

CITY OF FORT LAUDERDALE OUTDOOR EVENT APPLICATION

Fee must accompany application

Application received:
At least 60 days prior to event \$100.00
59 to 30 days prior to event \$150.00
29 to 14 days prior to event \$200.00
14 to 7 days prior to event \$250.00*
Less than 7 days prior to event \$300.00*
*Must be approved by City Manager or designee

Please submit by EMATL at least 60 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

PART I: EVENT REQUEST					
Event name: Vintage	Swing Celebration)			
Purpose of event (check	one): 🔲 Fund	draiser 🗹 Awareness	☐ Recreation	Other	
Requested location:E	splanade Park, 40	01 SW 2nd St, Fort Laud	erdale, FL 33312		
Estimated daily attendar	nce: <u>1,000 (300</u>	sustained attendance)	<u></u>		
Requested dates and tin	ne of event: DATE	DAY	BEGIN	END	
EVENT DAY 1: _	01/19/15	Monday	11:00_AM/PM	5:00AM/ PM	
EVENT DAY 2: _		·	AM/PM	AM/PM	
EVENT DAY 3: _			AM/PM	AM/PM	
SETUP: _	01/19/15	Monday	10:00AM/PM		
BREAKDOWN: _	01/19/15	Monday		6:00_AM/PM	
Has this event been held	in the past? _	Yes <u>✓</u> _No			
If yes, please lis	t past dates and I	ocations:		· · · · · · · · · · · · · · · · · · ·	
<u>Detailed</u> event descript	ion (include activi	ties, entertainment, ven	dors, etc.): South F	lorida Lindy Collective	
would like to host an eve	ent to celebrate th	e Swing Era, which may	r feature live music, sw	ving dancing performances.	
swing dancing lessons, s	swing dance & mi	usic presentations, as we	ell as items from vend	ors which represent the art	
and culture from the Swi	na Era Ma ara a	till in the planning	of according time this	avaint.	

Organization name: South Florida Lindy Co	llective
Address: 4421 SW 15th St, Suite 27	City, State, Zip: Pompano Beach, FL 33069
Phone: 786.664.7352	Fax: <u>N/A</u>
Corporation name: South Florida Lindy Coll (as i	lective Corporation t appears in articles of incorporation)
Date of incorporation: <u>09/21/2012</u> S	State incorporated in:FL Federal ID #:46-1088586
Two authorizing officials for the organization: President: <u>Christine Abrams</u>	Phone:
Vice President: Nicole Lancaster	Phone: <u>786.664.7352</u>
Event Coordinator: <u>Barbara Toriel</u>	Will you be on-site? _✓_YesNo
Title: <u>Director of Events</u> Phon	ne: <u>786.664.7352</u> Cell: <u>786.664.7352</u>
E-mail address: <u>babs@lindycollective.com</u>	Fax: <u>N/A</u>
Title: <u>Director of Public Relations</u> Phone	Will you be on-site? <u>√</u> YesNo e:786.664.7352
Event production company (if other than appl	icant):
	City, State, Zip:
	Title:
	t) (cell)
E-mail address:	Fax:
PART III: EVENT INFORMATION	
Are you planning to charge admission? If yes, how much? \$	YesNo
Are you requesting to fence the event?	Yes✓_No
Are you planning on having any type of conce If yes, State Health Dept, must be not	ssion?YesNo tified 10 days prior to event. Call John Litscher at 954-632-8094

ź	Are you planning on selling alcoholic beverages? If yes, how will the beverages be served? (Draft truck, cold plate, mini-bar, beer tub, table service, etc.) These arrangements have yet to be determined, but we reserve the right to consider it as an option.
	Are you planning on serving free alcoholic beverages? YesNo If yes, to whom will it be given? These arrangements have yet to be determined, but we reserve the
	right to consider it as an option. These beverages will only be served in accordance to what the law allows.
	Are you planning to have any type of amusement rides?Yes
	What type of rides are you planning? (All rides must be approved by the State of Florida Bureau of Fair Rides and all permits must be secured prior to opening. Contact Ron Jacobs at (850) 921-1530.
	Are you planning to play or have music? If yes, what music format(s) will be used? (amplified, acoustic, recorded, live, disc jockey, etc):
	We plan to feature amplified live music, as well as amplified recorded music with a DJ.
	List the type of equipment you will use (speakers, amplifier, drums, etc):
	We will likely use speakers, soundboard, computer, amplifier, microphones, and musical instruments.
	Will you use any type of soundproofing equipment?Yes
	List the days and times music will be played: Monday, January 19, 2015 from 10:45AM – 4:45PM
	Will your event require road closings?Yes
	****PLEASE NOTE***** You are required to secure barricades and/or directional traffic signs 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 be approved by the Police Dept. which may terminate any event occurring without the proper use of barricades.
	Will your road closings affect access to parking spaces or parking lots?Yes
1	Will any recyclable materials be utilized at this event?
1	Who will provide clean up services for garbage and recyclables? South Florida Lindy Collective
1	Contact Name: Barbara Toriel Phone: 786.664.7352 ****NOTE***** All grounds must be cleaned up immediately after completion of event. Recycling should be done at all City facilities and parks. Recycling may be provided by your organization, a private company or in some cases by the City of Fort Lauderdale. You are responsible for securing recycling services. Contact Janet Townsend
,	at <u>Itownsend@fortlauderdale.gov</u> or (954) 828-5956.

Will you require electricity? Events requiring electricity are the responsibility of the application of Sustainable Development Building Services I	licant. All permits must be obtained through the City's			
Company: To be determined	License #:			
Name of electrician:	Phone:			
PART IV: APPLICANT'S ACCEPTANCE				
The information I have provided on this application is true a	and complete to the best of my knowledge.			
Before receiving final approval from the City Commission, applicable) must furnish an original certificate of General L additionally insured in the amount of at least one million do the City Risk Manager, and an original certificate of liquor I being served.	lability insurance naming the City of Fort Lauderdale as ollars (\$1,000,000) or greater as deemed satisfactory by			
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 Depar EMS is required by City Ordinance to be onsite during all ou	tment will determine all security requirements and that itdoor events.			
I understand that the City has a noise ordinance. If at enforcement personnel, code enforcement personnel, representative that the entertainment or music is causing volume to an acceptable level as determined by City staff. may be directed to shut down the music or entertainment provisions of the noise control ordinance and understand the physical arrest, or the shutting down of the event.	parks and recreation personnel, or any other city g a noise disturbance, I will be directed to lower the If a second noise disturbance arises during the event, I for the remainder of the event, I agree to abide by all			
Barbara Toriel	Director of Events			
Name of applicant	Title			
<u>09/01/2014</u> Date				
Please <u>email</u> completed application at least 60 days ahead imeehan@fortlauderdale.gov	of your planned event to:			

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

Jeff Meehan, Outdoor Event Coordinator

1350 W. Broward Boulevard, Fort Lauderdale, FL 33312

Phone: (954) 828-6075 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

PREVENTION

1.	Are you planning to have canopies (no sides) for this event?YesNo
÷	How many and what sizes? Fifteen to Twenty 10'x10' booths
	Name of Company: <u>Vendors will provide their own equipment</u> A building permit is required. Please contact Capt. Bruce Strandhagen at 954-828-5080.
2.	Are you planning to have tents (with sides) for this event?YesNo
	How many and what sizes? One 10'x10' tent
	Name of Company: <u>To be determined</u> A building permit, exit signs, emergency lights, fire extinguishers, and "No Smoking" signs are required for tents. A fire watch at overtime rate may apply. Contact Capt. Bruce Strandhagen at 954-828-5080.
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 Department of stainable Development Building Services Division at 954-828-6520.
3.	Are you planning to have fireworks?Yes
	Name of company conducting the show:
4.	Are you having food vendors?YesNo
	How many and what kind? No more than 10 food/beverage vendors
<u>OP</u>	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. PERATIONS/EMS
Spe	ecial Event Detail Guidelines: * 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?YesYes
2. V	What is your estimated sustained attendance?300
3.	
	On-site contact? NAME Barbara Toriel PHONE 786,664,7352

	POLICE DEPARTMENT OUES	TIONNAIRE		
1. Do	es your event require use of police vehicles?	Yes	No <u>√</u>	
	If yes, A Hold-Harmless Agreement must be signed and Lia ONE MILLION DOLLARS <u>must be provided.</u>	ability coverage of a	a <u>minimum</u> of	•
2. Is	this a new or previously held event?	New <u></u> ✓	Previous	
	If yes, Previous date(s)?			
3. Ar	y established security, traffic, or other appropriate plan(s)?	Yes	No <u></u> ✓_	
	If yes, besides Fort Lauderdale Police, who will you be usin (private security company, volunteers, etc.)	g for this plan?		
4. Do	you have an established detail of off-duty officers? If yes, who is your Police department contact?	Yes	No <u> ✓</u>	
5. A n	y notable entertainers or special circumstances scheduled for	Yes	No <u>√</u>	
	Who/What?			
6. Is t	here alcohol being sold or given away?	Yes <u>√</u>	No	
7. Are	there any road closures required? If so what roads/intersections?	Yes	No	
8. Wh	at is your estimated attendance?1,000 (300 sustained atte	ndance)		
also ui hourly Events	rstand the off duty rate for Police personnel for ALL special enderstand there is a 24 hour cancellation requirement to avoid rate and costs to be incurred by the event organizer will b "Cost Estimate" worksheet developed at the Special Events ments will be paid within two (2) weeks of the payroll being s	d the 3 hour minim be quoted on the 0 logistics meeting a	num payment per c City of Ft. Lauderc	officer. The
	para Toriei 09/01/20	014		
Name	Date			