



Walton County Planning and Development Services

31 Coastal Centre Boulevard, Suite 100
Santa Rosa Beach, Florida 32459

Phone 850-267-1955
Facsimile 850-622-9133

OUTDOOR EVENT APPLICATION

NOTICE TO ALL APPLICANTS

You are required to submit this application to Planning and Development Services **AT LEAST FORTY-FIVE (45) DAYS PRIOR TO THE EVENT.** It can be delivered to: 31 Coastal Centre Blvd Suite 100, Santa Rosa Beach, FL 32459. Your application will not be processed without ALL of the listed items on page 2 of this application. For any questions about this application please contact Planning and Development Services at (850) 267-1955. You will be required to attend an Outdoor Review Committee Appointment prior to approval.

Name of Event: _____

Date of Event: _____ Date of Application: _____

APPLICANT

Name: _____

(If company or corporation, name of secretary and president)

Address: _____

City, State, Zip: _____

Telephone: _____ Fax: : _____ Email: _____

Driving Directions to Site from nearest major intersection: _____

AGENT

Name: _____

(If company or corporation, name of secretary and president)

Address: _____

City, State, Zip: _____

Telephone: _____ Fax: : _____ Email: _____

SITE INFORMATION

Subject	Information
Parcel Number	
Future Land Use	

Attachments

Attach applicable maps, surveys, aerial photos, diagrams, and supporting documentation as needed.

PLEASE NOTE: I understand that Walton County has adopted policies regarding the preservation of native vegetation and no clearing of any kind can take place on a site until the site has been approved for an event or issued a development order by Walton County Planning and Development Services.

SUBMITTAL CHECKLIST

THIS CHECKLIST IS FOR OUTDOOR EVENTS ONLY

SUBMITTALS FOR OUTDOOR EVENTS

- 1. Completed and Signed Application (original plus 1 copies)
- 2. Application Fee – \$100 per event**
- 3. The name(s) of all persons promoting or conducting the outdoor event(s).
- 4. The name(s) of all persons who will provide event-related services to the outdoor event, and executed copies of all contracts or agreements with such persons or groups (Example: vendors).
- 5. Proof of Ownership of site parcel (Owner Deed) and lease agreement.
- 6. The exact date(s) and time(s) of commencement and the exact date(s) and time(s) of the conclusion of the event(s). **Also, state hours that live music or amplified noise will be performed.**
- 7. A geographic description and scale map or plan of the site depicting the location of all required facilities.
- 8. Original copy of Insurance Liability Certificate meeting all requirements of Ordinance and naming Walton County as additional insured.
- 9. Agent Affidavit (if applicable).
- 10. A provision for security and traffic control. If the outdoor event requires services beyond those that are regularly provided by Walton County such as additional sheriff services, the number of officers to be retained and any associated fees shall be determined by the Sheriff's Office on a case-by-case basis. Please note: for those with an annual "Calendar of Events"; a Walton County Sheriff's Office Permit Recommendation Form is required prior to each event of your "Calendar of Events"
- 11. A provision for an emergency services plan with the level of service and associated fees being determined by the South Walton Fire District or the Walton County Fire Rescue and documented on a case by case basis by means of an Event Action Plan. Please note: for those with an annual "Calendar of Events"; a Walton County Fire District Consent Form or letter in your District is required prior to each event of your "Calendar of Events".
- 12. The name(s), phone numbers, and e-mail addresses of on-site contact and back-up person(s) to contact during the event and after hours for emergency situations.
- 13. A provision for parking facilities, both on and off site. Such plan shall provide for on-site and off-site parking in areas clearly designated as parking areas, with appropriate lighting for safety shown. No parking shall be allowed on internal neighborhood streets unless duly authorized.
- 14. Any necessary temporary improvements, including signage, in the public right-of-way must have Walton County Board of County Commissioners Administration approval (contact WC Administration for more information at 850-892-8155).
- 15. Any county road closures must have Walton County Board of County Commissioners approval (contact WC Administration for more information at 850-892-8155). Please note: for those with an annual "Calendar of Events"; please use the attached form for each event of your "Calendar of Events" that requires a road closure.

ALL OUTDOOR EVENTS SHALL BE HELD IN FULL COMPLIANCE WITH OUTDOOR EVENT ORDINANCE 2008-29 AND ANY AMENDMENTS TO THIS ORDINANCE, ANY CURRENT NOISE ORDINANCES, THE WALTON COUNTY LAND DEVELOPMENT CODE AND ALL OTHER APPLICABLE STATE AND FEDERAL LAWS, ORDINANCES, AND REGULATIONS.

WALTON COUNTY ROADWAY ACTIVITIES APPLICATION

The Roadway Activity Permit shall be available on site at all times during the activity.

Complete and submit to Walton County Administration, 76 N 6th St., DeFuniak Springs FL 32433,
for review and approval not less than 45 days prior to event

DATE: _____

Organization	Applicant
Address	City/State/Zip
Phone	Alt Phone
Contact Person	E-Mail
Title of Event/Activity	
Start Date and Time:	End Date and Time:

<u>TYPE OF ACTIVITY</u>	<u>LOCATION(S)</u>
<input type="checkbox"/> Marches/Parades on County Road:	_____
<input type="checkbox"/> Bicycle or Pedestrian races on County Road:	_____
<input type="checkbox"/> Signage on County ROW:	_____
<input type="checkbox"/> Other:	_____
<input type="checkbox"/> Road Closure ***Road Closures will be placed on the Board of County Commissioners Agenda for Approval***	_____
Name of County Road: _____	
Number of Lanes to be closed: _____	
Board Approved: _____	

For official use only (Do not write in this box)

Name of Approving Local Governmental Entity: WALTON COUNTY ADMINISTRATION

Telephone: (850) 892-8155 FAX: (850) 892-8454

Name of signing official (please print): _____

Signature of Approval: _____ Date: _____