



# CITY OF COCONUT CREEK

Development Services Department

4800 West Copans Road

Coconut Creek, Florida 33063

TEL: (954) 973-6752

FAX: (954) 956-1424

## INDOOR/OUTDOOR PROMOTIONAL ACTIVITY AND SALES PERMIT APPLICATION

BUSINESS I.D. # \_\_\_\_\_

FOR OFFICE USE ONLY

Date: \_\_\_\_\_

Name of Participant in Charge of Event: \_\_\_\_\_

Name of Business/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

PHONE NUMBERS: Home: \_\_\_\_\_ Business: \_\_\_\_\_

Cell: \_\_\_\_\_ Fax \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_ Time(s): From: \_\_\_\_\_ To: \_\_\_\_\_ Duration: \_\_\_\_\_

Location: \_\_\_\_\_ No. of People Participating: \_\_\_\_\_

Description of Event/Activity: \_\_\_\_\_

### ***IF THE ACTIVITY INVOLVES A BANNER, PLEASE SEE PAGE TWO.***

Type of Organization:  Non-Profit (501-C Attached)  Charitable  Other \_\_\_\_\_

All applications for permits shall be filed with the Development Services Department during normal business hours ***not less than two (2) weeks prior***

***to the activity.*** Written approval/disapproval with or without contingencies shall be forwarded from the Development Services Department to the applicant. All groups must abide by all restrictions as stated in Ordinance No. 146-95.

The undersigned does hereby request a permit issued on the basis of and subject to the herein set forth information, with the understanding that all City of Coconut Creek ordinances shall be complied with whether specified or not. **Please attach Certificate of Insurance as applicable verifying general liability, automobile liability, workers compensations and naming the City as additional insured.**

\_\_\_\_\_ (Participant/Organization) shall indemnify and hold harmless the City of Coconut Creek, and appointed officials and employees, from and against any and all claims, damages, losses and expenses, including attorney's fees, and costs, whether incurred in litigation, appeals or otherwise, up to and including the United States Supreme Court arising out of or resulting from the permit being granted for \_\_\_\_\_ (Activity/Event) providing that any such claim, damages, loss of expense (1) is attributable to bodily injury, sickness, disease or (2) is caused in whole or in part by a negligent act or omission by \_\_\_\_\_ (Participant/Organization) OR any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts may be liable, regardless of whether or not the same is caused in part by the City of Coconut Creek. Nothing in this granting of a permit shall affect the immunities of the City of Coconut Creek as provided by Chapter 768, Florida Statutes.

\_\_\_\_\_  
Date Applicant's Signature Applicant's Name (printed)

\_\_\_\_\_  
Applicant's Home Address

NAME OF ORGANIZATION: \_\_\_\_\_

**PROMOTIONAL BANNER(S)**

Promotional activity permits (including banners) may be issued six times per year (October 1 – September 30). Permits cannot be consecutive. A twenty-day hiatus must separate permit periods.

According to the Code of Ordinances, City of Coconut Creek, Sec. 13-459, following are the requirements for approval for banners:

1. A photograph or detailed description from the installer of the makeup of the banner including the text.
2. A site plan indicating where the banner(s) is/are to be placed, and how it/they will be installed.
3. The banner must be 15' from the right-of-way and cannot be attached to public property or a landscape feature.
4. The banner cannot exceed 32 square feet.
5. A permission letter from the leasing/management company. (The letter should include the dates.)
6. Temporary banners/signs installed in the ground cannot exceed 6'.

*If the activity includes a sign or banner, please complete the following:*

Date Banner to be Displayed: From: \_\_\_\_\_ To: \_\_\_\_\_ (Grand Opening 30 days/Other 20 days)

Wording on Sign/Banner: \_\_\_\_\_

Size: (cannot exceed 32 square feet) \_\_\_\_\_ Number of Banners (maximum of 2) \_\_\_\_\_

**FOR OFFICE USE**

**POLICE DEPARTMENT:**

DATE: \_\_\_\_\_  APPROVED  REJECTED

BY: \_\_\_\_\_ TITLE: \_\_\_\_\_

CONTINGENCIES OR REASON: \_\_\_\_\_

- |                              |                             |  |
|------------------------------|-----------------------------|--|
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | EXTRA PERSONNEL OR EQUIPMENT NECESSARY |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | POLICE OFFICERS REQUIRED               |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | TRAFFIC PATTERNS EFFECTED              |

**FIRE RESCUE:**

DATE: \_\_\_\_\_  APPROVED  REJECTED

BY: \_\_\_\_\_ TITLE: \_\_\_\_\_

CONTINGENCIES OR REASON: \_\_\_\_\_

- |                              |                             |   |
|------------------------------|-----------------------------|---|
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | E.M.S. DETAIL REQUIRED                    |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | FIRE DETAIL REQUIRED                      |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | FIRE INSPECTION REQUIRED PRIOR TO OPENING |

**DEVELOPMENT SERVICES DEPARTMENT:**

DATE: \_\_\_\_\_  APPROVED  REJECTED

BY: \_\_\_\_\_ TITLE: \_\_\_\_\_

CONTINGENCIES OR REASON: \_\_\_\_\_