



Special Event and Festival Application

Hernando County Parks are the perfect backdrop to showcase your Special Event or Festival.

Definitions:

Special Event means any public assembly, parade, picnic, or other similar event in which one or more of the following applies:

- (1) One hundred (100) or more participants; (2) Use of amplified sound;
- (3) Any advertising or sponsorship activities; or (4) Selling/distributing any food, goods, or merchandise.

In addition, **Festivals** are considered all rentals that will have live bands, vendors, or alcohol regardless of attendance.

All applications must be received eight (8) weeks prior to the requested event dates. Submittal of an application does not guarantee approval and is subject to departmental review within fourteen (14) days. It may be deemed necessary to meet with the event organizer to complete application review. Permit may be denied if all required application components, fees, and deposits are not received.

The following items will be required for review and processing:

- Completed application.
- Application fee, due with application submittal. Once an application has been approved, all assessed event fees are due at that time. The application fee is applied towards assessed fees.
- Event site layout, due with application submittal. All areas of intended use must be labeled legibly including but not limited to parking, portable toilets, vendors..etc.
- Anticipated County staffing needs must be indicated on application for review. Staffing may be required at the discretion of the department.
- Tax Exempt and Non-Profit organization documents, if applicable, due with application submittal.
- Copy of flyer or brochure no less than 30 days prior to event.
- Certificate of Insurance meeting all required guidelines attached is due no less than 30 days prior to event.
- Approved alcohol license, if applicable, due no less than 10 days prior to event.
- Refundable damage deposit in the form of a blank money order is due the business day prior to the event set up. Keys or access codes needed will be issued upon receipt of the damage deposit. Parks and all facilities must be cleaned and returned to its pre-event condition free of damage and all keys returned in order for damage deposit to be returned. Upon receipt of the damage deposit, an on-call phone number will be issued to the event organizer to address any issues that may arise during the event.

Type of Event Permit Requested: Special Event Festival

Event Name _____

Event Location _____

Event Date(s) _____ Event Time(s) _____

Anticipated Setup Date and Times _____

Anticipated Cleanup Date and Times _____

Anticipated Number of Attendees _____

Principal Organization _____

Event Organizer Contact Name _____ Phone Number _____

Contact Email _____

Contact Address _____

Are you Tax Exempt? Yes ___ No ___ Non-Profit? Yes ___ No ___

(Supporting Documents for these must accompany the application.)

Is this a fund-raising event? Yes No Entry fee charged for this event? Yes No

Any other fees associated? (i.e. vendor fee, performer fee..etc.) Yes No

Partnering Organization _____

Partner Contact Name _____ Phone Number _____

Contact Email _____

Contact Address _____

Are you Tax Exempt? Yes ___ No ___ Non-Profit? Yes ___ No ___

(Supporting Documents for these must accompany the application.)

Is this a fund-raising event? Yes ___ No ___

Event Purpose and Description (Supplemental pages may be attached)

Entire Park Requested? Yes ___ No ___ If no, Please list specific fields or facilities: _____

Will there be sales or giveaways of alcohol? Yes ___ No ___ Vendor: _____
(Approved alcohol license must be provided no less than 10 days prior to event. You must ensure this has been included on your insurance certificate.)

Will there be vendors? Yes ___ No ___ A complete listing of all vendor names and type along with the certificate of insurance must be submitted no less than 30 days prior to the event for review. Food, beverage, consumables and activity vendors are required to provide a certificate of insurance meeting the criteria shown in this application.

Will there be Food/Beverages for sale or giveaway? Yes ___ No ___

Live Bands? Yes ___ No ___ If yes please list acts _____

Will there be inflatables? Yes ___ No ___ Provider: _____

(The county has one vendor that may be utilized.)

Fireworks display? Yes ___ No ___

(Fireworks display permit must be provided no less than 10 days prior to event.)

Will you have your own staff or volunteers to maintain trash during the event and cleanup afterwards to return the park to its pre-event condition? Yes No Organizations: _____

Scheduling of County staff can be arranged:

Parks and Rec Technician Staff (Electrician) Dates requested: _____

(\$50.00 per hour, 2 hour minimum)

Time requested: _____

Parks and Rec Staff for park facility and assist with trash handling. Qty of persons requested: _____

(\$40.00 per hour, 2 hour minimum)

Dates requested: _____

Hours requested: _____

*Staff will be required for large events and festivals at the Department's discretion. *

Please initial the following statements of understanding:

Sufficient portable toilets must be arranged by the event organizer to accommodate the public during the period of the event. _____

Traffic control, Fire Rescue and EMS must be arranged by event organizer. _____

Festivals of any kind shall require Hernando County Sheriff Office (HCSO) off-duty details pursuant to their attendance requirement matrix of event size. _____

Dumpster needs over the capacity currently located at the Park Facility must be arranged by the event organizer. _____

Motor vehicles must drive and park only on appropriate improved surfaces. _____

There are no refunds unless event is cancelled by Parks and Recreation. This does not include cancellations due to noncompliance with application or ordinance requirements. _____

Smoking and vaping is prohibited at all county parks and indoor facilities. _____

Tables, chairs and all other county property shall not be removed from facilities. _____

To assure return of damage deposit, all facilities must be cleaned prior to vacating the premises and be free of damage. _____

Trash left on the grounds outside buildings, near courts, fields, or other facilities, must be picked up and placed in the nearest dumpster periodically. You must provide your own trash can liners when using the facilities unless arrangements with Park's staff have otherwise been made. DO NOT leave overflow trash sitting next to trash receptacles. _____

Any keys issued will be subject to the Parks and Recreation fee schedule for keys and locks. _____

I/we do understand all rules and regulations concerning the use of county facilities and parks and will comply with all rules and regulations. I/we will be responsible for any damages done to the facilities or park equipment. The county will not be responsible for items which are lost, stolen, or damaged before, during, or after rental. _____

I/we fully understand that this application does not confirm any request until it has been signed, dated, reviewed, and approved by an authorized Recreation employee, at which time a permit will be given to me or my representative, or mailed to the address designated above. If applicable, I understand that I will be informed prior to my event of any requirement for fees to be charged and collected for park staff. I further affirm that I have completed this application with as much accuracy and detail as possible. Security/Key Deposits are paid at the time keys are issued. Applicant agrees to hold Hernando County, its agents and employees harmless for any and all acts and/or omissions and accepts sole responsibility for usage of the facilities. I acknowledge that I have received a copy and have read, understand, and agree to all items and terms as outlined in the Special Event and Festival Application, including how to proceed in the event of any problems or emergencies that need immediate attention during my event.

Signature of Event Organizer _____ Date _____

Print name of Event Organizer _____

Fee Calculation Worksheet

Please refer to Attached Parks and Recreation Fee Schedule for Current Rates

Special Event or Festival fee _____

If organization is Non-Profit subtract 50% = _____

Subtract Application Fee \$100.00 = _____

Add, Scheduled Staff Parks and Rec Tech Staff \$50.00x _____ hrs= _____ = _____

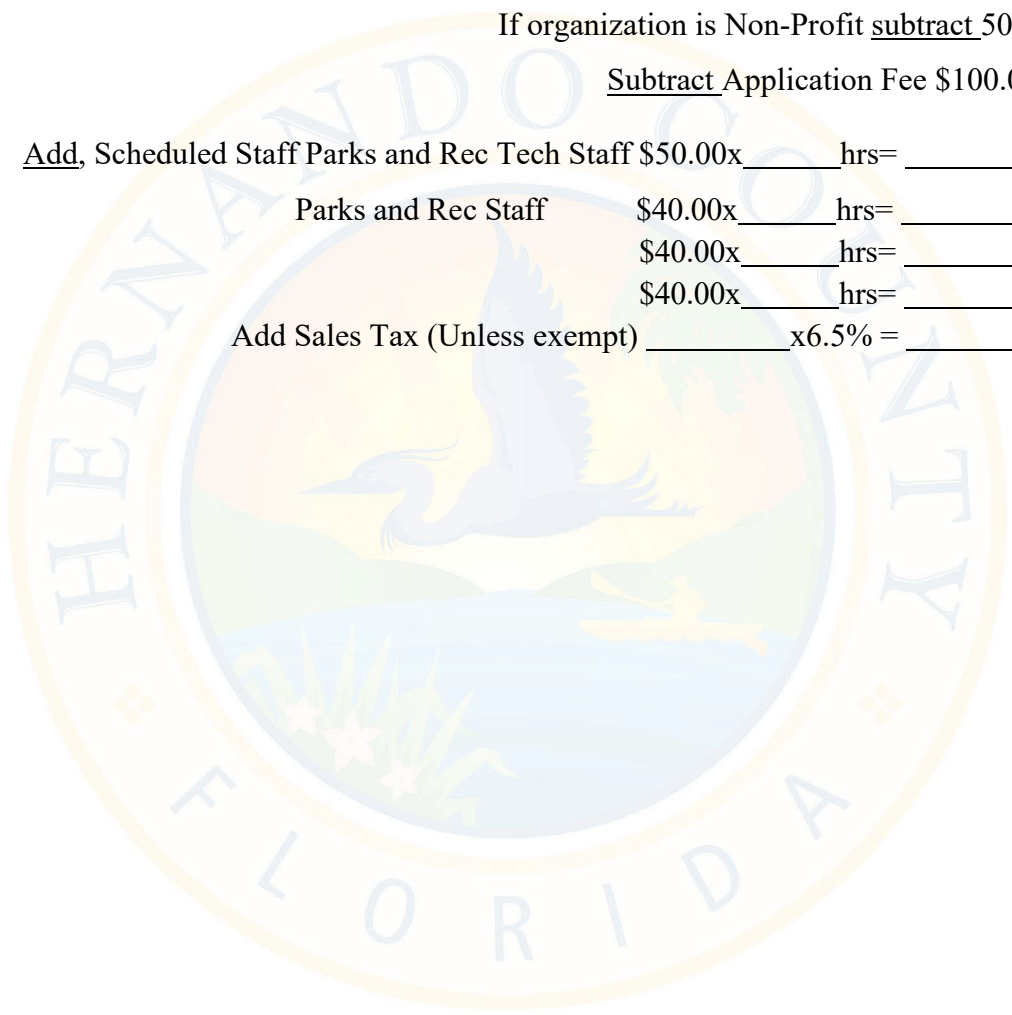
Parks and Rec Staff \$40.00x _____ hrs= _____ = _____

\$40.00x _____ hrs= _____ = _____

\$40.00x _____ hrs= _____ = _____

Add Sales Tax (Unless exempt) _____ x6.5% = _____ = _____

Total Fees Due



Hernando County Fee Schedule

Exhibit B - Special Events

Profit/Non-Profit Special Events	Fee
Special Event Application Fee	\$100
Special Event - 250 participants & under	\$600
Special Event - 251-750 participants	\$800
Special Event - More than 751 participants	\$2,000
Single Day Festival	\$2,500
Multi Day Festival	Fees to be Negotiated
Parks & Rec staff - 2hrs. min.	\$40 per hour
Parks & Rec Tech Staff - 2hrs. min.	\$50 per hour
Deposits	Fee
Damage Deposit Special Events (refundable)	\$1,000
Damage Deposit Festival (refundable)	\$1,500

Notes:

1. Fees are non refundable.
2. Non-Profits receive a 50% discount of fees. Deposits and staff time are exempt from the 50% discount.
3. Organizations wishing to host special events must complete the special event packet 6 weeks prior to event start date and pay application fee upfront. Once application is approved all fees are due at that time. Application fee goes towards assessed fees.
4. Any and all rentals that are advertised to the public via social media, print, or any other form of advertising are subject to **special event fees** listed above.
5. Any rental with live bands, vendors, or alcohol will be considered under the **festival fee** regardless of attendance.
6. Parks & Recreation staff is required for all events . The amount of staff time or number of staff required will be determined when details of the event are presented.
7. Money Order or a Cashier Check is required for damage deposits.

Certificate of Insurance Requirements

- * The date of issuance in the upper right-hand corner must be within 30 days.
- * The contracted / hired organization or individual in the application must be listed in the INSURED area of the COI.
- * General Liability Insurance is marked, has a policy number and the effective and expiration dates are current and effective for event dates.
- * General Liability Insurance limits must be minimum of \$1,000,000 Each Occurrence, \$2,000,000 General Aggregate, \$1,000,000 Personal & Advertising Injury, \$2,000,000 Products - Comp/Op Agg and finally \$5,000 Medical Expenses. \$1,000,000 Alcohol/Liquor Liability Coverage for the vendors serving, if applicable.
- *** High Risk events including Firework Displays, Concerts, Sporting Events, Marathons, bicycle/running races require a minimum of \$2,000,000 General Liability.
- * General Liability is marked with ADDL INSR and SUBRV WVD. These columns should be marked with x or y with Hernando County BOCC listed.
- * The following must appear under Description of Operations:
Hernando County BOCC or Certificate Holder is named as additional insured as to General Liability.
Waiver of Subrogation is in favor of additional insured, certificate holder or Hernando County BOCC.
- * The Certificate Holder specifically reads:
Hernando County BOCC
15470 Flight Path Dr
Brooksville, FL 34604.

The following applications are for reference only. Please contact the issuing agency for most current document and process.



FORM DBPR ABT – 6003
APPLICATION FOR TEMPORARY PERMIT OR SPECIAL SALES LICENSE
DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO

FORM DBPR ABT – 6003 IS REQUIRED TO:

- Apply for a temporary permit, not exceeding three days, to sell alcoholic beverages for consumption on premises only; or
- Apply for a special sales license, not exceeding three days, for the package sale only of alcoholic beverages.

FORM DBPR ABT – 6003 CHECKLIST

TRANSACTION	APPLICATION REQUIREMENTS
<p align="center">TEMPORARY PERMIT</p>	<ul style="list-style-type: none"> <input type="checkbox"/> APPLICATION FORM DBPR ABT – 6003 <ul style="list-style-type: none"> <input type="checkbox"/> Complete Sections 1-6. <input type="checkbox"/> Obtain Notarization for Applicant Affidavit in Section 6. <input type="checkbox"/> Determine if Section 8 applies to the location of the event and obtain attestation of permanent licensee if applicable. <input type="checkbox"/> APPROVALS BY OTHER STATE OR LOCAL AGENCIES <ul style="list-style-type: none"> <input type="checkbox"/> Section 3 - Sales Tax Certification Obtain approval from the local area office of the Florida Department of Revenue. <input type="checkbox"/> Section 4 – Zoning Approval Obtain approval from the city or county zoning authority governing the location of the event. <input type="checkbox"/> APPLICATION FEE <ul style="list-style-type: none"> <input type="checkbox"/> \$25.00 Payable To: Div. of Alcoholic Beverages and Tobacco <input type="checkbox"/> FILE APPLICATION FORM DBPR ABT - 6003 <ul style="list-style-type: none"> <input type="checkbox"/> Submit the original, completed application with the required approvals and the application fee at least seven (7) days prior to the first date of the planned event.
<p align="center">SPECIAL SALES LICENSE</p>	<ul style="list-style-type: none"> <input type="checkbox"/> APPLICATION FORM DBPR ABT – 6003 <ul style="list-style-type: none"> <input type="checkbox"/> Complete Sections 1-3 and 7. <input type="checkbox"/> Obtain Notarization for Applicant Affidavit in Section 7. <input type="checkbox"/> <input type="checkbox"/> APPROVALS BY OTHER STATE OR LOCAL AGENCIES <ul style="list-style-type: none"> <input type="checkbox"/> Section 3 - Sales Tax Certification Obtain approval from the local area office of the Florida Department of Revenue. <input type="checkbox"/> APPLICATION FEE <ul style="list-style-type: none"> <input type="checkbox"/> \$25.00 Payable To: Div. of Alcoholic Beverages and Tobacco <input type="checkbox"/> FILE APPLICATION FORM DBPR ABT - 6003 Submit the original, completed application with the required approvals and the application fee at least seven (7) days prior to the first date of the planned event.

GENERAL INSTRUCTIONS**TO PREPARE FORM DBPR ABT – 6003:**

All fields must be completed. If a question on the form is not applicable, insert "N/A." The form must be signed by the applicant prior to filing the application with the Division.

TO SUBMIT FORM DBPR ABT – 6003:

The completed, original application must be submitted, by mail or hand delivery, to a Division District Office serving the location of the licensed premise address at least seven days prior to the first day of the planned event to ensure the permit is issued by the requested event date. District Office contact information is available at:

<http://www.myfloridalicense.com/DBPR/alcoholic-beverages-and-tobacco/>.

LAWS AND REGULATIONS RELATED TO THE TEMPORARY PERMIT**Florida Law for Temporary Permits**

Pursuant to section 561.422, Florida Statutes, upon the filing of an application and payment of a fee of \$25 per permit, the division may issue a permit authorizing a bona-fide nonprofit civic organization, charitable organization, municipality, or county to sell alcoholic beverages for consumption only on premises for a period not to exceed 3 days, subject to any state law or municipal or county ordinance regulating the time for selling such beverages. Any such civic organization, charitable organization, municipality or county may be issued up to twelve temporary permits per calendar year, except in those counties or cities with special acts governing the number of permits allowed annually. Information regarding the cities and counties with applicable special acts can be found at:

<http://www.myfloridalicense.com/DBPR/alcoholic-beverages-and-tobacco/>.

Purchases of Alcoholic Beverages and Related Records

The permitted bona-fide nonprofit civic organization, charitable organization, municipality, or county may purchase alcoholic beverages from a distributor or vendor licensed under the beverage law. All records of alcoholic beverage purchases and sales must be retained for examination upon request of the Division of Alcoholic Beverages and Tobacco.

Sales of Alcoholic Beverages and Related Revenue

All alcoholic beverage sales transacted under the authority of the permit must be made by responsible members of the permitted organization, only during the permitted time frame, and only at the permitted location. All net profits from sales of alcoholic beverages collected during the permit period must be retained by the permitted nonprofit civic organization or charitable organization. When a temporary permit is issued to a municipality or county, all net profits derived from sales of alcoholic beverages during the permit period must be donated to a nonprofit civic or charitable organization within 90 days after the event.

Changes to the Permitted Event Date(s) or Event Venue

If, before the first day of the event date, the permitted event is rescheduled for reasons outside the control of event organizers, the applicant organization must notify the Division within 14 days of the cancellation to be eligible for reissuance of the temporary permit on the rescheduled date(s) at no additional application fee.

If the permitted venue becomes unavailable and a new venue is chosen, the city or county zoning authority serving the new event venue must complete a new Section 4 of this application confirming zoning approval.

ADDITIONAL INSTRUCTIONS FOR TEMPORARY PERMIT APPLICATION SECTIONS	
SECTION	ADDITIONAL INSTRUCTIONS
Section 1: Applicant Information	<p>Registration of Legal Entity or Proof of Nonprofit Status All corporations, domestic or foreign, and limited liability companies seeking a permit are required to be registered with the Florida Secretary of State, Division of Corporations, as an active nonprofit. Organizations which are not incorporated must submit one of the following: a letter outlining the purpose and the goals of the event and who will benefit from the event's profits; the organization's national, state, or local charter; the organization's by-laws, 501(c)3 registration, or minutes of meeting. The application will be considered incomplete without this active registration and proof of nonprofit status. For further information, contact the Department of State at (850) 488-9000 or www.sunbiz.org.</p>
Section 3: Sales Tax Certification	<p>Sales Tax Certification Section 3 must be completed by the Florida Department of Revenue confirming that the applicant has complied with the Florida Statutes concerning registration for Sales and Use Tax and has agreed to pay any applicable taxes due. Applications must be submitted within 90 days of DOR approval. The address and other contact information for Department of Revenue area offices can be found at: http://dor.myflorida.com/dor/taxes/servicecenters.html.</p>
Section 4: Local Zoning Approval	<p>Local Zoning Approval Section 4 applies only to applications for a temporary permit, not exceeding three days, to sell alcoholic beverages for consumption on premises only. The city or county zoning authority serving the area where the event or special sale will be held must complete this section confirming zoning approval. Applications must be submitted within 180 days of receiving zoning approval. The address and other contact information for area zoning offices can be found at: http://www.myfloridalicense.com/DBPR/alcoholic-beverages-and-tobacco/.</p>
Section 5: Description Of Premises of Temporary Event	<p>Description Of Premises of Temporary Event (Premises Sketch) Section 5 requires a complete sketch of the premises, drawn in ink or computer generated (letter size), detailing all permanent walls, doors, windows, counters, and labeling each room and area. Any outside areas where alcoholic beverages will be sold, consumed, or served must also be included in the sketch. Due to the difficulty of scanning, no blueprints will be accepted.</p> <p>When the event will be held at a location currently licensed for the sale of alcoholic beverages, a sketch of the entire premises must be submitted. If the event will not make use of the entire licensed premises, the sketch must identify the separate room or enclosure area of the licensed premises where the event will be held. In such circumstances, the attestation in Section 8 of this application must be signed by the current, permanent licensee and must be submitted by the nonprofit civic organization, charitable organization, municipality or county as part of its completed application.</p>
Section 6: Affidavit of Applicant for Temporary Permit	<p>Affidavit of Applicant for Temporary Permit Section 6, the affidavit of applicant for temporary permit, must be read and signed by an officer of the applicant organization in the presence of a notary, with the notary's seal affixed.</p>
Section 8: Attestation By Permanent License Holder	<p>Attestation By Permanent Licensee For Use Of Licensed Premises As A Permitted Temporary Event When the event will be held at a location currently licensed for the sale of alcoholic beverages, the attestation in Section 8 of this application must be signed by the current, permanent licensee and must be submitted by the nonprofit civic organization, charitable organization, municipality or county as part of the completed application.</p>

LAWS AND REGULATIONS RELATED TO THE SPECIAL SALES LICENSE

<p>Florida Law for Special Sales Licenses</p> <p>Pursuant to section 561.20(12)(a), Florida Statutes, upon the filing of an application and payment of a fee of \$25 per license, the division may issue a license authorizing the sale of alcoholic beverages in sealed containers only, for a period not to exceed 3 days. This license is issued only for the purpose of authorizing: a sale pursuant to levy and execution; a sale by an insurance company in possession of alcoholic beverages; a bankruptcy sale; a sale resulting from a license suspension or revocation; a sale of damaged goods by a common carrier; a sale by a bona fide wine collector; or a sale pursuant to Part V of Chapter 679, Florida Statutes.</p>
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ADDITIONAL INSTRUCTIONS FOR SPECIAL SALES LICENSE APPLICATION SECTIONS	
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SECTION	ADDITIONAL INSTRUCTIONS
Section 1: Applicant Information	<p>Registration of Legal Entity</p> <p>All corporations, domestic or foreign, general partnerships, limited liability companies, limited liability partnerships, and limited partnerships seeking a license are required to be registered with the Florida Department of State, Division of Corporations. The application will be considered incomplete without this active registration. For further information, contact the Department of State at (850) 488-9000 or www.sunbiz.org.</p>
Section 3: Sales Tax Certification	<p>Sales Tax Certification</p> <p>Section 3 must be completed by the Florida Department of Revenue confirming that the applicant has complied with the Florida Statutes concerning registration for Sales and Use Tax and has agreed to pay any applicable taxes due. Applications must be submitted within 90 days of DOR approval. The address and other contact information for Department of Revenue area offices can be found at: http://dor.myflorida.com/dor/taxes/servicecenters.html.</p>
Section 7: Affidavit of Applicant for Special Sales License	<p>Affidavit of Applicant for Special Sales License</p> <p>Section 7, affidavit of applicant for special sales license, must be read and signed by the individual applicant, every partner of a general partnership, every general partner of a limited partnership, a managing member, manager, or officer of a limited liability company, a managing member, manager, or officer of a limited liability partnership, or an officer of a corporate applicant, in the presence of a notary, with the notary's seal affixed.</p>

TYPE OF APPLICATION	
<input type="checkbox"/> Temporary Permit	<input type="checkbox"/> Special Sales License

SECTION 1A: APPLICANT INFORMATION			
Full Name of Applicant(s) The permit will be issued in the name of the applicant as provided on the application.			
Applicant Mailing Address			
City	County	State FL	Zip Code
Applicant Telephone Number		Applicant E-mail Address	
Corporation or Other Legal Entity If the applicant is a corporation or other legal entity, enter the name and the document number related to the legal entity as registered with the Florida Department of State Division of Corporations.			
FEIN Number		Florida Department of State Document Number	

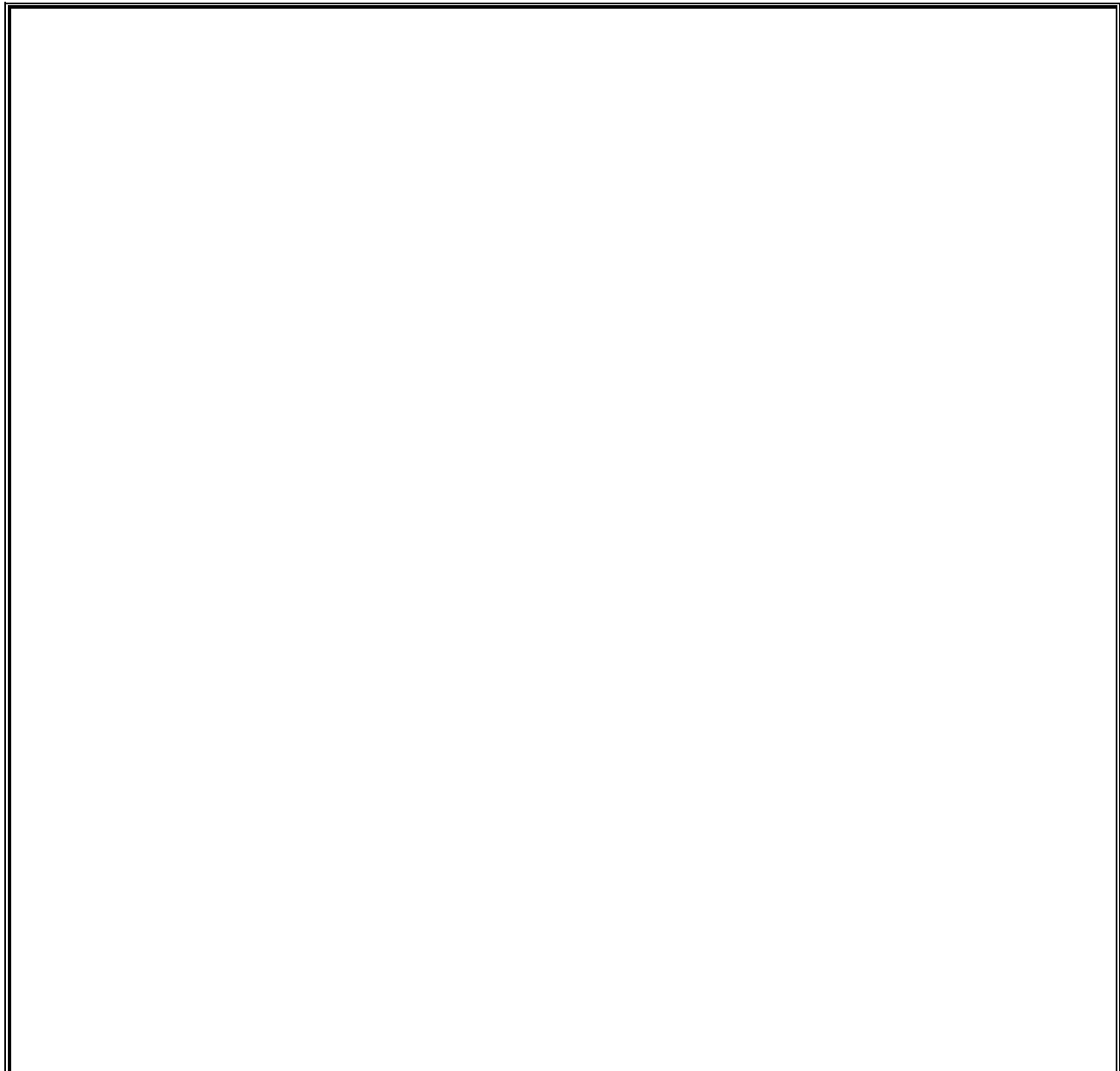
SECTION 1B (OPTIONAL): DESIGNATED CONTACT			
A contact person must be designated below if the applicant prefers to designate a person other than the applicant to receive and reply to Division communications regarding this application. The designated contact person will be permitted to make changes to the application paperwork on behalf of the applicant, and the Division will communicate directly with the contact person regarding the application. The applicant will not be copied on communications from the Division to the designated contact. It is the responsibility of the applicant to inform the Division if there is a change of designated contact and/or to the contact information of the designated contact.			
Full Name of Designated Contact			
Designated Contact Mailing Address			
City	County	State FL	Zip Code
Designated Contact E-mail Address		Designated Contact Telephone Number Ext.	

SECTION 2: DATES AND LOCATION FOR PERMIT OR LICENSE			
Dates of Active Use for Temporary Permit or Special Sales License			
Provide the date(s) of the event or sale when the permit or license will be effective. The dates provided may not exceed three days.			
Day 1	Day 2	Day 3	
Address for Physical Location of Temporary Event or Special Sales Event			
City	County	State	Zip Code
		FL	
Is the event location currently licensed for sales of alcoholic beverages under a permanent license issued by the Division? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, obtain attestation of permanent license holder in Section 8.			

SECTION 3: SALES TAX CERTIFICATION TO BE COMPLETED BY THE FLORIDA DEPARTMENT OF REVENUE
Full Name of Applicant(s)
Florida Department of Revenue Verification of Registration The named applicant(s) for a temporary permit or special sales license has complied with Florida Statutes concerning registration for Sales and Use Tax and has paid or agreed to pay any applicable taxes due.
Authorized Agency Signature _____
Printed Name _____
Title _____
Date _____

SECTION 4: LOCAL ZONING APPROVAL			
TO BE COMPLETED BY THE ZONING AUTHORITY GOVERNING THE TEMPORARY EVENT LOCATION			
Location of Temporary Event Street Address _____			
City _____	County _____	State FL	Zip Code _____
Local Zoning Approval The location of the temporary event complies with local ordinances for the temporary sale of alcoholic beverages based on the information supplied by the applicant in this application.			
Authorized Agency Signature _____			
Printed Name _____			
Title _____			
Date _____			

SECTION 5: DESCRIPTION OF PREMISES OF TEMPORARY EVENT	
Full Name of Applicant(s)	
Name or Title of Temporary Event	
Neatly draw a floor plan of the premises in ink, including: sidewalks and other outside areas which are contiguous to the premises, walls, doors, counters, points of sale of alcoholic beverages, storage areas, restrooms, bar locations, and any other specific areas which are part of the premises where the event will be held. A multi-story building where the entire building is to be licensed must show the details of each floor.	



**SECTION 6: AFFIDAVIT OF APPLICANT FOR TEMPORARY PERMIT
NOTARIZATION REQUIRED**

Full Name of Applicant(s)

"The applicant requesting the permit in the above and foregoing application is a nonprofit civic organization, charitable organization, municipality or county, and the permit, if used, will be used only by the applicant organization on the date(s) requested and at the location stated. By acceptance of this permit, the applicant agrees that, as a nonprofit or civic organization, all net profits from sales of alcoholic beverages during the permitted period will be retained by it, or, as a municipality or county, all net profits from sales of alcoholic beverages during the permit period will be donated to a nonprofit civic or charitable organization within 90 days after the permitted event. As a municipality or county, the applicant attempted to solicit a qualified nonprofit civic or charitable organization to conduct such sales for the permitted event but has been unable to find such a qualifying nonprofit civic or charitable organization in a reasonable and practicable manner and timeframe. The applicant organization has not received more than twelve (12) permits within the calendar year, unless otherwise authorized by law, and the applicant agrees that the location may be inspected and searched during the time that the permit is issued and business is being conducted without a search warrant by authorized agents or employees of the Division of Alcoholic Beverages and Tobacco, the Sheriff, Deputies, and Police Officers for purposes of determining compliance with the Florida Beverage Law.

I, the undersigned individual, or if a corporation, for itself, its officers and directors, hereby swear or affirm that I am duly authorized to make the above and foregoing application and, as such, I swear under oath or affirmation under penalty of perjury as provided for in sections 559.791, 562.45, and 837.06, Florida Statutes, that the foregoing information is true and correct."

Signature of Applicant/Affiant

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20 _____,
by _____ (print affiant name).

Personally Known

Produced Identification

Type of Identification Produced _____

Signature of Notary Public – State of Florida

Name of Notary Public – Typed, Printed, or Stamped

(NOTARY SEAL)

Commission Expires: _____

FOR DIVISION USE ONLY

DATE ACCEPTED BY DISTRICT OFFICE:

**SECTION 7: AFFIDAVIT OF APPLICANT FOR SPECIAL SALES LICENSE
NOTARIZATION REQUIRED**

Full Name of Applicant(s)

"As the applicant requesting the special sales license in the above and foregoing application, I understand that this license allows package sales in sealed containers for a period of up to three days, and does not permit the sale of alcoholic beverages for consumption on the premises. I agree that the location may be inspected and searched during the hours that the special sale is being conducted without a search warrant by authorized agents or employees of the Division of Alcoholic Beverages and Tobacco, the Sheriff, Deputies, and Police Officers for purposes of determining compliance with the Florida Beverage Law.

I, the undersigned individual, or if a corporation, for itself, its officers and directors, hereby swear or affirm that I am duly authorized to make the above and foregoing application and, as such, I swear under oath or affirmation under penalty of perjury as provided for in sections 559.791, 562.45, and 837.06, Florida Statutes, that the foregoing information is true and correct."

Signature of Applicant/Affiant

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20 _____,

by _____ (print affiant name).

Personally Known

Produced Identification

Type of Identification Produced _____

Signature of Notary Public – State of Florida

Name of Notary Public – Typed, Printed, or Stamped

(NOTARY SEAL)

Commission Expires: _____

FOR DIVISION USE ONLY

DATE ACCEPTED BY DISTRICT OFFICE:

SECTION 8: ATTESTATION BY PERMANENT LICENSE HOLDER FOR USE OF LICENSED PREMISES AS A PERMITTED TEMPORARY EVENT		
<p>An attestation is to be obtained from the current, permanent alcoholic beverage license holder when the temporary event of the applicant nonprofit civic organization, charitable organization, municipality, or county is hosted at a location that is permanently licensed by the Division of Alcoholic Beverages & Tobacco for the sale of alcoholic beverages.</p> <p>NOTE: The attestation must have the original signature of the alcoholic beverage license holder (only persons on file with the Division may sign) and must be submitted by the nonprofit civic organization, charitable organization, municipality, or county as part of the application for the Temporary Permit.</p>		
Full Name of Permanent License Holder at Temporary Event Location		
Business Name (D/B/A)		
License Number	Series of Permanent License	
	Series	Type:
Contact Person for Permanent License Holder	Contact Person Telephone Number	
	Ext.	
Contact Person E-mail Address		
Name of Applicant for Temporary Permit		
Date(s) of Temporary Event		
Day 1	Day 2	Day 3
<p>A temporary permit is being requested for an event to be held on your licensed premises. During the permitted dates and times of the event, no sales or service of alcoholic beverages may be made under your permanent alcoholic beverage license in the area identified for use by the temporary permit applicant in Section 5 of this application. Failure to comply may result in administrative charges being filed against your license.</p>		
_____ Signature of Permanent License Holder at Temporary Event Location		Date _____
_____ Printed Name of Permanent License Holder at Temporary Event Location		

HERNANDO COUNTY
FIREWORKS DISPLAY PERMIT APPLICATION

Date: _____ Key No. _____

Organization _____ Phone _____

Location of Display _____

Description of Property _____

Date of Display _____ Inclement Weather Date _____

Type of Display _____

Approximate Amount of Fireworks and Kinds _____

Name of Insurance Company _____

Policy Number _____

Kind of Insurance _____

Limits of Insurance _____

Manner and Place of Storage of Fireworks prior to delivery to Display Site _____

Number of Persons in Charge of Actual Display _____

Firing Line & Operator Qualifications per N.F. P.A.-1123 Chapter 7 _____

THE APPLICANT AGREES TO ABIDE BY ALL RULES AND REGULATIONS THAT GOVERN FIREWORKS WHETHER THEY BE FEDERAL, STATE OR LOCAL REQUIREMENTS AND AS STATED HEREIN SAID APPLICATION.

Applicant's Signature _____

State of _____ **County of** _____

The foregoing instrument has been sworn to and subscribed before me this _____ day of _____, 20____ by _____, who is personally known to me _____, or who has produced _____ as identification.

Signature of Notary

Notary Seal

FOR OFFICE USE ONLY

APPROVALS

Zoning Official Signature _____

County Sheriff Signature _____

Fire Official Signature _____

HERNANDO COUNTY FIREWORKS DISPLAY GUIDELINES AND PERMIT PROCEDURES

The procedures set forth in this document are the minimum requirements necessary to ensure a timely review and issuance of a permit as applied for.

Special or display fireworks: Large fireworks designed primarily to produce visible or audible effects by combustion, deflagration or detonation. This term includes, but is not limited to, firecrackers containing more than two (2) grains (130 mg) of explosive composition, aerial shells containing more than forty (40) grains of pyrotechnic composition, and other display pieces which exceed the limits for classification as "common fireworks" or which are classified as Class B explosives by the United States Department of Transportation

Permit requirements for public displays. Permits for supervised public display of fireworks in the unincorporated area of the county by fair associations, amusement parks, and other organizations, groups, or individuals may be granted by the zoning department in accordance with this article and any applicable Florida Statutes. The following conditions shall apply to any permit granted hereunder:

1. An application for permits shall be made in writing on a form provided by the county zoning department at least forty-five (45) days in advance of the date of the fireworks event.
2. Along with the application, two (2) sets of site plans will be required. These diagrams should be drawn to approximate scale and should illustrate compliance with the following:
 - a. Display site—identify significant ground features, public rights-of-ways, significant buildings or structures, overhead obstructions, parking areas, and spectator viewing areas.
 - b. Location of fireworks storage areas
 - c. Fallout area, including dimensions
 - d. North arrow
 - e. Location of significant roadways, including access and control points
 - f. Traffic plan indicating the flow of vehicles in and out of the site before and after display
 - g. Location of emergency vehicle staging area and access routes
3. Applicant must provide the shooting teams pyrotechnic qualifications. An operator qualification review shall be conducted to determine that the individual(s) discharging the fireworks is qualified for such activities in accordance with NFPA, Florida Statutes, and the following:
 - a. Current state fire marshal license or permit pursuant to Florida Statutes, chapter 552, as a manufacturer, distributor, user or blaster of explosives, and/or
 - b. Professional pyrotechnic fireworks shooting instruction, minimum of eighty (80) hours documented training and five (5) years documented experience.
4. *Evidence of financial responsibility.* An insurance policy showing general, comprehensive, liability, and property damage insurance coverage with minimum policy limits as prescribed by the office of risk management for the county.
5. *Indemnity agreement.* The entity making application for the permit, or the individual applying for their permit, shall execute an indemnity agreement which will be provided with the permit application, holding the county and its employees, the sheriff's department, its officers and employees, harmless from any and all claims occurring out of the use of such permit.

Upon completion of the formal permit application and required supplementary documents, the application shall be submitted to the zoning department along with a nonrefundable fee of two hundred dollars (\$200.00). The zoning department will disseminate and coordinate the application to the county sheriff's office, the commercial fire inspector, and other applicable county departments and other agencies for review and comment.

The zoning department administrative official, or designee, has the authority to deny, or grant the permit application with conditions. The zoning department administrative official shall consider the comments and recommendations made by those departments, offices and agencies reviewing the application, information supplied by the applicant and any other information deemed relevant in making its decision a determination regarding the permit application. Upon denial or approval of the application, the applicant will be notified in writing of the decision along with any required conditions of approval.

**HERNANDO COUNTY FIREWORKS DISPLAY
INDEMNITY AGREEMENT**

THIS AGREEMENT OF INDEMNITY entered into this _____ day of _____, 2_____, by and between _____ hereinafter called "Indemnitor", and the County of Hernando and the Sheriff's Office of Hernando County, hereinafter called "Indemnitee";

WITNESSETH:

WHEREAS, the indemnitor has requested of the Indemnitee permission to discharge fireworks at:

_____ ,
and

WHEREAS, the Hernando County Board of county Commissioners has granted to the Indemnitor a permit to and permission to discharge fireworks on the _____ day of _____, 2_____ at (location)

_____ conditioned upon the execution of a good and sufficient Indemnity Agreement to save and hold harmless the County and the Sheriff from any and all claims, suits, actions at law, demands or other liabilities which may arise or accrue against the County or the Sheriff as a result of said fireworks discharge or fireworks display, or any and all associated activities by the Indemnitor.

NOW, THEREFORE, in consideration of the premises and the grant of the requested part, the receipt of which is hereby acknowledged, the Indemnitor, and each of them for themselves, their and each of their heirs, executors, administrators, successors and assigns, jointly and severally do hereby covenant and agree to indemnify and maintain indemnified the Indemnitees, and hold and save harmless the said Indemnitees from and against all loss and damage (including damage to person or property, be they private or public, arising from anything done by, associated with or negligence of, the Indemnitor, its subcontractors, the offices, agents or employees of it while engaged in said fireworks discharge, display, or any and all associated activities. And the Indemnitor further agrees to indemnify the Indemnitees against any suits, actions or actions at law or in equity which may be brought against the Indemnitees, the Board of County Commissioners, their employees, the Sheriff's Office and their personnel, individual or otherwise, to recover damages for accidents, negligence or occurrences growing out of or arising from, said fireworks discharge, display or any and all activities or from any other cause, or any proceedings that may be taken against the Indemnitees, individually or otherwise, arising therefore, and to save them harmless therefrom.

IN WITNESS WHEREOF, we have hereunto submitted our names and affixed our respective seals the day, month and year first above written.

INDEMNITOR: _____
Applicant Signature

INDEMNITEE: Board of County Commissioners, Hernando County, FL

BY: _____
Administrative Official-Dev.Dept.

INDEMNITEE: Hernando County Sheriff's Office

BY: _____