



STAFF USE ONLY

Intake Date: _____

By: _____

Petition # _____

Planning & Zoning

12300 Forest Hill Blvd., Wellington, FL 33414 (561) 791-4000 PZApplications@wellingtonfl.gov

PART 1: PLANNING AND ZONING GENERAL APPLICATION

(Completed Part 1 and 2 of the Application is required)

INSTRUCTIONS:

1. Date of required pre-application meeting: _____
2. Please complete all questions on the application. If not applicable, indicate with N/A.
3. Provide required attachments as shown on the checklist (Part 2)
4. Check the appropriate type of request (Must complete Part 2 of the application specific to your request):

- | | | |
|--|--|--|
| <input type="checkbox"/> Administrative Appeal | <input type="checkbox"/> Development Order/ | <input type="checkbox"/> Site Plan/Amendment/ |
| <input type="checkbox"/> Administrative Variance | Amendment/Other | Subdivision |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Easement/Right-Of-Way | <input checked="" type="checkbox"/> Special Permit Use |
| <input type="checkbox"/> Architectural Review Board | Vacation Abandonment | <input type="checkbox"/> Unity of Title/Unity of |
| <input type="checkbox"/> Comprehensive Plan | <input type="checkbox"/> Master Plan/Amendment | Control/Release |
| Amendment | <input type="checkbox"/> Minor Site Plan Amendment | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Conditional Use/Compatibility | <input type="checkbox"/> Rezoning | <input type="checkbox"/> Zoning Text Amendment |
| Determination | | |

Multiple requests may be selected. A completed Part 2 Application for each request shall be submitted with a completed Part 1: Planning and Zoning General Application.

Application Fee: \$ \$250 (Total fee for all requests)

(Note: the application fee is an initial deposit and could be as all above applications are cost recovery.)

I. PROPERTY OWNER AND AGENT INFORMATION

Property Owner(s) of Record: Southfields Polo, LLC (Melissa Potamkin Ganzi)

Address: 3629 Aiken Road City: Wellington ST: FL Zip: 33414

Phone: (561)389-4182 Cell: _____

Email Address: _____

Applicant (if other than owner): (same)

Address: _____ City: _____ ST: _____ Zip: _____

Phone: _____ Cell: _____

Email Address: _____

Agent & Company Name: Maureen Gross/Maureen Gross, LLC

Address: 15380 Woodmar Court City: Wellington ST: FL Zip: 33414

Phone: (561)793-4181 Cell: (561)714-0887

Email Address: MaureenGrossRealtor@gmail.com

Consultants: If applicable to the request, please attach a separate list of all consultants that will provide information on this request. Include the name, address, telephone number, and fax number as well as the type of professional service provided.

Authorization or Power of Attorney must be attached if applicant is other than owner.

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VILLAGE OF WELLINGTON
PLANNING AND ZONING DEPARTMENT

II. REQUEST

A. Describe type of request:

Temporary tents, port-o-potties and generator set up for a 1-day polo tournament on November 28, 2015—the USPA International Cup Tournament 2015 at Grand Champions Polo Club

PCN--73-41-44-21-04-007-0020 will be used for spectator parking

III. PROPERTY LOCATION

A. Is the subject property located within one mile of another municipality? ☐ yes ☐ no

If 'yes' please specify: _____

B. Property Control Number (PCN): If additional PCNs, list on a separate sheet and attach to the application.

PCN: 73-41-44-21-09-000-0000

C. Total Acreage of Subject Property 30.69

D. Project Name: The USPA International Cup Polo Tournament 2015

E. Project Address: 13444 Southfields Road Wellington, FL 33414

F. General Location Description (proximity to closest major intersection in miles or fractions thereof):

Located within the Southfields Subdivision on Aiken Road; east of South Shore Blvd. and north of Lake Worth Road.

IV. LAND USE AND ZONING INFORMATION

A. Zoning Designation: AR/PUD/EOZ Future Land Use Designation: COM/REC

B. Existing Use(s) on Property: Polo Field

C. Proposed Use(s): Polo Tournament—the USPA International Cup Polo Tournament 2015

D. Do you have a Zoning Confirmation for this project? If so, please attach _____

V. COMPLIANCE

(Attach additional sheets if necessary)

A. Is property in compliance with all previous conditions of approval and/or applicable LDR requirements?

☐ yes ☐ no. If no, please explain: yes

B. Code Enforcement Case Number(s) _____

C. Report on the status of all previous conditions of approval: _____

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VILLAGE OF WELLINGTON
PLANNING AND ZONING DEPARTMENT

II. REQUEST

A. Describe type of request:

Temporary tents, port-o-potties and generator set up for a 1-day polo tournament on November 28, 2015--the USPA International Cup Tournament 2015 at Grand Champions Polo Club

PCN-73-41-44-21-04-007-0020 will be used for spectator parking

III. PROPERTY LOCATION

A. Is the subject property located within one mile of another municipality? ☐ yes ☐ no

If 'yes' please specify: _____

B. Property Control Number (PCN): If additional PCNs, list on a separate sheet and attach to the application.

PCN: 73-41-44-21-04-007-0020

C. Total Acreage of Subject Property 38.6503

D. Project Name: The USPA International Cup Polo Tournament 2015

E. Project Address: 13444 Southfields Road Wellington, FL 33414

F. General Location Description (proximity to closest major intersection in miles or fractions thereof):

Located within the Southfields Subdivision on Alken Road; east of South Shore Blvd. and north of Lake Worth Road.

IV. LAND USE AND ZONING INFORMATION

A. Zoning Designation: AR/PUD/EOZ Future Land Use Designation: COM/REC

B. Existing Use(s) on Property: Polo Field

C. Proposed Use(s): Polo Tournament--the USPA International Cup Polo Tournament 2015

D. Do you have a Zoning Confirmation for this project? If so, please attach _____

V. COMPLIANCE

(Attach additional sheets if necessary)

A. Is property in compliance with all previous conditions of approval and/or applicable LDR requirements?

☐ yes ☐ no. If no, please explain: yes

B. Code Enforcement Case Number(s) _____

C. Report on the status of all previous conditions of approval: _____

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PLANNING AND ZONING DIVISION

VI. PROJECT HISTORY

List in sequence the last five approvals starting with the most recent.

Petition Number	Request	Action	Date	Resolution/ Ordinance Number

VII. ADJACENT PROPERTIES

Adjacent Property to the:	Land Use Designation	Zoning Designation	Existing Use(s) of Property	Approved Use(s) of Property*
SUBJECT SITE	Commercial Rec	PUD/EOZD Subarea D	Grand Champions Polo Club	Grand Champions Polo Club
NORTH	Residential B	PUD/EOZD Subarea D	Residential with Equestrian Uses	Residential with Equestrian Uses
SOUTH	Residential A	EOZD Subarea C	Equestrian Stables	Equestrian Stables
EAST	Residential B	PUD/EOZD Subarea D	Residential with Equestrian Uses	Residential with Equestrian Uses
WEST	Residential B	PUD/EOZD Subarea D	Residential with Equestrian Uses	Residential with Equestrian Uses

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VILLAGE OF VILLARD
PLANNING AND ZONING DEPARTMENT

VIII. OWNER/APPLICANT ACKNOWLEDGEMENT

I/We do hereby swear/affirm that I/we am/are the owner(s) of the property referenced in this application.

I/We certify that the above statements or showings made in any paper or plans submitted herewith are true to the best of my/our knowledge and belief. Further, I/we understand that this application, attachments and fee become part of the official record of the Planning & Zoning Department of Wellington and the fee is not refundable. I/We understand that any knowingly false information given by me/us will result in the denial, revocation or administrative withdrawal of the application or permit. I/We further acknowledge that additional information may be required by Wellington in order to process this application.

I/We further consent to Wellington to publish, copy or reproduce any copyrighted document for any third party submitted as part of this application.

I/We, the aforementioned owner(s), do hereby give consent to (Agent/Representatives Name) Maureen Gross/Maureen Gross, LLC to act on my/our behalf to submit this application, all required material and documents, and attend and represent me/us at all meetings and public hearings pertaining to the request(s) and property I/we own described in the attached application. Furthermore, as owner(s) of the subject property, I/we hereby give consent to the party designated above to agree to all terms or conditions that may arise as part of the approval of this application for the proposed use.

Signature(s) of Owner(s):

Melissa Potamkin Ganzi

Print Name(s): Southfields Polo LLC/Melissa Potamkin Ganzi

NOTARY

STATE OF FL

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 8th day of OCTOBER, 2015 by

MELISSA POTAMKIN GANZI. He/She is personally known to me or has produced

as identification and did/did not take an oath.

Jeanine M. Ramirez
(Signature of Notary)

My Commission Expires: AUG. 11, 2017

JEANINE M. RAMIREZ
(Name - Must be typed, printed, or stamped)

(NOTARY'S SEAL OR STAMP)

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VILLAGE OF WELLINGTON
PLANNING AND ZONING DEPARTMENT

IX. AGENT ACKNOWLEDGEMENT

I/We do hereby swear/affirm that I/we am/are the agent(s) for the property referenced in this application.

I/We certify that the above statements or showings made in any paper or plans submitted herewith are true to the best of my/our knowledge and belief. Further, I/we understand that this application, attachments and fee become part of the official record of the Planning & Zoning Department of Wellington and the fee is not refundable. I/We understand that any knowingly false information given by me/us will result in the denial, revocation or administrative withdrawal of the application or permit. I/We further acknowledge that additional information may be required by Wellington in order to process this application.

I/We further consent to Wellington to publish, copy or reproduce any copyrighted document for any third party submitted as part of this application.

Signature(s) of Agent(s): Maureen Gross, LLC
Print Name(s): Maureen Gross/Maureen Gross, LLC

NOTARY

STATE OF FL

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 8th day of OCTOBER, 2015 by

MAUREEN GROSS. He/She is personally known to me or has produced
as identification and did/did not take an oath.

Jeanine M. Ramirez
(Signature of Notary)
JEANINE M. RAMIREZ
(Name – Must be typed, printed, or stamped)

My Commission Expires: AUG 11, 2017

(NOTARY'S SEAL OR STAMP)

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VILLAGE OF WELLINGTON
PLANNING AND ZONING DEPARTMENT

Property Detail

Parcel Control Number:	73414421090000000	Location Address:	13444 SOUTHFIELDS RD
Owners:	SOUTHFIELDS POLO LLC		
Mailing Address:	3629 AIKEN CT, WELLINGTON FL 33414 7320		
Last Sale:	Not available	Book/Page#:	/ Price: Not available
Legal Description:	GRAND CHAMPIONS POLO ALL OF PLAT		

2015 Values (Preliminary)

Improvement Value	\$83,331
Land Value	\$3,609,073
Total Market Value	\$3,692,404
Assessed Value	\$666,430
Exemption Amount	\$0
Taxable Value	\$666,430

All values are as of January 1st each year

2015 Taxes (Preliminary)

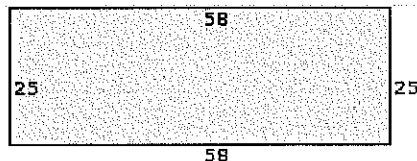
Ad Valorem	\$14,037
Non Ad Valorem	\$7,253
Total Tax	\$21,290

2015 Qualified Exemptions

No Details Found

Applicants

No Details Found

Building Footprint (Building 1)**Area 1****Subarea and Square Footage (Building 1)**

Description	Area	Sq. Footage
No Data Found.		

Extra Features

Description	Unit
PAVING- ASPHALT	3329

Unit may represent the perimeter, square footage, linear footage, total number or other measurement.

Structural Details (Building 1)

No Description

Acres 30.6894

MAP

Owner: SOUTHFIELDS POLO LLC PCN: 73414421090000000 1 of 1

Property Detail	
Parcel Control Number: 73414421040070020	Location Address: 13450 SOUTHFIELDS RD
Owners: SOUTHFIELDS POLO LLC	
Mailing Address: 3629 AIKEN CT, WELLINGTON FL 33414 7320	
Last Sale: DEC-2014	Book/Page#: 27291 / 1680 Price: \$13,250,000
Legal Description: SOUTHFIELDS PH 2 PB POLO & C C WELLINGTON COUNTRY PLACE PAR G (LESS NLY 1059.78 FT OF WLY 1266 FT)	
2015 Values (Preliminary)	2015 Taxes (Preliminary)
Improvement Value \$0	Ad Valorem \$15,468
Land Value \$5,478,680	Non Ad Valorem \$9,125
Total Market Value \$5,478,680	Total Tax \$24,593
Assessed Value \$734,356	2015 Qualified Exemptions
Exemption Amount \$0	No Details Found
Taxable Value \$734,356	Applicants
All values are as of January 1st each year	No Details Found
Building Footprint (Building 1)	Subarea and Square Footage (Building 1)
No Image Found	Description Area Sq. Footage
	No Data Found.
	Extra Features
	Description Unit
	No Extra Feature Available
Structural Details (Building 1)	Acres 38.6503
No Description	MAP

Owner: SOUTHFIELDS POLO LLC PCN: 73414421040070020 1 of 1



Planning and Zoning

12300 Forest Hill Blvd., Wellington, FL 33414 (561) 791-4000 PZApplications@wellingtonfl.gov

STAFF USE ONLY

Intake Date: _____

By: _____

Petition # _____

PART 2: SPECIAL PERMIT USE

I. SPECIAL USE CATEGORY

Check type of application(s) applying for:

- | | |
|--|---|
| <input type="checkbox"/> Accessory Dwelling | <input type="checkbox"/> Stand for the Sale of Agricultural |
| <input type="checkbox"/> Bed And Breakfast | Products |
| <input type="checkbox"/> Caretaker/Security Quarters | <input type="checkbox"/> Temporary Amusement/Special Event |
| <input type="checkbox"/> Mobile, Outdoor Retail/Food Vendor | <input type="checkbox"/> Temporary Outdoor Retail Sales |
| <input checked="" type="checkbox"/> Seasonal Equestrian Show/Special | <input checked="" type="checkbox"/> Temporary Tent |
| Event | <input type="checkbox"/> Other |

II. GENERAL SUBMITTAL CHECKLIST

PLEASE CHECK YES NO N/A

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

<input type="checkbox"/>

a. Provide five (5) copies of the following documents:

1. Completed application (Part 1 and Part 2)
2. Warranty deed including property control number or folio number and legal description of the property.
3. Signed and sealed survey (not more than one year old) including any and all easements of record (referenced by OR Book and Page) prepared by a surveyor registered in the State of Florida.
4. Certificate of Fire Proofing for tent structures.
5. Unity of Title (if applicable).

b. Application fee.

c. Electronic files (PDF, JPEG, Word) of all items on the checklist, including the application, saved with proper corresponding title.

d. Accessory dwelling occupancy required proof of elderly, physically disabled or meets the low income standards as defined in Article 3.

e. Documentation of not-for-profit status.

f. Circulation Plan including traffic control and parking plan for the special use/event.

g. Traffic statement signed and sealed by a Professional Engineer.

h. Wellington Business Tax Receipt for the current year.

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PLANNING AND ZONING

III. SITE PLAN (Five Copies)
24" x 36" with scale not smaller than 100' to an inch.

PLEASE CHECK

YES NO N/A

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

- a. Access points to the property for those attending the special use/event.
- b. Special use/event area square footage
- c. Location, setbacks, and footprint of tent or other structures.
- d. Location where permit will be posted.
- e. Location of all proposed signage.
- f. Complete event layout.

IV. EQUESTRIAN SHOW SUBMITTAL CHECKLIST

(In addition to items II. and III. For Equestrian Shows for more than four days or two events)

PLEASE CHECK

YES NO N/A

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

- a. Signed and notarized Notice Affidavit
- b. Completed Notice of Application for Special Use
- c. A list of all owners within a five hundred (500) foot radius of boundary lines of the subject property from the most recent tax roll information as provided by the Palm Beach Property Appraiser's Office
- d. Executed affidavit signed by the person responsible for completing the property owner list
- e. One (1) sets of POSTAGE PAID first class envelopes with the typed names of the owners within a five hundred (500) foot radius of the boundary lines of the subject property and Wellington's return address required..

IV. JUSTIFICATION STATEMENT
(Attach to Application)

The applicant shall provide a Justification Statement to explain how the request conforms to the following:

1. **Consistency with Wellington Comprehensive Plan**—the proposed Special Permit Use is consistent with the purposes, goals, objectives and policies of the Comprehensive Plan.
2. **Complies with supplementary use standards**—the proposed Special Permit Use complies with all relevant and appropriate portions of LDRS Section 6.4, Use Regulations & Definitions and Section 6.6 Supplementary Regulations.
3. **Compatibility with surrounding uses and zones**—the proposed Special Permit Use is consistent with the character of the immediate vicinity of the land proposed for development.

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4. **Design minimizes adverse impact**—the design of the proposed Special Permit Use minimizes adverse effects, including visual impact, of the proposed use on adjacent lands.
5. **Duration**—the length of time the proposed Special Permit Use will occur and how impacts will be minimized. (Dates and Times)
6. **Health and sanitation**—the proposed Special Permit Use complies with all relevant standards related to health and sanitation as determined by the Palm Beach County Public Health Unit.
7. **Traffic considerations**—the proposed Special Permit Use complies with all relevant transportation standards as determined by Wellington Engineering Department.
8. **Consistent with the LDRS**—the proposed Special Permit Use complies with all additional standards imposed on it by all other applicable provisions of the LDRS.
9. **Adequate public facilities**—permanent structures shall comply with Article 11, Adequate Public Facilities Standards, of the LDRS.

V. EVENT INFORMATION

A. Describe Special Use/Event Proposed: Provide the LDR Section that authorizes your request and description of the use/event. If live entertainment is proposed as a part of the use/event, provide a description of the type of entertainment and whether amplified sound will or will not be used as a part of the entertainment.

The applicant proposes to erect tents for tailgates, a VIP tent and General Admission tents for attendees of the USPA International Cup Tournament 2015.

There will be DJ music in the VIP tent. During the 1:00 and 3:00 matches, there will be a match announcer.

B. Is entertainment proposed at the event? _____ **What type of entertainment is proposed?**

Polo game. This is a charity event to benefit the Museum of Polo and Hall of Fame in Lake Worth and there will be a DJ in the VIP tent

C. If applicable, state the hours of operation for the entertainment: 1:00p.m. until 8:00p.m. on Saturday, November 28, 2015

D. Will amplified sound be used? Yes, for match announcements at the 1:00p.m. and 3:00p.m. matches

E. Provide the number of vendors anticipated for the use/event: 4-5, maybe

F. Will food be served? Yes—in the VIP tent, only **Will alcohol be served?** Yes, in the VIP tent by the caterer

G. Provide the anticipated attendance for the special use/event: 300+

H. If a horse show, number of entries each day: 2 polo teams for the 1:00p.m. match, and 2 polo teams for the 3:00p.m. match

I. Building permit number for all Special Use Permits with temporary tents greater than 10'x10':

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WILLING COUNTY
PLANNING DEPT.

VII. AGREEMENT FOR REMOVAL OF TEMPORARY FACILITY

(Applicable to all events utilizing temporary facilities such as tents, rides, bounces houses, bleachers, etc.)

Before me, the undersigned authority, personally appeared Maureen Gross/Maureen Gross, LLC, who, having first been duly sworn; deposes and says:

That he/she is the Agent of the following described land in Palm Beach County, Florida, to wit: for temporary rides, carnival, circus, revival tent, bazaar, and other temporary events:

That the undersigned was granted special permit use approval by Wellington Planning and Zoning Division on _____ to have a Temporary Facility on the above-described property for maximum period of _____ days, the dates being _____ through _____. It is understood that the undersigned agrees to the following:

- 1) The property will be self-policed during the period the permit for temporary outdoor retail sales is active and, furthermore, that said property will be returned to an orderly and sanitary condition after the expiration of said temporary permit;
- 2) Said facility is to be inspected by the area's Fire Marshall prior to the erection of the temporary facility and shall be inspected upon completion of all activities; and
- 3) No electricity shall be provided to the facility unless Wellington Building Division issues an approved Electrical Permit. It is understood that the undersigned at their volition will remove said temporary facility by the expiration date noted above.
- 4) To fulfill all conditions of approval for the special use permit.

Signature: Maureen Gross, LLC

Witness: Jeanine M. Ramirez

Witness: _____

NOTARY

STATE OF FL

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 8th day of OCTOBER, 2015

by MAUREEN GROSS. He/She is personally known to me or has produced

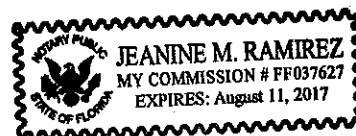
_____ as identification and did/did not take an oath.

(Signature of Notary)

My Commission Expires: AUG. 11, 2017

JEANINE M. RAMIREZ
(Name - Must be typed, printed, or stamped)

(NOTARY'S SEAL OR STAMP)



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Justification Statement

IV. ADDITIONAL INFORMATION

The following information is required as part of this application:

A. Standards for Review

Failure of the proposed special use to meet any standard below shall be deemed adverse to the public interest and the application shall not be approved. A letter verifying the decision of the Planning & Zoning Manager to approve, approve with conditions, or deny the application will be sent to the applicant. The applicant shall explain how the request is consistent with the following:

1. **Consistency with Wellington Comprehensive Plan**—the proposed Special Permit Use is consistent with the purposes, goals, objectives and policies of the Comprehensive Plan.

The proposed special event is consistent with the Village of Wellington's comprehensive plan.

2. **Complies with supplementary use standards**—the proposed Special Permit Use complies with all relevant and appropriate portions of LDRS Section 6.4, Use Regulations & Definitions and Section 6.6 Supplementary Regulations.

The temporary erection of tents, etc., shall be in accord with all regulatory set-backs.

3. **Compatibility with surrounding uses and zones**—the proposed Special Permit Use is consistent with the character of the immediate vicinity of the land proposed for development.

The proposed special event is consistent with the character of the immediate vicinity and uses of the area.

4. **Design minimizes adverse impact**—the design of the proposed Special Permit Use minimizes adverse effects, including visual impact, of the proposed use on adjacent lands.

No permanent structure shall be constructed pursuant to these permits. As well, none of the requested temporary structures shall be located within public rights of way or public easements.

5. **Duration**—the length of time the proposed Special Permit Use will occur and how impacts will be minimized.

Dates: Due to the Thanksgiving holiday, the tent set-up will be on Wednesday, November 25, 2014. The tournament will be on Saturday, November 28, 2014.

Time: Day of Tournament hours 9:00a.m. until 8:00a.m.

6. **Health and sanitation**—the proposed Special Permit Use complies with all relevant standards related to health and sanitation as determined by the Palm Beach County Public Health Unit.

The applicant will remove all trash and/or debris from the site and the immediate vicinity upon termination of the tournament.

7. **Traffic considerations**—the proposed Special Permit Use complies with all relevant transportation standards as determined by the Village of Wellington Engineering Department.

Ingress and egress will not disrupt normal traffic. All necessary parking shall be provided on site. There shall be no parking or stopping on any public right-of-way.

Two (2), or more, off-duty PBSO deputies will provide traffic control. A parking company will be hired to control traffic flow on property.

8. **Consistent with the LDRS**—the proposed Special Permit Use complies with all additional standards imposed on it by all other applicable provisions of the LDRS.

The proposed special event complies with all standards of the ULDC.

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9. **Adequate public facilities**—permanent structures shall comply with Article 11, Adequate Public Facilities Standards, of the LDRS.

No permanent structures are proposed by the applicant.

- B. **Describe Special Use/Event Proposed:** The summary shall include the LDRS Section that authorizes the Special Permit Use request, the specific requirement of the code and your proposed request. If live entertainment is proposed as a part of the use/event, provide a description of the type of entertainment and whether amplified sound will or will not be used as a part of the entertainment.

The applicant proposes to erect tents for tailgates, a VIP tent and General Admission tents for attendees of the USPA International Cup Tournament 2015.

There will be music in the VIP tent. During the 1:00 and 3:00 matches, there will be an game announcer.

- C. State the number of days and dates the use/event is expected to last: 1-day polo tournament on November 28, 2015

- D. Provide the hours of operation for the entire use/event: 9:00a.m. until 8:00p.m. on Saturday, November 28, 2015

- E. Is entertainment proposed at the event? NO What type of entertainment is proposed? Polo Game

Charity event with a DJ in the VIP tent

- F. If applicable, state the hours of operation for the entertainment: 1:00p.m. until 8:00p.m. on November 28, 2015

- G. Will amplified sound be used? yes for game announcement at the 1:00p.m. and 3:00p.m. matches

- H. Provide the number of vendors anticipated for the use/event: 4-5, maybe

- I. Will food be served? Yes---in the VIP tent, only Will alcohol be served? Yes, in the VIP tent by caterer

- J. Provide the anticipated attendance for the special use/event: 300+

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VALUED CITY OF