



POLICE DEPARTMENT

NOTE: Permit is **NOT FINAL** until executed by Chief of Police and is subject to approval by City Council and affected City Departments.

	PERMIT APPLICATION NUMBER								
DISTRICT:									
	APPLICATION FOR PERMIT - OU' *** Must be submitted at le			(18A)					
NAME OF EVENT:									
SPONSORING ORGANIZ	ATION/PERSON:								
HEAD OF ORGANIZATIO	N:		FEDERAL TAX ID #						
ADDRESS: _	Street		City						
PHONE: Bus	Street iness ()	2nd # <u>(</u>		State	Zip				
APPLICANT:		E-MAIL:							
ADDRESS:									
PHONE: Busin	Street 2nd # ()		State	Zip				
PERSON RESPONSIBLE	FOR EVENT CHARGES:								
LOCATION OF EVENT:_									
DATE (S) OF EVENT:									
SET UP START TIME:	(a.m.) (p.m.)	BREAKDOWN END	TIME:		(a.m.) (p.m.)				
'EVENT' START TIME:_	(a.m.) (p.m.)	'EVENT' END TIME:_	(1)		(a.m.) (p.m.)				
ESTIMATED I	NUMBER OF PARTICIPANTS (not including spectators):		(NOT to exce	ed 2:00 a.m.)					
ESTIMATED I	NUMBER OF SPECTATORS ATTENDING EVENT:								
*** If the ans	wer to any of the following questions is YES, EX	(PLAIN FULLY in t	he space provided	or on an atta	chment. ***				
YES NO									
D	o you intend to dispense, sell, or permit any alcoholic b	everages? If yes, exp	olain which ones.						
D	Do you intend to serve or sell any food, goods, or services? If yes, explain which ones.								
A	Are fireworks or other pyrotechnics going to be used? If yes, explain:								
W	Will it be necessary to have any street, lane, or sidewalk closures? If yes, specify which ones. (Fee is \$350.00)								
Is	Is the event going to be held in any city park or recreational facility? If yes, which one.								
- w	Will any tent(s), stages, or other structures be used? Which ones? **(If tent is larger than 10' x 10', call 407-246-2271 for a permit.)								
	Will there be any hot-air balloons or other inflatable device, helicopters, or parachutists? If yes, which ones.								
W									
W	Will there be any amplified sound equipment? What type? Decibel level? How /where will power source be accessed?								
W	/ill there be any signs or banners used at the site? If ye	s, include size, location	on, and method of atta	ichment.					
W	/ill any admission fee be charged? If so, how much?								

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GIVE A DESCRIPTION OF A	LL EVENT ACTIVITIES (unle	ess 'private event' into will be or	n City Calendar):	
"PARADE" INFORMATION: MAR	SHALLING TIME:		DISPERSAL TIME:	
NUMBER OF:	PERSONS	ANIMALS	VEHICLES	
	WHO/WHICH WILL CO	ONSTITUTE THE PARADE:		
TOTAL NUMBER	R OF UNITS:	(appr	oximately)	
PORTION OF ROADWAY(S)	/SIDEWALK(S) THAT THE PA	ARADE WILL OCCUPY (EXPLA	IN FULLY, ROUTE, ETC):	
INCLUDE:	ROUTE FOR RACE/PARAD	E/MARCH; LOCATION OF VEND	<u>T BE SUBMITTED WITH THIS APPLICATION.</u> ** OR SITES; LOCATION OF TENTS, STAGES, BLEACHER INATION POINT, MARSHALLING AREA, AND DISPERSA	
order, payable to the <u>City</u> Box 913, Orlando, FL 32 <u>All projected costs mus</u>	of Orlando. The applicate 802. If the event will necest to be paid before the event will necest to be paid before the event will be the event will be the event to be paid before the event to be the event to be paid before the event to be	tion and fee must be submitte ssitate or require the use of Ci nt and prior to issuance of	application is filed. Payment must be made with d to the Orlando Police Department, Special Operaty facilities, personnel, or equipment, the Permittee the permit. Upon completion of the event, the expartial refund. Altered applications will NOT be a	tions Division, P. O. must pay the costs. act charges for City
Application Fee F	Received by:	(0.0.0.0.0	on	
OFFICIATION BY ARRIVE	24NT - LOEDTIEW THAT AL	(S.O.D. Representative)	(Date)	V 541 051100D0 0D
MISREPRESENTATIONS WI CHAPTER 18A (can be view EVENT MAY BE CANCELLE BE VIOLATED. I CERTIFY 1	LL CONSTITUTE A CRIMINA ed at <u>www.Municode.com</u>) AN D BY THE CHIEF OF POLICE THAT I AM AUTHORIZED BY	AL VIOLATION OF THE CODE OF ND I AGREE TO COMPLY WITH E SHOULD ANY CONDITIONS/S THE ORGANIZATION NAMED H	IN THIS APPLICATION IS TRUE AND CORRECT. AN THE CITY OF ORLANDO. I CERTIFY THAT I HAVE RE ALL APPLICABLE PROVISIONS OF THE CITY CODE. IT IPULATIONS OF THE PERMIT OR CITY ORDINANCE EREIN TO ACT AS ITS AGENT FOR THE HEREIN DESUBLIGATIONS SHOULD I CANCEL THE EVENT.	VIEWED CITY CODE I UNDERSTAND THE OR STATE STATUTE
AND SEVERALLY INDEMNII APPEAL, FOR ANY AND AL	FY AND HOLD THE CITY HALL CLAIMS FOR DAMAGE T	ARMLESS AGAINST LIABILITY,	KE THIS APPLICATION, CONTRACT AND AGREE THA INCLUDING COURT COSTS AND ATTORNEYS' FEES OR DEATH OF PERSONS ARISING OUT OF OR RESTICIPANTS.	FOR TRIAL AND ON
SIGNED:			Sworn to me and subscribed before me this	day of
SIGNED:	LICANT SIGNATURE			•
			, 2	··
Print	ted/Typed Name of Applican	t		
Date:			NOTARY PUBLIC SIGNATURE (or Law Enforcement	ent Officer)
			My commission expires	

PERMIT APPLICATION NUMBER:

Rev: 2/2/11/fav