



## SPECIAL EVENTS APPLICATION PROCESS M E M O R A N D U M

Pursuant to Municipal Code Chapter 191, a special event is defined as a preplanned single gathering, event or series of related consecutive daily gatherings or events of an entertainment, cultural, recreational, education, political, religious or sporting nature expected to draw 500 or more persons as participants and/or spectators at any time within the duration of the event, and sponsored by an individual or entity, whether private or governmental, which is proposed to be held on public property\*.

A special event does not include any activities on private property, except as specifically provided in Section 191.102. If the event is to be held on property that has a license or lease with the City of Jacksonville, please contact Risk Management at (904) 630-1312 prior to completing an application.

To proceed in organizing a special event in the City of Jacksonville, a Special Events Permit is required. There should be no advertising, promotion or staging of a special event without a conditional approval.

The Special Events Permit Application is due at least 90 days and not more than 365 days prior to a proposed event date. A delay in submitting an application for permit could result in higher costs for City of Jacksonville personnel (i.e. JSO, JFRD, etc.) and could also affect the availability of staffing, or application could not be approved.

A non-refundable application fee is also due with the Special Events Permit Application. Cashier's check or money order payable to the City of Jacksonville. No Personal/Business Checks are accepted.

A complete application packet should include the following:

- Application and necessary forms
- Site map or layout of event
- Scope and description of event
- Certificate of Insurance and acknowledgment of insurance requirements
- Hold Harmless & Indemnification Statement
- Street closure request (if applicable) and map of the proposed street closures with detours
- Application fee - check payable: City of Jacksonville - Cashier's check or money order only

The Office of Special Events serves as a resource in the Special Events Permit application process, and is available to assist with event coordination questions.

Office of Special Events  
117 W Duval Street, Suite 280  
Jacksonville, FL 32202  
Office (904) 630-3690  
Fax (904) 630-3693/ (904) 630-4744

Office of Risk Management  
Office (904) 630-1312  
Fax (904) 630-2100

*\* Events held on private property with 500 or more people that will occupy adjacent public streets or public property are also considered.*



## City of Jacksonville Special Event Permit Application

(pursuant to ordinance 2013-695-E)

**Definition:** Special event means a preplanned single gathering, event or series of related consecutive daily gatherings or events, expected to draw five hundred (500) or more persons at any session as participants or spectators, which is proposed to be held on public property. Events on private property shall be considered special events if 500 or more people participating in the event will occupy adjacent public streets or public property during the event.

**Application Fee:** Each applicant shall submit a non-refundable fee along with completed application at least **90 days and no more than 365 days** prior to proposed event date. No applications will be processed or considered without payment of the fee. The fee shall be \$100.00 for the first calendar day, plus \$50.00 for each whole or partial subsequent calendar day, not to exceed a maximum amount of \$200.00. **A cashier's check or money order should accompany this application, payable to the City of Jacksonville and delivered / mailed to the address at the bottom of this page.**

*Submission and acceptance of this application is not to be construed as an approval of your request for a permit. If any information provided in this application is false or if the applicant does not comply with timeframes, deadlines and requirements the permit may be denied. It is unlawful and a class D offense to conduct, stage, or promote a special event without a permit or make a false statement on the application.*

Name of Entity or Individual(s) seeking to conduct the special event:		
Address:		
City, State & Zip Code:		
Phone number(s):	Cell number:	Fed ID #
Fax number:	E-mail address:	Tax ID #
Dates of proposed event:		Hours of proposed event:
Name of Event and Proposed Location: <i>(list facility, area, street or parking requested to use for event)</i>		
Description of event. Type of entertainment planned. <i>Attach additional page if necessary.</i>		
*Expected daily attendance:	Provide a written statement of the basis for the estimate:	
Is this a first time event?	*** If no, ticket price or entrance fee(s):	
If previously held, list last two years attendance number's		
Will this event be free to the public?	*** If no, ticket price or entrance fee(s):	
Name of business, organization, or non-profit organization that is financially responsible for the event if different from applicant.		
Circle if organization is <b>profit</b> or <b>nonprofit</b> <i>(if nonprofit, attach copy of tax exempt certificate)</i>		

*Applicant's Initials* \_\_\_\_\_

*Office of Special Event – City Hall at St. James  
117 West Duval Street, Suite 280  
Jacksonville, Florida 32202  
(904) 630-3690*

**FOR ADMINISTRATIVE USE ONLY**

<b>CITY OF JACKSONVILLE SPECIAL EVENT PERMIT APPLICATION</b> (pursuant to ordinance 2013-695-E)					
*****How will this event be promoted? ( <i>radio, tv, print advertising</i> ) List the names of each media if known.					
Are you requesting permission to close city streets for the event? <b>YES NO</b> ( <i>if a street is closed for your event you will be required to provide a possible detour route to be approved by JSO</i> )					
For street closure, complete the separate street closure request and attach a map of the requested closures along with detours for traffic. ( <i>if the street you are trying to close belongs to the Florida Department of Transportation or includes a bridge your application will take longer to process</i> ).					
A diagram drawn to an understandable and readable scale of the areas to be used and/or affected by the special event must be attached to this application. Label the uses of each area: i.e. vendors, rides, parking for vendors, etc.					
If event is a parade, estimate the number of units in each of the following categories:	Bands:	Floats:	Cars:	Marching units:	Other:
Indicate time and location of assembling prior to start of parade:			Indicate time and location of disbanding following parade:		
Will a stage(s) be built for the event?			How many?		
Will you request use of city owned mobile stage? YES NO			Size(s):		
Will tents be erected at proposed event?			How many?		
			Size(s):		
Who will provide the tents?			Who will provide the stages?		
Will you need electricity at the event?	Date(s):		Time(s):		
Use:	Location(s):		Amperage required:		
In order to ensure a clean, sanitary environment during and after events held on public property, clean up services will be provided by the City or its designated representative. The cost for these services is the responsibility of the event organizer, and is dependent on the scope and size of the proposed event. This in no way exempts the organizer / producer from keeping the area clean. Outline your plan to keep the area clean during the event as well as at the conclusion of your event.					
Describe plans for security, crowd control and traffic control. ( <i>The Jacksonville Sheriff's Office ["JSO"] must be the primary provider of personal safety and property security</i> ).					
List specific law enforcement needs: include any issues or concerns. ( <i>money being collected, alcoholic beverage sales, special escorts, etc.</i> )					
Will you need outdoor vehicular or pedestrian traffic regulation or control?					
Describe plans for fire and emergency medical services protection. ( <i>The Jacksonville Fire and Rescue Department ["JFRD"] must be the provider of fire and EMS protection, including transportation, unless JFRD determines it cannot do so, in which case, the provisions of Section 191.113 (b) shall apply</i> ).					
Will you have fireworks display(s) during the event?			If so, please give details about the location(s), duration, and company hired to do the show. (Please note that if the display requires a Coast Guard permit, the permit application to the Coast Guard needs to be submitted up to 135 days prior to the event).		
Date(s)	Time(s)				

**Applicant's Initials** \_\_\_\_\_

**CITY OF JACKSONVILLE SPECIAL EVENT PERMIT APPLICATION** (pursuant to ordinance 2013-695-E)

Will there be amplified music at the event?		Number of loud speakers and types of sound amplification devices: Location(s)	
Date(s)	Time(s)		
Do you plan to have vendors?		List types of vendors (all organizations must have a vending permit to sell food and drinks).	
Rides & amusement - including but not limited to bounce houses , rock walls and similar devices ( <i>mechanical amusement devices shall comply with the requirements of Chapter 160 Ordinance code</i> )			
Are you requesting to sell alcoholic beverages? If so, describe your plans for alcohol beverage control:			
Name entity that will provide alcoholic beverage license permit & liability insurance. ( <i>All applicable requirements of state beverage laws must be met</i> ).			
Will you utilize automobile(s), watercraft(s) or aircraft(s) at the event? If so please explain when, where and how they will be utilized.			
Will cranes or heavy equipment be used for any activity associated with the special event? If so, please explain their purpose and dates and times in which they will be used.			
Will you provide child care in connection with the event?			
Will you be hanging banners:		Quantity:	Verbiage
Location(s)		Sizes(s):	
Additional information you wish the city to consider:			

**\*Please note that if attendance substantially exceeds the amount estimated on this application, JSO may terminate the event and future event permit applications may be forfeited. Events with more than 50,000 attendees will require a written coordinated public safety plan to be created and provided by the Chief of Special Events.**

\*\*No glass containers will be allowed.

\*\*\*If applicable, a report on ticket sales must be delivered or provided via facsimile or e-mail to the Office of Special Events at least 10 days prior to the event.

\*\*\*\*Applicant will be required to sign an agreement providing full responsibility and liability for expenses incurred by the city within 10 days of conditional approval (see attachment).

\*\*\*\*\*Applicant cannot advertise that a particular performer will appear at a special event until a contract for the performer's appearance has been executed and a copy of the contract is provided to the Special Events office. Such contracts may have pricing information and pricing provisions redacted

***By signing this application, you are stating that you understand the information in this application to be true to the best of your knowledge, and that you agree to comply with the Ordinances and Codes of the City of Jacksonville. Should the City grant approval and a permit be issued, you agree to comply with any other requirements provided by law.***

Applicant Signature	Date
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CITY OF JACKSONVILLE  
SPECIAL EVENTS  
INSURANCE REQUIREMENTS

**Special Event Insurance Requirements (Section 191.106)**

Within ten business days of receiving conditional approval of a special event application as provided in Section 191.108 (a) the applicant shall:

(a) Without limiting Applicant's liability, the Applicant shall procure and maintain at its sole expense, insurance of the types and in the minimum amounts for the Certificate Holder as stated below:

**Certificate Holder:** City of Jacksonville  
(Mailing Address) 117 W. Duval St. Ste 335  
Jacksonville, FL 32202

**Coverage Requirements:** Insurance Carrier(s) must meet AM Best A- VII Rating

**General Liability:** (No more restrictive than ISO Form CG0001 including property damage, personal injury, products/comp. ops. agg., premises operations and blanket contractual liability)  
\$1,000,000 Each Occurrence  
\$2,000,000 Products & Completed Ops Aggregate  
\$1,000,000 Personal Injury and Advertising  
\$2,000,000 General Aggregate  
*City of Jacksonville, it's members, officials, officers, employees and agents as Additional Insured under the above General Liability Coverage*

*Applicant will provide evidence of workers' compensation insurance or exemption as required by Florida Workers Compensation Law as defined in Chapter 440, Florida Statutes. Such insurance will include coverage for any appropriate Federal Acts (Longshore and Harbor Workers Compensation Act, 33 USC §§ 901-952, and the Jones Act, 46 USC §§ 688 et seq.) where activities include exposures for events or occurrences covered by these Federal statutes. Such evidence will include evidence of employer's liability insurance for the following minimum limits of coverage:*

**Workers' Compensation:** Statutory  
**Employers' Liability:** \$100,000 Each Accident  
\$500,000 Disease, Policy Limit  
\$100,000 Disease, Each Employee

*In the event alcoholic beverages will be served, sold, consumed or otherwise allowed at the event:*

**Liquor:** \$1,000,000 Combined Single Limit

*Unless a separate ordinance is specifically applicable to the automobiles in use, the amount and type of insurance below is required in the event the use of motor vehicles is an integral part of the special event as determined by Risk Management:*

**Automobile Liability:** \$500,000 Combined Single Limit

*Automobile Liability (all automobiles-owned, hired or non-owned)*

**Professional Liability (Errors & Omissions):** *In the event that any services or activities of a professional nature are provided and Risk Management determines the coverage is necessary:*  
\$1,000,000 Each Occurrence / Claim

*In the event the use of watercraft is an integral part of the special event event:*

**Watercraft Liability:** \$1,000,000 Combined Single Limit  
*Watercraft Liability (all watercraft- owned, hired or non-owned)*

*In the event that children will be supervised in connection with the event and Risk Management determines the coverage is necessary:*

**Sexual Molestation:** \$1,000,000 Each Occurrence / Claim

CITY OF JACKSONVILLE  
SPECIAL EVENTS  
INSURANCE REQUIREMENTS

(b) *Participants* – The Applicant shall assume all responsibility for obtaining insurance from the event’s contributing participants and subcontractors (such as caterers, vendors, production companies, entertainers, sponsors) in the types and amounts necessary to adequately protect the City and the City’s members, officials, officers, employees and agents.

(c) *Primary and Non-Contributory* – The Applicant’s insurance will apply on a primary basis and will not require contribution from any insurance or self-insurance maintained by the City.

(d) *Deductibles* – The deductibles of the insurance policies applicable to the special event shall be deemed customary and the responsibility of the Applicant and any named insureds.

(e) *Additional Insured* – The Applicant’s insurance, except workers’ compensation and any additional coverages where it is unavailable, will name the **City of Jacksonville and City’s members, officials, officers, employees and agents, as additional insureds under all insurance coverages required for the special event.**

(f) *Reporting Provision* – The Applicant’s insurance shall be provided on an occurrence form. In the event that coverage is only available on a claims made form, the Applicant shall agree to maintain an extended reporting coverage for a minimum of two years past the expiration of the annual policy term.

(g) *Duration* – Notwithstanding anything to the contrary, the Applicant’s liabilities intended to be covered by the insurance coverage(s) required under this section shall survive and not be terminated, reduced or otherwise limited by any expiration or termination of particular policies for insurance coverages.

(h) *Sovereign Entities* – State and federal agencies eligible for sovereign immunity may submit a statement of self-insurance for liability as allowed by the applicable state or federal statute. Such statement will be acceptable in place of insurance requirements defined herein.

(i) *Financial Responsibility* – Applicant shall obtain insurance by an insurer holding a current certificate of authority pursuant to Chapter 624, Florida Statutes, or a company that is declared as an approved Surplus Lines carrier under Chapter 626, Florida Statutes. Such insurance shall be written by an insurer with an A.M. Best Rating of A-VII or better. **Applicant must maintain continuation of the required insurance throughout the special event, which includes load-in, setup, tear down, and load-out.**

(j) **Evidence of Financial Responsibility – Applicant must provide a certificate of insurance to the City’s Division of Risk Management, demonstrating the maintenance of the required insurance including the additional insured endorsement, no later than 10 days after the conditional approval.** Upon written request, the Applicant shall make its insurance policies and endorsements available to the City’s Division of Risk Management. The City’s Division of Risk Management shall approve the Applicant’s insurance if it complies with this section’s requirements, including, if any, additional insurance coverages deemed necessary by the Division of Risk Management. No material alteration or cancellation, including expiration and non-renewal of Applicant’s insurance, shall be effective until 30 days after receipt of written notice by the City from the Applicant or the Applicant’s insurance company.

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**Date**

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**Authorized Representative Signature**



## Hold Harmless and Indemnification Agreement (Section 191.105)

By signing the below the:

Applicant releases and forfeits any right of action against the City or its members, officials, employees and agents from any liabilities, claims for damages, losses, and costs which arise out of or in connection with the special event and to the fullest extent permitted by law, indemnifies, defends and saves the City and City's members, officials, officers, employees and agents harmless:

(1) against all liability, claims for damages, and suits for or by reason of any injury to any person, including death, and damage to any property for every cause in any way connected with the special event irrespective of negligence, actual or claimed, upon the part of the City, its agents and employees, except where caused by the willful and wanton acts of City officials, officers, employees and agents, and

(2) from all expenses incurred by the City for police protection, fire protection and emergency medical services, restoration and clean up, sanitation and maintenance costs and expenses that are required to preserve public order and protect public health, welfare and safety at the special event in accordance with the requirements of Sections 191.113, 191.114, 191.115, 191.116 and 191.117.

The Applicant shall also agree to indemnify the City and City's members, officials, officers, employees and agents against all charges, expenses and costs, including the reasonable value of the services of the Office of General Counsel, incurred on account of or by reason of any such injuries, damages, liability, claims, suits or losses and all damages growing out of the same.

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

\_\_\_\_\_  
*Applicant or Authorized Representative Name*

\_\_\_\_\_  
*Applicant or Authorized Representative Signature*

\_\_\_\_\_  
*Event Name*

\_\_\_\_\_  
*Event Date*

DEPARTMENT OF PUBLIC WORKS



**TO:** Traffic Operations Office  
Right of Way & Stormwater Maintenance Division  
1007 Superior Street  
Jacksonville, FL 32254

**SUBJECT: MARKING OF PAVEMENT/CLEAN-UP FOR SPECIAL EVENT**

I understand that I am not allowed to apply any paint / markings / decals on any roads or sidewalks for the event named below unless I receive permission from the Traffic Operations Office.

If permission is granted, I understand that I am responsible for the complete removal of any markings upon conclusion of the event.

Additionally, I understand that I am responsible for proper removal and disposal of all trash resulting from this event, or I will provide the city with adequate funding to cover the associated cost of the clean-up.

Name of Event \_\_\_\_\_

Date of Event \_\_\_\_\_

**AUTHORIZED REPRESENTATIVE:**

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Organization (if applicable) \_\_\_\_\_

Date \_\_\_\_\_





**CITY OF JACKSONVILLE – DEPARTMENT OF PUBLIC WORKS  
REQUEST FOR TEMPORARY CLOSING OR SPECIAL USE OF CITY ROAD**

**DO NOT USE THIS FORM** IF YOUR EVENT INVOLVES THE CLOSURE OF A STATE ROAD AND/OR LOCKDOWN OF THE MAIN STREET OR ORTEGA DRAWSPAN  
PLEASE SUBMIT THE "TEMPORARY CLOSING OF STATE ROAD" PERMIT

DATE SUBMITTED: \_\_\_\_\_ DATE(S) OF EVENT: \_\_\_\_\_

NAME OF ORGANIZATION/EVENT SPONSOR		APPLICANT/CONTACT NAME	CONTACT PHONE
CONTACT E-MAIL ADDRESS			CONTACT FAX
TITLE OF EVENT			
HAS THE JACKSONVILLE SHERIFF'S OFFICE BEEN CONSULTED ABOUT THIS CLOSURE? _____ YES _____ NO			
NAME OF OFFICER(S) THAT PROVIDED INPUT: _____			
WILL THIS BE A HOLD-AND-RELEASE EVENT? (NO CLOSURES REQUIRING BARRICADES AND TRAFFIC DETOURS) _____ YES _____ NO			
IS THE JACKSONVILLE SHERIFF'S OFFICE PROVIDING TRAFFIC CONTROL? _____ YES _____ NO		IF NO, PLEASE NAME PARTY HANDLING TRAFFIC CONTROL: _____	
EVENT DURATION <i>Example: 4 hours, 8 a.m. until 12 p.m.</i>	IF ROAD CLOSURE(S) INVOLVED:		
	CLOSURE START TIME (INCL. SET UP/BARRICADES)	CLOSURE END TIME (BARRICADES REMOVED)	
PLEASE DESCRIBE ROAD(S) TO BE CLOSED AND/OR THE EVENT ROUTE <b>AND ATTACH MAP (REQUIRED)</b> <i>"See Attached Map" is not acceptable. Please list each road that will be closed (with limits from – to) and the duration of the closure.</i> <b>DO NOT USE THIS FORM FOR EVENTS THAT WILL CLOSE STATE ROAD(S) AND/OR REQUIRE LOCKDOWN OF THE MAIN STREET OR ORTEGA DRAWSPAN</b>			
PLEASE DESCRIBE DETOUR ROUTE AND ATTACH MAP (If applicable)			
SPECIAL CONDITIONS: _____ CHECK IF NONE			
TYPED NAME AND TITLE (INCLUDE BADGE NO. IF APPROPRIATE)		SIGNATURE OF LAW ENFORCEMENT REPRESENTATIVE	DATE SIGNED
TYPED NAME AND TITLE OF COJ PUBLIC WORKS OFFICIAL		SIGNATURE OF COJ PUBLIC WORKS OFFICIAL	DATE SIGNED

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION  
**TEMPORARY CLOSING OF STATE ROAD PERMIT**

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

Permit No. \_\_\_\_\_

**Governmental Entity**

Approving Local Government City of Jacksonville Dept. of Public Works Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Organization Requesting Special Event**

Name of Organization \_\_\_\_\_ Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Description of Special Event**

Event Title \_\_\_\_\_ Date of Event \_\_\_\_\_  
Start Time \_\_\_\_\_ End Time \_\_\_\_\_  
Event Route (attach map) \_\_\_\_\_  
\_\_\_\_\_   
Detour Route (attach map) \_\_\_\_\_  
\_\_\_\_\_

**Law Enforcement Agency Responsible for Traffic Control**

Name of Agency \_\_\_\_\_

**US Coast Guard Approval for Controlling Movable Bridge**

Not Applicable   
Copy of USCG Approval Letter Attached   
Bridge Location \_\_\_\_\_

The Permittee will assume all risk of and indemnify, defend and save harmless the State of Florida and the FDOT from and against any and all loss, damage, cost or expense arising in any manner on account of the exercise of this event.

The Permittee shall be responsible to maintain the portion of the state road it occupies for the duration of this event, free of litter and providing a safe environment to the public.

**Signatures of Authorization**

Event Coordinator \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
Law Enforcement  
Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
Government Official  
Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**FDOT Special Conditions**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FDOT Authorization**

Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_



## INFORMATION REQUIREMENTS FOR SPECIAL EVENT STREET CLOSURE

The below information pertains to events expected to draw 500 or more persons as participants and/or spectators at any time within the duration of the event.

We strongly recommend that event organizers contact the Jacksonville Sheriff's Office Special Events Unit at (904) 630-2160 during the planning stage of the event about the cost or necessity of off-duty police officers to assist with traffic control.

- **COJ "Request for Temporary Closing of Road" Form**
  - Must include a written description of the route (including lanes used) or the streets being closed.
    - Please do not write "See Attached Map" unless the map includes all pertinent information.
- **Map of Event Route / Street(s) to be Closed and Proposed Maintenance of Traffic Plan / Detour Route**
  - Applicant/event organizer(s) are responsible for ensuring JSO has had input on the route and need for traffic control support.
  - Proper barricades must be used
    - Barricade suppliers are listed in the phone book.
    - Cones, sawhorses, ropes and/or vehicles are not permitted for use as barricades.
- **Florida Dept. of Transportation "Temporary Closing of State Road" Permit**
  - **This form is only necessary for events closing state roads or locking down the Main Street or Ortega bridge. If you are unsure, complete both the COJ and FDOT forms.**
  - Applicant must complete sections marked with a check
  - Be sure to include specific information about routes, including lanes being used.
  - Events utilizing the Main Street or Ortega bridges will require permission from the U.S. Coast Guard and FDOT to lockdown the drawspan
    - Please include the time and duration needed for the lockdown
- **Pavement Markings / Post-Event Clean Up Acknowledgement Form**
  - Pavement markings are NOT allowed unless specifically requested and approved by the city.

EVENT ORGANIZERS ARE SOLELY RESPONSIBLE FOR ENSURING THAT ALL AFFECTED RESIDENTS, BUSINESSES AND OTHER PROPERTY OWNERS ARE NOTIFIED OF THE ROAD CLOSURE(S) THROUGH THE USE OF FLIERS, TEMPORARY SIGNS, POSTERS OR OTHER MEANS AS LEGAL AND APPROPRIATE.

If you need more information or assistance regarding the street closure, contact the Public Works Director's Office at (904) 255-8786 or e-mail [PWAdmin@coj.net](mailto:PWAdmin@coj.net)

**RESERVE STAGE AND BLEACHER  
FOR SPECIAL EVENTS**

SUBMIT REQUEST LETTERS TO:

RON BRUTON, PARKS & RECREATION  
214 N. HOGAN STREET, 3<sup>RD</sup> FLOOR  
JACKSONVILLE, FLORIDA 32202  
PHONE: (904) 255-8765 FAX: (904) 630-8217  
E-mail: [rebruton@coj.net](mailto:rebruton@coj.net)

Date of Event: \_\_\_\_\_ Name of Event: \_\_\_\_\_

Event Contact Person: \_\_\_\_\_ Phone No: \_\_\_\_\_

**RENTAL EQUIPMENT NEEDED**

Small Stage (20' x 16')	Large Stage (40' x 16')	Bleachers (how many)
\$430.00 ea. + Tax \$30.10	\$455.00 ea. + Tax \$31.85	\$370.00 ea. + Tax \$25.90
		(seating capacity approx. 200)

Delivery Location (Duval County Only): \_\_\_\_\_

Organization Holding Event: \_\_\_\_\_

Start Time of Event: \_\_\_\_\_ End Time of Event: \_\_\_\_\_

Earliest Time equipment can be delivered: \_\_\_\_\_

Earliest Time equipment can be picked up: \_\_\_\_\_

Will overnight security be provided for equipment? YES \_\_\_\_\_ NO \_\_\_\_\_

If "YES", What type of security? \_\_\_\_\_

**AFTER RESERVATIONS HAVE BEEN ACCEPTED AND BEFORE EQUIPMENT CAN BE DELIVERED, THE FOLLOWING MUST BE PROVIDED:**

**STAGE AND/OR BLEACHER RENTAL FEES**

- Check made payable to the Tax Collector OR City of Jacksonville for delivery charges(s). Delivery charge (Including tax) for each piece of equipment reserved. SALES TAX **NOT REQUIRED** IF USER PROVIDES COPY OF "STATE OF FL/DEPT. OF REVENUE CONSUMER'S CERTIFICATE OF EXEMPTION." Do not mail checks to Tax Collector or City of Jacksonville.
- THE CITY RESERVES THE RIGHT TO CANCEL THIS RESERVATION FOR ANY REASON. IN THAT EVENT, THE FULL DEPOSIT WILL BE REFUNDED IF THE COORDINATOR/ USER DECIDES TO CANCEL THIS RESERVATION A \$20.00 ADMINISTRATIVE FEE WILL BE APPLIED TO THE REFUND.

**CERTIFICATION OF INSURANCE WORDING FOR EVENTS OR EQUIPMENT RENTAL**

(Certificate of Insurance forms are issued by your insurance agent)

**NOTE: THE USER MUST PROVIDE APPROPRIATE INSURANCE COVERAGE FOR ALL DAYS USER HAS POSSESSION OF CITY EQUIPMENT.**

**COVERAGES: (Minimum)**

Commercial General Liability: \$1,000,000 each occurrence / \$2,000,000 aggregate

Workers Compensation (Florida Statutory)

& Employers Liability:\* \$100,000 each accident / \$100,000 Disease - Each employee / \$500,000 Disease – Policy limit

\*You may provide a letter of workers compensation exemption, if applicable, in lieu of this insurance.

**DESCRIPTION SECTION:**

List (1) Event Name, (2) Date of Event (including delivery and pick up dates), and (3) What is occurring for the event (i.e. Equipment rental, stage rental etc.)

City of Jacksonville, its members, officials, officers, employees and agents must be shown as "Additional insured"

**CERTIFICATE HOLDER SECTION**

CITY OF JACKSONVILLE  
231 E. Forsyth St., Suite 470  
Jacksonville, Florida 32202

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