



# 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 14-33  
DATE APPLICATION RECEIVED 11/3/14 SG

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

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

NAME OF EVENT: AIDS Walk Orlando 2014

SPONSORING ORGANIZATION/PERSON: Hope and Help Center of Central Florida, Inc.

HEAD OF ORGANIZATION: Marilyn Carifi, Executive Director FEDERAL TAX ID # 59-2872225

ADDRESS: 1935 Woodcrest Drive, Winter Park, FL 32792, Winter Park, FL 32792  
Street City State Zip

PHONE: Business (407) 645-2577 2nd # ( )

APPLICANT: Christopher Hessler E-MAIL: chessler@hopeandhelp.org

ADDRESS: 1935 Woodcrest Drive, Winter Park, FL 32792, Winter Park, FL 32792  
Street City State Zip

PHONE: Business (407) 645-2577 x111 2nd # ( ) FAX (407) 645-1570

PERSON RESPONSIBLE FOR EVENT CHARGES: Hope and Help Center of Central Florida, Inc.

LOCATION OF EVENT: Lake Eola, Orlando

DATE (S) OF EVENT: March 29th, 2014 (Saturday)

SET UP START TIME: 6:00 AM (a.m.) (p.m.) BREAKDOWN END TIME: 12 noon (a.m.) (p.m.)

'EVENT' START TIME: 9:00 AM (a.m.) (p.m.) 'EVENT' END TIME: 12 noon (a.m.) (p.m.)  
(NOT to exceed 2:00 a.m.)

ESTIMATED NUMBER OF PARTICIPANTS (not including spectators): 2,000

ESTIMATED NUMBER OF SPECTATORS ATTENDING EVENT: 200

\*\*\* 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.
	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)
X		Is the event going to be held in any city park or recreational facility? If yes, which one. Lake Eola
X		Will any tent(s), stages, or other structures be used? Which ones? *(If tent is larger than 15' x 15', call 407-246-2271 for a permit.) Small tents, stage will be Disney Amphitheatre
	X	Will there be any hot-air balloons or other inflatable device, helicopters, or parachutists? If yes, which ones.
X		Will there be any amplified sound equipment? What type? Decibel level? How/where will power source be accessed? DJ and announcements for Walk, Equipment will be borrowed by Disney, Disney to work with Lake Eola sound technician
X		Will there be any signs or banners used at the site? If yes, include size, location, and method of attachment. Signs will be attached to tents and walk route signs
	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? Volunteers and Hope and Help staff members

WHO WILL PROVIDE OTHER CLEAN-UP (TRASH, ETC) AFTER THE EVENT? Volunteers and Hope and Help staff members

GIVE A DESCRIPTION OF ALL EVENT ACTIVITIES (unless 'private event' info will be on City Calendar): Registration for AIDS Walk walkers, announcements, Walk event, HIV testing, award presentation

"PARADE"

INFORMATION: MARSHALLING TIME: N/A DISPERSAL TIME: N/A

NUMBER OF: PERSONS N/A ANIMALS N/A VEHICLES N/A

WHO/WHICH WILL CONSTITUTE THE PARADE: N/A

TOTAL NUMBER OF UNITS: N/A (approximately)

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

N/A

**\*\* 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: \_\_\_\_\_ on \_\_\_\_\_  
(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: Marilyn Canfield  
APPLICANT SIGNATURE

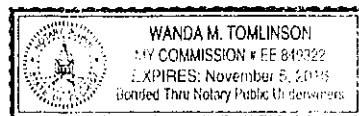
Marilyn Canfield  
Printed/Typed Name of Applicant

Date: 12-11-13

Sworn to me and subscribed before me this 12th day of  
December, 2013

Wanda M. Tomlinson  
NOTARY PUBLIC SIGNATURE (or Law Enforcement Officer)

My commission expires 11/05/2016

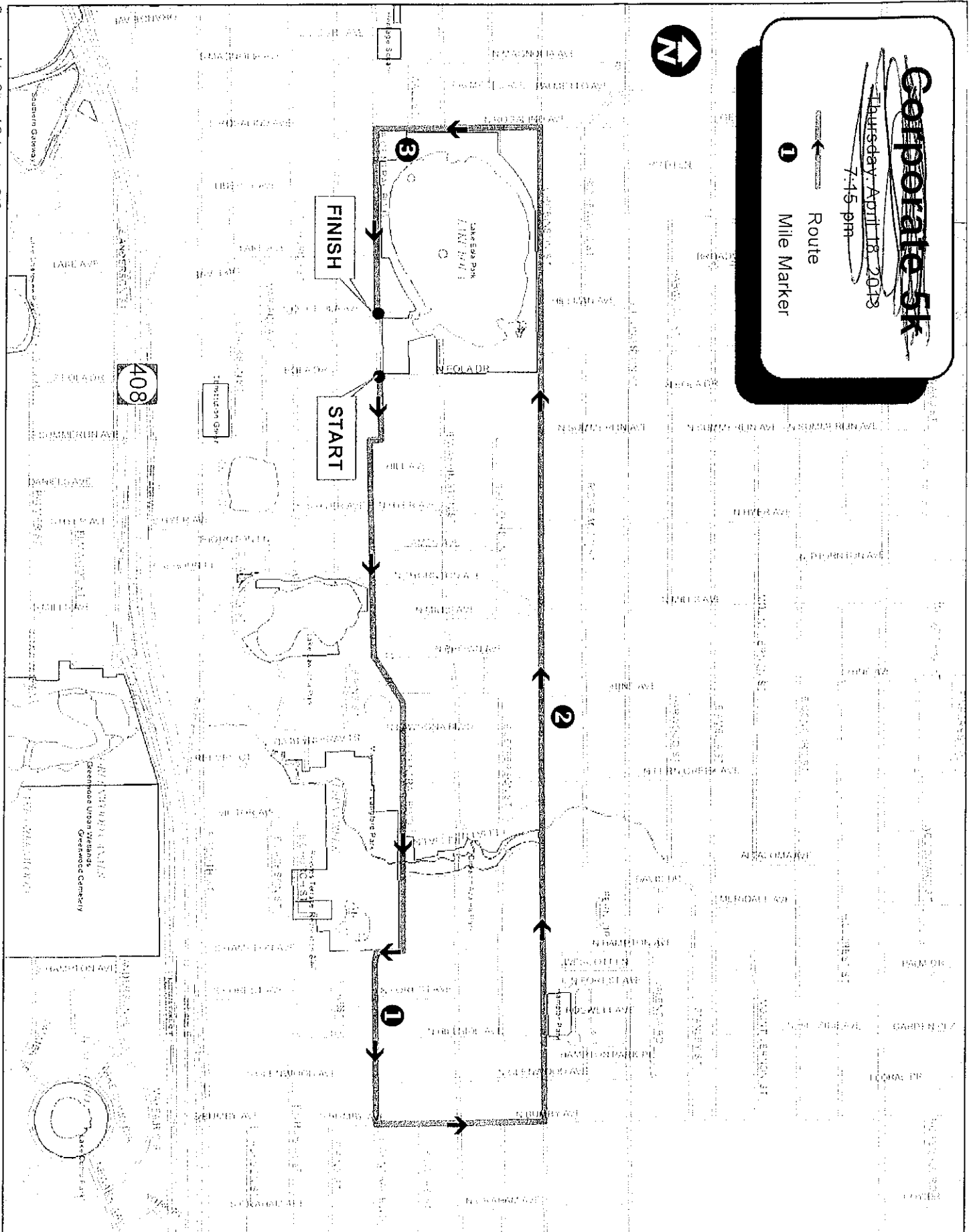


#14-33

**Corporate 5K**

Thursday, April 18, 2019  
7-15 pm

Route  
Mile Marker



Prepared by City of Orlando, GIS

106419 EAH 2019

Proposed route