



# CITY OF ORLANDO



## 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.

DISTRICT: 4 PERMIT APPLICATION NUMBER 14-41  
DATE APPLICATION RECEIVED 1/7/14 SG

### APPLICATION FOR PERMIT - OUTDOOR PUBLIC ASSEMBLY (18A)

\*\*\* Must be submitted at least 60 days before event. \*\*\*

NAME OF EVENT: Annual Orlando Turkish Festival

SPONSORING ORGANIZATION/PERSON: Coral Springs Foundation

HEAD OF ORGANIZATION: ORLANDO CULTURE DIALOGUE CENTER FEDERAL TAX ID # 383696225

ADDRESS: 576 N Semoran Blvd. Orlando, FL 32807

PHONE: Business (407) 601-7937 407 City 407 State 719-8038 Zip

APPLICANT: MESUD HASGUR / HUSEYIN PEKER E-MAIL: mesudhan2a@hotmail.com

ADDRESS: SAME

PHONE: Business (407) 601-7937 407 City 407 State 432-6535 FAX Zip

PERSON RESPONSIBLE FOR EVENT CHARGES: MAHMUT MUNCUSUNLULAR

LOCATION OF EVENT: LAKE EOLA - DOWNTOWN ORLANDO

DATE (S) OF EVENT: March 23, 2014 (Sunday)

SET UP START TIME: 8:00 (a.m.) (p.m.) BREAKDOWN END TIME: 10:00 (a.m.) (p.m.)

'EVENT' START TIME: 12:00 (a.m.) (p.m.) 'EVENT' END TIME: 7:00 (a.m.) (p.m.)

ESTIMATED NUMBER OF PARTICIPANTS (not including spectators): 4000 20 SG (NOT to exceed 2:00 a.m.)

ESTIMATED NUMBER OF SPECTATORS ATTENDING EVENT: 5000

\*\*\* If the answer to any of the following questions is **YES**, EXPLAIN FULLY in the space provided or on an attachment. \*\*\*

YES	NO	
	X	Do you intend to dispense, sell, or permit any alcoholic beverages? If yes, explain which ones.
X		Do you intend to serve or sell any food, goods, or services? If yes, explain which ones. <u>Meat, Deserts, Drinks, Clothes and Gift Items</u>
	X	Are fireworks or other pyrotechnics going to be used? If yes, explain:
X		Will it be necessary to have any street, lane, or sidewalk closures? If yes, specify which ones. (Fee is \$350.00) <u>Rosalind Ave, Pedestrian Sidewalk &amp; Meter Parking</u>
X		Is the event going to be held in any city park or recreational facility? If yes, which one. <u>Lake Eola</u>
X		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. <u>10'x10' &amp; 10'x20' &amp; 10'x40'</u>
X		Will there be any hot-air balloons or other inflatable device, helicopters, or parachutists? If yes, which ones. <u>Kids Moonwalks, Party's Balloon</u>
X		Will there be any amplified sound equipment? What type? Decibel level? How/where will power source be accessed? <u>Regular, on mid level, power source will be needed</u>
X		Will there be any signs or banners used at the site? If yes, include size, location, and method of attachment. <u>Stage (10'x20') - Entrance (2'x20') - Tents (2'x8') with Rope</u>
	X	Will any admission fee be charged? If so, how much?

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WHO WILL PROVIDE CLEAN-UP FOR STREET/SIDEWALK AFTER THE EVENT? CITYWHO WILL PROVIDE OTHER CLEAN-UP (TRASH, ETC) AFTER THE EVENT? CITY

GIVE A DESCRIPTION OF ALL EVENT ACTIVITIES (unless 'private event' info will be on City Calendar): Cultural Food, classic folk dances, live music, children's activities and includes moonwalks, face painting, balloon twisting, bungee, rock wall adventures, cotton candy, pop-corn and ice-cream.

**"PARADE"**

INFORMATION: MARSHALLING TIME: \_\_\_\_\_ DISPERSAL TIME: \_\_\_\_\_

NUMBER OF: PERSONS \_\_\_\_\_ ANIMALS \_\_\_\_\_ VEHICLES \_\_\_\_\_

WHOWHICH WILL CONSTITUTE THE PARADE: \_\_\_\_\_

TOTAL NUMBER OF UNITS: \_\_\_\_\_ (approximately)

PORTION OF ROADWAY(S)/SIDEWALK(S) THAT THE PARADE WILL OCCUPY (EXPLAIN FULLY, ROUTE, ETC):

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**\*\* A DIAGRAM OF THE PROPOSED ASSEMBLY SITE MUST BE SUBMITTED WITH THIS APPLICATION. \*\***

INCLUDE: ROUTE FOR RACE/PARADE/MARCH; LOCATION OF VENDOR SITES; LOCATION OF TENTS, STAGES, BLEACHERS, LOCATION OF FIREWORKS/PYROTECHNICS, PARADE STARTING POINT, TERMINATION POINT, MARSHALLING AREA, AND DISPERSAL AREA; ETC.

**NOTICE:** There is a **NON-REFUNDABLE** application fee payable when this application is filed. Payment must be made with a check or money order, payable to the City of Orlando. The application and fee must be submitted to the Orlando Police Department, Special Operations Division, P. O. Box 913, Orlando, FL 32802. If the event will necessitate or require the use of City facilities, personnel, or equipment, the Permittee must pay the costs. **All projected costs must be paid before the event and prior to issuance of the permit.** Upon completion of the event, the exact charges for City services will be totaled and the Permittee may be subject to additional charges or a partial refund. **Altered applications will NOT be accepted.**

Application Fee Received by: Sharon Grimes on 1/7/14 \$200  
(S.O.D. Representative) (Date)

**CERTIFICATION BY APPLICANT:** I CERTIFY THAT ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT. ANY FALSEHOODS OR MISREPRESENTATIONS WILL CONSTITUTE A CRIMINAL VIOLATION OF THE CODE OF THE CITY OF ORLANDO. I CERTIFY THAT I HAVE REVIEWED CITY CODE CHAPTER 18A (can be viewed at [www.Municode.com](http://www.Municode.com)) AND I AGREE TO COMPLY WITH ALL APPLICABLE PROVISIONS OF THE CITY CODE. I UNDERSTAND THE EVENT MAY BE CANCELLED BY THE CHIEF OF POLICE SHOULD ANY CONDITIONS/STIPULATIONS OF THE PERMIT OR CITY ORDINANCE OR STATE STATUTE BE VIOLATED. I CERTIFY THAT I AM AUTHORIZED BY THE ORGANIZATION NAMED HEREIN TO ACT AS ITS AGENT FOR THE HEREIN DESCRIBED ACTIVITY. I ALSO HAVE RECEIVED THE NOTICE INFORMING ME OF MY RESPONSIBILITIES AND OBLIGATIONS SHOULD I CANCEL THE EVENT.

BY FILING THIS APPLICATION, I, AND THE ORGANIZATION ON WHOSE BEHALF I MAKE THIS APPLICATION, CONTRACT AND AGREE THAT WE WILL JOINTLY AND SEVERALLY INDEMNIFY AND HOLD THE CITY HARMLESS AGAINST LIABILITY, INCLUDING COURT COSTS AND ATTORNEYS' FEES FOR TRIAL AND ON APPEAL, FOR ANY AND ALL CLAIMS FOR DAMAGE TO PROPERTY OR INJURY TO, OR DEATH OF PERSONS ARISING OUT OF OR RESULTING FROM THE ISSUANCE OF THE PERMIT OR THE CONDUCT OF THE ACTIVITY OR ANY OF ITS PARTICIPANTS.

SIGNED: \_\_\_\_\_

APPLICANT SIGNATURE

MESUD HASGUR

Printed/Typed Name of Applicant

Date: 01/07/2014FL DL # H260-548-88-322-0

Rev. 2/2/11/fav

EXP. 2/3/14

Sworn to me and subscribed before me this 8th day ofJanuary, 2014

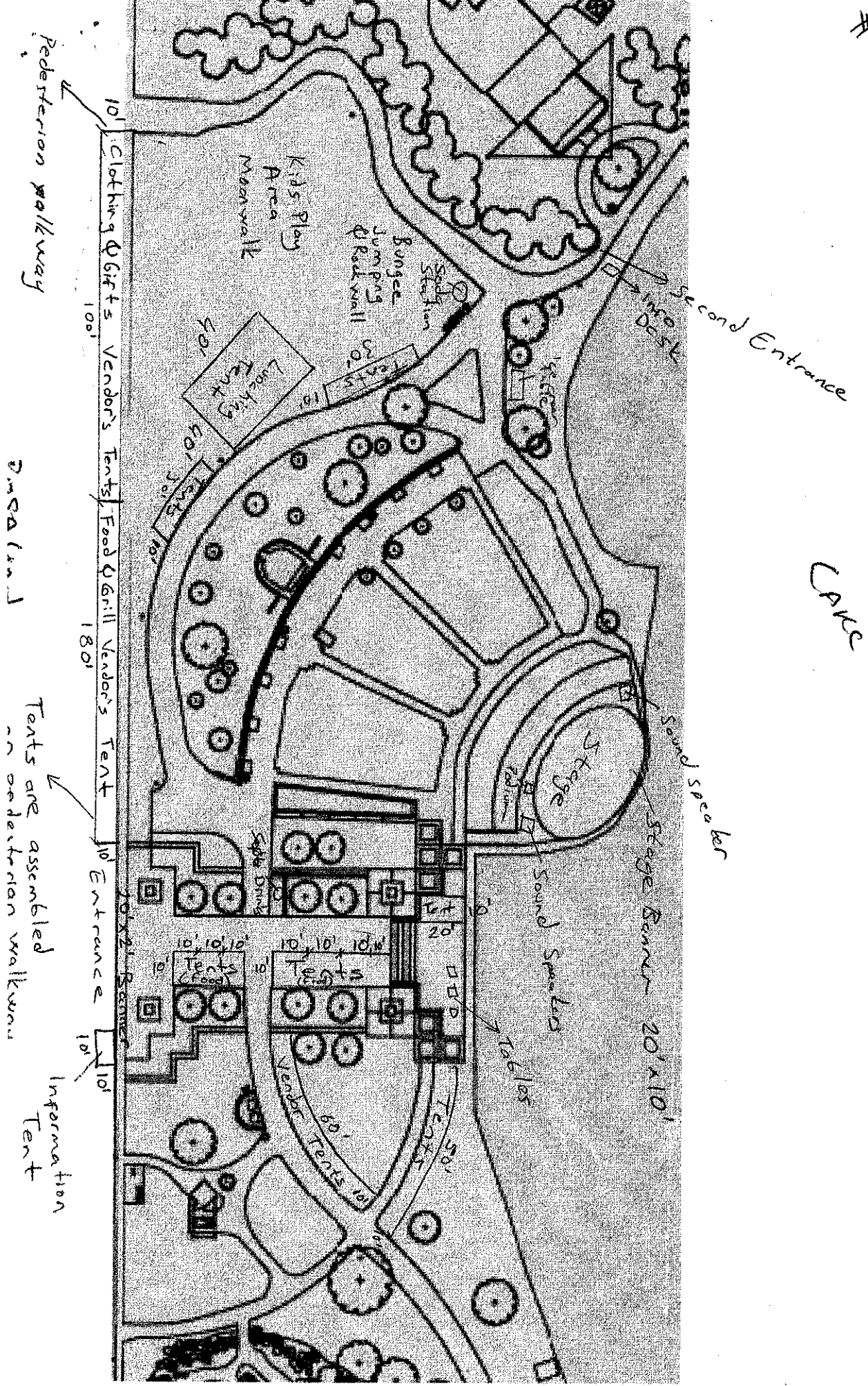
Sharon Grimes  
NOTARY PUBLIC SIGNATURE (or Law Enforcement Officer)

My commission expires \_\_\_\_\_



SHARON GRIMES  
MY COMMISSION # EE 114253  
EXPIRES: August 22, 2015  
Bonded Thru Budget Notary Services

#14-41



LAKE