



**Public Works Department  
Office of the Director**

Tom Funcheon  
Public Works Director

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To: Mayor and Board of Commissioners

From: Tom Funcheon, Public Works Director

Date: February 14, 2023

Subject: Special Event – City of Tarpon Springs Recreation Department  
Easter Egg-Stravaganza  
April 1, 2023

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**Recommendation:**

That the Mayor and Board of Commissioners approve the City of Tarpon Springs Recreation Departments' special event application for the "Easter Egg-Stravaganza" on April 1, 2023, at the Sports Complex.

If a change in the event date is necessary due to inclement weather, the City Manager will authorize/designate a rain date.

**Background:**

This event has been approved by the Special Events Review Committee based on previous years' events.

The event begins at 10:00 a.m. and ends at 1:00 p.m. There will be an egg hunt, slides, active outdoor games, DJ music and food & beverages will be sold.

All set-up and clean-up will be the event sponsors' responsibility.

Approval of this event authorizes the Sponsor/User the use of City property for said special event with the understanding that they must operate and carry out the needs and functions of the event within the confines and requirements established and approved by the Special Events Committee, the B.O.C and the Sponsor's application on record.

**City of Tarpon Springs  
Application for Special Events**

**Event Information:**

Date of Application: 12/13/2022  
Name of Event: Tarpon Springs Easter Egg-stravaganza  
Date(s) of Event: Saturday, April 1st, 2023  
Alternate Date(s): \_\_\_\_\_  
Hours of Event: 10 am-1 pm  
Set up/break down time needed: 8 am-3 pm  
Type/Purpose of Event: Community Easter Event  
  
Location of Event (include map for parade/procession routes with assembly and disband points): Tarpon Springs Sports Complex

If Closure of a City Parking is needed, please check: Mother Meres  Tarpon Ave.  Orange St.  Court/Lemon   
Other: \_\_\_\_\_

Disposition of Proceeds: None, Free Event

**Applicant Information:**

Name of Organization: Tarpon Springs Recreation Division  
Registered Nonprofit Org.: Yes  No   
Organizations Address: 400 S Walton Ave. Tarpon Springs, FL 34689  
Individual to Contact: Ashley Harter (Telephone #) 727-942-5628 (email) aharter@ctsfl.us  
Alternative Contact: Jamie Taylor (Telephone #) 727-942-5628 (email) jtaylor@ctsfl.us

**General Information:**

Number of Vendors: 20(includes city departments)(Sponsor is required to keep a list of vendors, and must be able to produce upon request.)  
Location for Designated Vendor Parking (Please complete Vendor Designated Parking Form and attach to application): parking lot  
Approximate Number of Attendees: 500 Entrance Fee: \$ FREE  
Location for Attendee Parking: parking lot  
Will Private Security be Provided: Yes  No  Name of Private Company: \_\_\_\_\_  
Will the Following be Provided: Traffic Control: Yes  No  Crowd Control: Yes  No

Will Music be Provided: Yes  No  Hours of Play: 9:30 am-1 pm Band:  DJ:  Other: \_\_\_\_\_

Type & Location of Toilet Facilities: Bathrooms on site

Tent or Other Structure: Yes  No  Type of Structure: 10X10 Tents

How will Structure be Secured: Tent Weights

Solid Waste Collection/Disposal: Yes  No  Dumpster:  Rolloff:  Other: \_\_\_\_\_

If parade # of: Participants \_\_\_\_\_ Animals \_\_\_\_\_ Floats \_\_\_\_\_ Bands \_\_\_\_\_ Other \_\_\_\_\_

Amusement/Carnival Rides: Yes  No  Name of Company Providing Rides: Air fun games

Types of Rides: yard games and slides Is Diagram of Layout Attached: Yes  No

Will Food/Beverages be Served: Yes  No  Cooked on Site:  Catered:  Sold:  Given Away:

Will Alcoholic Beverages be Served: Yes  No  Type of Alcoholic Beverages: \_\_\_\_\_

*Event Sponsor is responsible to ensure that all food/alcohol vendors have all necessary licenses as required by the Department of Business and Professional Regulations, Division of Hotels & Restaurants and/or Division of Alcohol and Tobacco, Department of Health, Environmental Health Division or any other applicable State Agency.*

**Equipment/Miscellaneous (please check if needed):**

Barricades:  How many: \_\_\_\_\_

Cones:  How many: \_\_\_\_\_

Portable Stage:  Location: \_\_\_\_\_

Electricity Needed:  Where: football field, concession stand, storage units

Public Restrooms:  Hours of Opening/Closing: normal operating times

Street Banners:  Locations: \_\_\_\_\_

Additional City Trash Cans:  6 please

Directional Parking Signs:  Locations: \_\_\_\_\_

Other: \_\_\_\_\_

Is a check made payable to the City of Tarpon Springs for the Application Fee & Deposit Attached: Yes  No

If not, when will it be sent: N/A

Is the Certificate of Insurance Attached: Yes  No  If not, when will it be sent: N/A

I (we) agree that it is my (our) responsibility to cleanup after the conclusion of the special event: Yes  No

I (we) have read and completed this application and it is true and correct to the best of my (our) knowledge; I (we) have read the general instructions for this application and the City of Tarpon Springs Ordinance #88-25 and agree to conform with the provisions as set forth therein. I (we) understand that knowingly providing false information on the application shall automatically void the application and cancel the event.

Ashley Harter  
Signature of Applicant

12/13/2022  
Date