

CITY OF FORT LAUDERDALE **OUTDOOR EVENT APPLICATION**

\$100 Fee must accompany application

Application must be filled out completely!

Please submit by EMAIL at least 90 days ahead of your planned event.

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

- 1. Facility requested
- 2. Compliance with City ordinances
- 3. 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

Purpose of event (check one) Giveaway		☐ Awareness	□ Recreation	X□ Other	
Requested location: Park					
Estimated daily attendance: _	1,000				
Requested dates and time of D		DAY	BEGIN	Eľ	ND
EVENT DAY 1:	11 	21	5:00pm AM/		:00pm AM/PM
EVENT DAY 2:			AM/	PM	AM/PM
EVENT DAY 3:			AM/	PM	AM/PM
SETUP:			AM/	PM	
BREAKDOWN:					AM/PM
Has this event been held in th	ne past? X	YesNo)		
If yes, please list past Years	t dates and location	ons: <u>Last</u>	<u>t</u>		

Organization name: Team O Inc		
Address: 2136 N W 8 th Street F	ort Lauderdale Florida	City,
State, Zip: <u>33311</u> Phone: <u>954-584-1400</u> 1401	Fax:	<u>954-584</u>
Non-Profit Organization? X Yes _	No Tax ID #:	
Corporation name:City (Team Of Life
Inc.	(as it appears in articles of incorp	poration)
Date of incorporation:7-19-2006 8013645317C-1	State incorporated	in:Fla Federal ID #:85-
Two authorizing officials for the organiz President: <u>Essie Hill Reed</u> 1400		Phone: <u>954-584-</u>
Secretary:	Same above	Phone:
Event Coordinator: Big Mama No		Will you be on-site?X_Yes
Title: Coordinator	Phone: <u>954-584-1400</u>	Cell:
E-mail address:Fax:	bigmamahelpseverybody@yaho	oo.com
Additional Contact:	Will	you be on-site?YesNo
Title:	Phone:	Cell:
E-mail address:		Fax:
Event production company (if other tha	n applicant):	
Address:	City, State, Zi	0:
Contact person:	Title:	
Phone: (day)	_ (night)	(cell)
E-mail address:	Fa	x:
PART III: EVENT INFORMATION		
Are you planning to charge admission? If yes, how much? \$		_Yes <u>X</u> No

Are you requesting to fence the event?	YesXNo
Are you planning on having any type of concession? If yes, State Health Dept. must be notified 10 days procession.	YesX_No rior to event. Call John Litscher at 954-632-8094.
2 of 6	
Are you planning on selling alcoholic beverages? If yes, how will the beverages be served? (Draft truck,	YesX_No cold plate, mini-bar, beer tub, table service, etc.)
Are you planning on serving free alcoholic beverages? If yes, to whom will it be given?	Yes <u>X</u> No
Are you planning to have any type of amusement rides? If yes, name of company: None	Yes <u>X</u> _No
What type of rides are you planning?(All rides must be approved by the State of Florida Buprior to opening. Contact Ron Jacobs at jacobsr@doa.	
Are you planning to play or have music? If yes, what music format(s) will be used? (amplified,	No , acoustic, recorded, live, disc jockey, etc):
DJ List the type of equipment you will use (speakers, am	nplifier, drums, etc):
Speakers Will you use any type of soundproofing equipment?	Yes <u>X</u> _No
List the days and times music will be played: 5:00to8:00pm	
How close is the event to the nearest residence? Community	Right In Our
Will your event require road closings? If yes, list requested streets and times in detail :	Yes <u>X</u> No
**** <u>PLEASE NOTE</u> ***** You are required to secure barra Please attach a layout of your traffic plan, including the plan arrows, cones, and message boards, as well as the name of be approved by the Police Dept. which may terminate any ev	acement and number of barricades, signs, directiona the company you will be using. Your traffic plan mus
Will your road closings affect access to parking spaces or park *****PLEASE NOTE****** All road closings which result in be billed to the event organizer and must be paid in full before	loss 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, care milk or juice boxes.) Please refrain from the use of Styrofo	X Yes No dboard, glass, plastic drink containers, aluminum cans, and pam plates and cups.
Who will provide clean up services for garbage and recyclable Inc.	es?Team Of Life

Contact Name:	Big Mama	Phone: 954-584-	
1400	t be cleaned up immediately Recycling may be provided by y You are responsible for securi	after completion of event. Recycling should be your organization, a private company or in some ing recycling services. Contact Janet Townsend	
Will you require electricity? Events requiring electricity are the re Building Department at (954) 828-51	esponsibility of the applicant. A	All permits must be obtained through the City's	
Company:	Li	cense #:	
Name of electrician:	PI	none:	
PART IV: APPLICANT'S ACCEPT	ANCE		
The information I have provided on t	this application is true and com	plete to the best of my knowledge.	
applicable) must furnish an original oraditionally insured in the amount of	certificate of General Liability if f at least one million dollars (\$	erstand that I (and the production company, if insurance naming the City of Fort Lauderdale as 1,000,000) or greater as deemed satisfactory by nsurance in the amount of \$500,000 if alcohol is	
I understand that a Parks and Recreant notified if any conflicts arise.	ation sponsored activity has p	recedence over the above schedule and I will be	
I understand that the City of Fort La EMS is required by City Ordinance to		vill determine all security requirements and that vents.	
enforcement personnel, code enforepresentative that the entertainme volume to an acceptable level as det may be directed to shut down the m	procement personnel, parks a ent or music is causing a noi termined by City staff. If a sec nusic or entertainment for the lance and understand that my	ime during the event it is determined by law and recreation personnel, or any other city se disturbance, I will be directed to lower the cond noise disturbance arises during the event, I remainder of the event. I agree to abide by all failure to do so may result in a civil citation, a	
Essie Big Mama Reed			
CEO			
Name of applicant 11-03-12	Title		
Date			

Please <u>email</u> completed application at least 90 days ahead of your planned event to: <u>smolnar@fortlauderdale.gov</u>.

Please mail the \$100.00 application fee (payable to the City of Fort Lauderdale) to:

Susan Fyfe Molnar, Outdoor Event Coordinator

1350 W. Broward Boulevard, Fort Lauderdale, FL 33312

Phone: (954) 828-5362 Fax: (954) 828-5650

Please include the following with the application:

- * Event site plan including stage(s), other entertainment locations, activities, booths, restrooms, canopies, dumpsters, fencing, generators, etc.
- * Traffic/detour plan including the placement and number of barricades, signs, directional arrows, cones, message boards, and name of the barricade and/or traffic signs company being used.

FIRE DEPARTMENT QUESTIONNAIRE

<u>PR</u>	REVENTION
1.	Are you planning to have canopies (no sides) for this event?YesX_No
	How many and what sizes?
	Name of Company:
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?YesX_No
	Name of company conducting the show:
4.	Are you having food vendors?YesX_No
	How many and what kind? 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 \$75 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 NOX
2. \	What is your estimated sustained attendance?1000
3. <u>140</u>	On-site contact? NAMEBigmamaPHONE954-584-

A minimum of 4 hours will be charged for all special event details. 45 minutes will be added to the pre and post event times (totaling 1.5 hours), allowing for travel and preparation for the event.

	POLICE DEPARTMENT Q	JESTIONNAIRE	
1. Does you	ur event require use of police vehicles?	Yes	No <u>X</u>
	es, A Hold-Harmless Agreement must be signed and E MILLION DOLLARS must be provided.	d Liability coverage of	a <u>minimum</u> of
2. Is this a	new or previously held event?	New	Previous X
If ye	es, Previous date(s)? <u>Last Year</u>		
3. Any esta	blished security, traffic, or other appropriate plan(s)? Yes	No <u>X</u>
•	es, besides Fort Lauderdale Police, who will you be vate security company, volunteers, etc.)	using for this plan?	
	nave an established detail of off-duty officers? es, who is your Police department contact?	Yes	No <u>X</u>
. Any nota	ble entertainers or special circumstances scheduled	•	NoX
Who	o/What?		
6. Is there a	lcohol being sold or given away?	Yes	No <u>X</u>
. Are there	any road closures required?	Yes	No <u>X</u>
If so	what roads/intersections?		
	our estimated attendance? _1,000		
also underst nourly rate Events "Cos	d the off duty rate for Police personnel for ALL spe and there is a 24 hour cancellation requirement to and costs to be incurred by the event organizer of t Estimate" worksheet developed at the Special Eve s will be paid within two (2) weeks of the payroll be	avoid the 3 hour mini will be quoted on the ents logistics meeting	imum payment e City of Ft. La and provided t
	Bigmama11-03-12		
Name	Date		