



## City of Green Cove Springs Special Event Application

**Instructions:** The information requested in this application will help staff approve your event and ensure adequate facilities are provided. Each section must be completed in its entirety. This application should be submitted to the Development Services Department a **minimum** of 30 days in advance for a minor event and 60 days in advance for a major event. Staff will determine whether the event is major or minor.

### EVENT SUMMARY

Event Title

Description

Recovery and Remembrance Day  
A celebration of strength, resilience,  
and hope. This event honors those overcoming  
Opioid Use Disorder (OUD), promotes awareness,

Event

☐ Promotional Event

☐ Concert/Performance

☐ Festival

Purpose

☐ Fundraiser

☐ Parade/Procession/March

☐ Walk/Run

☐ Outdoor Market

☒ Community Gathering

☐ Other: \_\_\_\_\_

If other, please describe: \_\_\_\_\_

Estimated Attendance

Peak 500

Average Per Day \_\_\_\_\_

Total \_\_\_\_\_

Event Website

N/A

Date/Time

Day of Event:

9/27/25

Set-Up:

0900

AM

PM

Start/End Time:

1000 - 1400

Breakdown:

1400

AM

PM

Provide the address and a general description of the venue and space to be utilized there.

Location

Spring Park - GCS.

Area of Event Site (SqFt or Acres): \_\_\_\_\_

### APPLICANT

Host Organization (if any)

Name
Address
Phone Number
Email

CCFR - PARAMEDICINE / AND VARIOUS OTHER  
CLAY COUNTY ORGANIZATION

Contact Person

Name
Address
Phone Number
Email

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reduces stigma, and stands as a  
powerful reminder that recovery is  
real and possible.

### VENUE SPECIFICS

Please provide a **site sketch** for the venue which shows: (1) ingress and egress to the site, (2) any requested closure of public roads or public parking spaces, (3) designated event parking, (4) location of first aide, (5) location of garbage and recycling cans to be provided, (6) location of restrooms (on-site and portable, including those which are ADA accessible) and handwashing stations, (7) location of vendors, (8) location of entertainment, and (9) location of any other event infrastructure.

YES NO

- ☒ ☐ Are you requesting the closure of any roads or public parking spaces in conjunction with this event? If yes, please provide details.

Please see site sketch  
(2 FOOD TRUCKS)

NOTE: Road closures must be approved by City Council.

- ☒ ☐ Are you requesting any aide from the City for this event (police presence, barricades for road closures, etc.)? If yes, please provide details. CCFR will be present

ENGINE AND RESCUE  
Police / barricades for Street Closure

NOTE: Assistance is subject to availability and staff approval; payment for services may be required. If approved, assistance will be coordinated by the applicant with the appropriate department.

- ☒ ☐ Will there be any tents / canopies used as part of the event? If yes, please indicate how many and what size(s).

Approx 30<sup>12-15</sup> vendor w/ tables  
and possibly sm. tents. (10x10)

NOTE: All tents must be properly anchored. Tents may require additional review, associated fees, and permitting. Staff will help you determine if a tent permit is required.

### SUBMISSION INFORMATION

Applications should be submitted to the Development Services Department. E-mail your completed application to [planning@greencovesprings.com](mailto:planning@greencovesprings.com) or mail / hand deliver your completed application to:

City of Green Cove Springs  
Development Services Department  
321 Walnut Street  
Green Cove Springs, FL 32043

Minor events are decisioned by the Site Development Review Team (SDRT). Major events must be approved by City Council. After an initial approval of a major event, additional information may be required, as written in City Code Sec. 117-791 of the city code.

Upon approval by SDRT (and when necessary, City Council) and payment of fees, staff will issue an event permit.

**FEES**

**Minor Event:** \$50

**Major Event:** a. \$500.00 for the first 5,000 persons in attendance over the entire event.  
b. \$100.00 for each additional 1,000 persons in attendance.

The applicant will pay the appropriate fee based on estimated total attendance but must provide attendance figures after the event to verify fees paid.

**AFFIDAVIT OF APPLICANT**

I certify that I am at least eighteen (18) years old, that I am empowered to execute this application on behalf of the host organization, and that the information on this application is true and complete to the best of my knowledge. I agree to hold harmless, indemnify and defend the City of Green Cove Springs, its officers and employees from any liability costs and attorney fees, which may arise from the Special Event.

I understand that this Special Event application does not guarantee approval of my event or reservation of the event location. I understand that failure to provide information and/or failure to obtain permits by established deadlines will result in cancellation of such Special Event.

I agree to comply with all City ordinances and regulations in connection with this Special Event. I understand that the violation of any City ordinances and/or regulations during the event will result in immediate termination at the City's discretion and ineligibility for future Special Events.

I understand it is my responsibility to (1) ensure all vendors are properly licensed with the appropriate authorities and (2) return the site to its original condition after the event. Food vending is subject to inspection by the Department of Business and Professional Regulations, Division of Hotels and Restaurants (DBPR). Event coordinators are responsible for notifying DBPR that they intend to conduct an event with food vendors. Call DBPR – (850) 487.1395 for details. Alcoholic beverages may not be consumed as part of the event without the appropriate State and City approvals.

I understand temporary signs and banners are not allowed in the City Limits of Green Cove Springs unless in areas designated by the City Manager or for events which are City Sponsored. Signage otherwise would be limited to the duration of the event.

I agree to pay the City for any services required in staging this Special Event. I understand that a Final Permit authorizing the conduct of the event will not be issued until all permit fees are paid and all required information has been provided.

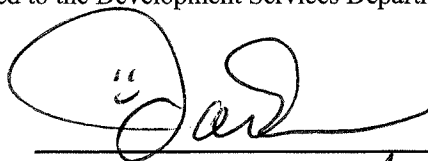
If the event is cancelled after receipt of the permit, I understand a refund is not guaranteed. Any changes in venue or event dates must be submitted to the Development Services Department to be routed for review; approval of changes is not guaranteed.

**Applicant Signature**

**Applicant Printed Name**

**Applicant Title(if any)**

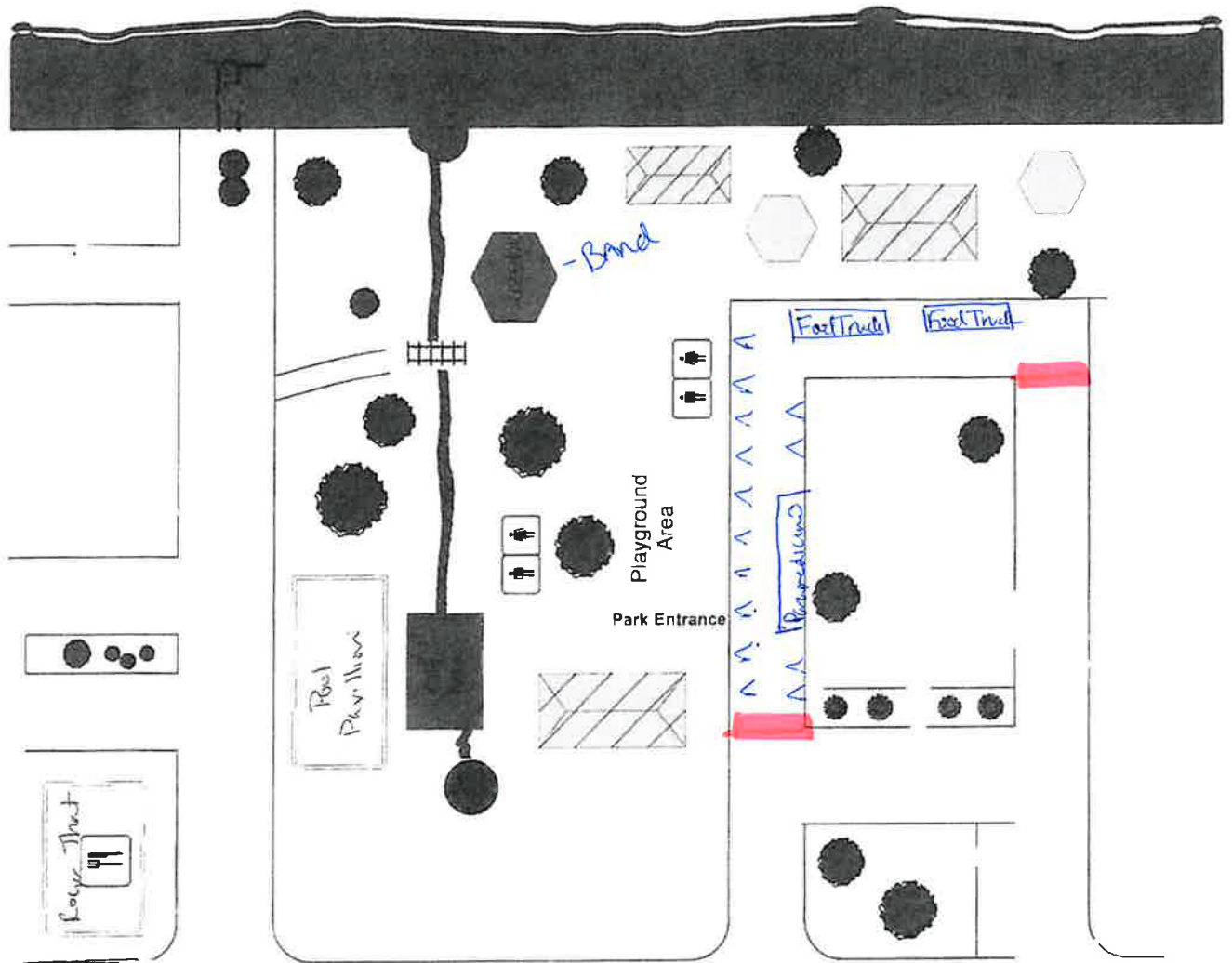
**Date**



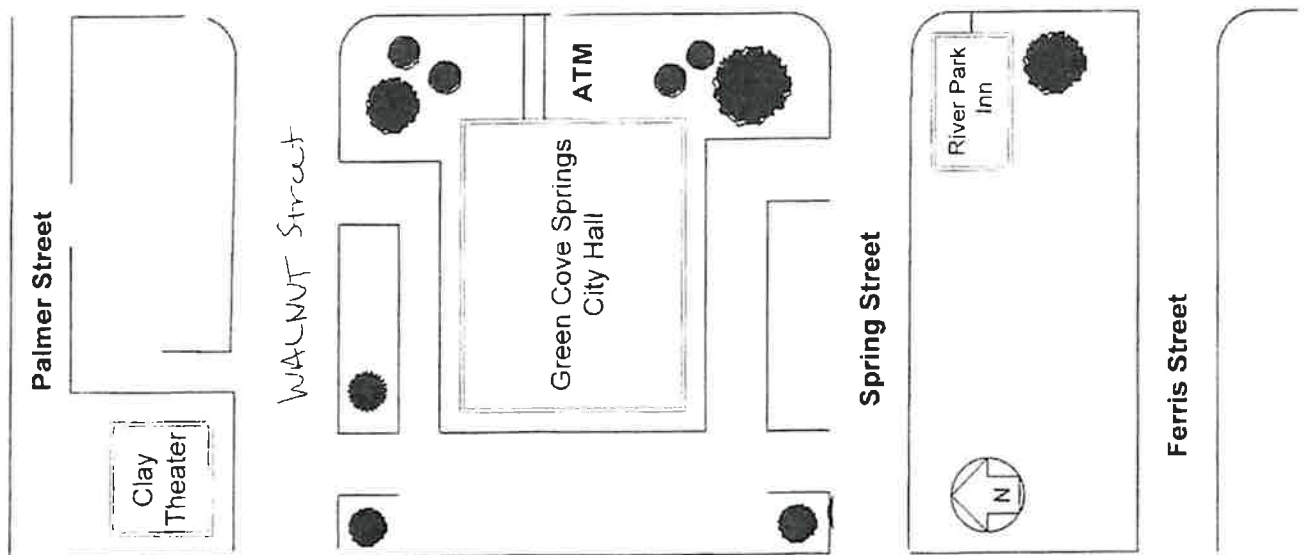
JAIRO HERRERA

BUREAU CHIEF CCFR PARAMEDICINE

7/16/25



Magnolia Avenue



Orange Avenue - Hwy 17

