DATE/TIME RECEIVED:



TOWN OF LAKE PARK SPECIAL EVENTS DEPARTMENT SPECIAL EVENT PERMIT APPLICATION

For Events being held on Town Property, Town services may be requested for an additional fee(s). Please schedule a pre-submittal meeting with the Special Events Director at least 60 days in advance of your event by calling 561-840-0160.

This Application must be completed and submitted by the Event Organizer ("Applicant")

If this Event requires a Town facility rental, please contact our Special Events Department at 561-840-0160 regarding the completion of the Facility Usage Application PRIOR to submitting this application.

Instructions:

This completed Special Event Permit Application and all relevant attachments must be submitted to the Special Events Department not less than thirty (30) calendar days prior to the date of the proposed Event. For events being proposed wholly or partially on Town Property, the deadline to submit is sixty (60) calendar days prior to the date of the proposed Event.

Application Fee Due and Payable Upon Submittal: \$100.00 (\$50.00 for individuals or Non-profit organizations). Note: Application Fees are Non-Refundable.

Non-Profit IRS Tax Identification Number (required if Applicant is a non-profit):

x85-8012592486C-4

(If applicable)

Name of Applicant (i.e. Event Organizer):

Children's Home Society of Florida - BRIDGES at Lake Park

Name of Event:

ASQ Pop Up Family Event

Address/Location of Event:

Kelsey Park (East Side) - 601 Federal Highway, Lake Park, FL 33403

Are you interested in sponsorship from the Town of Lake Park? Yes 🤟

Ne

535 PARK AVENUE, LAKE PARK, FLORIDA • Phone 561-881-3318 • Fax 561-881-3323

Special Event Permit Application Revised: January 2023 Previous Editions Obsolete

Dates/Times of the event (as applicable):
Date Day Begin Time End Time
Event Day 1 02/22/25 Saturday 9:30 AM () PM 2:00 () AM () PM
Event Day 2() AM () PM() AM () PM
Event Day 3() AM () PM() AM () PM
Event Day 4() AM() PM() AM() PM
Event Day 5() AM () PM() AM () PM
Event Day 6() AM () PM() AM () PM
Additional Applicant Information:
Name: Anishka Jordan
Address:1411 10th Street
State/Zip _ Lake Park, FL 33403
CONTACT PHONE: 561-881-5060 (Ciara Brice)
Alternate Phone #561-814-3020 (Ciara Brice)
Fax:
E-mail: ciara.brice@chsfl.org (Ciara Brice)
Description and Purpose of the Event Parents with children ages 2months - 5 years old with
recieve a free developmental screening and learn about activities that can do at home to support their child's growth and development. They will also receive fun and educational to be aways Estimated number of participants? 15
Has this event ever occurred in the Town of Lake Park? YesNo Has this site had a Special Event Permit this calendar year? YesNo
Has this site had a Special Event Permit this calendar year? Yes No
Will there be an admission fee for the Event? If ves. how much? Yes (\$)No

535 PARK AVENUE, LAKE PARK, FLORIDA • Phone 561-881-3318 • Fax 561-881-3323 Special Event Permit Application Revised: January 2023 Previous Editions Obsolete

THE FOLLOWING SECTIONS MAY NOT APPLY TO NON-COMMERCIAL EVENTS

NON-COMMERCIAL EVE	A T P		
Will your event require road closure?	Yes _	No _	V
If YES, describe the requested street segment closure and till Circulation Plan prepared by a Traffic Engineer, including You are responsible for notifying affected businesses/entities regarding affected routes: [Initial to acknowledge statement]	a detour sim	anna mla	7.0
EVENT COMPONENTS (Check the items that will be associated)	ted with your	event.)	
Boad closure			
Electric service hook-up required			
Water service hook-up required			
Sidewalks blocked			
Municipal park(s) prepared			
Booths or other temporary structures			
Parking lots to be partially or completely closed			
Food Vendors (Liquid Propane Gas Log)			
Town litter pick-up or street sweeping			
Tents (if yes, describe type and size 10 K LO & 2-2	20×10)		
Barricades ordered			
Alcohol served			
Security/Law Enforcement			
Music, bands, DJ			
Rides or other amusements			
Animals			
Fireworks			
Bleachers Designated models			
Designated parking area			
Town Restroom (if yes, please describe Ents, il. Nes	stram)	
Portable Restrooms (if yes, please describe Dumpsters/Trash Receptacles)	
Portable stage			
Other (e.g., bounce house, etc.)			
outer (e.g., bounce nouse, etc.)			
VENT VENDOR(S) LIST ALL NAMES (identify which ones		•	
	ure jooa truc	KS)	

535 PARK AVENUE, LAKE PARK, FLORIDA • Phone 561-881-3318 • Fax 561-881-3323 Special Event Permit Application Revised: January 2023

Previous Editions Obsolete

Will the event require the use of electricity?	Yes	
Will the event require water hook-up?	Yes	No No
*Will food and/or beverages be served?	Yes V	No
*Will the event have vendors or concession sales, including	g food? Yes	No
*If the answer to the above question is YES, the responsible for securing all respective Palm Beach Countricates for food vendors, as well as copies of all other	ty and State of Fl	orida Health
WILL THE EVENT INCLUDE FOOD TRUCKS?	Yes	No V
*If the answer to the above question is YES, all food truc license, PBC Business Tax Receipt, and a current PBC Report. Copies of these documents must be provided to th (14) calendar days prior to the event.	Fire Rescue Safe	ty Inspection
For events on Town property, the Liquid Propane Gas to of the event for leaks prior to operating any gas applian staff with their LPG Log at each event to ensure properfollowed.	ces. Applicants	must provide
For events on Town property, Applicants must also provide Insurance issued no more than thirty (30) days prior to the naming the Town of Lake Park (and the CRA, if the even CRA area) as certificate holder and an additional insured general liability. The required limits are \$1 million per of aggregate. \$100,000 damage to rented premises must also Applicants who are found to have attempted to circuising another person/entity for the purposes of obtaining another specific the purposes of obtaining another specific the purposes.	the date of the ever that is taking place we decourrence and \$2 to be provided. cumvent this required	nt and within the commercial million uirement by ed insurance
Town for three years. (Applican	t initial to acknowledg	e statement)
The Applicant holds full responsibility and liability for its	s vendors (Initial to acknow	ledge statement)
**Will alcoholic beverages be served?	Yes	No V
**If the answer to the above question is YES, additional usual to the insured's operations with a \$1million limit n Certificate of Insurance.	nust be included o	on the
***Are you proposing signage?	Yes	No
***If the answer to the above question is YES, please fill out the Sig the Community Development Department. An additional \$100.00 a signage application. This application will be deemed incomplete if s	pplication fee is requ	ired for this

535 PARK AVENUE, LAKE PARK, FLORIDA • Phone 561-881-3318 • Fax 561-881-3323
Special Event Permit Application
Revised: January 2023
Previous Editions Obsolete

application is not submitted.



AFXOC =X 01X01=X

· Space for vendor setup

Will the event have an official "Flyer" and/or promotional materials? Yes No

If yes, please provide a copy of the "Flyer".

Flyer is boung created by the Once

Please provide a sketch of the Special Event site including: Proposed location of parking, tent(s), concession stand(s), booth(s), stage(s), etc.

OR provide an attachment:

NOTE: Public parking spaces are on a first-come, first-serve basis, and may be metered depending on where your event is being held.

IF TENTS ARE BEING UTILIZED:

MAXIMUM ALLOWABLE TENT SIZE IS 35' X 45'

For ALL tents larger than 10 ft. x 10 ft. (pop-up style), a Certificate of Flame Resistance is required and must accompany this Special Event Permit Application.

535 PARK AVENUE, LAKE PARK, FLORIDA • Phone 561-881-3318 • Fax 561-881-3323 Special Event Permit Application Revised: January 2023 Previous Editions Obsolete

(All requirements imposed by any of the reviewing entities below, will be communicated to the Applicant early-on and must be secured no later than 14 calendar days in advance of the event, with verification provided to the Town prior to the issuance of the Special Events permit)

(FOR OFFICE USE ONLY) SIGNATURES/APPROVALS:

Please Sign and Date

SPECIAL EVENTS DIRECTOR:			
·	DATE:		
PUBLIC WORKS DIRECTOR:			
	DATE:		
MARINA DIRECTOR:			
	DATE:		
PALM BEACH COUNTY SHERIFF:			
	DATE:		
PALM BEACH COUNTY FIRE-RESCUE:			
	DATE:		_
RISK MANAGEMENT:		1	ADA Requirements
	DATE:	\leq	Insurance Requirements
COMMUNITY DEVELOPMENT DIRECTOR:		•	- Tan sandanio
	DATE:		
A copy will be provided to the Staff Member and/or	Code Officer if on du	ity.	

Additional Comments (reviewers may include attachments):

535 PARK AVENUE, LAKE PARK, FLORIDA • Phone 561-881-3318 • Fax 561-881-3323 Special Event Permit Application Revised: January 2023 Previous Editions Obsolete

APPLICANT SIGNATURE:	
APPLICANT PRINTED NAME: ANISHKA JORDAN	DATE: 1/2/2025
PROPERTY OWNER: (If Property Owner is not the Applicant)	
PROPERTY OWNER PRINTED NAME:	DATE:
THE PARTY OF THE P	DATE: