



# Osceola County Special Event Application

Osceola County Board of County Commissioners  
Community Development Department  
1 Courthouse Square, Suite 1400  
Kissimmee, FL 34741  
Phone: (407)742-0200  
Specialpermits@osceola.org

Application No.: \_\_\_\_\_  
Date Received: \_\_\_\_\_

### Submittal Checklist

- Property Owner Authorization
- Proof of Ownership
- Legal Description
- Narrative describing the event in detail. Including:
  - Sounds which will project beyond the property lines.
  - Vehicular Traffic and parking
- Site plan showing:
  - Lot Dimensions,
  - Location of Special Event (with all details of set-up), Setbacks of set-up from property and right-of-way lines, Driveways, identifying parking and access, roads, tents, signs, portable toilets, and any other structures and setbacks from property lines and any other existing site improvements
- Application Fees \$620.00  
This application must be completed and submitted to the Zoning Office within no less than thirty (30) days prior to the scheduled of start of the event. Failure to do so may result in denial of permits. Any questions about this form may be directed to the Zoning Office at 407-742-0200.  
  
If temporary tent(s) and/or temporary sign(s) will be used in conjunction with this event, separate permit applications must be submitted to the Zoning Office with this Special Event application.

In accordance with Chapter 3, Article 3.8, Section 3.8.1.O of the Osceola County Land Development Code, authorization for a Special Event is issued to:

### Applicant

Name: \_\_\_\_\_  
Agent/Lessee: \_\_\_\_\_ Tax ID# \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Event Details

Address of Event: \_\_\_\_\_  
Parcel Number: \_\_\_\_\_  
Dates of Event: \_\_\_\_\_ Hours: \_\_\_\_\_

Event on County property? Yes ( ) No ( )  
If yes provide liability Insurance. The insurance shall have a limit not less than \$1 million per occurrence for the general aggregate.

Details of Event: \_\_\_\_\_  
(a narrative may be attached to describe the event in detail.) \_\_\_\_\_  
\_\_\_\_\_

Will law enforcement or private security be employed to assist with the event?  
Yes ( ) No ( )  
If so please provide agreement.  
How many officers? \_\_\_\_\_

(If the Special Event Review Staff determines that utilization of off duty law enforcement (police, sheriff, or highway patrol) officers is necessary to direct traffic, such service shall be arranged (and paid for) by the applicant.)

### Property Owner:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_



**Additional Required Documents:**

- If portable toilets are to be provided at the Special Event, please provide an approval letter from the County Health Department for utilization of portable toilets.
- All food operations occurring at a special event will require a food vending permit from the Health Department according to Chapter 64E-11 of the Florida Administrative Code. Please contact the Health Department at 407-742-8606 for additional information.
- If event activity is to occur in streets, roads, or rights-of-way, applicant shall demonstrate compliance with Sections 336.048 and 316.2045, Florida Statutes.
- Business Tax Receipt under special provisions for vendors with regards to special events is required please contact the Tax Collector's Office to obtain these licenses (407)742-4000.
- If temporary tent(s) and/or temporary sign(s) will be used in conjunction with this event, separate permit applications must be submitted to the Zoning Office with this Special Event application.
- If the Special Event Review Staff determines a Temporary Noise Permit is required, such permit must be obtained by the applicant and approved by the Zoning Staff prior to approval of the Special Event Permit.

I CERTIFY THAT, to the best of my knowledge and belief, all information supplied with this application is true and accurate, and that I am:

- Owner of the property described herein.**
- Party to an agreement for deed or sales contract for the purchase of this property.**  
(If this area is checked, you must be specifically authorized in the contract, or by another legal document, to initiate an application for this request.)
- Agent for the owner or purchaser of this property.** (If you checked this area, a written notarized authorization letter from the property owner(s), to act on their behalf, must accompany this request.) DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**For Office Use Only**

Date of Issuance: \_\_\_\_\_

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

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

Location of sales: \_\_\_\_\_

Zoning Approval: \_\_\_\_\_

**Osceola County Fire Rescue  
SPECIAL EVENT APPLICATION**

This application must be completed and submitted during the Zoning Department application process and within no less than 45 days prior to the schedule start of the event. Failure to do so may result in denial of permits and/or requested services. Any questions about the application process may be directed to the Life Safety Management Bureau 407-742-7000.

Name/Type of Event: \_\_\_\_\_

Date(s)/Time(s): \_\_\_\_\_

(Note: Please indicate the actual times you would like department personnel to be on-site.)

Event Organizer: \_\_\_\_\_

Address/Phone: \_\_\_\_\_

Location(s) this event will be staged: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

The event will be conducted:   Indoors: \_\_\_\_\_   Outdoors: \_\_\_\_\_   Both: \_\_\_\_\_

Occupancy Load:   Inside: \_\_\_\_\_   Outside: \_\_\_\_\_

Expected peak Attendance: \_\_\_\_\_   Maximum peak Attendance: \_\_\_\_\_

Age Range of Group Affiliation (if any) of Attendees: \_\_\_\_\_

Check All That Apply: Tents: \_\_\_\_\_ Vehicles: \_\_\_\_\_ Special Electrical: \_\_\_\_\_ Pyrotechnics: \_\_\_\_\_

Other: \_\_\_\_\_ Explain: \_\_\_\_\_

Protection Requested: Fire: \_\_\_\_\_ EMS: \_\_\_\_\_ Both: \_\_\_\_\_

Describe or attach a copy of the Medical Action Plan.

Attach site map/ Special configurations.

Describe Parking Capabilities/Assigned Staff: \_\_\_\_\_

Security Arrangements Provided: Public: \_\_\_\_\_ Private: \_\_\_\_\_

Describe: \_\_\_\_\_

Please include the name and phone number of the on-site contact the day of the event.

\_\_\_\_\_

**BILLING INFORMATION**

Name/Business: \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_

Please provide an email address if you would like to receive the invoice via email or

If you would like to pay by Master Card or Visa please contact Pat at 407-742-7000.

Please return this application to Terri Cole via fax: 407-742-6867 or Email,  
[tc05@osceola.org](mailto:tc05@osceola.org)

**OSCEOLA COUNTY  
AGENT AUTHORIZATION FORM**



I/we, as the owner(s) of real property in Osceola County, Florida, which is described below do hereby authorize the following person or persons to act as my/our agent to execute any petitions, applications, or other documents necessary to affect the application approval requested and more specifically described below, and to appear on my behalf before any administrative or legislative body in the County concerning the application(s) and to act in all respects as my/our agent in matters pertaining to the requested application(s).

**Agent Information [PLEASE PRINT]**

Name(s): \_\_\_\_\_  
Company: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Requested Application(s):** \_\_\_\_\_

**Subject Property [PLEASE PRINT]**

Address: \_\_\_\_\_  
Parcel ID(s): \_\_\_\_\_  
Legal Description: \_\_\_\_\_  
\_\_\_\_\_  See Attached

**Property Owner(s) Information [PLEASE PRINT]]**

Property Owner Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**SIGNED AUTHORIZATION**

_____ DATE	_____ SIGNATURE	_____ PRINTED NAME OF PROPERTY OWNER
_____ DATE	_____ SIGNATURE	_____ PRINTED NAME OF PROPERTY OWNER

STATE OF FLORIDA  
COUNTY OF OSCEOLA

The forgoing document was (or affirmed) and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_  
20\_\_\_\_ by \_\_\_\_\_ who is personally  
known to me or who produced \_\_\_\_\_ as identification.

Public Notary Seal:

\_\_\_\_\_  
Signature of Notary  
Notary # \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

## **Article 3.8 Commercial Uses Siting Standards**

### **3.8.1 COMMERCIAL USES**

#### **O. Special Event**

Private residences are exempt from the provisions of this regulation. The following standards shall apply:

1. A special event shall be limited to between the hours of 7 a.m. and 9 p.m. Sunday through Thursday, and 7 a.m. and 11 p.m. on weekends and holidays, unless otherwise approved by the County Manager prior to the event.
2. The amount of noise generated shall be in compliance with the County noise Ordinance.
3. All parking provided shall be on-site, unless the Sheriff's Office determines that public safety concerns are adequately addressed for off-site parking.
4. All trash and debris shall be removed when the event is over and/or when the use permit expires and site returned to its pre-existing condition.
5. All required electrical permits for event shall be obtained by a licensed electrical contractor.
6. A letter of approval for the event shall be obtained from the Fire Marshall and / or the Health Department should portable toilets be used, prior to the event. An on-site fire extinguisher(s) shall be located within seventy-five feet of any portion of the tent facility.
7. Written consent from the owner, or authorized agent of the property shall be obtained prior to the issuance of a permit.
8. A Special Event Permit shall only be granted if staff finds that the parking generated by the event can be accommodated without undue disruption to or interference with the normal flow of traffic. Utilization of off-duty police, sheriff or Highway Patrol officers to direct traffic may be required. Cost of providing same to be incurred by the operator of the special event. In cases where it is deemed necessary, the County
9. Manager may require the applicant to post a bond to ensure compliance with the conditions of the special event permit.
10. In cases where the County Manager deems it necessary, the applicant may be required to provide special event insurance coverage up to a limit of \$5,000,000 per occurrence.
11. If the applicant requests the County to provide extraordinary services or equipment or the County
12. Manager otherwise determines that extraordinary services or equipment should be provided to protect the public health or safety, the applicant shall be required to pay to the County a fee sufficient to reimburse the County for the costs of these services.
13. Display or Meeting Tent requests shall adhere to the following criteria in addition to the above:
  - a. The use permit may be granted for forty five (45) days, per lot and may be extended up to ninety (90) days by the County Manager.
  - b. When a display/meeting tent is used in conjunction with a seasonal sales lot, only a seasonal sales lot Permit shall be required (a separate display/meeting tent/special event permit shall not be required).