

City of Chipley

CITY HALL

1442 Jackson Avenue P.0. Box 1007 Chipley, Florida 32428 (850) 638-6350 Fax: (850) 638-6353



Special Event Application

Name/Organization: 900 Commonity Out Reach	
Address:	_
Contact person: Robert David Phone: 850-326-3213 Fax:	_
E-mail:	
Type of Event: Celebruiting the New Year with the comm	unity.
Purpose of Event: To provide a Safa enviscement for our	
youth & community to celebrate the Alea Year	
Location of Event: Pork Indoors/Outdoors	
Date(s) & Time(s) of Event: 31 D=c 25 1700 - 0100 (13cn 26)	
Amount of Liability Insurance:(attach copy of policy)	I
Concert Yes/No If yes, What type of music? 107 US. will be played	
Will food and nonalcoholic beverages be sold? 100 - Free FSSS	
Will fireworks be displayed? Yes/No If yes, provide name, license number and pyrotechnic plan to be approved by Fire Chief. Fix works will not be south by 900	Communt outreater!
Will amusement rides be available? NO	·
Number of participants anticipated per day: 100 - 200 Are security and/or medical services provided?	
Applicant Signature:Date:	
Approved { Denied { } Value:	-
0.9 0005	

RELEASE AND HOLD HARMLESS AGREEMENT

FOR THE SOLE CONSIDERATION O	OF the <u>City of Chipley</u> granting permission for
the undersigned to conduct a	upon street(s) as provided for in
it's letter of request, the undersigned agrees to inde	emnify and hold harmless the City of Chipley,
it's successors, agents and assigns and all other pe	ersons, firms or corporations, from any and all
claims, demands, damages, actions, causes of action	
and particularly on account of all injuries, both to	·
use of the street(s) as described above, and release	
any such Claims.	to receive discounting to the city of employ, for
Undersigned hereby declares that the terms	s of this agreement and lease have been
completely read and are fully understood and volu	
IN WITNESS WHEREOF, the undersign	ned has executed this release this
day of	ned has executed this felease, this
day of	
EIDM OD	
FIRM OR ORGANIZATION: 900 Cummun.	14 1) 18-01
ORGANIZATION: 100 COMMONS	27 OUT Tach
10	Chris C. Gdwards Print Name
Marche / Glin	Marie (Educate
What Color	Chris E. Gowen
Signature	Print Name
<1 - N > 0 U	
) record	
Witness	Witness
Sherry Snell	
Print Name	Print Name
STATE OF FLORIDA	
COUNTY OF WASHINGTON	
The foregoing instrument was acknowledged befo	ore me by Christopher Edwards
who is personally known to me or who produced	FZ Duk as
identification, and who executed the foregoing ins	
he/she executed the same freely and voluntarily an	
ine she executed the sume freely and votalitarily an	id for purposes expressed therein.
Witness my hand and seal in the County and State	last aforesaid this 3 day of
, 20	last alvicsalu tilis Uay Ol
, 20	
SHERRY SNELL	
A second	The me Xaly
Notary Public - State of Florida	Sherry Dray
Notary Public - State of Florida Commission # HH 470986 My Comm. Expires Dec 7, 2027 Bonded through National Notary Assn.	Notary Public