



**CITY OF PANAMA CITY  
SPECIAL EVENTS PERMIT APPLICATION**

*Check all that apply:*

Parks: \_\_\_\_\_ Parade:  Marina: \_\_\_\_\_ Festival: \_\_\_\_\_  
Run/Walk: \_\_\_\_\_ Block Party: \_\_\_\_\_ Group Feeding: \_\_\_\_\_

1. Applicant's Name: John Deegins, Veteran's Service
2. Address: 840 West 11<sup>th</sup> Street, Panama City, FL 32401
3. Telephone Number Day: 850-248-8280 Evening: \_\_\_\_\_
4. Name, Address, Telephone Number of Organization:  
Bay County Veterans Service
5. Authorized Head of Organization: John Deegins
6. Chairperson's Name: \_\_\_\_\_  
Address: SAME AS ABOVE
7. Name of Event: 2019 Veterans Day Parade
8. Purpose of Event: Celebrate Veterans Day
9. Date(s) of Event: Monday, November 11, 2019
10. Event Times: Assembly: 7:30am Start: 9:30am End: 11:30am
11. Assembly Location: East 13<sup>th</sup> St, East 12<sup>th</sup> St, & Wilson Ave
12. If more than one day, list other dates/times: N/A

13. Approximate number of persons, vehicles, animals, type of animals, description of vehicles: Approx. 65-75 units to include, marching bands, civic groups, floats, trucks and possibly horses
14. Approximate number of spectators expected: 1000
15. Description of activities (Music group, political speaker, food, etc): Parade, Review & wreath laying ceremony
16. Description of public facilities to be used: Tommy Oliver Stadium
17. Route (COPY OF MAP MUST BE ATTACHED): See attached map route
18. Will the parade occupy all or part of the street? ALL
19. Length of parade or run in miles: Depends on Participation
20. Interval to be maintained between units in feet: 35'
21. Description of recording equipment, sound amplification devices, banners, signs, or attention getting devices: N/A
22. Will the event involve open flame, incendiary devices, or pyrotechnics? If yes, explain. (The Fire Department must be consulted) N/A
23. Will alcoholic beverages be sold or served: N/A  
(Map must clearly indicate egress from alcohol consumption area)

Type of alcohol served: Beer: \_\_\_\_\_ Wine: \_\_\_\_\_ Liquor: \_\_\_\_\_

Time Start: 9:30 AM Time End: 10:30 AM (Parade only)  
\*\*NOTE: Organizer is responsible for obtaining any applicable State Alcohol, Beverage, Tobacco (ABT) licenses.

24. Grey water plan: \_\_\_\_\_  
\_\_\_\_\_

25. Clean up plan: \_\_\_\_\_  
\_\_\_\_\_

26. I have read and agree to comply with the conditions set forth in the City of Panama City Special Events Handbook in accordance with Chapter 17 of the City of Panama City Municipal Code. JD Initials

27. Organizer assumes all responsibility for any and all damages sustained to park site and will reimburse City for any and all damages, including labor costs. I understand that I must abide by the Regulations as set forth in the City of Panama City Ordinance 22.31-22.42 and the rules of the Department of Leisure Services. JD Initials  
(Park Reservations ONLY!)

28. I understand that this application is not approved until it is signed off by the appropriate departments and is approved by the City Commission (if required). JD Initials

29. I understand that the permit fee (\$100.00) is NON-REFUNDABLE.  
JD Initials

Permit fee: JD Date paid: \_\_\_\_\_  
Application shall be filed not less than sixty (60) days nor more than one hundred eighty (180) days before the date on which the event is to be conducted.

**REQUIRED SIGNATURES**

Applicant: John Dejean  
Leisure Services: \_\_\_\_\_  
Public Works: \_\_\_\_\_  
Marina: \_\_\_\_\_  
Fire Department: \_\_\_\_\_  
Police Department: \_\_\_\_\_


## INDEMNITY AND HOLD HARMLESS AGREEMENT

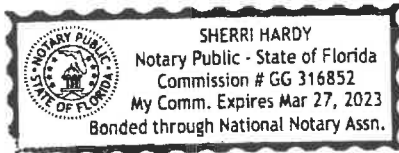
**IN CONSIDERATION** of the City of Panama City, Florida ("City") approving the use of the City's streets and other City properties by the Undersigned, the Undersigned agrees to indemnify and hold harmless the City, its agents, employees and assigns, from any and all claims, demands, damages, actions, causes of actions, or suits for injury or death to any person and damages to property of others, including the property of the City, arising out of or from the use of the City's streets and properties or from the sale, consumption or possession of alcoholic beverages by those attending or participating in the activities sponsored by the Undersigned, as well as any injury resulting from the previous negligence of the City regarding the construction and maintenance of its properties.

The Undersigned represents that (1) the Undersigned has read and understands the terms of the foregoing Indemnity and Hold Harmless Agreement, (2) that the Undersigned's execution of this instrument constitutes its free and voluntary act, (3) that the execution hereof is made without any representations of inducement or otherwise by those indemnified hereby; (4) that this Agreement has been properly approved by the Undersigned and if applicable in accordance with its organizational structure, and (5) that no other signature other than the one affixed to this document is necessary to make this indemnity and hold harmless agreement binding on the Undersigned or its organization.

**IN WITNESS WHEREOF**, the Undersigned has hereunto set its hand and seal,  
this 21<sup>st</sup> day of August 2019

Signed, sealed and delivered  
in the presence of

  
\_\_\_\_\_  
Print Name of Witness  
Gayle Cockrell  
\_\_\_\_\_  
Print Name of Witness



Bay County Board of Commissioners  
\_\_\_\_\_  
Print Name of Organization or  
Individual

  
\_\_\_\_\_  
Signature

Philip "Griff" Griffiths  
\_\_\_\_\_  
(Print Name)

Title: Chairman, Bay County Board of County Commissioners  
\_\_\_\_\_  
Print Name and Title if acting on Behalf of  
Above Organization

## PARADE PERMIT/STREET CLOSURE APPLICATION

NOTE: No devices to create holes in the sidewalks or asphalt roadways are allowed. Any markings made on pavement, sidewalks, or roadways shall be made with chalk.

1. Applicant's Name: 1 John Deegins Veterans Service
2. Address: 1 840 West 11<sup>th</sup> Street, Panama City, FL 32401
3. Telephone Number Day: 1 850-248-8280 Evening: 1
4. Name, Address, Telephone Number of Organization:  
1 Bay County Veterans Service  
840 West 11<sup>th</sup> Street  
Panama City, FL 32401 850-248-8280
5. Authorized Head of Organization: 1 John Deegins, Director
6. Chairperson's Name: 1 Same AS Above  
Address: 1 Same AS Above
7. Date(s) of Event: 1 Monday, November 11, 2019
8. Name of Event: 1 2019 Veterans Day Parade
9. Purpose of Event: 1 Celebrate Veterans Day
10. Route (COPY OF MAP MUST BE  
1
11. Approximate number of persons, vehicles, animals, type of animals, description of vehicles:  
1 Approx. 65-75 units to include, marching bands, civic groups, floats, trucks and possibly horses
12. Date & Time of Event: Assembly 1 7:30 am Start: 1 9:30 am End: 1 11:30 am  
If more than one day, list other dates/times: 1 N/A 1 N/A 1 N/A
13. Will the parade occupy all or part of the street? All 1  Part 1
14. Length of parade or run in miles: 1 1.4 miles
15. Assembly area/route: 1 East 13<sup>th</sup> St., East 12<sup>th</sup> St., and Wilson Ave  
1
16. Interval to be maintained between units in feet: 1 35-
17. If parade/street closure is to be held by someone other than the applicant, applicant shall file a letter with the Chief of Police from the person proposing authorization in order for the applicant to apply for a permit.  
Permit fee: 1  Date paid: 1  ,201

Application shall be filed not less than sixty (60) days nor more than ninety (90) days before the date on which the event is to be conducted.

**Parade Permit/Street Closure Application (Continued)**

1  
Command Member

1  
Date Received

**APPLICANT PLEASE NOTE: All barricades required for the function to be supplied by the Applicant. Event sponsors should contact the Public Works Department at 872-3005 to coordinate assistance they may need with electrical hookups, refuse containers, etc.**

**Field Services Captain's Comments:**

Assigned to: 1

Plan of Action / After Action Required

1

**The above application was submitted to the City Commission for consideration and the following action was taken:**

Approved 1

Disapproved 1

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

Date: 8-27-2019

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

Approving Local Government <u>Panama City Police Dept</u>		Governmental Entity _____
Telephone _____	Email _____	Contact Person _____

Organization Requesting Special Event	
Name of Organization <u>Bay County Veterans Service</u>	Contact Person <u>Lon Spradlin</u>
Telephone <u>850-248-8280</u>	Email <u>lspradlin@baycounty.fl.gov</u>

Description of Special Event	
Event Title <u>2019 Veterans Day Parade</u>	Date of Event <u>Monday Nov. 11, 2019</u>
Start Time <u>7:30 AM</u>	End Time <u>11:30 AM</u>
Event Route (attach map) <u>See attached map</u>	
<u>note: Parade begins @ 9:30 AM</u>	
Detour Route (attach map) <u>N/A</u>	

Law Enforcement Agency Responsible for Traffic Control	
Name of Agency <u>PCPD</u>	

US Coast Guard Approval for Controlling Movable Bridge	
Not Applicable <input checked="" type="checkbox"/>	
Copy of USCG Approval Letter Attached <input type="checkbox"/>	
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 <u>John Deegins</u>	Signature <u>[Signature]</u>	Date <u>8/23/2019</u>
Law Enforcement Name/Title _____	Signature _____	Date _____
Government Official Name/Title _____	Signature _____	Date _____

FDOT Special Conditions	

FDOT Authorization		
Name/Title _____	Signature _____	Date _____

# Veteran's Day Parade

— Parade Route - 1.4 Miles



Bay High School

W 11th St

E 11th St

Jenks Ave

Harrison Ave

W Beach Dr

W 6th St

E 6th St

Panama City City Hall



## Permit Fees Remittance Sheet

<input checked="" type="checkbox"/> Permit Application Fee	\$ <u>0</u>
<input type="checkbox"/> Block Party	\$ _____
<input type="checkbox"/> Security Deposit	\$ _____
<input type="checkbox"/> Police / Security	\$ _____
<input type="checkbox"/> Public works - Electrical Connections	\$ _____
<input type="checkbox"/> Public Works - Trash Carts	\$ _____
<input type="checkbox"/> Utilities - Water	\$ _____
<b>Total</b>	\$ _____

Proof of Liability Insurance received

Date NA

DOT Permit (if required)

Date \_\_\_\_\_

Panama City Fire Dept. Authorization Sheet (if required)

Date \_\_\_\_\_

### Payment received:

\_\_\_\_\_  
Organizer Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Witness Signature

Date \_\_\_\_\_