## 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 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

Before receiving final approval from the City Commission, the applicant (and production company, if applicable) must furnish the City of Fort Lauderdale with an original certificate of liability insurance in the amount of at least one million dollars (\$1,000,000) or greater as deemed satisfactory by the City Risk Manager. *The insurance must name the City of Fort Lauderdale as an additional insured.* If alcohol is being served at the event, a certificate of liquor liability insurance in the amount of \$500,000 naming the City as additionally insured must also be provided.

## **PART I: EVENT RÉQUEST**

Event name: YogaFest 2013	3		_
Purpose of event: Fundraiser for Those in NeedSharing Yoga with			on – to bring Yoga and Meditation to da community
Requested location: 10S New River	Dr E, FT Laude	erdale F	L, 33301 & Huizenga Plaza
Estimated daily attendance:		300	
•	DAY <u>Sat</u>	10:00	cluding set up and tear down)  BEGIN END  AM/PM 10:00AM/PMAM/PMAM/PMAM/PMAM/PM
Set up for event will begin on:	4/20/13 Date		8am Time
Break down will be completed by:			
Will your event require road closing	js? <u>X</u> Yes		No .

If yes, list requested streets and times in <b>detail</b> :As above
****PLEASE NOTE***** You are required to secure barricades and/or directional traffigns for road closings. Please attach a layout of your traffic plan, including the placement and number of barricades, signs, directional arrows, cones, and message boards, as well as the name of the company you will be using. Your traffic plan must approved by the Police Dept. who may terminate any event taking place without the proper use of barricades.
Will your road closings affect access to parking spaces or parking lots?YesXNo
**** <u>PLEASE NOTE</u> ***** According to City policy, all road closings which result in loss of revenue from inaccessible parking spaces, will be billed to the event organizer and must be paid in full before the event will be allowed to take place. For additional deta regarding this charge, please call Keela Black at 828-3794.
Has this event been held in the past?No
If yes, please list past dates and locations: 11.11.11 & 11.12.11 International Polo Club Palm Beach and 4.22.10 Miami Beach Botanical Garden
PART II: APPLICANT
Organization name: MahaShakti Foundation Inc.  (as it appears in articles of incorporation)
Address: 610 Heron Dr.
City, State, Zip Code: <u>Delray Beach FL 33444</u>
Phone: <u>704-756-9245</u> Fax:
Non Profit Organization? <u>x</u> YesNo Tax ID #: <u>27-2753112</u>
Corporation name: same
Date of incorporation: State incorporated in: _FL
Federal ID # <u>27-2753112</u>
Two authorizing officials for the organization:  President: Keith Fox Phone: 561-703-1236
Secretary: Kelly Brookbank Phone: 704-756-9245
Event Coordinator:
Title: General manager of DTS Phone: 9544639800 (cell)
E-mail address: dtsaloon@hollsouth.not Eave

Additional contact Person:			
Title:	Phone:	Cell:	
E-mail address:		Fax:	
Event production company (if oth	er than applicant):	Jose Sąlano/Amazing	Logistics
Address:	City, State,	, Zip:	<del></del>
Contact person:	7	Title:	
Phone: (day)305-469-72	204 (night)	(cell)	
E-mail address:		(fax)	
PART III: EVENT INFORMATION	ON		
Detailed event description:			
Yoga, Meditation, Shopping, Musi	c, etc. for everyone		
Are you planning to charge admis If yes, how much? \$		_XYes	No
Are you requesting to fence the e	vent?	X_Yes	No
Are you planning on having any ty If yes, State Health Depar Call John Litscher at 954-	rtment must be notifie		X_No
Are you planning on selling alcoho If yes, how will the beverag service, etc.)	olic beverages? ges be served? (Draft		No , <u>beer tub</u> , ta
Are you planning on serving free a If yes, who will you be giv			_X_No
Are you planning to play or have i	music?	<u>X</u> Yes	No
If yes, please describ			
Are you planning to have any type If yes, name of company:			_X_No
What type of rides are you plann	nina?	<del></del>	

(All rides must be approved by the State of Florida Bureau of Fair Rides and all permits must be secured <u>prior</u> to opening. Contact Ron Jacobs at <u>jacobsr@doacs.state.fl.us</u> or(850) 488-9790).
Who will provide clean up services?:Yes, Downtowner Saloon(Company name)
Name:John ConlonPhone:9544639800*  *Note: All grounds must be cleaned up <b>immediately</b> after completion of event.
Events requiring electricity are the responsibility of the applicant. All permits must be obtained through the City's Building Department at (954) 828-5191 before setting up.
Company: _Atlantic Electric
Name of electrician: Scott Lutz Phone: 9544943702
License #:13002581
All security requirements will be determined by the City of Fort Lauderdale Police Department. EMS is required by City Ordinance to be onsite during all outdoor events.
Please attach a copy of your proposed event site plan including stage(s), other types of entertainment, activities, booths, restrooms, dumpsters, fencing, etc.
The information I have provided on this application is true and complete to the best of my knowledge. If this application is approved, I understand that I must furnish an original certificate of General Liability insurance naming the City of Fort Lauderdale as additionally insured, and an original certificate of liquor liability insurance 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.
In addition, when approval for the event is given by the City Commission, that approval is contingent upon review and approval of the event agreement by the City Attorney's Office.
Bradley Noonan
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) to:  Susan Fyfe Molnar  Outdoor Event Coordinator

1350 W. Broward Boulevard Fort Lauderdale, FL 33312

E-mail address: <a href="mailto:smolnar@fortlauderdale.gov">smolnar@fortlauderdale.gov</a> Phone: (954) 828-5362 Fax: (954) 828-5650

## **FIRE DEPARTMENT QUESTIONNAIRE**



1.	Are you planning to have canopies (no sides) for this event? X YesNo
	How many and what sizes? _2-3
	Name of Company:Robinhood rental
2.	Are you planning to have tents (have sides) for this event?YesYes
	How many and what sizes?
	Name of Company:
3.	Are you planning to have fireworks?YesXNo
	Name of company conducting the show:  A Fireworks permit is required for all pyrotechnics displays. Please contact Lt.  D'Agostino at 954-828-5884.
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 \$50 - \$60 per hour.
Spe	cial Event Detail Guidelines:
	<ul> <li>One rescue unit/cart for 500 to 5,000 people in attendance (sustained attendance)</li> <li>Two rescue units/carts for 5,000 to 10,000 plus people in attendance (sustained attendance)</li> <li>One command person if two or more rescue units/carts. One more rescue unit/cart per 5,000 additional people.</li> </ul>
The	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

3. On-site contact?  NAMEJohn ConlonPHONE_9544639800
A minimum of 4 hours will be charged for all special event details. 30 minutes will be added to the pre and post event times (totaling 1 hour), allowing for travel and preparation for the event.
POLICE DEPARTMENT QUESTIONNAIRE
1. Does your event require use of police vehicles? Yes NoX
If yes, you must provide a certificate of liability insurance that includes automobil comprehensive and collision, and worker's compensation, for damage or incidents the occur in non-police action while in our employment, in addition to the require \$1,000,000 general liability naming the City as additional insured as required for a events
2. Is this a new or previously held event? NewPreviousX
Previous date(s) 5 years
3. Any established security, traffic, or other appropriate plan(s)? Yes_XNo
If yes, besides Fort Lauderdale Police, who will you be using for this plan? (private security company, volunteers, etc.)
private & security company _
Do you have an established detail of off-duty officers? YesX No  If yes, who is your Police department contact?
Mitch Van Sant
5. Any notable entertainers or special circumstances scheduled for your event?  Yes No_X
Who/What?
I understand the off duty rate for Police personnel for ALL special events is calculated at a 3-hour minimum rate. The hourly rate and costs to be incurred by the event organizer will be quoted on the City of Ft. Lauderdale Special Events "Cost Estimate" worksheet developed at the Special Events logistics meeting and provided to the organizer.
Bradley Noonan
Signature Date

2. What is your estimated sustained attendance? \_\_\_\_\_300\_\_\_\_