

## St. Johns County Board of County Commissioners

Parks & Recreation Department

## RESERVATION AND EVENT PERMIT APPLICATION PUBLIC EVENT

#### 1. APPLICANT AUTHORIZATION

Attach a written communication from the organization or organizations in whose name the event will be advertised, which authorizes you, the applicant, to apply for this special event permit on its/their behalf.

Applicant's Name:	Title:	
Company Name:		
Company Address:		
Company Mailing Address:		
Daytime phone:	Evening Phone:	
Emergency:	Email:	
2. TITLE, PURPOSE AND BRIEF DESC	CRIPTION OF EVENT	
Location requested:		
Refer media or citizen inquiries to:	Phone:	
<b>3. EVENT PRINCIPALS</b> Please attach a separate sheet listing naminvolved in any way in the proposed spromoters, financial underwriters, commercibeing produced, the organization or organization or organization and organization or organization organization organization organization organization organization organization organization o	pecial event. Include professional event ial sponsors, charitable agencies for whose zations in whose name the event is being	organizers, event benefit the event is advertised, and all
4. REQUESTED EVENT COMPONENT	S	
A. Requested day and date (first choice):		
B. Alternate days and dates:		
C. Requested hours of operation: from	am/pm; to	am/pm.
D. Set up (beginning day and date):	, Time	am/pm
Dismantle by (day and date):	, Time	am/pm
2175 Mizell Road, St. Augustine, FL 32080		www.sjcfl.us

E. Describe the number and type of animals to be	used in the event (if any):	
F. Attach a draft of the entry form for participants	s/spectators, if applicable.	
G. Anticipated number of participants:	spectators:	

#### 5. INSURANCE (For sports and public events):

This application will not be approved until the County has received a valid **Certificate of General Liability** Insurance which specifically includes St Johns County, Board of County Commissioners, 500 San Sebastian View, St. Augustine, FL 32084 as additional insured by policy endorsement. Additionally, if required by Florida Statute, proof of Workers' Compensation Insurance will need to be included with this application. If your business is using any vehicle for or during the event, proof of **Auto Insurance** will need to be included with this application. The amounts for general liability, auto insurance, and workman's compensation insurance are specified below.

\*For use of Ketterlinus Gym please add the City of St. Augustine, 75 King Street, St. Augustine, FL 32084 and St. Johns County School Board, 40 Orange Street, St. Augustine, FL 32084 as additional insured.

- A. The APPLICANT hereby states and affirms that insurance coverage required is in place at the time of this Agreement, and will remain so for the term of this rental agreement and that the APPLICANT will not occupy the premises under this Agreement until it has obtained all insurance required under such laws. The APPLICANT agrees to submit documentation of all insurance coverage to the COUNTY or its representatives upon request. All insurance policies shall be issued by companies authorized to do business under the laws of the State of Florida. Compliance with the foregoing requirements shall not relieve the APPLICANT of its liability and obligations under this rental agreement.
- B. The APPLICANT shall maintain during the term of this rental agreement commercial general liability insurance in the amount of one million dollars (\$1,000,000.00) combined single limit to protect the APPLICANT and the COUNTY from claims for damages for bodily and personal injury, including wrongful death, as well as from claims of property damages which may arise from any operations under this agreement, whether such operations are by the APPLICANT or by anyone directly employed by or contracting with the APPLICANT or PARTICIPANT.
- C. The APPLICANT shall maintain, during the life of this rental agreement, comprehensive automobile liability insurance in the amount of one hundred thousand dollars (\$100,000.00) per person, three hundred thousand dollars (\$300,000.00) per occurrence combined single limits to protect the APPLICANT from claims for damages for bodily injury, including wrongful death, as well as from claims for property damage, which may arise from the ownership, use, or maintenance of owned, or non-owned automobiles, including rented automobiles whether such operations are by the APPLICANT or by anyone directly or indirectly employed by the APPLICANT.
- D. The APPLICANT shall maintain, during the life of this rental agreement, adequate Workers' Compensation Insurance and Employers Liability Insurance in at least such amounts as are required by law. If the APPLICANT is not required to maintain Workman's Compensation Insurance and Employers Liability Insurance under Florida Law, verification noting this exclusion shall be provided to the COUNTY by the APPLICANT insurance carrier.
- E. All insurance, other than Workers' Compensation, to be maintained by the APPLICANT shall specifically include St Johns County as an Additional insured, by policy endorsement, and a Certificate of Insurance naming St. Johns County Board of County Commissioners, 500 San Sebastian View, St. Augustine, FL 32084, as Additional Insured must be provided to the COUNTY by the APPLICANT insurance carrier. The description should include the dates and the title of the event and name of specific facility (ies) being rented by the APPLICANT.

F. The insurance requirement is deemed contractual, and the COUNTY shall not be deemed responsible to any third party for any failure of insurance coverage.

6. SANITATION Give a brief description of your "Plan of Clean-up":		
<b>7. LOCATION MAP</b> Check off items below that apply to your event. Attach a map of your requested location (available from the county website).		
A. If a route is involved, the beginning area, the route (indicate directions with arrows), and the finish area.		
B. If a route is involved, the places where buses, trolleys or trains need to be considered.		
C. If a route is involved, it will expedite approval of your event if you attach separate maps giving two or three alternate routes.		
D. If a relay is involved, indicate hand-off points.		
E. Entertainment or stage locations (grandstand operators should provide you with a to-scale drawing).*		
F. Alcoholic beverage concession area.*		
G. Non-alcoholic concession areas.		
H. Food concession areas.*		
I. General merchandise concession area.		
J. Portable toilet facilities (indicate number).		
K. First aid facilities.		
L. Event participant and/or spectator parking areas.		
M. Event organizer's command post.		
N. Fireworks or pyrotechnics site.*		
O. Vehicle fuel handling site.*		
P. Cooking areas.*		
Q. Tables, enclosures, etc.		
R. Temporary or permanent structures constructed for the event.*		
S. Site of electrical wiring to be installed for the event.*		
T. Trash containers (indicate number):		
U. Other (please describe):		

<sup>\*</sup>Remember, it is your responsibility to know and follow all applicable codes and ordinances.

<sup>\*\*\*</sup>Please note bounce houses are not allowed at your event.

### 8. AVAILABILITY OF FOOD, BEVERAGES AND/OR ENTERTAINMENT

A.	If there will be music, sound amplification, or any other noise impact, please describe, including the intended hours of the music, sound or noise.  *Please see attached Noise Ordinances			
В.	Alcoholic beverages to be served? Yes No			
	IF YES, PLEASE COMPLETE THE APPLICATION FOR PERMIT FOR POSSESSION AND CONSUMPTION OF ALCOHOLIC BEVERAGE ON PUBLIC PROPERTY			
C.	If yes, describe what system will be used to ensure that alcoholic beverages will be consumed only by those persons 21 years and older:			
D.	If yes, describe how, where, when and by whom the alcoholic beverages will be served:			
E.	If a D.J., a dance, or live entertainment is part of your event, please describe:			
F.	Food and/or non-alcoholic beverages to be served? Yes No			
G	If you intend to cook food in the event area, describe your area layout, including fuel or electric source to be used:			
H.	Please note that the use of bounce houses is not permitted on county property.			
	ECURITY AND SAFETY PROCEDURES bescribe your proposed procedures for set-up, operation, internal security and crowd Control:			
	the event is to occur at night, describe how you are going to light the event area in order to increase afety of participants and spectators coming to and leaving from the event:			
	your event includes vehicles or animals, describe the minimum and maximum speeds of the event the minimum and maximum intervals of space to be maintained between units:			
	vive name, address and phone numbers of the agency or agencies which will provide first aid and equipment. Attach additional sheets if necessary.			
Nam	e of Agency:			
Nam	e of Representatives:			
Addı	ress:			
Phon	ne Number			

#### 10. VENDORS OR CONCESSIONAIRES

A. Describe what vendors or concessionaires you will allow in conjunction with the event and the purpos or purposes of the concessions:
B. Describe how you intend to regulate, monitor and control the type, number and quality of vendors/concessionaires whom you may permit to operate in conjunction with the event:
11. OTHER PERTINENT INFORMATION:

#### 12. PERMITS AND LICENSES

To the extent that the APPLICANT needs to secure, obtain/acquire, and maintain permits and/or licenses, in order to use the premises and facilities described herein and to conduct, manage or operate the Event and activities described herein, then the APPLICANT shall be responsible for securing, obtaining/acquiring, and maintaining, at the APPLICANT's sole expense, any, and all, permits, licenses, and/or approvals required by Federal, State, and/or local law, rule, regulation, or ordinance. Specifically, the APPLICANT shall be required to secure, obtain/acquire, and maintain for the duration of the Event, any, and all, permits, licenses, and approvals that are required for, or associated with, APPLICANT's use of the premises and facilities described herein.

#### 13. RESERVED PAVILIONS

If you have paid for a pavilion or space in one of our facilities and hold an approved permit please make sure you bring the permit with you to your function on day of reservation. In the event you arrive and someone is in the pavilion and does not have the site reserved you may show them you have paid for and reserved the site for the allotted time slot on your permit.

If you encounter any problem please call the St. Johns County Sheriff's non-emergency number which is 904-824-8304 for assistance.

#### 14. America with Disabilities Act (ADA),

Applicants are hereby advised that, in accordance with applicable provisions of the America with Disabilities Act (ADA), all Special Events conducted on St. Johns County property and open to the public shall be accessible to people with disabilities. County staff shall ensure that each Special Event venue provides for an adequate number of accessible parking spaces in appropriate locations, accessible routes throughout the site, and other accessible features for food service, restroom facilities (including accessible portable toilets), assembly area seating, etc., where such elements or facilities are provided for the public. No ADA accessible element or facility shall be obstructed, removed, relocated, or otherwise altered without prior written approval by the County. Applicants must coordinate with County staff as necessary to ensure compliance with the provisions contained in this paragraph, failure to do so may result in revocation of this Special Event Permit.

#### 15. INDEMNIFICATION & HOLD HARMLESS:

To the extent permitted by law, the APPLICANT shall indemnify, defend, and hold harmless the COUNTY, its officials, agents, servants and employees from all claims (including tort-based, contractual, injunctive, and/or equitable), losses (including property (personal and/or real), and bodily injury), costs (including attorneys' fees), suits, administrative actions, arbitration, or mediation originating from, connected with, or associated with, or growing out of (directly and/or indirectly), the APPLICANT's use of the premises and facilities described herein. Moreover, the APPLICANT shall indemnify, defend, and hold the COUNTY, its officials, agents, servants and employees harmless from all claims, losses, costs, suits, and administrative actions, arbitration, or mediation, from, or incident to, connected with, associated with, or growing out of the APPLICANT's direct and/or indirect negligent or intentional acts or omissions associated with the above-noted actions and activities.

\*This provision relating to Indemnification, is separate and apart from, and is in no way limited by, any insurance provided by the APPLICANT, as set forth herein or otherwise.

### THIS FEE IS NON-REFUNDABLE

Print Name of Authorized Applicant	Original Signature of Authorized Applicant	
Date Signed	Original Signature of Witness	
Please note there must be an ori	iginal signature and a witness to your	
signature before submitting this ap	plication in order for it to be considered	
for permitting. Electronic signa	atures are not acceptable. Thank you	
**Checks are only accepted thro ***If paying by credit card, plea	rder payable to St. Johns County. ee weeks prior to your requested date. ase contact our office at 904.209.0333.	
Recreati	ion Use Only	
Resident Non-Resident	Verified: Date Paid:	
Method of Payment: Check # Cash	Credit Card Money Order	
General Liability Liquor liability	insurance is attached (if applicable)	
APPLICATION IS: APPROVED DENI	ED APPROVED WITH CONDITIONS	
DIRECTOR OF RECREATION AND PARKS or AUTHORIZED DESIGNEE	DATE	

Persons who wish to appeal the decision to approve or deny a permit shall make that request to the County Commission through the County Administrator.

# APPLICATION PERMIT FOR POSSESSION AND CONSUMPTION OF ALCOHOLIC BEVERAGE ON PUBLIC PROPERTY IN ACCORDANCE WITH ORDINANCE 99-50

1. Name, address, telephone number of person and/or organization applying for permit:		
2. Description of event, where it will be held, dates and hours:		
3. Estimated amount of physical area (space) needed for the event and the number of attend the event:	of persons expected to	
4. Insurance requirements are as follows: Alcohol is only permitted in or on County premises with the written per County Administrator on a completed Application for Permit for Consumption of Alcoholic Beverage on Public Property in Accordance with 99-50 (this application) AND with proof of liquor liability insurance coverage of one million dollars (\$1,000,000.00) per occurrence which specifically in County as Additional insured by policy endorsement. This application will not be approved until the County has received a very contract of the county has received	Possession and Ordinance ge in the amount ncludes St Johns	
of Insurance for liquor liability in the amount of \$1,000,000 (one millioccurrence which specifically includes St Johns County, Boar Commissioners, 500 San Sebastian View, St. Augustine, FL 32084 as ado by policy endorsement.	ion dollars) per rd of County	
**************************************	*****	
APPLICATION IS: APPROVED DENIED APPROVED WITH	CONDITIONS	
County Administrator / Designee	 Date	

**Copies:** Affected Departments Law Enforcement

#### ATTENTION APPLICANT!!

Please read the following carefully and if you have any questions regarding ordinances or state laws pertaining to your event, please call the St. Augustine Beach Police Department at (904) 471-3600, St. Augustine Police Department at (904) 825-1070, or St. Johns County Sheriff's Department at (904) 824-8304 during business hours.

# ST. AUGUSTINE BEACH NOISE ORDINANCE SECTION 9.02.12.A(1) AMPLIFIED SOUND PRODUCED BY ELECTRONIC AUDIO EQUIPMENT, MUSICAL INSTRUMENTS AND SIMILAR DEVICES.

No person shall operate, play, or permit the operation or playing of any radio, stereo, tape player, television, electronic audio equipment, musical instrument, or other sound amplifier in such a manner as to: (a) be plainly audible at a distance of two hundred (200) feet or more from the real property boundary of the source of the sound.

#### ST. JOHNS COUNTY NOISE ORDINANCE SECTION 2005-114.28

No person shall make such loud, excessive, unnecessary noise so as to create a nuisance in any County park. Noise shall be considered a nuisance where it produces actual physical discomfort and annoyance to persons of ordinary sensibilities. No audio device, such as loudspeakers, television, radio, compact disc, tape, record player, or musical instrument, except equipment used by law enforcement, rescue or safety personnel, shall be used in a manner: that exceeds a noise level of 60 dBA measured on the A-weighted scale at 25 feet, or below that level, nevertheless; that exceeds noise which is unreasonable, considering the nature and purpose of the user's conduct, location in the park, time of day or night, impact on other park users and other factors that would govern the conduct of a reasonably prudent person under the circumstances.

#### CITY OF ST. AUGUSTINE NOISE ORDINANCE SECTION 11-89

Operating, playing or permitting any devices which produce or reproduces sound between the hours of 10:00 p.m. and 7:00 a.m. in such a manner as to create excessive and unnecessary noise across a residential real property line or within a noise-sensitive area is prohibited.

# FLORIDA STATUTE 562.11(1)(a) SELLING, GIVING, OR SERVING ALCOHOLIC BEVERAGES TO PERSONS UNDER AGE 21

It is unlawful for any person to sell, give, or permit to be served alcoholic beverages to persons under 21 years of age or to permit persons under 21 hears of age to consume said beverages. Anyone convicted of violation of this statute shall be guilty of a misdemeanor in the second degree punishable by 60 days in jail and/or a \$500 fine.

#### **For Fairgrounds Use Please Note:**

If applicable, when reserving the SJC Fairgrounds applicant must provide adequate tower lighting if directing attendees to park their vehicles in the back remote parking lot. Also include with your application the Fairgrounds site map showing where vendors are setting up their booths.

### St. Johns County Park Rules

Please observe the following park rules for your family enjoyment:

- ✓ Park hours are dawn to dusk unless otherwise posted.
- ✓ Operation of motorized vehicles limited to designated areas. Please park in designated areas only. Overnight parking prohibited.
- ✓ All dogs to be controlled by leash except in designated areas. Please clean up after your pet.
- ✓ No horseback riding allowed on park property unless in a designated area.
- ✓ Golfing, Archery, Rockets, Aircraft, and Paintball prohibited.
- ✓ No tampering with park property including but not limited to removing signs, graffiti, and removal of soil or shrubbery.
- ✓ No removal of archeologically sensitive material
- ✓ Please contain fires in grills or in places provided only.
- ✓ Picnic tables and shelters are available on a first come first serve basis, except when reserved through a permit.
- ✓ No possession or consumption of alcoholic beverages without permit.

Permits are issued at the discretion of the Director of the Recreation and Parks Department.

St Johns County Recreation & Parks Where Everybody Plays!

Failure to comply with Park Ordinance 2005-114 may be punishable by fine of \$500 per violation per day or imprisonment or both.

#### **Certificates of Insurance Fact Sheet**

#### **Every certificate must include the following:**

- 1) The Certificate must say "Certificate of Liability Insurance" across the top.
- 2) Your name or the person or vendor you're working with should be named on the certificate.
- 3) Under "Type of Insurance" you must indicate all applicable insurance.
- 4) Under "Limits" you should have at least \$1,000,000.
- 5) Depending on what type of business or rental the insurance is for you may also have other types of insurance marked by an "X".
- 6) You must have "Liquor Liability" somewhere on this certificate with a policy limit, if it is required for your event.
- 7) In the box for "Description of Operations" you must have a description of what type of activity you are hosting.
  - \*Example: Wedding on May 13, 2011, Rental of Pier Pavilion 350 A1A Beach Blvd., St. Augustine, FL 32080
- 8) The Certificate Holder for the policy must be: St. Johns County Board of County Commissioners 500 San Sebastian View St. Augustine, Fl 32084
- 9) In the box for "Description of Operations" you must have "St. Johns County is named as additional insured" or "Certificate holder is named as additional insured." There should be no special exceptions or conditions placed in this box.
  - 1. The certificate must state that either the Certificate holder is additionally insured or name St. Johns County as additionally insured prior to your event date. Applications will not be approved otherwise.

#### **For Private Sport Events**

This application will not be approved until the County has received a valid **Certificate of General Liability** Insurance which specifically includes St. Johns County Board of County Commissioners, 500 San Sebastian View, St. Augustine, FL 32084 as additional insured. Additionally, if your company is required by Florida Statute, proof of **Workers' Compensation Insurance** will need to be included with this application. If your business is using any vehicle for or during the event, proof of **Auto Insurance** will need to be included with this application.