

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

Application must be filled out completely!

Please submit by EMAIL 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

Event name: Gla	am-A-THON Glan	Doll Strut		
Purpose of event (check	cone): □X Fund	draiser Awareness	☐ Recreation ☐ Oth	ner
Requested location:S	SW 2 Street betw	een SW 5 th Ave & SW 2	Ave. and inside Esplana	ade Park
Estimated daily attenda	nce:			
Requested dates and tir	me of event: DATE	DAY	BEGIN	END
EVENT DAY 1:	10/17/2015	Saturday	11AM/PM	3AN/PM
EVENT DAY 2:	· · · · · · · · · · · · · · · · · · ·		AM/PM	AM/PM
EVENT DAY 3:	· · · · · · · · · · · · · · · · · · ·		AM/PM	AM/PM
SETUP:	10/17/2015	Saturday		
BREAKDOWN: _	10/17/2015	Saturday		3p-5pAM/PM
Has this event been held	d in the past?	X_YesNo		÷
If yes, please lispast 4 years. Prior to the				in the same location for the
Detailed event descript	tion (include acti	vities, entertainment, ve	endors, etc <u>.):</u> Approx	dimately 50 registered
	oll Strut to raise	funding for breast cance	er patients of Broward H	lealth systems and stroll
merchandise in Esplanad	de Park for the d	ay and spectators are w	elcome to attend the ev	vent. A panel of Celebrity ted by WSVN TV and Clear
Channel Radio.	<u> </u>	- Ele artaido presentati	CITE THE CYCLE IS SUPPO	TOO DE TENTE LA CITA CICAL

Organization name: Glam-A-THON, Inc.					
Address: PO Box 189 City, State, Zip: Ft. Lauderdale, F	L 33302				
Phone: (813) 477-6111 Fax: (480) 2474519					
Corporation name: Glam-A-THON, Inc. (as it appears in articles of incorporation)					
Date of incorporation: $\underline{8/2/2010}$ State incorporated in: _	FL Federal ID #: <u>27-32655601</u>				
Two authorizing officials for the organization: President: Tammy Gail	Phone: 813-477-6111				
Treasurer: Beth Dreyfuss	Phone: (954) 600-1096				
Event Coordinator: <u>Jo Ann Smith</u> No	Will you be on-site? X Yes				
Title: Event Coordinator Phone: 954-298-	.5607 Cell: <u>954-298-5607</u>				
E-mail address: club10@aol.com	Fax:				
Additional Contact:	Will you be on-site?YesNo				
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					
Are you planning to charge admission? If yes, how much? \$ 45	X_YesNo				
Are you requesting to fence the event?	YesX_No				
Are you planning on having any type of concession? X YesNo If yes, State Health Dept. must be notified 10 days prior to event. Call John Litscher at 954-632-8094.					

PART II: APPLICANT

Are you planning on selling alcoholic beverages?YesX_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? X Yes No If yes, to whom will it be given? Over 21 with wristbands
Are you planning to have any type of amusement rides?Yes _X_NoYes _x_No
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?X_YesNo If yes, what music format(s) will be used? (amplified, acoustic, recorded, live, disc jockey, etc):
Disc Jockey
List the type of equipment you will use (speakers, amplifier, drums, etc):
speakers and amp
Will you use any type of soundproofing equipment?YesX_No
List the days and times music will be played: Saturday 10/17, 11a-3p
How close is the event to the nearest residence?
Will your event require road closings? X Yes No If yes, list requested streets and times in detail :
Same road closure as previous years
****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? X Yes No *****PLEASE NOTE***** 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. Please call Dee Paris at 828-3771.
Will any recyclable materials be utilized at this event? Yes X No (Materials that can be recycled include all clean paper, cardboard, glass, plastic drink containers, aluminum cans, and milk or juice boxes.) Please refrain from the use of Styrofoam plates and cups.
Who will provide clean up services for garbage and recyclables?
Contact Name: <u>Jo Ann Smith</u> Phone: <u>954-298-5607</u> ***** <u>NOTE</u> ***** 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 jtownsend@fortlauderdale.gov or (954) 828-5956.

	_YesXNo ility of the applicant. All permits must be obtained through the City's lding Services Division at (954) 828-5191 before setting up.
Company:	License #:
Name of electrician:	Phone:
PART IV: APPLICANT'S ACCEPTANCE	
The information I have provided on this appl	lication is true and complete to the best of my knowledge.
applicable) must furnish an original certificate additionally insured in the amount of at least	ty Commission, I understand that I (and the production company, if the of General Liability insurance naming the City of Fort Lauderdale as the one million dollars ($$1,000,000$) or greater as deemed satisfactory by icate of liquor liability insurance in the amount of $$500,000$ if alcohol is
I understand that a Parks and Recreation sp notified if any conflicts arise.	onsored activity has precedence over the above schedule and I will be
I understand that the City of Fort Lauderdal EMS is required by City Ordinance to be onsi	le Police Department will determine all security requirements and that te during all outdoor events.
enforcement personnel, code enforcement representative that the entertainment or many volume to an acceptable level as determined may be directed to shut down the music or	rdinance. If at any time during the event it is determined by law it personnel, parks and recreation personnel, or any other city nusic is causing a noise disturbance, I will be directed to lower the d by City staff. If a second noise disturbance arises during the event, I entertainment for the remainder of the event. I agree to abide by all dunderstand that my failure to do so may result in a civil citation, a event.
Tammy Gail	Glam-A-THON, President
Name of applicant	Title
<u>4/1/2015</u> Date	
Please email completed application at least of imeehan@fortlauderdale. Please mail the application fee (payable to the Jeff Meehan, Outdoor Event	.gov ne City of Fort Lauderdale) to: Coordinator

Please include the following with the application:

Phone: (954) 828-6075 Fax: (954) 828-5650

- * 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 OUESTIONNAIRE

PREVENTION

1.	Are you planning to have canopies (no sides) for this event? X YesNo
	How many and what sizes? (20-25) 10x10 canopies
	Name of Company: <u>Best Rental</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?YesXNo
	How many and what sizes?
	Name of Company:
Bui	**PLEASE NOTE**** 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?YesX_No
	Name of company conducting the show:
4.	Are you having food vendors? X YesNo
	How many and what kind? Possibly 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 \$75 per hour.
<u>OP</u>	ERATIONS/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	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? YESNOX
2. V	Vhat is your estimated sustained attendance?
3. (On-site contact? NAME Tammy Gail PHONE 813-477-6111
	ninimum of 4 hours will be charged for all special event details. 45 minutes will be added to the pre and post nt times (totaling 1.5 hours), allowing for travel and preparation for the event.

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POLICE DEPARTMENT OF	UESTIONNAIRE
1. Does your event require use of police vehicles?	Yes No_X
If yes, A Hold-Harmless Agreement must be signed and ONE 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 yes, Previous date(s)? October 18, 2014	
3. Any established security, traffic, or other appropriate plan(s)? Yes No <u>X</u>
If yes, besides Fort Lauderdale Police, who will you be (private security company, volunteers, etc.)	
Do you have an established detail of off-duty officers? If yes, who is your Police department contact?	Yes NoX
5. Any notable entertainers or special circumstances scheduled	d for your event? Yes NoX
Who/What?	
6. Is there alcohol being sold or given away?	Yes possibly No
7. Are there any road closures required?	Yes_XNo
If so what roads/intersections? Same closures as previous	ious years – SW 4 Ave, SW 3 rd Ave
8. What is your estimated attendance? 300-400	
I understand the off duty rate for Police personnel for ALL spenalso understand there is a 24 hour cancellation requirement to hourly rate and costs to be incurred by the event organizer viewents "Cost Estimate" worksheet developed at the Special Events "Cost Estimate" worksheet developed at the Special Events all payments will be paid within two (2) weeks of the payroll be	avoid the 3 hour minimum payment per officer. The will be quoted on the City of Ft. Lauderdale Special ents logistics meeting and provided to the organize
Tammy Gail	4/1/2015