EVENT CONTACT INFORMATION

Applicant Name: Silver Coffee - Stephanie Wheeler

Address: 646 Poinsettia Rd

City: Belleair State: FL Zip Code: 33756

Phone: 727.452.4037 Email: Swheeler78@AOL.COM

Are you requesting that this event is held (at least in part) on public property? ☐ Yes ☒ No

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.*

See 2024 application

Are you going to be the primary contact for this event? ☒ Yes ☐ No

** If no, please provide primary contact information in the section below.*

Primary Contact (if different than applicant): Stephanie Wheeler

Role with the Event: Committee Member

Address: 1 Harborside Drive

City: Belleair State: FL Zip Code: 33756

Phone: 727.452.4037 Email:

Emergency Contact (MUST BE ON-SITE FOR EVENT):

Role with the Event: Committee Member

Phone: 727.452.4037 Email: Swheeler78@AOL.COM

EVENT OVERVIEW

Event Name: Silver Coffee Event Date: 11/7/25

Start Time: 6 PM ☐ am / ☒ pm End Time: 10:30 ☐ am / ☒ pm

Site Address: 1 Harborside Drive Belleair, FL 33756

Current Zoning of the Subject Parcel: Residential

Expected # of Attendees: 150 Expected # of Vehicles (Including Vendors): 60

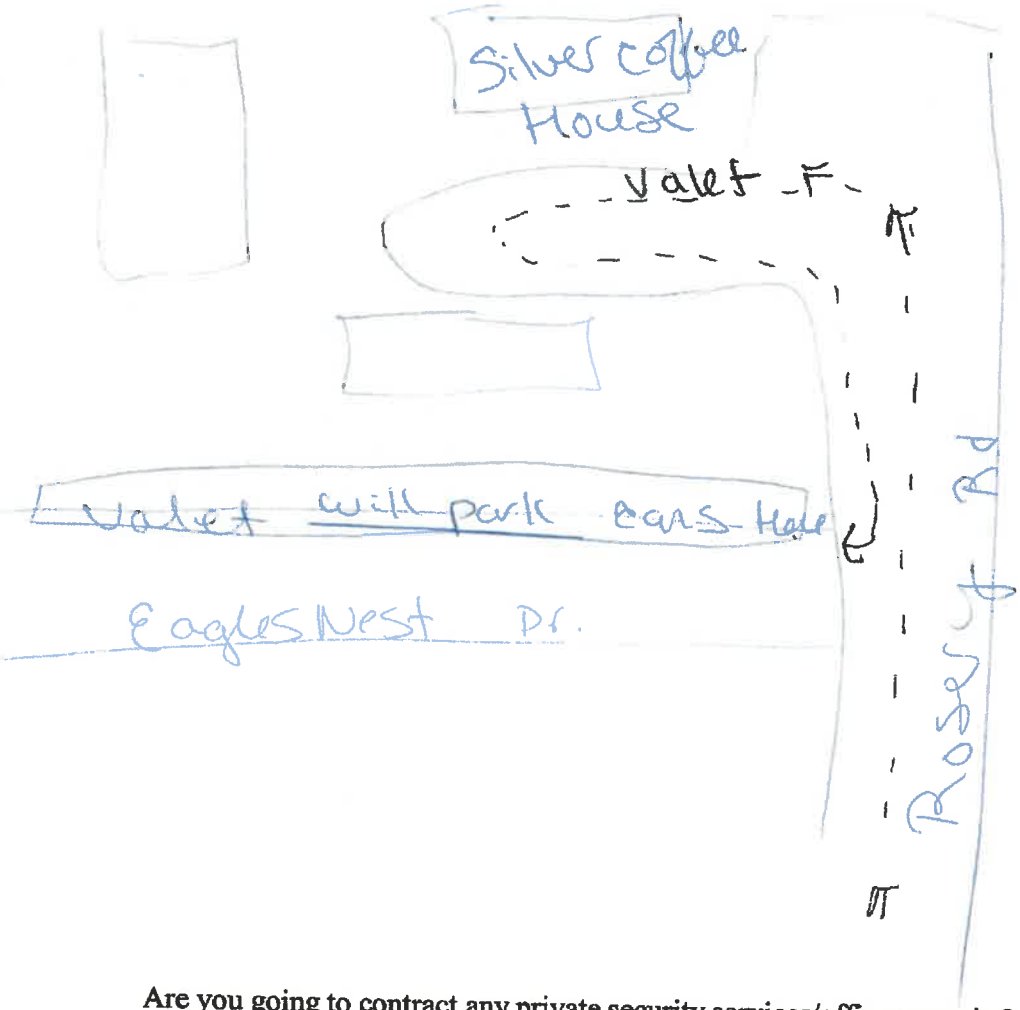
We are encouraging ride share

Information carried over from 2024 application

↓

Updated 7/2/24

Provide a detailed description of the proposed event in the space 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 existing Code, citing the special relief checkboxes on pages 3 and 4 of this application:



Are you going to contract any private security services/officers 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 parking services for this event? ☒ Yes ☐ No

** If yes, provide the name of the vendor, company contact information, and ensure a parking plan is attached.*

Vendor: Safeway Parking Enterprises Phone: 813.842.1242

Vendor: _____ Phone: _____

✱ We encourage rideshare or carpool

Provide the name(s) of any other commercial vendor(s) contracted for the event:

Elite Events - 727.791.7082

REQUIRED APPLICATION ATTACHMENTS - 2024 Applicant has all

Unless exempted by Town staff, 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

Check any sections below that are relevant for your event and attach relevant documentation.

☐ **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 Plan (Code Section 74-484):** If requesting to exceed noise limits, explain anticipated noise impacts, including the nature, duration, and location of any amplified sound.

☐ **Road Closures:** If the proposed event will require the temporary closing of Town roads or other public spaces, attach a map of these closures and an explanation for their necessity.

☐ **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) in 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 (more than 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.

☐ **Other:** _____

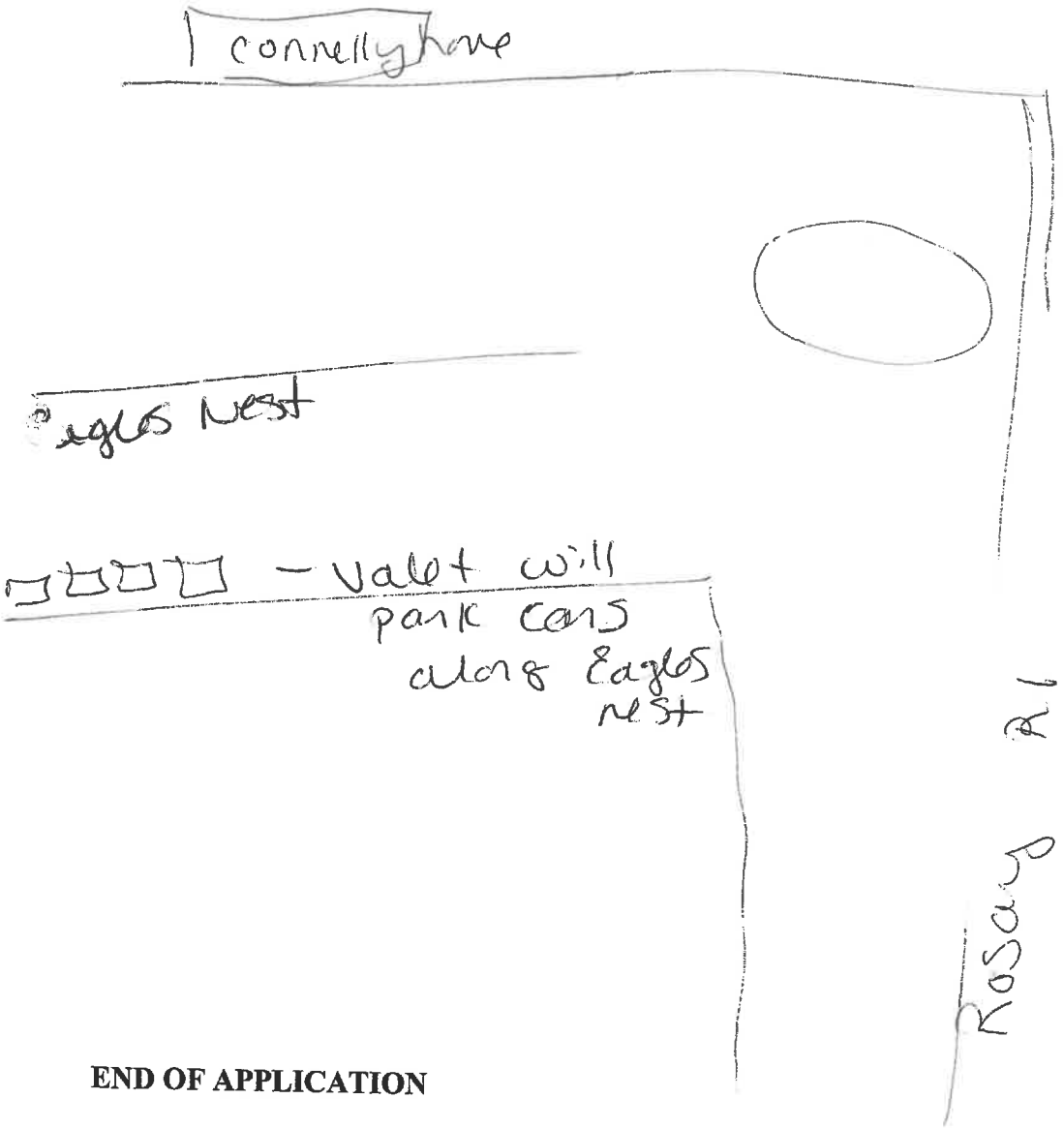
AUTHORIZATION

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 damage to public property that may result from the requested event.

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

Sylvia Eccheell — *Applicant signature*

9/20/25 — *Date*



END OF APPLICATION

Silver Coffee Parking Plan

Outlook

Fwd: Silver Coffee event

From Hilary Wahlbeck <floridahil@gmail.com>
Date Tue 10/7/2025 10:10 AM
To Amanda Oreskovich <aoreskovich@townofbelleair.net>; Stephanie Wheeler <StephanieWheeler00@gmail.com>

Hi Amanda,

See below from the homeowner! Will send the rest as they come in.

Thanks again!

Hilary

---------- Forwarded message ---------
From: **Marilyn Connelly** <marilyn@connelly.org>
Date: Tue, Oct 7, 2025 at 9:07 AM
Subject: Silver Coffee event
To: Hilary Wahlbeck <floridahil@gmail.com>

Town of Belleair
Marilyn and John Connelly are happy to be hosting the Silver Coffee to benefit Children's Home Society of Florida the evening of November 7th. Will be held at our home at One Harborside Drive in Belleair.
Thank you,
Marilyn Connelly
Sent from my iPad

Neighbor Letter # 1

Outlook

Fwd: Permit Letter

From Hilary Wahlbeck <floridahil@gmail.com>
Date Tue 10/7/2025 11:39 AM
To Amanda Oreskovich <aoreskovich@townofbelleair.net>; Stephanie Wheeler <StephanieWheeler00@gmail.com>

Hi Amanda, see below from Angela Hawkins. They are directly next door to the Connelly's. Working on the others!

Thanks!

---------- Forwarded message ---------
From: **Pamela DiMuccio** <pdimuccio@hawkinsff.com>
Date: Tue, Oct 7, 2025 at 10:06 AM
Subject: Re: Permit Letter
To: Angela Hawkins <ahawkins@hawkinsff.com>, Hilary Wahlbeck <floridahil@gmail.com>

Dear Town of Belleair,

We are giving our support and consent for the Silver Coffee event occurring on November 8, 2025, at 1 Harborside Dr., Belleair.

Thank you,

Kevin and Angela Hawkins
3 Harborside Dr.
Belleair 33756

Neighbor Letter #2

From: Angela Hawkins <ahawkins@hawkinsff.com>
Sent: Tuesday, October 7, 2025 9:57 AM
To: Pamela DiMuccio <pdimuccio@hawkinsff.com>; Hilary Wahlbeck <floridahil@gmail.com>
Subject: Fw: Permit Letter

Pam could you please provide this letter for us to Hilary.
We support

Get Outlook for iOS

Outlook

Fwd: Consent for event

From Hilary Wahlbeck <floridahil@gmail.com>
Date Tue 10/7/2025 12:27 PM
To Amanda Oreskovich <aoreskovich@townofbelleair.net>; Stephanie Wheeler <StephanieWheeler00@gmail.com>

Hi Amanda,

Here is one from the Venezia's. Thank you!

---------- Forwarded message ---------
From: **sarah venezia** <sarahvenezia@gmail.com>
Date: Tue, Oct 7, 2025 at 11:25 AM
Subject: Consent for event
To: <floridahil@gmail.com>

Dear Town of Belleair,

We are giving our support and consent for the Silver Coffee event occurring on November 7, 2025 at 1 Harborside Dr., Belleair.

Thank you,

Sarah Venezia
205 Rosery Road, Belleair, FL 33756

Sent from my iPhone

Neighbor Letter #3

STAFF WORKFLOW (FOR TOWN USE ONLY)

Police Department Representative: Allison Daniels **Date:** 09/30/25

Signature: [signature]

Estimated Department fees: Ø

Does the Police Department recommend approval of this permit? ☑ Yes ☐ No

Notes:

Public Works Representative: Ryan Womack **Date:** 9/30/25

Signature: [signature]

Estimated Department fees: Ø

Does the Public Works Department recommend approval of this permit? ☑ Yes ☐ No

Notes: Public Works will add "No Parking Signs" prior to the event. Will add them to Eagles Nest Dr, Garden Cir, N. Pine Cir.

Finance Department Representative: Michelle Mims **Date:** 10-7-25

Signature: Michelle Mims

		Due Date:	Date of Receipt:
Application Fee:	$ Ø	/	/
Total Estimated Town Staff Fees:	$ Ø	/	/

Notes: Fee waived - This event was rescheduled from Nov. 2024. Application fee was paid with first application for the original event date.

Town Manager: Gay Lancaster **Date:** 10/6/25

Signature: Gay Lancaster

Does the Town Manager recommend approval of this permit? ☑ Yes ☐ No

Notes: _____

_____

Date of Commission Decision: 10/21/25

Special Relief Permit is **APPROVED** ☐ Special Relief Permit is **DENIED** ☐

Notes: _____

_____

_____

_____ _____

Town Manager Signature *Date of approval/denial*

FINAL FEES

Final (Actual) Town Staff Fees:	$
Initial Amount Due:	$
Difference ☐ Due or ☐ Owed	$

Due Date for Difference Due or Owed: _____ Date of Receipt (*If Due*): _____