

## CITY OF FORT LAUDERDALE **OUTDOOR EVENT APPLICATION**

\$100 Fee must accompany application

# Application must be filled out completely. In DARK ink or type, and submitted at least 90 days ahead on your planned event.

The application will be reviewed by our administrative staff to determine the following criteria:

- 1. Facility requested
- Compliance with City ordinances
   Special permits required
- 4. Charges your organization will incur when City assistance and/or services are required
- 5. Security requirements
- 6. Environmental Issues/effects on surrounding areas

Detailed event description: The Wor	ld Championships is t	the largest pro-am wal	keboard			
tournament in the world. Over 200 athletes from around the world will compete in over amateur divisions. The event is televised on NBC Sports Network and covered by Wake.						
Requested location: Mills Pond	l Park		,			
,						
•	•		_			
Estimated daily attendance: Thurs	- TIT: DOO DET (	<u>day Sat-Sun:</u> 250	0 per day			
Estimated daily attendance: Thurs	- FII: 500 per o	day Sat-Sun: 250	0 per day			
		·	0 per day			
Requested dates and time of event:	See attached sch	nedule				
Requested dates and time of event: S	See attached sch  DAY  Monday	nedule BEGIN	END			
Requested dates and time of event: :  DATE  BEGIN SETUP: 9/8/2014	See attached sch  DAY  Monday  Thursday	nedule BEGIN 8amAM/PM	END 7pm			
Requested dates and time of event: S  DATE  BEGIN SETUP: 9/8/2014  EVENT DAY 1: 9/11	See attached sch  DAY  Monday  Thursday  Friday	nedule BEGIN  8am AM/PM  8am AM/PM	<b>END</b> 7pm 7pm AM/PM			
BEGIN SETUP: 9/8/2014  EVENT DAY 1: 9/11  EVENT DAY 2: 9/12	See attached sch DAY  Monday  Thursday  Friday  Saturday	nedule BEGIN  8am AM/PM  8am AM/PM  8am AM/PM	END 7pm 7pm AM/PM 7pm AM/PM			

PART	II: APPLICANT
Organiz	ation name: World Sports and Marketing LLC
Address	: 460 N Orlando Ave Suite 200 City, State, Zip: Winter Park, FL 32789
Phone:	. 407-375-7187 Fax: <u>.407-637-3506</u>
Non-Pro	ofit Organization? Yes X No Tax ID #: 59-3754949
Corpora	tion name: World Sports and Marketing LLC (as it appears in articles of incorporation)
Date of	incorporation: State incorporated in: _FL Federal ID #; _59-3754949
	thorizing officials for the organization: nt:Phone:
	ry:Phone:
Event C	oordinator Name: Chris Bischoff Will you be on-site? X YesNo
	rector of Operations Phone: Cell: 407-375-7187
	address: chris.bischoff@bonniercorp.com Fax: 407-637-3506
Event p	roduction company (if other than applicant):
	City, State, Zip:
	person) Title:
Phone:	(day)(cell)
E-mail a	iddress: Fax;
PART	III: EVENT INFORMATION
Are you	planning to charge admission? X Yes No  If yes, how much? \$13 adult/ \$5 child 6-12
Are you	requesting to fence the event? (possibly) X YesNo
	planning on having any type of concession?
	planning on selling alcoholic beverages? (possibly) <u>x</u> YesNo yes, how will the beverages be served? (Draft truck, cold plate, mini-bar, beer tub, table service, etc.) n/a at this time
	planning on serving free alcoholic beverages?  Yes X No  If yes, to whom will it be given?

If yes, name of company:	res <u>X</u> INO
What type of rides are you planning? (All rides must be approved by the State of Florida Bure prior to opening. Contact Ron Jacobs at jacobsr@doacs	
Are you planning to play or have music?  If yes, what music format(s) will be used? (amplified, a	X_YesNo coustic, recorded, live, disc jockey, etc):
A DJ will have music going throug	hout the event.
List the type of equipment you will use (speakers, ampl	ifier, drums, etc);
Speakers	and the state of t
Will you use any type of soundproofing equipment?	
List the days and times music will be played Thuns-	Sunday: 8am-6pm
How close is the event to the nearest residential use?	500 feet
Will your event require road closings? Yes X No If yes, list requested streets and times in <b>detail</b> ;	<u> 1888 - Barrier Barrier, ann an Airstean an Airstean an Airstean ann an Airstean an Airstean an Airstean an Ai</u>
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New - and the professional states and the second states are second states are second states and the second states are se	and the second of the second o
****PLEASE NOTE***** You are required to secure barrice Please attach a layout of your traffic plan, including the place arrows, cones, and message boards, as well as the name of the be approved by the Police Dept. which may terminate any even	ement and number of barricades, signs, directiona he company you will be using. Your traffic plan musi
Will your road closings affect access to parking spaces or parking ************************************	ss of revenue from inaccessible parking spaces will
Will any recyclable materials be utilized at this event?  (Materials that can be recycled include all clean paper, cans, and milk or juice boxes.) Please refrain from the	
Who will provide clean up services for garbage and recyclables	We will work with a local dumpster provider.
	,
Contact Name:  ****PLEASE NOTE***** All grounds must be cleaned up in materials should be recycled at all City facilities and parks. Rec, a private company or in some cases by the City of Fort Lauderd services. Contact Janet Townsend at <a href="mailto:Jtownsend@fortlauderdalego">Jtownsend@fortlauderdalego</a>	ycling service may be provided by your organization, dale. You are responsible for securing recycling
Will you require electricity? <u>X</u> Yes <u>No</u> Events requiring electricity are the responsibility of the applican Building Department at (954) 828-5191 before setting up.	nt. All permits must be obtained through the City's
Company:	License #:
Name of electrician:	Phone:
3	

#### PART IV: APPLICANT'S ACCEPTANCE/SIGNATURE

The information I have provided on this application is true and complete to the best of my knowledge.

Before receiving final approval from the City Commission, I understand that I (and the production company, if applicable) must furnish an original certificate of General Liability Insurance naming the City of Fort Lauderdale as additionally insured in the amount of at least one million dollars (\$1,000,000) or greater as deemed satisfactory by the City Risk Manager, and an original certificate of liquor liability insurance in the amount of \$500,000 if alcohol is being served.

I understand that a Parks and Recreation sponsored activity has precedence over the above schedule and I will be notified if any conflicts arise.

I understand that the City of Fort Lauderdale Police Department will determine all security requirements and that EMS is required by City Ordinance to be onsite during all outdoor events.

I understand that the City has a noise ordinance. If at any time during the event it is determined by law enforcement personnel, code enforcement personnel, parks and recreation personnel, or any other city representative that the entertainment or music is causing a noise disturbance, I will be directed to lower the volume to an acceptable level as determined by City staff. If a second noise disturbance arises during the event, I may be directed to shut down the music or entertainment for the remainder of the event. I agree to abide by all provisions of the noise control ordinance and understand that my failure to do so may result in a civil citation, a physical arrest, or the shutting power of the event.

	Director of Operations
Signature of applicant	Title
2/27/14 Date	*

Please return completed application at least 90 days ahead of your planned event, along with \$100.00 application fee (payable to the City of Fort Lauderdale) and an event site plan to:

Susan Fyfe Molnar, Outdoor Event Coordinator 1350 W. Broward Boulevard, Fort Lauderdale, FL 33312

E-mail address: smolnar@fortlauderdale.gov Phone: (954) 828-5362 Fax: (954) 828-5650

EVENT APPLICATION SUBMISSION CHECKLIST:
X Completed application form
X \$100 application fee payable to the City of Fort Lauderdale
X Event Site Plan, showing:
<ul> <li>layout of event (stage(s), other types of entertainment, activities, booths, restrooms, canopies, dumpsters, fencing, generator location or other source of electricity, etc.)</li> <li>traffic plan (including the placement and number of barricades, signs, directional arrows, cones, message boards, and name of the barricade and/or directional traffic signs company being used.)</li> <li>X We are prepared to furnish our Certificate of Liability Insurance as well as our Certificate of Liquor Liability</li> </ul>
Insurance (if applicable) before submittal to the City Commission

### FIRE DEPARTMENT OUESTIONNAIRE

## PREVENTION

1.	Are you planning to have canopies (no sides) for this event? X Yes No
	How many and what sizes? 15 to 20- sizes: 10 x 10, 15 x 15, 20 x 20, 30 x 30, 40 x 40, 30 x 50
	Name of Company: Nelsons Tents and Events A building permit is required. Please contact Lt. Strandhagen at 954-828-5892.
2.	Are you planning to have tents (with sides) for this event?YesXNo
	How many and what sizes?
	Name of Company:
Bu	** <u>PLEASE NOTE</u> **** All permits required by the Florida Building Code must be obtained through the ilding Department (including but not limited to electrical, structural, plumbing). Contact the Building Department 954-828-6520.
3.	Are you planning to have fireworks?YesXNo
	Name of company conducting the show:
4.	Are you having food vendors? X Yes No
	How many and what kind? Possibly 2 to 3 food trucks
	A fire extinguisher is required for each food booth. If a propane tank is used for a fuel source, it must be secured on the outside of the booth. A Fire inspection is required for all food booths. If the inspection is during non-working hours the cost will be \$60 - \$70 per hour.
<u>OF</u>	PERATIONS/EMS
Spe	* One rescue unit/cart for 500 to 5,000 people in attendance (sustained attendance)  * Two rescue units/carts for 5,000 to 10,000 people in attendance (sustained attendance)  * One more rescue unit/cart per 5,000 additional people  * One command person if two or more rescue units/carts are required
The	e number of rescue units and paramedics is determined according to attendance and other risk factors.
1.	Does your event require EMS medical standby services based on the guidelines above? YES_X_NO
2. 1	What is your estimated sustained attendance? <u>1,250</u>
3.	On-site contact? NAME_Chris_Bischoff PHONE_407-375-7187
	ninimum of 4 hours will be charged for all special event details. 45 minutes will be added to the pre and post ent times (totaling 1.5 hours), allowing for travel and preparation for the event.

	POLICE DEPARTMENT OUESTIONNAIRE				
1.	Does your event require use of police vehicles?	Yes	No_X		
2.	Is this a new or previously held event?  NewX	Previous	<del>indiri di desimanana</del>		
	Previous date(s)?		· · · · · · · · · · · · · · · · · · ·		
3.	Any established security, traffic, or other appropriate plan(s)?	Yes_X_	No		
	If yes, besides Fort Lauderdale Police, who will you be using for (private security company, volunteers, etc.)	this plan?			
	We would like ot talk with Ft. Lauderda	ale Police	about using them		
	for overnight security.	v			
4,	Do you have an established detail of off-duty officers?  If yes, who is your Police department contact?	Yes	No <u>X</u>		
5.	Any notable entertainers or special circumstances scheduled for your	event? Yes	No_X		
	Who/What?		<del>- Marine and American States - American</del> J		
The Eve	nderstand the off duty rate for Police personnel for ALL special ever be hourly rate and costs to be incurred by the event organizer will be a costs Estimate" worksheet developed at the Special Events logist 2/27/14 pature	nts is calculated quoted on the C	ity of Ft. Lauderdale Special		
~.5	K (*)				