

DATE RECEIVED
PERMIT #
CUSTOMER #
(FOR ADMINISTRATIVE PURPOSES ONLY)

Town of Palm Beach | Town Clerk's Office 360 S County Rd, Palm Beach, Florida 33480 Phone: (561) 805-5416

Email: TownClerk@townofpalmbeach.com

## TEMPORARY ANIMAL PERMIT APPLICATION

NOTE: If there is any change that would alter the information given in this application while it is pending, the applicant shall notify the Town Clerk's Office within 24 hours of such change.

APPLICANT/CONTACT PERSON	NAME:					
ADDRESS:						
		CITY	STATE	ZIP		
EVENT ADDRESS:						
ZONING DISTRICT OF THE LOCA	ATION:					
EVENT DATE(S):	ESTIMATED ATTENDANCE:					
OUTLINE PROVISIONS FOR IMI	MEDIATE CLEANUP AFTER EV	VENT ON ANY PUBLIC STRE	ETS, SIDEWALKS, OR ALLEYS:			
EVENT NAME:						
PURPOSE OF EVENT:						
ORGANIZATION NAME:ORGANIZATION ADDRESS:			olicable)			
OWNER'S NAME:		DHONE/EMAIL:				
PROPOSED ANIMAL INFORMA		PHONE/EIWAIL.				
NAME:		I (AS NEEDED):	WILDLIFE CLASS DESIGNAT (per Florida Fish and Wildli Commission)	_		

No animals shall be permitted in residentially zoned areas of the Town, other than Class III wildlife as designated by the Florida Fish and Wildlife Conservation Commission or its successor organization as designated by the State of Florida and those for which a permit is not required pursuant to rule 68A-6.0022, Florida Administrative Code, as amended. Class I and Class II wildlife as designated by the Florida Fish and Wildlife Conservation Commission or its successor organization as designated by the State of Florida may be allowed on all Town owned property and all private property located within a commercial, R-D(1), R-D(2) and PUD-A zoning district provided all permit requirements have been met and a minimum setback buffer of not less than fifty (50) feet is maintained between the location of the wildlife and the nearest adjacent residentially zoned areas of the Town. [See Article 1., Section 10-10(a)(2)e

<sup>\*</sup>Please make an attachment if additional space is needed

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## **ANIMAL HANDLER INFORMATION**

Animal handler(s) must be present to handle the animal(s) for the duration of the event. Provide the following information for each animal handler that will be present. Attach additional pages providing the requested information for animal handlers if required:

HANDLER NAME:			·	
ADDRESS:				
		CITY	STATE	ZIP
PHONE:	EMAIL:			
FLORIDA FISH AND WILDLIFE	ICENSE NUMBER:			
SPECIFY THE TIMES THE ANIM	ALS WILL BE PRESENT:			
SPECIFY THE TIMES THE ANIM	ALS WILL BE ON DISPLAY:			
	INSURANC	CE INFORMATION		
NAME OF APPLICANT'S INSUR	ANCE COMPANY:			
PHONE/EMAIL:				
	0,000.00 per occurrence. There vn Code for more information o		cancenation. Please see AI	icie i.,
	plan for the property in questio be in attendance to view the a	n indicating the location of the		
the creme is taking place on pe		HECKLIST		
☐ Truthfully complete a ☐ Attach site plan ☐ Read Article I., Section added in the Descript		te of Insurance, and confirm that ttom of the proof of insurance f	at the event name, location	
Please review Chanter 10 Arti	cle I. of the Town of Palm Beach		nlication submission and co	ontact the
Town Clerk's Office at (561) 22	7-6300 with any questions. Before some string of the result of the resul	ore a permit is issued, the applic		
provisions set forth therein in	he Town Code of Ordinances rel cluding the most recently adopto Fish and Wildlife Conservation	ed rules and regulations design	ated as the Wildlife Code of	f the State of
PRINTED NAME:				

APPLICANT SIGNATURE: \_\_\_\_\_DATE: \_\_\_\_\_