



**Public Works Department
Office of the Director**

Tom Funcheon
Public Works Director

To: Mayor and Board of Commissioners

From: Tom Funcheon, Public Works Director

Date: January 9, 2018

Subject: Special Event – City of Tarpon Springs Recreation Department
Hook Kids on Fishing
March 10, 2018

Recommendation:

That the Mayor and Board of Commissioners approve the City of Tarpon Springs Recreation Departments' special event application for the "Hook Kids on Fishing" on March 10, 2018 at Craig Park.

Background:

This event has been approved by the Special Events Review Committee based on previous years' events.

The event will begin at 10:00 a.m. and end at noon. This instructional fishing event is held simultaneously throughout Florida.

All set-up and clean-up will be the event sponsors' responsibility.

Approval of this event authorizes the Sponsor/User the use of City property for said special event with the understanding that they must operate and carry out the needs and functions of the event within the confines and requirements established and approved by the Special Events Committee, the B.O.C and the Sponsor's application on record.

**City of Tarpon Springs
Application for Special Events**

Event Information:

Date of Application: 12/27/17
Name of Event: Hook Kids on Fishing
Date(s) of Event: March 10, 2018
Alternate Date(s): none
Hours of Event: 10am-12pm
Set up/break down time needed: 8am-1pm
Type/Purpose of Event: Instructional Fishing Event at Craig Park/Spring Bayou
Location of Event (include map for parade/procession routes with assembly and disband points): Craig Park/Spring Bayou
If Closure of a City Parking is needed, please check: Mother Meres Tarpon Ave. Orange St. Court/Lemon
Other: N/A

Disposition of Proceeds: None, Free Event

Applicant Information:

Name of Organization: Tarpon Springs Recreation Division
Registered Nonprofit Org.: Yes No
Organizations Address: 400 S Walton Ave, Tarpon Springs, FL 34689
Individual to Contact: Ashley Harter (Telephone #) 727-942-5628 (email) aharter@ctsfl.us
Alternative Contact: Craig Dolan (Telephone #) 727-942-5628 (email) cdolan@ctsfl.us

General Information:

Number of Vendors: 0 (Sponsor is required to keep a list of vendors, and must be able to produce upon request.)
Location for Designated Vendor Parking (Please complete Vendor Designated Parking Form and attach to application): Parking lot
Approximate Number of Attendees: 75 Entrance Fee: \$ Free
Location for Attendee Parking: Parking lot/ Street Parking
Will Private Security be Provided: Yes No Name of Private Company: _____
Will the Following be Provided: Traffic Control: Yes No Crowd Control: Yes No
Will Music be Provided: Yes No Hours of Play: _____ Band: DJ: Other: _____
Type & Location of Toilet Facilities: Craig Park Bathrooms- Please open at 8am**
Tent or Other Structure: Yes No Type of Structure: 10X10 Tents
How will Structure be secured: Tent Weights

Solid Waste Collection/Disposal: Yes No Dumpster: Rolloff: Other: _____
If parade # of: Participants _____ Animals _____ Floats _____ Bands _____ Other _____
Amusement/Carnival Rides: Yes No Name of Company Providing Rides: _____
Types of Rides: _____ Is Diagram of Layout Attached: Yes No

Will Food/Beverages be Served: Yes No Cooked on Site: Catered: Sold: Given Away
Will Alcoholic Beverages be Served: Yes No Type of Alcoholic Beverages: _____

Event Sponsor is responsible to ensure that all food/alcohol vendors have all necessary licenses as required by the Department of Business and Professional Regulations, Division of Hotels & Restaurants and/or Division of Alcohol and Tobacco, Department of Health, Environmental Health Division or any other applicable State Agency.

Equipment/Miscellaneous (please check if needed):

Barricades: How many: _____
Cones: How many: _____
Portable Stage: Location: _____
Electricity Needed: Where: _____
Public Restrooms Hours of Opening/Closing: Please open at 8am
Street Banners: Locations: _____
Additional City Trash Cans:
Directional Parking Signs: Locations: _____
Other: _____

Is a check made payable to the City of Tarpon Springs for the Application Fee & Deposit Attached: Yes No
If not, when will it be sent: n/a

Is the Certificate of Insurance Attached: Yes No If not, when will it be sent: on File

I (we) agree that it is my (our) responsibility to cleanup after the conclusion of the special event: Yes No

I (we) have read and completed this application and it is true and correct to the best of my (our) knowledge; I (we) have read the general instructions for this application and the City of Tarpon Springs Ordinance #88-25 and agree to conform with the provisions as set forth therein. I (we) understand that knowingly providing false information on the application shall automatically void the application and cancel the event.

Ashley Harter
Signature of Applicant

12/27/17
Date