

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

PART L'EVENT REQUEST	,			
Event name: <u>Walk Like M</u> Dash				
Purpose of event (check one):	X Fundralser	Awareness	€ Recreation	€ Other
Requested location: <u>Huizeng</u>	•			NA. 4
Estimated daily attendance:				
	27.5-Maria Madhanana an maranana annon	erenaan, om a mer mer mer ster var meet a feld maar verda fills die fills bild believe	••	
Requested dates and time of e	event: ATE	DAY	BEGIN	END
EVENT DAY 1: May	<u>.</u>	4 th , 2014	6;30_AM	<u>12_</u> PM
EVENT DAY 2:	enthologica, with the constraint process of the constraint and the con	aphine, all annual S. S. C. Canada S. Survey St. S. S. S. S. C. S.	AM/P	MAM/PM
EVENT DAY 3:		agentajan ngan sensenti adalah dalah kepada pendaga da 1949 da	AM/P	MAM/PM
SETUP: 2a	ım	and the second s	فقد الله المستخدمات ال	6amAM/PM
BREAKDOWN: 12n	m	Makes assumed to be der by proper to the top of the control of the	,	2pmAM/PM
Has this event been held in the	e past? X	YesNo		
If yes, please list past	dates and location	ons: <u>Same Loca</u>	tion. May 6, 2012	and April 23, 2013.
		2		
Detailed event description (in or vendors and giveaways, D.	iclude activities,	entertainment, vei		walk and run in addition to ten
	man, v nana manadorus address de després de pris est de la jeun hanga		and the same state of the same	AND THE RESIDENCE OF ANY PROPERTY OF THE PROPE
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PART II: APPLICANT	
Organization name: Mothers Against	
•	E 302 City, State, Zip: Weston, FL 33326
	Fax:
Corporation name: Mothers Agains	t Drunk Driving
	(as it appears in articles of incorporation)
Date of incorporation:	State incorporated in: Federal ID #: 94-2707273
Two authorizing officials for the organ	nization: Phone: 850-983-6773 X3
Secretary: Lista Hightower, CFO	Phone:
Event Coordinator: <u>Dave Pinsker</u>	Will you be on-site? X Yes No
Title: FL State Executive Director Cell:	Phone: <u>954-448-7880</u>
	dd.org Fax:
Management of the Section of the Sec	
Additional Contact: <u>Jennifer Mossac</u>	deghi Will you be on-site? X Yes No
Title: <u>Program Specialist</u> Cell:	Phone: 954-448-7880
E-mail address: jennifer.mossade	ghi@madd.org Fax:
Event production company (if other the	nan applicant):
Address:	City, State, Zip:
Contact person:	Title:
Phone: (day)	(night) (cell)
E-mail address:	Fax:
PARTAIGE EVENT INFORMATION	
Are you planning to charge admission If yes, how much? \$\$25_	1? <u>X</u> YesNo walker/runner. Guests are free
Are you requesting to fence the even	t? <u>Yes X</u> No

Are you planning on having any type of concession? Yes X No If yes, State Health Dept. must be notified 10 days prior to event. Call John Litscher at 954-632-8094.
Are you planning on selling alcoholic beverages? Yes X 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? Yes X No If yes, to whom will it be given?
Are you planning to have any type of amusement rides? Yes X 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 (850) 921-1530.
Are you planning to play or have music? X Yes No If yes, what music format(s) will be used? (amplified, acoustic, recorded, live, disc jockey, etc):
DJ_and_band
List the type of equipment you will use (speakers, amplifier, drums, etc): Speakers and amplifiers.
Will you use any type of soundproofing equipment? Yes X_No
List the days and times music will be played: May 4 10am-noon
How close is the event to the nearest residence? <u>Huizenga Plaza</u>
Will your event require road closings? X YesNo If yes, list requested streets and times in detail:
3 rd avenue bridge
**** <u>PLEASE NOTE</u> ***** You are required to secure barricades and/or directional traffic signs for road closing. Please attach a layout of your traffic plan, including the placement and number of barricades, signs, direction arrows, cones, and message boards, as well as the name of the company you will be using. Your traffic plan makes 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 X No *****PIEASE 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? (Materials that can be recycled include all clean paper, cardboard, glass, plastic drink containers, aluminu cans, and milk or juice boxes.) Please refrain from the use of Styrofoam plates and cups.

Who will provide clean up services for garbag	e and recyclables? <u>MADD and Five Star Events</u>
done at all City facilities and parks. Recycling	ned up immediately after completion of event. Recycling should be may be provided by your organization, a private company or in some responsible for securing recycling services. Contact Janet Townsend
	YesNo lity of the applicant. All permits must be obtained through the City's ding Services Division at (954) 828-5191 before setting up.
Company:	License #:
Name of electrician:	Phone:
	cation is true and complete to the best of my knowledge.
Before receiving final approval from the City applicable) must furnish an original certificate additionally insured in the amount of at least	y Commission, I understand that I (and the production company, if e of General Liability insurance naming the City of Fort Lauderdale as one million dollars (\$1,000,000) or greater as deemed satisfactory by tate of liquor liability insurance in the amount of \$500,000 if alcohol is
I understand that a Parks and Recreation sponotified if any conflicts arise.	onsored activity has precedence over the above schedule and I will be
I understand that the City of Fort Lauderdale EMS is required by City Ordinance to be onsite	e Police Department will determine all security requirements and that e during all outdoor events.
enforcement personnel, code enforcement representative that the entertainment or mivolume to an acceptable level as determined may be directed to shut down the music or provisions of the noise control ordinance and physical arrest, or the shutting down of the entertainment or mivolume to an acceptable level as determined may be directed to shut down the music or of the entertainment or mivolume to an acceptable level as determined may be directed to shut down the music or of provisions of the noise control ordinance and physical arrest or the shutting down of the entertainment or mivolume to an acceptable level as determined may be directed to shut down the music or of provisions of the noise control ordinance and physical arrest or the shutting down of the entertainment of t	CFO Florida State Executive Director
Name of applicant 12/11/2014 /2-/16 / 13 Date	Title

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/OUESTIONNAIRE

<u>PR</u>	<u>EVENTION</u>
1.	Are you planning to have canopies (no sides) for this event?YesNo
	How many and what sizes?
	Name of Company:
2.	Are you planning to have tents (with sides) for this event?No
	How many and what sizes?
	Name of Company: 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.
Buil	** <u>PLEASE NOTE</u> ***** All permits required by the Florida Building Code must be obtained through the Iding Department (including but not limited to electrical, structural, plumbing). Contact the Department of tainable Development Building Services Division at 954-828-6520.
3.	Are you planning to have fireworks?No
	Name of company conducting the show: A permit is required for all pyrotechnics displays. Contact Capt. Wendy D'Agostino at 954-828-5884.
4.	Are you having food vendors?YesNo
	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 \$75 per hour.
OP	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? YESNO
2. W	/hat is your estimated sustained attendance?

A minimum of 4 hours will be charged for all special event details. 45 minutes will be added to the pre and post event times (totaling 1.5 hours), allowing for travel and preparation for the event.

3. On-site contact? NAME___

PHONE

		VATE OF THE STATE	
1. Does your event require use of police vehicles?	Yes	No	
If yes, A Hold-Hamiless Agreement must be signed and Liab ONE MXLLION DOLLARS must be provided.	ility coverage o	of a <u>minimum</u> of	
2. Is this a new or previously held event?	New	Previous	
If yes, Previous date(s)?			
3. Any established security, traffic, or other appropriate plan(s)?	Yes	No	
If yes, besides Fort Lauderdale Police, who will you be using (private security company, volunteers, etc.)			
4. Do you have an established detail of off-duty officers? If yes, who is your Police department contact?	Yes	No	
5. Any notable entertainers or special circumstances scheduled for y			
Who/What?			
6. Is there alcohol being sold or given away?	Yes	No	
7. Are there any road closures required?	Yes	No	
If so what roads/intersections?	ergergeste den 1997-july - Littlesepte Laboratorion		
8. What is your estimated attendance?	· · · · · · · · · · · · · · · · · · ·		
I understand the off duty rate for Police personnel for ALL special eralso understand there is a 24 hour cancellation requirement to avoid hourly rate and costs to be incurred by the event organizer will be Events "Cost Estimate" worksheet developed at the Special Events (All payments will be paid within two (2) weeks of the payroll being s	the 3 hour mi e quoted on ti ogistics meetir	nimum payment p he City of Ft. Lau	per officer. The derdale Specia
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Name Date	markandinde måd fråd udvor ma ernörm byrigide singag ir g	and commenced an	