

DME Stadium, LLC FACILITY PERMIT APPLICATION

Dean O'Brien, CEO
2441 Bellevue Ave.
Daytona Beach, FL32114
dean.obrien@dmedelivers.com

Thank you for selecting DME Stadium, LLC for your event. This application is for a Facility Use Permit.

1. Separate applications must be submitted for each field or facility.
2. 3 references are required for use of Stadium. References must include addresses and phone numbers.

The event may require evidence of liability insurance, listing DME Stadium, LLC and the City of Daytona Beach as additionally insured. If insurance is required, proof of insurance must be submitted to DME Stadium, LLC 30 days prior to the event date.

Unless waived by the DME, you must apply for a Facility Use Permit no later than 30 days before your proposed event and no sooner than 365 days before your proposed event.

Every applicant for a Facility Use Permit is required to pay a non-refundable application fee as follows:

Classification	Application fee <i>nonrefundable</i>
1 - 499 people	\$ 25.00
500 - 990 people	\$ 50.00
1,000 - 4,999 people	\$ 200.00
5,000 or more people	\$ 300.00

If a Facility Use Permit is granted, it will be conditioned on payment of additional fees established

Please type or print legibly when completing all sections of the application. Incomplete applications may be rejected, and a new application fee will be required.

Please submit completed application and application fee to:

DME Stadium, LLC
2441 Bellevue Ave.
Daytona Beach, FL 32114
Or via email: dean.obrien@dmedelivers.com

Date Rcvd _____ Initials _____

REQUIRED INFORMATION:

Name of Applicant: _____

Type of Organization: non-profit profit charitable government
 Individual other (please explain):

Primary Contact Person: _____

Applicant Address: _____

City: _____ **State:** _____ **Zip:** _____

Work Phone: _____ **Cell Phone:** _____

Fax Number: _____

Email address: _____

Website: _____

DESCRIPTION OF USE:

Proposed Event Name: _____

Brief Description of Proposed Event and/or Activities planned:

Site plan attached: Yes N/A No(explanation)_____

Will an admission fee be charged for the event? Yes No

Fees collected prior to event? Yes No

Fees collected on site before/during event? Yes No

Event Time:

Date _____ Start _____ am/p.m. End _____ am/p.m.

Date _____ Start _____ am/p.m. End _____ am/p.m.

Date _____ Start _____ am/p.m. End _____ am/p.m.

Set-up: Date _____ Start _____ am/p.m. End _____ am/p.m.

Breakdown: Date _____ Start _____ am/p.m. End _____ am/p.m.

Rain Date: Date _____ Start _____ am/p.m. End _____ am/p.m.

Anticipated Attendance: _____ (approx.)

Have you reserved this facility / field with the City of Daytona Beach or DME previously? Yes No

If yes, list previous date(s): _____

**If this is the first time you are holding this event at the Stadium please list references on the last page of the application.*

Have you held this event in another City/venue previously? Yes No

Is this event different from the previous years? Yes No

Will you be using a sound system/require audio or visual? Yes No

Audio Needs: _____ **Audio Needs:** _____

Visual Needs: _____ **Visual Needs:** _____

PROPOSED SPONSORS:

How many commercial sponsors with on-site visibility do you anticipate?
(Including product sampling, giveaways, exhibits and advertising)

List specific names:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

ALCOHOL BEVERAGES/LIQUOR LIABILITY:

Do you propose to dispense, provide or serve alcoholic beverages? Yes No

Name of organization licensed to serve alcohol at this event: _____

Limit of liquor liability coverage, if required, will be no less than \$500,000

The organization is: for profit not for profit (see below)

Is above company a 501(c)(3) organization applying for a temporary alcohol sale license? Yes No

A copy of the license must be submitted prior to the event

Do you propose to tailgate prior, during or after the event? Yes No

Will tailgating be incorporated in this event? Yes No

A copy of the tailgating policy is available online and will be provided with your permit, if approved.

PROMOTION:

At what level will the event be promoted? Local Regional National
 International

What type of publicity will be used?

Newspaper Radio Television Web Site Direct Mail
 Community Billboard Other

Telephone number to be released for public information: () _____

SIGNS:

Are you proposing to use signs? Yes No

How many signs and what dimensions? _____

BANNERS:

Will you be using banners at your event? Yes No

Are you selling advertisement(s) or sponsorships? Yes No

Are you proposing to use to hang banners at your event? Yes No

How many banners and what dimensions? _____

FACILITY REQUIREMENTS:

Will you require use of amenities?

Electricity: Yes No Water: Yes No

****Extra charges may be applied for use of Water and Electrical ****

Describe in detail, including type and location: _____

TRAFFIC:

Will normal traffic patterns be altered by the event? Yes, see below No

Explanation: _____

Will shuttles be used to transport? Yes No

Note: Public Service Announcements regarding parking/traffic flow is the responsibility of the permittee.

Have you ever damaged DME/City property and failed or refused to pay for such damage upon the City’s request or demand? Yes No

Are you past due on any fees or charges of any kind owed to the DME or the City of Daytona Beach? Yes No

SANITATION:

If granted a permit, you must properly dispose of waste and garbage throughout the term of the event, and immediately upon conclusion of the event. The area must be returned to a clean condition. DME strongly encourages permittees to plan ways to encourage vendors, participants and the public to recycle waste that is generated during the event.

Will you be using DME services for refuse, garbage and litter? Yes No

Number of trash cans: _____

Dumpsters: _____

Number of recycling containers: _____

If no, how will you be handling the removal of refuse, garbage, litter, etc.?

Note: Permittees not using DME services may contact Waste Pro, Attn: Lisa Dorsey at 386-788-8890 to arrange for dumpsters.

SECURITY:

Note: The Stadium property requires the use of Private Security or Daytona Beach Police Department Officers during the event at the permittees' expense.

Will this event require additional security? Yes No

If yes, what are your plans for providing additional security?

EMERGENCY FIRE/MEDICAL SERVICES:

Note: Public Property requires the use of the Daytona Beach Fire/Rescue Department employees during the event at the permittees' expense.

What are your plans for providing additional Fire/EMS?

Will this event require additional fire or EMS support? Yes No

If yes, what are your plans for providing additional fire or EMS support?

Please tell us how you learned about us: Website Facebook

Twitter Instagram Brochure Newspaper

Radio Referral

Event Contact Information:

Please provide information for emergency use **DURING** the event only.

(These individuals must be on site during the entire event)

1st Contact Person Name: _____

Contact Cell Phone: _____

2nd Contact Person Name: _____

Contact Cell Phone: _____

3rd Contact Person Name: _____

Contact Cell Phone: _____

REFERENCES

(Required for first time events in Daytona Beach)

1. Name: _____ Title: _____
Phone: _____
Event Name: _____ Event Date(s): _____

2. Name: _____ Title: _____
Phone _____
Event Name: _____ Event Date(s): _____

3. Name: _____ Title: _____
Phone: _____
Event Name: _____ Event Date(s): _____

The undersigned acknowledges that this is an application only and does not obligate the DME in any fashion to grant the requested Facility Use Permit; that the application fee is non-refundable; and that the applicant may be required to pay additional fees, pay cleaning and damage deposits, and provide insurance as a condition of receipt of permit.

The undersigned affirms that the questions in this application have been answered truthfully. The undersigned further affirms that, if the applicant is a corporation, limited liability company or other type of firm, the undersigned is authorized to represent the applicant. The undersigned further affirms that if this application is granted, the applicant will be deemed to indemnify and hold DME and the City of Daytona Beach harmless.

Signature of Applicant _____ Date _____

Printed Name _____

Title (if applicable) _____