



Cc:Police _____
Cc:Code Enf. _____

**CITY OF AVENTURA
SPECIAL EVENTS PERMIT
NON-PUBLIC PROPERTY REQUESTS**

Name of Applicant: _____ Phone No. _____

Address: _____ Fax No. _____

Contact Person: _____

24-hour Contact(s) and Phone Number(s)

Date(s) & Time of Event: _____

Peak Hour(s) of Attendance: _____ Location and Description of Event:

Indicate what is included in the event:

No & size of tents _____ Music _____ Food _____
(Tents require Fire Department permit & inspection)

No & size of signs _____

*****No Fireworks or Banners allowed**

Please include any printed material on the event with your completed application.

The City Manager may revoke the permit based on the endangerment of the health, safety or welfare of the community. The person designated in the permit application as being the contact person must remain at the location of said activity or event during the entire time stated on the permit.

The City Manager may impose reasonable conditions on the permitted activities and request that a bond be posted to secure the costs of cleanup, repair or replacement of damage or destruction of property.

Signature of Applicant

Date

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To be completed by City

Application Reviewed by: Police _____ Building _____ Planning/Code _____

Application Approved

Signage Conditions

Application Denied

The number, size & location of signs to be determined by the City Manager per City Code Sec. 31-143 (h) Temporary Signs (8).

City Manager

Date

**Fax or Mail completed form and supporting documents to:
Office of the City Manager, 19200 West Country Club Drive, Aventura, FL 33180
(305) 466-8911 (305) 466-8919 fax**