

# 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 REQUEST

Event name: **BEACH BASH 5K**

Purpose of event: **Charity Fun Run / Walk**

Requested location: **SOUTH BEACH PARK ACROSS FROM BIHIA MAR**

Estimated daily attendance: **200**

Requested dates and time of event (NOT including set up and tear down)

	DATE	DAY	BEGIN	END
EVENT DAY 1:	9/22/12	Saturday	7:00 AM	9:30 AM
EVENT DAY 2:	_____	_____	_____ AM/PM	_____ AM/PM
EVENT DAY 3:	_____	_____	_____ AM/PM	_____ AM/PM

Set up for event will begin on: **SATURDAY SEPT 22<sup>ND</sup> at 4:30 AM**

Break down will be completed by: **SATURDAY SEPT 22<sup>ND</sup> at 10:00 AM**

Will your event require road closings? **NO**

If yes, list requested streets and times in:

This is a fundraising 5K Run for the Greater Fort Lauderdale Road Runners Club

- North on the sidewalk from the Park to just north of Sunrise Blvd., and back

**\*\*\*\*PLEASE NOTE\*\*\*\*** You are required to secure barricades and/or directional traffic signage from a traffic sign rental company. A layout of your traffic plan must be attached to this application and must include 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. who may terminate any event taking place without the proper use of barricades. If you need assistance in this area you may contact Gina Rivera at (954) 828-5786.

Will your road closings affect access to parking spaces or parking lots? **No**

**\*\*\*\*PLEASE NOTE\*\*\*\*** 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 details 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:

## **PART II: APPLICANT**

Organization name: **The Greater Fort Lauderdale Road Runners Club**  
(as it appears in articles of incorporation)

Address: **PO Box 2512,**

City, State, Zip Code: **Fort Lauderdale, FL 33303-25112**

Phone: **954-245-9015** Fax: **954-786-8645**

Non Profit Organization? **Yes** Tax ID #: **85-8013231043C-2**

Corporation name: **The Greater Fort Lauderdale Road Runners Club**

Date of incorporation: **9/17/1972** State incorporated in: **FL**

Federal ID #: **59-6583560**

Two authorizing officials for the organization:

President: **Cynthia A. Raes – Barnard** Phone: **954-461-5515**

Secretary: **Ellen Bor** Phone: **954-670-9869**

Event Coordinator: **Robert A. Barnard**

Title: **Race Director** Phone: (cell) **954-245-9015**

E-mail address: **bob@gflrrc.org** Fax:

Additional contact Person: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Fax: \_\_\_\_\_

Event production company (if other than applicant): \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Contact person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (day) \_\_\_\_\_ (night) \_\_\_\_\_ (cell) \_\_\_\_\_

E-mail address: \_\_\_\_\_ (fax) \_\_\_\_\_

### PART III: EVENT INFORMATION

Detailed event description: **5K Run / Walk**

Are you planning to charge admission? **Yes**  
If yes, how much? Free to Members, \$10 to Non-members & \$15 race day

Are you requesting to fence the event? **No**

Are you planning on having any type of concession? **No**  
If yes, State Health Department must be notified 10 days prior to event.  
Call John Litscher at 954-632-8094.

Are you planning on selling alcoholic beverages? **No**  
If yes, how will the beverages be served? (Draft truck, cold plate, mini-bar, beer tub, table service, etc.) \_\_\_\_\_

Are you planning on serving free alcoholic beverages? **No**  
If yes, who will you be giving it to? \_\_\_\_\_

Are you planning to play or have music? **Yes**

If yes, please describe in detail (Amplified? Acoustic? Type?)  
Amplified & Acoustic at race site and Acoustic on the Course

Are you planning to have any type of amusement rides? **No**  
If yes, name of company: \_\_\_\_\_  
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 [jacobsr@doacs.state.fl.us](mailto:jacobsr@doacs.state.fl.us) or (850) 488-9790).

Who will provide clean up services?: **GFLRRC Volunteers**  
(Company name)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

\*Note: All grounds must be cleaned up **immediately** after completion of event.

If yes, you must provide a certificate of liability insurance that includes automobile comprehensive and collision, and worker's compensation, for damage or incidents that occur in non-police action while in our employment, in addition to the required \$1,000,000 general liability naming the City as additional insured as required for all events

2. Is this a new or previously held event?  
Previous date(s)?

**New**

Any established security, traffic, or other appropriate plan(s)? **No**

If yes, besides Fort Lauderdale Police, who will you be using for this plan?  
(private security company, volunteers, etc.)

\_\_\_\_\_  
\_\_\_\_\_

4. Do you have an established detail of off-duty officers? **No**  
If yes, who is your Police department contact?

5. Any notable entertainers or special circumstances scheduled for your event?  
**No**

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.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date 7/12/12