



Special Event Permit Application

Event	Event Name: Asian American & Pacific Islander Fest		Event Date: 05/21/2022	
	Event Venue/Location requested: McKenzie Park			
	Organization/Applicant Name: QoL			
Applicant Information	Address: Oak Ave & Park St			
	Contact Name: Dr. Kesia Blenn			
	Office Phone:	Cell: 8507715919	Email: kblenn@pcgov.org	
	Social Media/ Website: Panama City Quality of Life			
	Organization Classification: Private <input type="checkbox"/> Corporate <input type="checkbox"/> 501(c) <input checked="" type="checkbox"/>			
If Organization is a tax exempt, nonprofit entity, you must attach a copy of your IRS 501 (c) tax exemption letter providing proof and certifying your current tax exempt, nonprofit status.				
Is your organization requesting a waiver of application fees and/or other fees? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				

Event Description	Carnival/Fair <input type="checkbox"/> Demonstration <input type="checkbox"/> Concert/Performance <input type="checkbox"/> Festival <input checked="" type="checkbox"/> Fundraiser <input type="checkbox"/>			
	Block Party <input type="checkbox"/> Outdoor/Farmer's Market <input type="checkbox"/> Marathon/Race/Walk <input type="checkbox"/> Parade/Procession <input type="checkbox"/>			
Wedding <input type="checkbox"/> Marina <input type="checkbox"/> Other <input type="checkbox"/>				
Brief Description: In collaboration with community partners, the Quality of Life Dept will be hosting this one day festival in honor of federally-designated Asian American & Pacific Islander Month. The festivities will include all authentic cuisine, performances, arts, local food trucks and vendors.				

Estimated number of spectators: 1000
 Will any fees be charged to the spectators? YES NO
 If so, what fees and amount will be charged? _____

Event Start Date/Time: May 21, 2022 3:00 PM Event End Date/Time: May 21, 2022 8:00 PM
 Event Set-up Date/Time: May 21, 2022 11:00 Event Breakdown Date/Time: May 21, 2022 9:00 PM

Parking must be planned and designated depending on the type and location of your event. Please indicate the areas you plan on utilizing for participant/attendee parking:
 Public parking near McKenzie Park and downtown in general

Do you have designated handicap parking? YES NO
 Location: Public handicap spaces around McKenzie Park

Event Rain Date requested: YES NO Date: _____
 You may request to cancel your event which may render a partial refund, up to 48 hours before the date and time of the event. Cancellation requests made within those 48 hours of the event date/time will forfeit full security deposit.

Please indicate the types of advertising (check all that apply):
 Local Radio National Radio Local TV National TV Cable TV Local Newspaper
 National Newspaper Direct Mail/Flyers Internet Email Billboards Social Media Outlet



Will sound amplifying equipment be used? YES NO Type of equipment: Sound system

Identify the type of entertainment being requested: BAND DISC-JOCKEY OTHER Various

Will there be alcoholic beverages involved in this event? YES NO
 Will alcoholic beverages be for sale? YES NO
 If yes, which type of alcohol will be served? WINE BEER LIQUOR
 Describe the circumstances involved with the use of alcoholic beverages for this event.
 A Temporary Alcohol permit for the event must be provided by the applicant. City Ordinance (Chapter 3)
 NA

Will electricity be needed for this event? YES NO
 Will additional power be needed for this event? YES NO If yes, total number of electrical panels: _____

Will Light Towers be used for this event? YES NO If yes, total number of Light Towers: 2

Will this event require a street closure? YES NO If yes, Full or Partial
 What road you are requesting to be closed? Portions of Park Ave & 3rd Ct
 Beginning Crossroad: Park Ave & Oak Ave Ending Crossroad: 3rd Ct & Luverne Ave
 Requested time of closure from: 12:00 PM to: 9:00 PM
 Attach site plan detailing the area to be closed and requested barricade locations.

All Parade/ Race/Walk routes must utilize a Commission approved route map.
 Parade _____: Run/Walk _____:
 What is the approximate number of persons, vehicles, animals, type of animals and description of vehicles?

Is there a Sanitation/Clean-up plan? YES NO
 Name and phone number of Company/Person responsible for Sanitation/Clean-up services:
Kesia Blenn 850-771-5919

Will additional garbage carts be needed? YES NO How many? 8
 Will dumpsters be needed? YES NO How many? 2-Yard 4-Yard 6-Yard 8-Yard
 Date trash will be removed from event location(s): 05/21/2022

Portable Restrooms: YES NO Number of portable restrooms: Standard 1 ADA 1
 Date/Time: Drop off 05/20/2022 10:00 Pick up 05/23/2022 10:00

Will there be Stages/Platforms or Tent(s)
 Size of stage/platform: 30x16 Location: Existing pavilion at Park
 Tents: 1 of 20x24 ; 13 of 10x10
 (Number of Tents) (Size) (Number of Tents) (Size)

Temporary Hydrant Meter requested: YES NO City Ordinance (Sec. 23-24, 25.)
 If YES, you must complete the Temporary Hydrant Meter Service Agreement Application.

Describe any additional equipment requested for placement: Equipment includes the use of a moon, bounce and or inflatable carnival type rides and activities provided by a 3rd party vendor. Proof of insurance by the vendor providing such equipment will be required prior to permit approval.
 NA



Will food be distributed at this event? YES NO

Will food vendors be utilized in this event? YES NO

If yes, you must acknowledge and abide by the following requirement.

I understand that I am responsible for providing a list of all vendors participating in this event for the purpose of license verification, the Fats, Oil and Grease discharge plan, and any additional materials as requested by the City of Panama City Quality of Life Department or FOG Inspector. I understand that failure to supply all required information will result in the rejection of this application.

Initial KB

Will any LP-Gas, Charcoal, Flammable or Combustible Liquids be used? YES NO OPEN FLAME

Safety/Security Plan: (Attach a detailed Plan of Action or briefly describe safety/security plan to include, but not limited to, COVID-19, crowd control, EMS, internal security, venue safety, traffic control and barricades beyond Panama City Police & Fire) (Barricades must be FDOT Compliant)
Hand washing stations as well as hand sanitizer will be readily available to attendees. FDOT compliant barricades will facilitate safe road closure at all intersections.

The City of Panama City Police and Fire Chiefs will determine the number of officers and other city personnel necessary to ensure the safety of the community during the event.

Are you hiring additional security from a private security company? YES NO

Private security is not a substitute for City of Panama City Police Department law enforcement personnel.

If yes, list the Name and Contact Number of private security company:

Will there be fireworks or open flame? YES NO

If yes, describe:

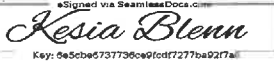

A permit for fireworks or open burn is required. City Ordinance (Sec. 12-165). The following must be submitted to the Fire Chief in order to be considered for a fireworks permit.

- City Permit
- No local or state burn ban in effect
- Arrangements made with owners of adjoining properties
- Proof of Liability Insurance
- FAA Notification
- Coast Guard Notification
- ATF Notification
- Current permit/license to discharge fireworks
- Site plans including aerial maps, proposed shell count and size paperwork
- Safety arrangements (water supply and/or fire extinguishers)
- All following guidelines are met:
 - NFPA-1123 – Fireworks Display,
 - NFPA 1124 – Manufacture, Transportation, Storage and Retail Sales of Fireworks & Pyrotechnic Articles
 - NFPA 1126 – Use of Pyrotechnics Before a Proximate Audience
 - NFPA 1127 – High Power Rocketry

*A permit is not required to discharge fireworks on New Year's Eve, New Year's Day or July 4th.



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Affidavit	To the best of my knowledge, this special event permit application form is correct and complete. If additional materials are determined to be necessary, I understand that I am responsible for filing additional materials as specified by the City of Panama City, Quality of Life Department. I understand that failure to supply all required information per the relevant Applicant Checklists and Requirements will result in the rejection of this application.	
	Applicant's Name: Kesia Blenn	
	Applicant's Signature: 	Date: 02/21/2022
	Event Coordinator print name: Missy Bagwell	02/25/2022
Event Coordinator Signature: 		

Approvals / Internal Use Only	City Sponsored ___ City Partnered ___ CRA ___
	QOL Department Director's Approval: YES <input checked="" type="radio"/> NO ___ Yes, with conditions listed below ___
	Conditions:
	QOL Department Director Signature & Date: 
	Panama City Police Department Approval: YES <input checked="" type="radio"/> NO ___ Yes, with conditions listed below ___
	Conditions:
	Panama City PD Professional Services Signature & Date: 
	Panama City Police Department Chief Signature & Date: 
	Panama City Fire Department Approval: YES <input checked="" type="radio"/> NO ___ Yes, with conditions listed below ___
	Conditions:
Panama City Fire Department Chief Signature & Date: 	
Application Ready for Commission:	
City Commission consideration and action: Approved ___ Disapproved ___ Date: _____	

Permit Fees / Internal Use Only	<u>Fees (check paid fees)</u>	
	<input type="checkbox"/> Application Fee	\$ _____
	<input type="checkbox"/> Security Deposit	\$ _____
	<input type="checkbox"/> Solid Waste – Garbage Carts/Dumpsters	\$ _____
	<input type="checkbox"/> Logistics – Electrical Connections	\$ _____
	<input type="checkbox"/> Utilities – Water Meter	\$ _____
	<input type="checkbox"/> Police / Security	\$ _____
	<input type="checkbox"/> Block Party	\$ _____
	<input type="checkbox"/> Fire / EMT	\$ _____
	<input type="checkbox"/> Other	\$ _____
Total Fees Due	\$ _____	

ASIAN AMERICAN & PACIFIC ISLANDER FEST

Sat, May 21, 2022

Setup - 12:00 pm

Open to public - 3:00-8:00 pm

McKenzie Park, Panama City, FL

QoL Contact: Dr. K - 850-771-5919



KEY

- Porta potties (2)
- Hand washing (2)
- Performing areas (A=20x24 tent, B=pavilion)
- Vendors (6 food, 7 community)
- Food sampling
- Tables (10+4+1+4=19)
- Chairs (30+24+6+4+6+1 6=86)
- Mural Panels (2 frames/6 murals)
- 10x10 tents (5)
- QoL tent (1)
- Electricity (2)
- Barricades (8)
- Light plant (2)
- Trash carts (8)
- ART Craft tables



