



SPECIAL EVENT PERMIT APPLICATION PROCEDURE

Event organizers wishing to hold a special event within County right-of-way must obtain a special event permit from the Palm Beach County Traffic Division. To obtain a permit, the following documents are required:

1. Completed Special Event Application. Please fill out 1 of the 3 applications that corresponds with the timeframe the right-of-way is to be closed. These applications are attached to this procedure document.
 - a. *“Special Event Application for Temporary Road Closure **Less Than 12 Hours**” (No Liability Insurance required)*
 - b. *“Special Event Application for Temporary Road Closure **Less Than 24 Hours**”*
 - c. *“Special Event Application for Temporary Road Closure **More Than 24 Hours**”*
2. General Liability Insurance (Waived for road closures less than 12 hours)
3. Consent of the applicable Law Enforcement Agency having jurisdiction over the subject roadway (Agency signature & date required)
4. A map, no larger than 8-1/2” X 14”, showing the location – including the beginning and ending of the road closure and/or streets that are being blocked off
5. Maintenance of Traffic Plan
6. The request must be submitted in letter form on official letterhead as an attachment to an email and sent to:

Streets south of Southern Boulevard - Mr. Sean Reilly, Traffic Division –
SReilly@pbcgov.org

Streets north of Southern Boulevard - Ms. Graciela M’Causland, Traffic
Division – GMCausla@pbcgov.org

- Palm Beach County approval is for Palm Beach County roads only. All other non-county locations will require approval, as necessary, from the maintaining agency or owner.
- Permit applications shall be filled out completely and received by the Traffic Division as follows:
- A **minimum of ninety (90) working days** in advance of a temporary road closure **for more than 24 hours**
- A **minimum of thirty (30) working days** in advance of a temporary road closure **for less than 24 hours**
- A **minimum of ten (10) working days** in advance of a temporary minor road closure **for less than 12 hours**.
- If application is not filled out completely and all attachments are not included, it will be rejected.



PALM BEACH COUNTY ENGINEERING AND PUBLIC WORKS DEPARTMENT
TRAFFIC DIVISION
2300 North Jog Road
West Palm Beach, Florida 33411
(561) 684-4030

Special Event Application for Temporary Minor Road Closure – Less Than 12 Hours
(Submit 10 days prior to event)

APPLICANT INFORMATION

Contact Name: _____ Email: _____
Applicant Address: _____ Telephone: _____
Anticipated Number of Attendance: _____

DESCRIPTION OF SPECIAL EVENT

Event Title: _____ Event Location: _____
Date of Event: _____ Event Hours: _____

LAW ENFORCEMENT AGENCY RESPONSIBLE FOR TRAFFIC CONTROL (if applicable)

Name of Agency: _____ Telephone: _____
Contact Name: _____ Email: _____

Provide/Confirm the following:

- _____ Event Location/Detour Route (attach map)
- _____ Maintenance of Traffic Plan (attach map)
- _____ Consent of the applicable police department having jurisdiction over the subject roadway(s)

The Applicant shall protect, defend, reimburse, indemnify and hold the Palm Beach County Board of County Commissioners, its agents, employees and elected officers harmless from and against all claims, liability, expense, loss, costs, damages or causes of action of every kind or character, including attorney's fees and costs, whether at trial or appellate levels or otherwise, arising during and as a result of their performance due to the acts or omissions of the Applicant.

The Applicant will assume all risk of and indemnify, defend and save harmless the Palm Beach County Board of County Commissioners from and against any and all loss, damage, cost or expense arising in any manner on account of the exercise of this event.

The Applicant shall be responsible for maintaining the portion of the County road it occupies for the duration of this event and providing a safe environment to the public.

The Applicant shall provide general insurance in an amount of not less than \$1,000,000 and shall name Palm Beach County as both certificate holder and additional insured.

Signature of Applicant: _____ Date: _____

Approved by Traffic Division: _____ Date: _____



PALM BEACH COUNTY ENGINEERING AND PUBLIC WORKS DEPARTMENT
TRAFFIC DIVISION
2300 North Jog Road
West Palm Beach, Florida 33411
(561) 684-4030

Special Event Application for Temporary Minor Road Closure – Less Than 24 Hours
(Submit 30 days prior to event)

APPLICANT INFORMATION

Contact Name: _____ Email: _____
Applicant Address: _____ Telephone: _____
Anticipated Number of Attendance: _____

DESCRIPTION OF SPECIAL EVENT

Event Title: _____ Event Location: _____
Date of Event: _____ Event Hours: _____

LAW ENFORCEMENT AGENCY RESPONSIBLE FOR TRAFFIC CONTROL

Name of Agency: _____ Telephone: _____
Contact Name: _____ Email: _____

Provide/Confirm the following:

- _____ Event Location/Detour Route (attach map)
- _____ Maintenance of Traffic Plan (attach map)
- _____ Consent of the applicable police department having jurisdiction over the subject roadway(s)
- _____ Certificate of Insurance

The Applicant shall protect, defend, reimburse, indemnify and hold the Palm Beach County Board of County Commissioners, its agents, employees and elected officers harmless from and against all claims, liability, expense, loss, costs, damages or causes of action of every kind or character, including attorney's fees and costs, whether at trial or appellate levels or otherwise, arising during and as a result of their performance due to the acts or omissions of the Applicant.

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Signature of Applicant: _____ Date: _____

Approved by Traffic Division: _____ Date: _____



PALM BEACH COUNTY ENGINEERING AND PUBLIC WORKS DEPARTMENT
TRAFFIC DIVISION
2300 North Jog Road
West Palm Beach, Florida 33411
(561) 684-4030

Special Event Application for Temporary Road Closure – More Than 24 Hours
(Submit 90 days prior to event)

APPLICANT INFORMATION

Contact Name: _____ Email: _____
Applicant Address: _____ Telephone: _____
Anticipated Number of Attendance: _____

DESCRIPTION OF SPECIAL EVENT

Event Title: _____ Event Location: _____
Date of Event: _____ Event Hours: _____

LAW ENFORCEMENT AGENCY RESPONSIBLE FOR TRAFFIC CONTROL

Name of Agency: _____ Telephone: _____
Contact Name: _____ Email: _____

Provide/Confirm the following:

- ____ Event Location/Detour Route (attach map)
- ____ Maintenance of Traffic Plan (attach map)
- ____ Consent of the applicable police department having jurisdiction over the subject roadway(s)
- ____ Certificate of Insurance

The Applicant shall protect, defend, reimburse, indemnify and hold the Palm Beach County Board of County Commissioners, its agents, employees, and elected officers harmless from and against all claims, liability, expense, loss, costs, damages or causes of action of every kind or character, including attorney's fees and costs, whether at trial or appellate levels or otherwise, arising during and as a result of their performance due to the acts or omissions of the Applicant.

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The Applicant shall be responsible for maintaining the portion of the County road it occupies for the duration of this event and providing a safe environment to the public.

The Applicant shall provide general insurance in an amount of not less than \$1,000,000 and shall name Palm Beach County as both certificate holder and additional insured.

Signature of Applicant: _____ Date: _____

Approved by Traffic Division: _____ Date: _____