EVENT CONTACT INFORMATION
Applicant Name: Paullegir Community Foundation
Address: 903 Ponce de Leon Blud
City: Belleain State: Fl Zip Code: 33756
Phone: 727-219-1817 Email: bcfworks@gmail.com
Are you requesting that this event be held (at least in-part) on public property? Yes
Are you the property owner/lessee of the event site? ☐ Yes 💢 No*
* If no, please attach a written letter of consent to use the event site from the property owner
Are you going to be the primary contact for this event? Yes \(\subseteq \text{No*} \) * If no, please provide primary contact information in the section below
Primary Contact (if different than applicant): James McArthur
Role with the Event: Co-Chair
Address: 504 Park Avenue
City: Belleain State: Fl Zip Code: 33756
Phone: 727 - 560 - 0961 Email: James@ socapstrategies.com
Emergency Contact (MUST BE ON-SITE FOR EVENT): Kanh Relistall
Role with the Event: Co-Chair
Phone: 727-424-7047 Email: Kanbrettstattagmail.com
EVENT OVERVIEW
Event Name: Lets Rumble Date of Event: 4 17 21
Start Time: 8:00 Am / pm End Time: 10:00 Ap am / pm
Site Address: Hunter Memorial Park / The Mall
Current Zoning of the Subject Parcel: Park
Expected # of Attendees: 300 Expected # of Vehicles (Including Vendors): 200
Roads closed at 6=00am - 11=00am
Deceimna cars at 6=30am

Provide a detailed description of the proposed event below (or attach a separate sheet). Please explain the event's purpose and activities, and describe why the event is requesting exemption(s) from the Code, citing the special relief checkboxes on pages 3 and 4 of this application. Also include an explanation of any measures in place to prevent underage drinking at your event.
Belloair Community Foundation 1st Annual "Let's Rumble
Car Show. at Klunter Park and the Likst Side of the
Mall High and care will be placed in the park.
But will have brailer and offer coffee adonuts.
Casull also be placed along the west side of
mall which will closed to traffic.
East-side will remain open wil no parking. We will need a parking map for attended from town
Barricades + cones + trash cans
Signage in Hunter & Mall 2 weeks prior to event.
Place a car @ the north end of Hunter 7 days prior. Hire police services

Are you going to contract any private security services/ornicers on-site? \(\) Yes* \(\) No * If yes, please provide the name of the business and the name(s) and cell phone numbers of the person(s) who will be on-site. Attach additional sheets as necessary.				
Name:	Cell Phone:			
Name:	Cell Phone:			
Are you going to utilize any parkin	g services for this event?			
* If yes, provide the name(s) of the	vendor(s) below along with company contact information.			
Vendor:	Phone:			
Vendor:	Phone:			



Provide the name(s) of any other commercial vendor(s) contracted for the event:		
BCF trailer		
REQUIRED APPLICATION ATTACHMENTS		
Unless exempted by the Town Manager, please attach the following documents to this application.		
Site Layout: May be printed out or hand-drawn on an 8.5" x 11" piece of paper or larger.		
☐ Parking Plan: May be printed or drawn on a map that is 8.5" x 11" or larger. Plan must designate space for public safety services access and parking.		
Neighbor Input Letters: Signed letters from at least four (4) neighbors who reside within three lots of the event-site that include a statement of approval or disapproval.		
SPECIAL RELIEF DOCUMENTATION		
Please mark the categories below for which you are seeking special relief, and attach relevant supporting documents to your application.		
☐ Alcohol Licensure (Code Section 6-2): If requesting to serve alcohol on public property or to sell alcohol, attach all necessary alcohol licensure applications, including State Form ABT 6003.		
□ Noise Mitigation Plans (Code Section 74-484): If requesting to exceed the noise regulations allowed by Town Code, provide an attached explanation of expected noise impacts, including the nature, duration, and location of any amplified sound.		
Sanitary Plans: If regular on-site restrooms are not sufficient for the event and other accommodations are to be made, provide a written explanation of those plans and include their location(s) on the required site layout.		
Special Event Insurance: Proof of special events insurance coverage if requesting to hold the event on public property, with the Town of Belleair listed as additional insured.		
☐ Street Vending: If planning to contract street vending for this event (i.e. food trucks), attach a letter explaining the vendor's purpose and impact, along with the vendor(s) contact information.		
☑ Temporary Signage (Code Section 74-572): If requesting to place temporary signage in excess of what the Code allows, attach a plan for the signage and a statement of its purpose.		
☐ Waste Elimination/Restoration Plans: If the event will create a level of waste that requires a dumpster or other cleanup not covered by regular pickup, provide an explanation of waste removal.		

AUTHORIZATION

By signing below, the applicant certifies that all information provided on this application is complete and correct and that all necessary attachments have been included. The applicant also agrees to the relevant fee schedule set forth by the Town, and assumes all responsibility for any and all damages to public property that may result from the requested event. A violation of any of the permit's parameters, any other sections of the Town's Code, or other relevant laws may result in code enforcement or other legal action.

THE COMPLETION OF THIS FORM DOES NOT CONSTITUTE APPROVAL FOR A SPECIAL RELIEF PERMIT.

END OF APPLICATION

STAFF WORKFLOW (FOR TOWN USE ONLY)	
Date of Application Submission to the Police Department: $\frac{\partial /\partial \partial /\partial \partial }{\partial \partial $	2/
Received By (Initials): Approved By (Initials):	
Does the Police Department have any objections to this permit? Yes	□ No
If yes, provide an explanation here or attach another sheet:	
You'ce Services will be needed fort	his
EVENT. (DNE OFFICER)	
Date of Receipt by Parks and Recreation Department: 2/25/21	
Received By (Initials): Approved By (Initials):	PA-
Does the Parks and Recreation Dept. have any objections to this permit?	Yes ⊠No
If yes, provide an explanation here or attach another sheet:	<u>'</u>
Date of Receipt by Town Manager: 2/3/21	
Does the Town Manager have any objections to this permit?	lo
If yes, provide an explanation here or attach another sheet:	
Date of Commission Decision:	
☐ Special Relief Permit is approved* ☐ Special Relief Permit is	denied
Assessed Fee: Due Date for Fee:	
	
Town Manager's signature Date of approval/a	denial

*If approved by the Commission, the Police Department will issue a Special Relief Permit to the applicant within three (3) business days. The Police Department will be responsible for enforcing the conditions of the permit before, during, and after the event.