



## CITY OF FORT LAUDERDALE SPECIAL EVENT APPLICATION

Submit a **COMPLETED APPLICATION**, SITE PLAN and SITE PLAN NARRATIVE by email **60 days** before your planned event. Events Planned for July or August must be submitted by **May 1<sup>st</sup>**.

After you submit the application with your fee you will be contacted to meet with the Special Events team to review:

1. Facility/Location requested
2. Compliance with City ordinances
3. Special permits required
4. Other Charges for City Services
5. Security requirements
6. Environmental issues/effects on surrounding areas

### Fee must accompany application

At least 60 days prior to event  
**\$200.00**

59 to 30 days prior to event  
**\$400.00**

Less than 30 days prior to event  
**Denied unless approved by City  
Manager or designee**

### PART I: EVENT REQUEST

Event Name **Healthcare for the Homeless - 'Thanksgiving Feast'**

Purpose of event (check one): ☐ Fundraiser ☐ Awareness ☐ Recreation ☒ Other

Expected maximum attendance 250 Expected sustained attendance \_\_\_\_\_

Has this event been held in the past? ☒ Yes ☐ No

If yes, please list past dates, locations and attendance \_\_\_\_\_

Monday, 11/23, 2015; Monday, 11/24, 2014, Monday, 11/25/2013; 1101 W. Broward Blvd., Fort Lauderdale, 33312

Detailed Description (Activities, Vendors, Entertainment, etc.)

Thanksgiving meal, music;

Location **1101 W. Broward Blvd**

Date	Time	DATE	DAY	BEGIN	END	Attendance
SETUP:			SATURDAY			
EVENT DAY 1:	11/21/16		MONDAY	11:00 am	12:00pm	
EVENT DAY 2:			SATURDAY			
EVENT DAY 3:			SATURDAY			
BREAKDOWN:			SATURDAY			

\*events scheduled for more than 3 days will be subject to special council approval

### PART II: APPLICANT

Organization Name **North Broward Hospital District**  
**8N06XXXXPXXXXXX** Phone: **(954) 527-6041**

For-Profit ☐

Non-profit ☒

Private ☐

(as registered)

Address: 1101 W. Broward Blvd City, State, Zip: Ft. Lauderdale  
Date of registration: 10/20/16 State registered in: FL Federal ID #: 85-8012646292C-5  
Email Address: panderson@browardhealth.org Fax: (954) 527-6052

**Two Authorizing Officials for the Organization**

President: Jasmin Shirley, SVP, BH CHS Phone: (954) 320-2830

Secretary: \_\_\_\_\_ Phone: \_\_\_\_\_

**Event Coordinator** Name Portia Anderson Will you be on-site? ☒ Yes ☐ No

Title: Nurse Manager Phone: (954) 527-6049 Cell: \_\_\_\_\_

E-mail address: panderson@browardhealth.org Fax: (954) 527-6052

**Additional Contact** Name Scott DiMarzo Will you be on-site? ☒ Yes ☐ No

Title: Director, Quality Phone: (954) 355-4953 Cell: \_\_\_\_\_

E-mail address: sdimarzo@browardhealth.org Fax: (954) 355-4936

**Event Production Company** (if other than applicant): \_\_\_\_\_

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

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

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

**PART III: EVENT INFORMATION**

All City permits must be obtained through the City's Department of Sustainable Development Building Services Division using the Building Permit Form - Apply and pay for the permits at least 30 days before the event. Contact the DSD Building Services Division (954) 828-5191 with any questions.

**Admission** ☐ Yes ☒ No If yes, how much? \$ \_\_\_\_\_

**Alcohol For Sale** ☐ Yes ☒ No **Alcohol For Free** ☐ Yes ☒ No  
If yes, how will the beverages be controlled and served? (Draft truck, bar tender, beer tub, etc.)

\*Provide State of Florida alcohol licenses and \$500,000 of Liquor Liability Insurance 30 days before event.

**Amusement Rides** ☐ Yes ☒ No  
If yes, name and contact of company: N/A

What type of rides are you planning? N/A

\*Florida Bureau of Fair Rides, Ron Jacobs (850) 921-1530 must be contacted 30 days before the event to schedule inspections and final approval of all vendors and rides prior to use.

**Electricity** ☐ Yes ☒ No

\* Events requiring electricity must be permitted. [eventpower@fortlauderdale.gov](mailto:eventpower@fortlauderdale.gov)

Company: \_\_\_\_\_ License #: \_\_\_\_\_

Name of electrician: \_\_\_\_\_ Phone: \_\_\_\_\_

**Entertainment**

☐ Yes ☒ No

If yes, what type of entertainment will be there? Any notable performers?

**Fencing or Barricades**

☐ Yes ☒ No

\* Include proposed fences in your Site Plan & Narrative

**Fireworks & Flame Effects**

☐ Yes ☒ No

Name & Contact of Company conducting the show: \_\_\_\_\_

\*A permit and Fire Watch is required for all pyrotechnics displays. [firemarshal@fortlauderdale.gov](mailto:firemarshal@fortlauderdale.gov)

**Food Vendors**

☐ Yes ☒ No

\* State Health Dept. Tara Palmer at (954) 397-9366 must be notified 10 days prior to event. All Food Vendors must be inspected by the Fire Rescue Department, Capt. Bruce Strandhagen at (954) 828-5080 to ensure compliance prior to serving food. 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. Inspections during non-working hours cost will cost \$75 per hour.

**Music**

☒ Yes ☐ No

If yes, what music format(s) will be used? (amplified, acoustic, recorded, live, MC, DJ, etc):

DJ

List the type of equipment you will use (speakers, amplifier, drums, etc):

Speaker,

Days and times music will be played: Monday, 11/21/2016

How close is the event to the nearest residence? Approximately 250 feet

Soundproofing equipment? ☐ Yes ☒ No

**Parking Impact**

☐ Yes ☒ No

\*All Parking Spaces that are impacted by an event will be billed to the event organizer through the Transportation & Mobility Dept. and must be paid in full before the event. [eventtam@fortlauderdale.gov](mailto:eventtam@fortlauderdale.gov)

**Road Closings**

☐ Yes ☒ No Which Roads? \_\_\_\_\_

\*Closing roads requires submitting an approved Maintenance of Traffic plan to the Special Events Director for each agency affected BEFORE the Commission will vote on it. Some Forms and instructions can be found in the Special Events manual Appendix. To expedite the process you may want to select a pre-approved MOT plan.

**Sanitation & Waste**

Will the event encourage Recycling and Sustainability?

☐ Yes ☒ No

\*The Green Checklist in the Events Manual can help. Recycling must be provided at all City events, facilities & parks.

Company Name \_\_\_\_\_ Contact \_\_\_\_\_ Phone \_\_\_\_\_

All grounds must be cleaned up **immediately** after completion of event or you will be subject to fees. You are responsible for securing recycling services.

**Security/Police**

☒ Yes ☐ No

Who is your Police contact for officers and security planning?

Name **Broward Health G4S** Phone **(954) 444-0747**

\*Security companies and their plans must be approved and you may still be required to hire City Police. See below.

Security Company \_\_\_\_\_ Contact \_\_\_\_\_ Phone \_\_\_\_\_

**Tents or Canopies** ☒ Yes ☐ No

Quantity and size of each? **1 -20x40; 1- 15x20; 6-10/10**

Company Name **Sunshine Tents & Events Rentals** Contact **Marisha Persad** Phone **(954) 374-0169**

\*A detailed Site Plan showing the locations and size of each canopy or tent is required. A permit and final inspection is required if there are multiple canopies, if they are going to be used for cooking or if there are Tents (with walls).

**Toilets** ☐ Yes ☒ No

\*All toilets must be removed within 24 hours. Portable Toilets are regulated by Broward County. They require a copy of your contract or invoice to be faxed to (954) 467-4898 to ensure compliance with minimum standards.

**Transportation Plan** ☐ Yes ☒ No

\* Any events larger than 5,000 people must have an approved Transportation Plan. [eventtam@fortlauderdale.gov](mailto:eventtam@fortlauderdale.gov)

#### **Part IV: SECURITY AND EMERGENCY SERVICES**

Your Event may require Security and Emergency Services which will be determined using this application, your Site Plan and Narrative, MOT, transportation plan and any additional information requested during your Special Events meeting. The hourly rate and costs for services will be quoted on the "Cost Estimate" worksheet developed at the meeting and provided to the organizer. The cost may change after the meeting.

If Fire Rescue or Police staff are scheduled for the event then a minimum of four (4) hours for each Fire Rescue staff and a minimum of three (3) hours for each Police staff will be charged. Fire Rescue also charges 45 minutes to set up and 45 minutes to break down for each event. If the event is canceled then an event representative must call each department at least 24 hours before the event is expected to begin or the organization will be charged.

#### **Fire Prevention and Emergency Medical Services**

Fire Rescue may need to inspect your event or provide services based on your Building Permit, expected attendance and other risk factors such as alcohol, time, day, location, event type or weather. When you complete your Building Permit Form with Department of Sustainable Development (DSD) indicate all the permits and inspections you need and immediately pay DSD directly. All other payments for services will be invoiced to the event coordinator and must be paid within thirty (30) days. For questions call the Fire Marshal at (954) 828-6370.

On-site Contact Name **Portia Anderson, Nurse Manager** Phone **527-6049**

#### **Police**

Your event may require security services based on expected attendance and other risk factors such as alcohol, time, day, location, event type or weather. Depending on your event it may be possible to supplement some of the City Police services with a private third-party security company if their security plan is approved by the City Police department. If you want to use a private security company, their proposed security plan must be presented along with their business license and contact information with this event application. The Police will review the plan and inform you if it meets City requirements.

If a Fort Lauderdale Police vehicle is required then a Hold-Harmless Agreement must be signed and Liability coverage of a minimum of one million dollars (\$1,000,000) must be provided.

## PART V: APPLICANT'S ACCEPTANCE

The information I have provided on this application is true and complete to the best of my knowledge.

If I have not submitted my application with the necessary plans, within the deadline and according to the rules outlined in the Special Events Manual it may be denied.

Before receiving final approval from the City Commission, I understand that I (and the production company, if applicable) must furnish an original certificate of General Liability insurance naming the City of Fort Lauderdale as additionally insured in the amount of at least one million dollars (\$1,000,000) or greater as deemed satisfactory by the City Risk Manager, and an original certificate of liquor liability insurance in the amount of five hundred thousand dollars (\$500,000) if alcohol is being served. Other liability insurance and fees may also be required up to thirty (30) days in advance of the event.

I understand that City of Fort Lauderdale Parks and Recreation sponsored activities have precedence over the event requested above and I will be notified if any conflicts arise.

I understand that the City of Fort Lauderdale Police department will determine all security requirements and that the City of Fort Lauderdale Fire Rescue department will determine all fire and Emergency Medical Services requirements.

I understand that any cancelations for City scheduled services must be made by phone to each department representative at least 24 hours before the scheduled event time or the organizer will be liable for any associated fees.

I understand that I may be required to provide a deposit based on historical performance or lack thereof.

I understand that the City has a noise ordinance that my event must follow. I agree to abide by all provisions of the noise control ordinance and understand that my failure to do so may result in a civil citation, a physical arrest, or the shutting down of the event. If at any time during the event it is determined by law enforcement personnel, code enforcement personnel, parks and recreation personnel, or any other city representative that the entertainment or music is causing a noise disturbance, I will be directed to lower the volume to an acceptable level as determined by City staff. If a second noise disturbance arises during the event, I may be directed to shut down the music or entertainment for the remainder of the event.

  
event coordinators signature

10/24/16  
date

## PART VI: SUBMISSION

**Email** application and plans 60 days before your planned event to: [specialevents@fortlauderdale.gov](mailto:specialevents@fortlauderdale.gov)

**Include** these plans with application for:

1. ALL events - **Event Site Plan & Narrative** – show stages, restrooms, fencing, tents etc.
2. Closed Roads - **Maintenance of Traffic Plan** – show barricades, directions, cones, etc.
3. 5000+ people - **Transportation Plan** – show transportation options for attendees.
4. Security needs – **Security Plan** – detail how event coordinator will manage security.

**Mail** application fee (payable to **City of Fort Lauderdale**) to:  
Jeff Meehan, Special Events Coordinator  
1350 W. Broward Boulevard  
Fort Lauderdale, FL 33312

**Questions ?** (954) 828-6075