MOT ID#:

TAM-MOT-25090040

# MAINTENANCE OF TRAFFIC (MOT) FORM

SECTION 1: APPLICANT INFORMATION	Applicant Phone: 954-468-1541
Applicant Name: Riverwalk Fort Lauderdale	Applicant Phone: 954-468-1541 MOT APPR
Applicant Email: events@goriverwalk.com	- 11 11 11 00001
Applicant Address: 888 East Las Olas Blvd., Suite 210, Fo	ort Lauderdale, FL 33301 oss, City, State, Zip Code)
City Project Manager (if applicable)	Phone:
Agency responsible for this project: City City County	FDOT Other: Riverwalk Fort Lauderdale
On-site/Emergency Contact Phone: Matt Norse (954)99	7-0697
SECTION 2: PROJECT INFORMATION	
ENG Permit # (obtain from Department of Sustainable	Development (DSDI): Special Event
Pivervalk Annual Event	Development (555)
Project Name: Riverwalk Annual Event  Project Address: Esplanade Park - 400 SW 2nd St., Fort L	auderdale, FL 33312
Project Address: Espianade Park - 400 8 W Zhu Bu, 10 K Z	ess, City, State, Zip Code)
Specific Dates and Times Requested for MOT Imp Please identify a start date that is at least two weeks for require up to two weeks from the time that all require Begin Date: 1/1/26	rom the submittal date. The approval of an MOT application may add documents are received by TAM staff.  Begin Time: 7:00 am
End Date: 12/31/26	End Time: 10:00 pm
SECTION 3: PROJECT DETAILS	
Partial or Shoulder Closure	Daily Setup/ Breakdown ☑ YES ☐ NO
▼ Full Road Closure (detour): Under 72 Hours	Using Crane in ROW* ☐ YES  ☑ NO
☐ Sidewalk Closure: Under 72 Hours	Parking Meters Impacted* ☑ YES □ NO
☐ Full Road/Sidewalk Closure: More than 72 Hours	*Crane and parking meter mitigation must be done prior to MOT approval. Please refer to the MOT Guidelines for crane definitions.
SECTION 4: TYPE OF WORK DESCRIPTION	
<ul> <li>Describe the nature of the construction and any p</li> <li>Describe any specific safety hazards that the w</li> <li>SW 2nd St closed between SW 4th Ave and SW 5th Ave</li> </ul>	intersection. Use complete street names, including directionals. whasing plans. A separate MOT application is required for each phase. Work may produce during construction (i.e., large holes, etc.).
SW 4th Ave closed between SW 2nd St and the New River	f
Food trucks and vendors on street in parking spaces	· ·
SECTION 5: FDOT DESIGN STANDARD INDEX DRA	AWING NUMBERS/MUTCD TYPICAL APPLICATION ollowed. The indexes must include the north arrow and the names of the ness will be covered or backfilled during non-working hours.)

Office Use Only	MOT ID#:	
Office Use Only	MOI ID#:	-

# MAINTENANCE OF TRAFFIC (MOT) FORM



## SECTION 6: MOT DESCRIPTION

Please make sure to include the following in	nformation in the descrip	tion:
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- List the lanes that will be open and closed on each street and describe any necessary detours in detail. If detours are not required, please state that below.
- State if flagmen will be provided. State if the MOT will be continuous or intermittent. If intermittent, state the times of the day the MOT will be in effect. State any other special considerations related to this request. SW 2nd St will be closed between SW 4th Ave and SW 5th Ave SW 4th Ave. will be closed between SW 2nd St.and the New River SW 5th Ave will remain open MOT will be continuous between 7:00 am and 10:00 pm SECTION 7: MOT FORM CHECKLIST (Provide one copy of each attachment.) ☐ Certification(s) for Traffic Control Technician ☑ Completed Required Signatures Form or Traffic Control Supervisor must be embedded ☐ Color aerial(s)/MOT Plan with index overlay on MOT plans along with FDOT indexes/MUTCD documents ☐ County and State approvals (if required) ☑ Plan of work (optional, but preferred) ☐ Crane and Parking Mitigation (if required) ▼ FDOT Index MUTCD Reference Drawing(s) SECTION 8: ADDITIONAL COMMENTS Please Note: The approval of an MOT application may require up to two weeks from the time that all required documents in the checklist above are received by TAM staff. Any rejected MOT submittal that is corrected and sent back will be considered a new submittal, which may require up to two additional weeks to approve. Additional time may be needed for more complex plans or plans requiring additional coordination/information. In signing this application, I understand that separate City and/or County and/or State permits may be required for this project! Furthermore, (am aware that I am responsible for ensuring that the project is completed in accordance with the plans and specifications as stipulated in the permit approval condition. (PRINT/NAME/TITLE) (APPLICANT SIGNATURE) (DATE SIGNED) As a consideration for the permission granted herein, indemnify and hold harmless the City of Fort Lauderdale for any damages, claims, or injuries that may result from the MOT plan approved under the PERMIT.

City of Fort Lauderdale | Maintenance of Traffic (MOT) Form and Guidelines

(NAME OF COMPANY)

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(COMPANY AUTHORIZED AGENT)

		F
Office Use Only) MOTID#:	NG Permit#:	3
REQUIRED SIGNATUR	ES FORM	ANTERO
Applicant must collect all required signatures. To expedite processing submitted to MOT@fortlauderdale.gov separately on this page. All si before two-week review process	gnatures and comm	es may be obtained and 770 ents must be submitted A
M. From M		
Print Nama Signatur	Y	7120116
Police Department	4	112010
1300 W. Broward Boulevard  Tel: 954-828-5477  Call for Appointment		(Date) /
*Required only if MOT includes a detour for any direction of tra	avel.	
Katie Williams		****
Print Name Signature		
Mills Manage Manage Annage		7/31/25
Fire Rescue Department 528 N.W. 2nd Street   Tel: 954-828-6800		
Call for Appointment		(Date)
*Required only if MOT includes a detour for any direction of in	avel.	
Print Name Signature		
Broward County Traffic Engineering Division		
2300 W. Commercial Boulevard   Tel: 954-847-2653  Call for Appointment. Walk-ins NOT accepted.		(Date)
*Required only if MOT/detour affects Broward County road or inte	rsection.	
THE STATE OF THE S	<u> </u>	
After all applicable signatures are collected, applicant should submit		s routing form to the
Transportation and Mobility Department at mot	Wiortiauderdale.gov.	
OFFICE USE ONLY Department Directors Signature (renticated by 面	(establish required)	
Martha Parfait  Martha Par  Print Name  Signature	fait	
Print Name Signature		0/15/25
Transportation and Mobility Department		9/15/25
290 N.E. 3 <sup>rd</sup> Avenue   Tel: 954-828-4997   Email: MOT@fortlaude	1.1 84 mm	(Date)
Call for Appointment. Walk-Ins and hard capies NOT accepted	4	
	III	

A copy of the final permit and this MOT form shall be kept on site and be made available to the City inspector at all times.

Traffic modifications required for special events shall be coordinated through the Parks and Recreation's Special Events Department. Please call 954-828-4349 or email BHenry@fortlauderdale.gov.

MOT plans for City Capital Improvement Projects shall be coordinated through the City of Fort Lauderdale Public Works

Department, Please call 954-828-5772 or email raivarez@fortlauderdale.gov.

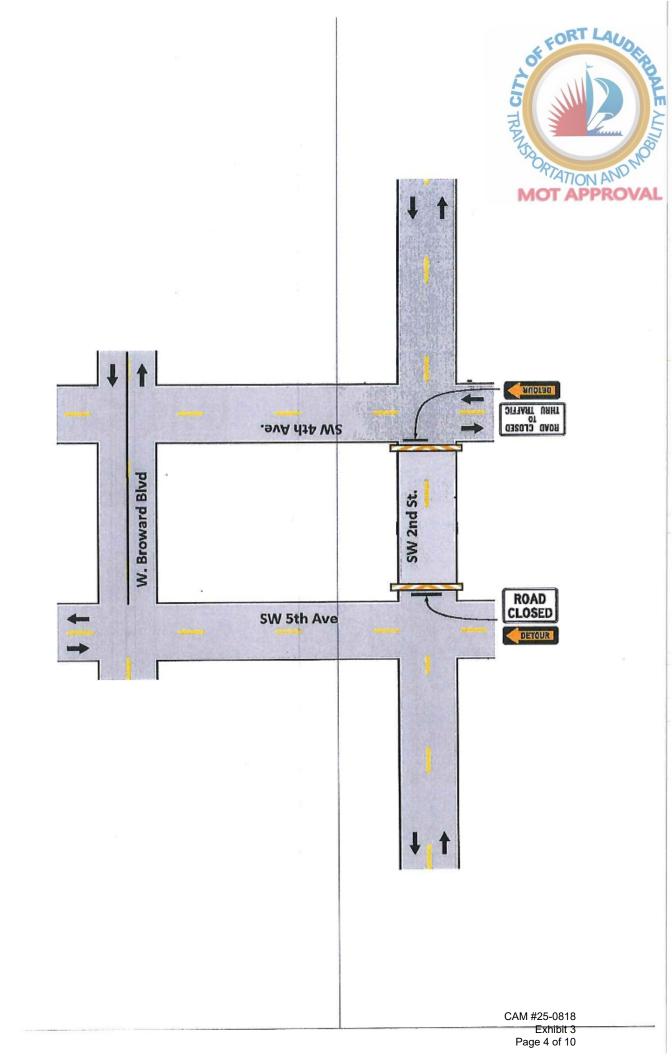
Signature
Transportation and Mobility Department

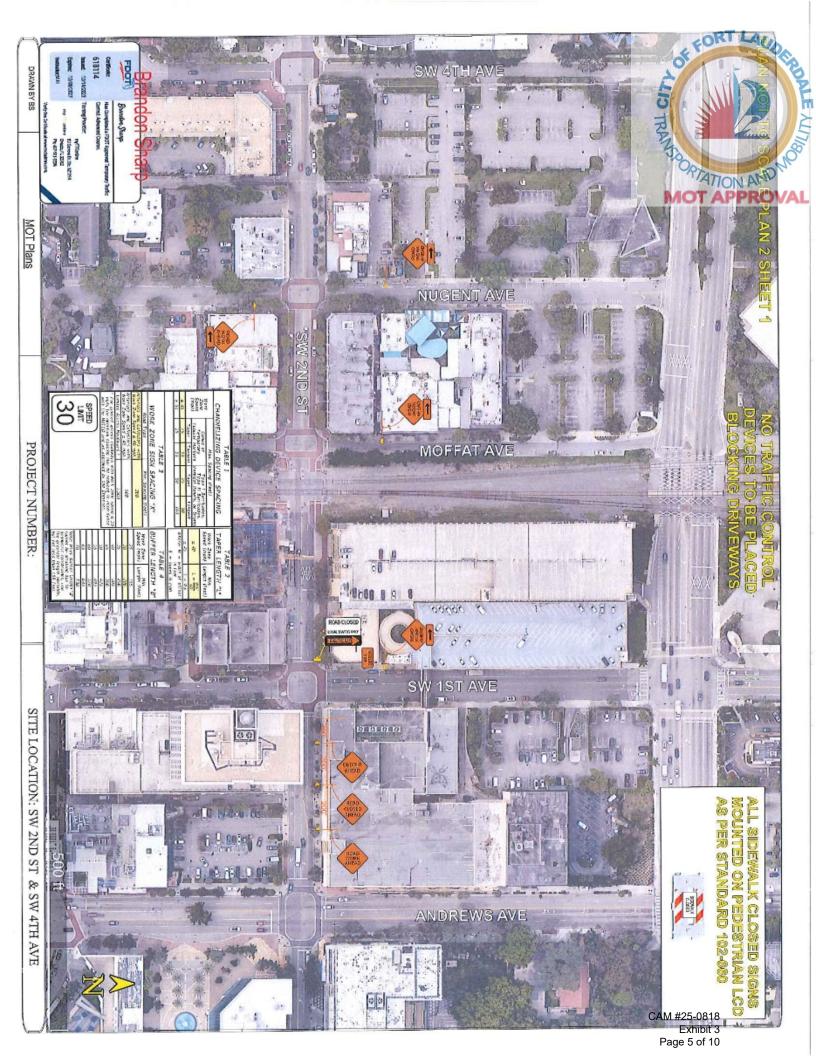
Ben Rogers, Director

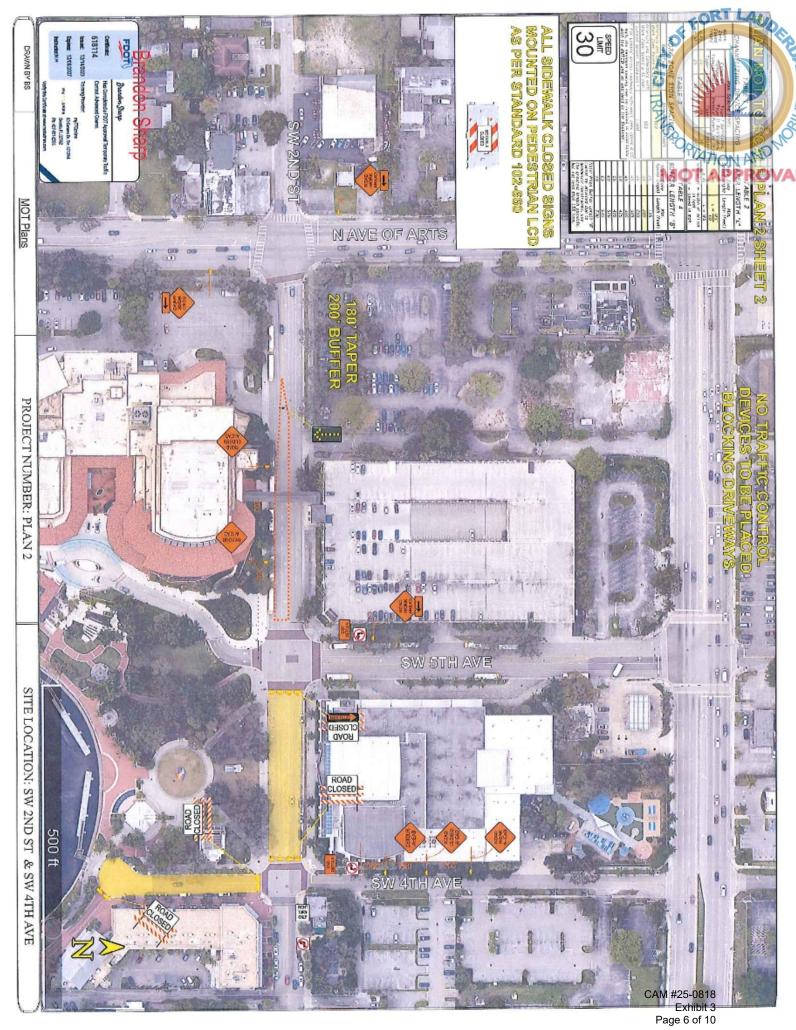
City of Fort Lauderdale | Maintenance of Traffic (MOT) Form and Guidelines

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(Date)







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Temporary Barrier Notes	Channelizing Devices Notes	Temperary Asphalt Separator	Business Entrance	Drop-Offs in Work Zones	Advanced Warning Arrow Boards	Channelizing Devices Consistency	Channelizing Devices	Signals	Truck Mounted Attenuators	Machpies/Crosswalks/Joints	Commonly Used Warning and Regulatory Signs in Work Zones	Wert Zone Sign Supports	Signs	Survey Work Zones	Flagger Control	Speed Reduction Signing	High-Misiellity Sefecy Apparel	Lane Widths	Overweight/Oversize Vehicles	Length Of Lane Closures	Superelevation	Clear Zone Widths For Work Zones	Above Ground Hezerd	Signt Distance	Railroads	Overhead Work	Temporary Traffic Control Devices	Definitions	General Notes, TTC Tables	TABLE OF CONTENTS

# GENERAL NOTES:

- 1. This Index contains information specific to the Federal and State guidelines and standards for the preparation of traffic control islans and for the execution of traffic control in work zones, for construction and maintenance operations and killing work on highways, roads and streets on the State Highway System. Certain resultenants in this Index are based on the High volume nature of State Highways. For hiphways, roads and streets off the State Highway System, the local agency (City/County) basing jurisdiction may adopt requirements based on the minimum requirements provided in the MITCD.
- 2, Use this Index in accordance with the Plans and Indexes 102-801 through 192-880, Indexes 102-801 through 192-880, Indexes 102-801 through 102-880 are Department-specific typical applications of commonly encountered situations a marker therefore as recommended by the Brotate Traffic Supervisor and approved by the Engineer. Devices include, but are not limited to, flaggers, parable temporary signals, signs, parement markings, and chancelating devices Comply with MUTCO or applicable Department criteria for any changes and document the reason for the change.
- 3. Except for emergencies, any road closure on State Highway System must comply with Section 335.15, F.S.

Work		Max.	Max. Spacing (feet	2
Speed Speed	Tubular	Markers Dorary	Type I i Type II i Vertical Pan	l Barricades Il Barricades anels, or Or
1	78087	Tangent	Taper	Tang
5.45	25	50	25	30
1 60	25	50	50	100

Work Zone Length (Feet

TABLE 2

\$ 40

SM = 7 T = MSS

Where: W = width of offs in feet S = speed in mph

oth work zone speed a 55	* For Limited access readlessys with work zone speed & 55
1,500	Limited Access Roadways "
500	Arterials and Collectors with Work Zone Speed = 45 mph
200	Arterials and Collectors with Work Zone Speed & 40 mph
Kin. Specing (feet)	Road Type
SPACING "X"	WORK ZONE SIGN SPACING "X"

		1	*		Γ.
	57	П	Spr mph with	Timit.	
Work Web	SYMBOLS:		the the	ted Access Roadways	
25	5		Naga Naga	5933	and the same
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6			35 0	iad.	1
		ш	5000	sye	ľ
		ш	ndag tu B	1	ľ
			for Limited access roadways with work zone speed & 55 work, the windows specing may be reduced to accordance with the MUTCO and as approved by the Engineer.		l
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			the duce		l
			5000 0000	,500	l
		1	200	1	ł
			0.00		l
			80 SS		ı

Lane Identification and Direction of Traffic

Channelizing Device
 Work Zone Sign
 Type III Barricade

Note: When Bu cannot be atta geometric con- the greatest i out not less to	70	65	60	55	50	45	40	35	30	25	Work Zone Speed (mph)	BUFFER LEN
luffer Length "E" lained due to nstraints, use length possible, than 155 fect.	730	645	570	495	425	360	305	250	200	155	Min. Length (feet)	LENGTH "B"

ANDARD PLAN	FY 2025-26
15	

FDOT

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10:42:48 All

2/10/2024

FDOT

Brandon Sharp

randon Sharp

NST REVISION 11/01/23

Expines: 12/08/2027

myTTOprize 81 Caneva Dr. Sta. 621394 9 Oviede, PL 32762 Ptr.487-501-9206

squedt 12/14/2023

618114

Has Completed a FBOT Approved Temporary Traffic Centrel: Advanced Course.

GENERAL INFORMATION FOR TRAFFIC CONTROL THROUGH WORK ZONES

102-600 1 of 1	TAGES NEGAT
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## Notes for Figure 6P-20—Typical Application 20 Detour for a Closed Street

#### Guidance:

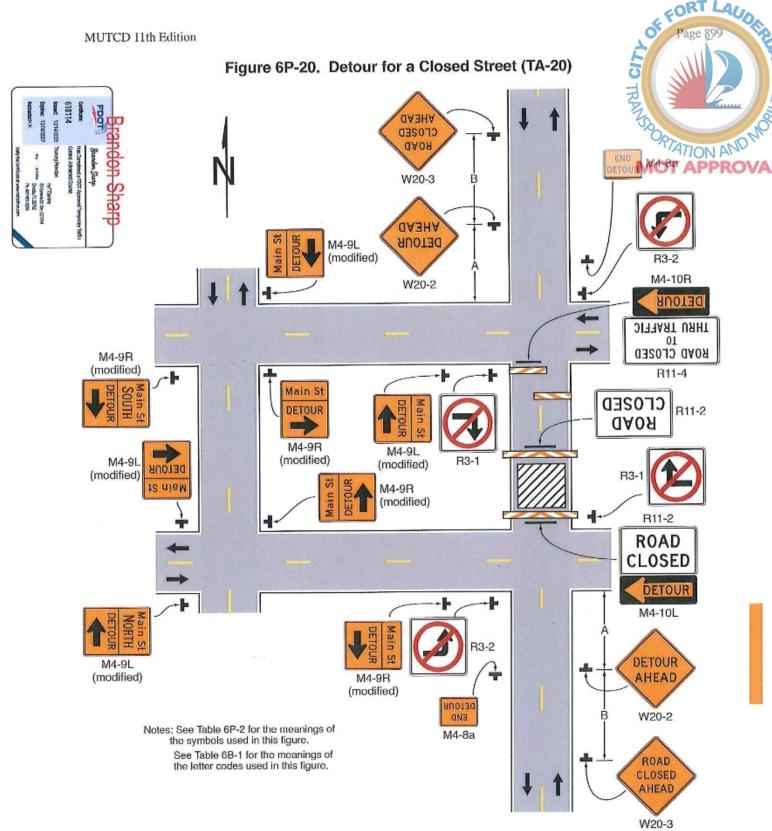
- 1. This plan should be used for streets without posted route numbers.
- 2. On multi-lane streets, Detour signs with an Advance Turn Arrow should be used in advance of a turn.
  Option:
- 3. Flashing warning lights and/or flags may be used to call attention to the advance warning signs.
- 4. Flashing warning lights may be used on Type 3 Barricades.
- Detour signs may be located on the far side of intersections. A Detour sign with an advance arrow may be used in advance of a turn.
- A Street Name sign may be mounted with the Detour sign. The Street Name sign may be either white on green or black on orange.

### Standard:

- When used, the Street Name sign shall be placed above the Detour sign.
- 8. Figure 6P-9 contains the information for detouring a numbered highway.



MUTCD 11th BO



**Typical Application 20** 

