



# 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: 3

PERMIT APPLICATION NUMBER 14-48  
DATE APPLICATION RECEIVED 11/14/14 SG

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

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

NAME OF EVENT: Family Outfest Picnic

SPONSORING ORGANIZATION/PERSON: Converge Orlando

HEAD OF ORGANIZATION: Mikael Audebert FEDERAL TAX ID # 27-3164330

ADDRESS: 189 S. Orange Ave Suite 1110S Orlando FL 32801  
Street City State Zip

PHONE: Business (321) 800.3947 2nd # ( )

APPLICANT: Gabrielle Shulruff E-MAIL: Gabrielle@convergeorlando.com

ADDRESS: 189 S. Orange Ave Suite 1110S Orlando FL 32801  
Street City State Zip

PHONE: Business (321) 800.3947 2nd # ( ) FAX

PERSON RESPONSIBLE FOR EVENT CHARGES: Mikael Audebert

LOCATION OF EVENT: Lake Ivanhoe Park

DATE (S) OF EVENT: 7/5/14

SET UP START TIME: 8:00 AM (a.m.) (p.m.) BREAKDOWN END TIME: 11:00 PM (a.m.) (p.m.)

'EVENT' START TIME: 12:00 PM (a.m.) (p.m.) 'EVENT' END TIME: 9:30 PM (a.m.) (p.m.)  
(NOT to exceed 2:00 a.m.)

ESTIMATED NUMBER OF PARTICIPANTS (not including spectators): 300

ESTIMATED NUMBER OF SPECTATORS ATTENDING EVENT: 700-900

\*\*\* 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. • Liquor, beer, and wine
X		Do you intend to serve or sell any food, goods, or services? If yes, explain which ones. • We plan on having food trucks vend the food
X		Are fireworks or other pyrotechnics going to be used? If yes, explain: • In the spirit of the 4 <sup>th</sup> of July we plan on doing Fireworks in the evening around 9 PM
	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 Ivanhoe Park
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>10x10. IF LARGER, HANDLED BY NELSON TENTS</u>
X		Will there be any hot-air balloons or other inflatable device, helicopters, or parachutists? If yes, which ones. • Inflatable devices - provided by sponsors • Bounce houses
X		Will there be any amplified sound equipment? What type? Decibel level? How/where will power source be accessed? • There will be a DJ • Band will perform
X		Will there be any signs or banners used at the site? If yes, include size, location, and method of attachment. • Attached via zip ties

X	Will any admission fee be charged? If so, how much? \$10
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WHO WILL PROVIDE CLEAN-UP FOR STREET/SIDEWALK AFTER THE EVENT? N/A

WHO WILL PROVIDE OTHER CLEAN-UP (TRASH, ETC) AFTER THE EVENT? WE WILL

GIVE A DESCRIPTION OF ALL EVENT ACTIVITIES (unless 'private event' info will be on City Calendar):

- DJ spinning music
- Band performing
- Characters in fur costumes
- Guests utilizing the volleyball field
- Working with an organization to have rental canoes, paddle boards, kayaks, etc. on the lake
- Fireworks in the evening
- Dancing

**"PARADE"**

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

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

WHOM/WHICH WILL CONSTITUTE THE PARADE: \_\_\_\_\_

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

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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**\*\* 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: Mikael Juosef  
 APPLICANT SIGNATURE

Sworn to me and subscribed before me this 14<sup>th</sup> day of January, 2014.

#14-48

Printed/Typed Name of Applicant \_\_\_\_\_  
Date: 1/14/14

*Sharon Grimes*  
NOTARY PUBLIC SIGNATURE (or Law Enforcement Officer)

Rev: 2/2/11/fav

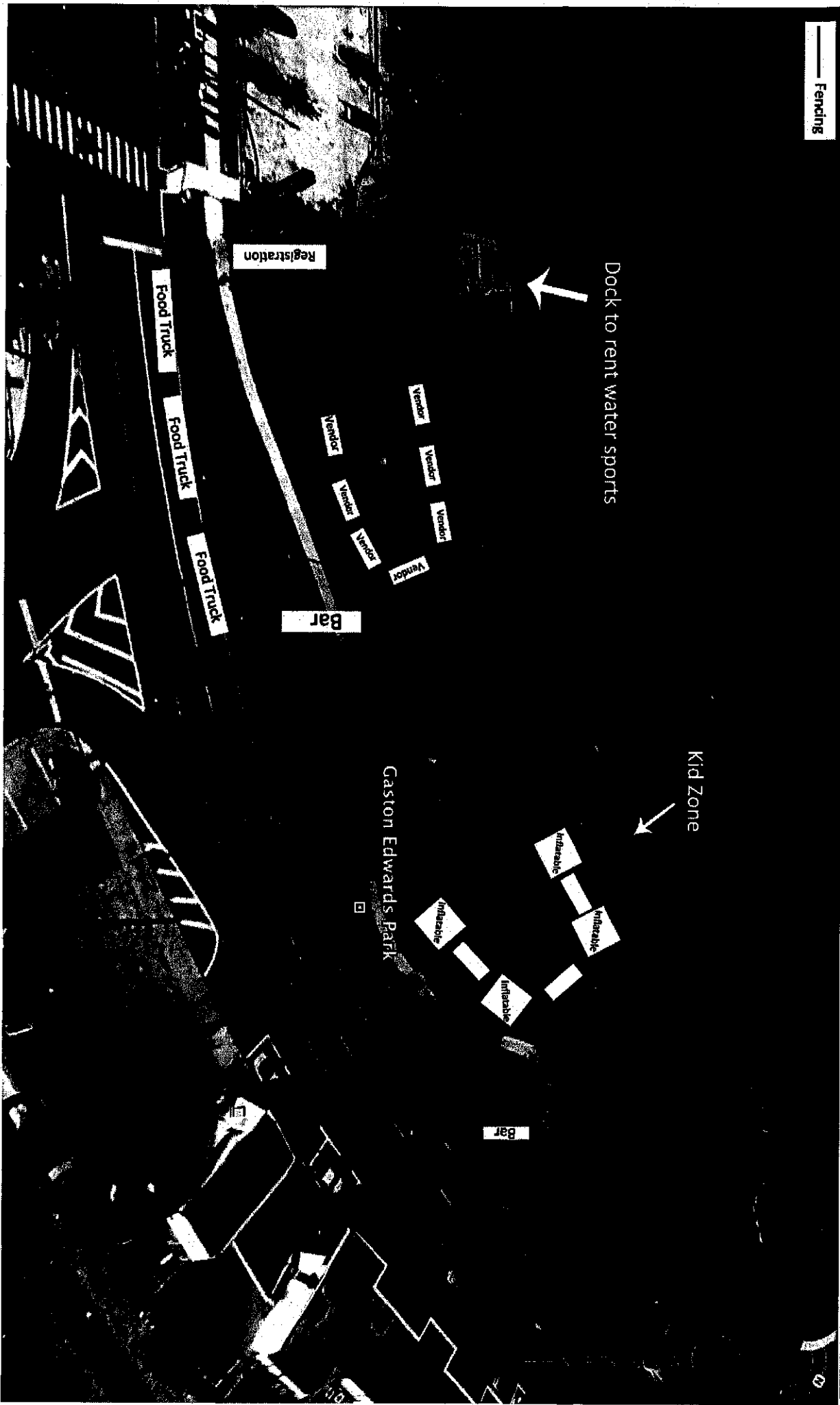
My commission expires \_\_\_\_\_



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

#14-48

— Fencing



Dock to rent water sports



Registration

Food Truck

Food Truck

Food Truck

Bar

Vendor

Vendor

Vendor

Vendor

Vendor

Vendor

Vendor

Kid Zone



Inflatable

Inflatable

Inflatable

Inflatable

Bar

Gaston Edwards Park



#14-48

