



Walton County Planning and Development Services

APPLICATION FOR OUTDOOR EVENTS

Application Package Contents

ALL APPLICATIONS SHALL BE SUBMITTED USING THE ONLINE PORTAL

<https://www2.citizenserve.com/waltonplanning>

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.** Applications submitted less than 45 days, but at least 30 days prior to the event shall be assessed a \$200.00 late fee, in addition to the permit fee. It can be delivered to: 842 State Highway 20 East Ste 110, Freeport, FL 32439. 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 Meeting prior to approval.

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INITIAL SUBMITTAL CHECKLIST

APPLICATION FOR OUTDOOR EVENTS – INITIAL SUBMITTAL WILL INCLUDE THE FOLLOWING ITEMS

If any submittals do not meet these requirements, they will not be accepted

Additional items may be required per LDC 1.13.00 (N)

(Credit Cards Accepted or Check payable to Walton County)

- Fee for Outdoor Event Application: \$100 per event
- Agent Affidavit
- Proof of Ownership
- Completed and Signed Application
- A geographic description and scale map or plan of the site depicting the location of all required facilities.
- Original copy of Insurance Liability Certificate meeting all requirements of Ordinance and naming Walton County as additional insured.
- 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"
- 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"
- 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
- 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
- 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)
- 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

Name of Event: _____

Date of Event: _____ Date of Application: _____

Applicant Information

Name: _____

If company or corporation, name of secretary or officer

Address: _____

City, State, Zip: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____

Property Information

Legal Description:

Parcel Identification Number(s) Obtained from Property Appraiser's Office:

Driving directions to the site from the nearest major intersection:

Property Owner Information (if different from applicant)

Name: _____

If company or corporation, name of secretary or officer

Address: _____

City, State, Zip: _____

Telephone Number: _____ **Fax Number** _____

Email: _____

Agent Information (if different from applicant)

Name: _____

If company or corporation, name of secretary or officer

Address: _____

City, State, Zip: _____

Telephone Number: _____ **Fax Number** _____

Email: _____

FLORIDA STATUTES 837.06 – FALSE OFFICIAL STATEMENT

Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

I have read and understand all the information provided in this application, the requirements listed within the application, and agree to provide the necessary information requested by Walton County. The information I have provided on this application is true and correct to the best of my knowledge.

Applicants Signature: _____

Date: _____

Applicant's Signature

Printed Name

Date

STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned Notary Public in and for said County and State, appeared

_____, who is personally known to me or who has produced

_____ as identification, and who executed the foregoing instrument.

Given under my hand and seal this _____ day of _____, _____.

Signed Name of Notary Public

{Seal}

Printed Name of Notary Public

Commission Number: _____

Expiration Date: _____



ROADWAY ACTIVITIES

WHAT IS A ROADWAY ACTIVITY?

A “roadway activity” is any activity that may affect the safe and normal movement of vehicular and pedestrian traffic along the county roadway systems, or which may require the assistance of local, county or state law enforcement agencies. Roadway activities include, but are not limited to, marches, parades, organized bicycle or pedestrian races, fundraisers, festivals or other activities that may impact roadway operations.

PERMIT APPLICATION

Walton County has a responsibility to provide a safe and efficient roadway system for all users. Any activity affecting county roads must first obtain a Roadway Activity Permit from Walton County Administration. ***Please note Walton County will not permit activities on State or Federal roadways.***

Roadway Activity Permit Applications are available at Walton County Administration or on the county website www.co.walton.fl.us. Applicants must demonstrate that the non-profit activity has a charitable benefit for the citizens of Walton County. Limit two roadway activities per group/applicant annually. Roadway activities such as solicitations and fundraisers shall not be held on holidays. Applications shall be submitted not less than 30 days prior to the roadway activity. Applications may be submitted via email, fax or mail. If you have any questions about the application, please contact Walton County Administration at (850) 892-8155.

RULES & RESPONSIBILITIES

The roadway activity organizer is responsible for coordinating with all local government agencies that may be impacted by the activity. This includes, but is not limited to, Walton County Sheriff’s Department, Walton County Code Enforcement, North and/or South Walton Fire Department.

Roadway activities shall not block private drives, entrances or access to any private property.

All activity participants shall wear safety vests and follow the rules established herein.

All signage may be placed in the county right-of-way two days before the activity and must be removed two days after the activity. Signage can be no larger than 18” x 24” and must be placed with wire, or similar, stakes.

When conducting roadway activities such as solicitations or fundraisers, all participants must remain out of the roadway. Participants may approach a vehicle to collect contributions, but must not hold up traffic.

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

Please be aware if any rules or safety regulations are violated, no future roadway activity permits will be issued.

Please note the Sheriff's Department and/or Code Enforcement has the authority to shut down any Roadway Activity if they feel safety rules and regulations are not being adhered to.

APPLICANTS STATEMENT OF ACKNOWLEDGEMENT

I have read, understand, and agree to abide by the rules and regulations included herein. I hereby affirm that the above information is true and correct in describing the intent of this application. I understand that the issuance of the roadway activity permit is contingent upon compliance of all conditions and requirements.

I, _____ the undersigned, agree to abide by the provisions in this application and the responsibilities attached hereto.

(Signature of Applicant)

(Date)
BCC Adopted May 24, 2011

Agent Affidavit / Special Power of Attorney

STATE OF FLORIDA COUNTY OF WALTON

KNOW ALL MEN BY THESE PRESENTS, that I _____ am presently the owner and/or leaseholder of _____ and desiring to execute a Special Power of Attorney, have made, constituted and appointed, and by these presents do make, constitute and appoint _____ whose address is _____. County of _____, State of _____, my Attorney full power to act as my agent in the process of obtaining a outdoor events permit pertaining to _____.

FURTHER, I do authorize the aforesaid Attorney-in-Fact to perform all necessary tasks in the execution of aforesaid authorization with the same validity as I could effect if personally present. Any act or thing lawfully done hereunder by the said attorney shall be binding on myself and my heirs, legal and personal representative, and assigns.

PROVIDED, however, that any and all transactions conducted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by the said attorney for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney and the designation "Attorney-in-Fact."

WITNESSES:

APPLICANT:

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned Notary Public in and for said County and State, appeared

_____, who is personally known to me or who produced _____ as identification, and who executed the foregoing instrument. Given under my hand and seal this ____ day of _____,

Signed Name of Notary Public

Printed Name of Notary Public

{Seal}

Commission Number: _____ Expiration Date: _____