



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! Before completing this application, please review the **Special Event Policies & General Instructions** and contact us with any questions that you may have. Submit the completed application, with the nonrefundable \$50 application fee, to the address below.

Applications will not be accepted if submitted less than 60 days before the proposed event date.

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?

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Carnival/Circus/Fair/Parade | <input type="checkbox"/> Picnic/Party _____ | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Exhibit/Festival | <input type="checkbox"/> Charity Walk/ Run _____ | _____ |
| <input type="checkbox"/> Reception / Wedding | <input type="checkbox"/> Tournament or Competition _____ | _____ |
| | | (Explain) |

D. Event Dates/Times: (Attach a detailed timeline. List multiple event days on an additional sheet.)

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 Federal Tax ID # ☐ Not For Profit Attach "Consumer's Certificate of Exemption" ☐ Individual _____

Contact Name: _____ Phone: _____ Email: _____

Secondary Contact Name: _____ Phone: _____ Email: _____

- ☐ Applicant understands that submission of an application does not guarantee approval.
☐ Applicant agrees not to promote or advertise the event until written approval has been received from the City.

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, attach the Sponsor letter to this application and provide their contact information below:

Name: _____ Phone: _____ Email: _____

Address: _____
Street Address City State Zip Code



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G. Estimated Number of Participants: Spectators: _____ Vendors: _____ Vehicles: _____

H. Event Classification: ☐ Private, ☐ Public; Cost is \$_____ or ☐ is free; ☐ Annual (specify changes); ☐ Family-Friendly (if not, explain) _____

I. Event Features:

- | | | |
|---|---|---|
| <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. Special Equipment: (Maintain 5' clearance around all fire hydrants):

- | | | |
|--|--|--------------------------------------|
| <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: Please provide a brief public event description for the City's calendar. _____

Public Contact Information: _____

Website / Social Media Link(s): _____

L. City Services Requested:

- | | | |
|--|---|--|
| <input type="checkbox"/> Potable water | <input type="checkbox"/> Trash Cans _____ | <input type="checkbox"/> Use of City Streets/Avenues/Parks (attach site 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 have read and fully understand the Special Event Policies & Guidelines and that the information provided 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), are true and accurate. I further certify that I am authorized to act on behalf of the organization named in Section E Applicant.

Signature of Applicant

Date



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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 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 Control: How will you ensure cleanliness during and after your event? _____

2. Noise Management: Amplified music must remain under 95 dBA and 100 dBC? How will you ensure noise compliance? Please provide the entertainment schedule by stage. Applicant shall alternate performances to ensure noise does not compact guests, but encourage guests to rotate throughout the entire 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) Guest parking areas (including advertisement plan)
- 2) Vendor only parking
- 3) transit plans (trolley, golf-cart, Uber, etc.)
- 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 events, 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
- Food trucks, trailers, cooking areas, grills, and any flammable gases
- Vendor placement – sponsors, merchandise, nonprofit, etc.
- Generator locations and/or sources of electricity
- Barriers, Fencing height and type along with entrance and exit locations
- Valet, shuttle or rideshare pick-up and drop-off zones
- Furniture - tables, chairs, bars, furniture, seating, activities, and/or games
- Signage - banners, and elaborate decorations such as inflatables, balloon arches, etc.



CITY OF
SANFORD
FLORIDA

**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, as filed with the city on _____, and named _____ may give
(Date) (Special Event Name)

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 Applicant's 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 _____, 2026 +, 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 _____, 2026.

Notary Public; State of Florida

(Affix Notarial Seal)

Printed Name: _____