

**TOWN OF LADY LAKE  
GROWTH MANAGEMENT DEPARTMENT  
SPECIAL EVENT PERMIT**

Any open-air gatherings or temporary sales events will require a special event permit.

\*\*This permit must be submitted three weeks prior event. \*\*

**Applicant Information**

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

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Corporation/Organization Name or D.B.A.: \_\_\_\_\_

**Event Information**

Event Date(s): \_\_\_\_\_ Event Hour(s): \_\_\_\_\_

Event Setup Date: \_\_\_\_\_ Event Cleanup Date: \_\_\_\_\_

Promoter of the Event: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Sponsor(s) of Event: \_\_\_\_\_

On-site Event Manager (if different from above): \_\_\_\_\_

Event Manager's Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Briefly Describe Event: \_\_\_\_\_

Has this event ever been held at another location within the Town Limits: \_\_\_\_\_

If yes, where? \_\_\_\_\_

Will there be an admission charge? \_\_\_\_\_ If yes, how much? \_\_\_\_\_

Expected Daily Attendance: \_\_\_\_\_ Peak Attendance: \_\_\_\_\_

Will there be musical entertainment: \_\_\_\_\_ If yes, what type? \_\_\_\_\_

Will there be amplified sound entertainment? \_\_\_\_\_ If yes, what is the time frame? \_\_\_\_\_

Will there be alcoholic beverages served? \_\_\_\_\_

Will there be any inflatables, climbing walls, game tables, kids' activities, hot air balloons, or similar items? \_\_\_\_\_

Will there be signs, banners, special lighting/décor? \_\_\_\_\_

Will electrical hookup be required? \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_