May 28, 2019

