

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

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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

PART I: EVENT REQUEST

6. Environmental issues/effects on surrounding areas

| Event name: Mt. Olivet Sevie | enth-Day Adver | tist Church 5 | Duras a Alcahal |
|--|-------------------------|---------------------|---------------------|
| Event name: Mt. Olivet Seve Awareness Parade Purpose of event (check one): Fundral | iser Awareness | ☐ Recreation ☐ Ot | her |
| Requested location: Joseph C. | Carter Park | 1450 W.S | unrise Blud |
| Fort Lauderdale | | | |
| Estimated daily attendance: 400 | People | | |
| | • | | |
| Requested dates and time of event: DATE | DAY | BEGIN | END |
| EVENT DAY 1: February 21, | 2015 Saturday | 3:00 AM/PM | 6:00 AM PM) |
| EVENT DAY 2: | | AM/PM | AM/PM |
| EVENT DAY 3: | | AM/PM | AM/PM |
| SETUP: 2-21 15 | Saturday | 3:00 AMPM) | |
| BREAKDOWN: 2-11-15 | Saturday | | (0:00 AM (PM) |
| Has this event been held in the past? | YesNo | | |
| If yes, please list past dates and lo | ocations: Joseph (| C. Carter, | February 19, 2011 |
| February 18, 2012 | | | |
| <u>Detailed</u> event description (include activit | ies, entertainment, ven | dors, etc.): Parade | · Pouticipants Will |
| March through the Con | mounts wit | h Say "NO". | to Drugse Alcahol |
| | | | give aways of life |
| tyle Brochures. Also u | tilizing Dri | im Corps a | nd Plantation |
| figh School Step to | am. | | |
| v v | | | |

| PART II: APPLICANT |
|--|
| Organization name: Mt. Olivet Seventh-Day Adventist Church |
| Address: 649 N.W. 15th Way City, State, Zip: FT. Lauderdale, FL |
| Phone: (954) 463-4517 Fax: |
| Corporation name: Same As Above— (as it appears in articles of incorporation) |
| Date of incorporation: State incorporated in: Federal ID #: <u>85-8013569587C</u> = |
| Two authorizing officials for the organization: President: PASTOR FUCIOUS Hall Secretary: Bevery Scott Ch Clerk Phone: 954-739-5911 |
| |
| Event Coordinator: Patricia Pigby Will you be on-site? Ves No |
| Title: Health Temperance Phone: Cell: 954-245-1875 |
| E-mail address: fatriciarighy 37@ Yahoo Com Fax: |
| Additional Contact: Rosalyn Murray Will you be on-site? 1/YesNo Title: Asst Hat Director Phone: 954-791-5708 Cell: 954-812-5131 |
| E-mail address: |
| Event production company (if other than applicant): MA |
| 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? \$ |
| Are you requesting to fence the event?Yes |
| Are you planning on having any type of concession? Yes |

| Are you planning on selling alcoholic beverages? Yes 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?YesNo If yes, to whom will it be given?Yes |
| Are you planning to have any type of amusement rides? Yes No If yes, name of company: |
| What type of rides are you planning? |
| 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 will be utilizing the Stage and Sound System, that will be available for the Same day through Prior Collaboration with Joseph List the type of equipment you will use (speakers, amplifier, drums, etc): |
| Speakers, (Others unknown) C. Carley Par |
| Will you use any type of soundproofing equipment? Yes 1 No |
| List the days and times music will be played: Saturday, February 21, 2015 - 3pm-61 |
| How close is the event to the nearest residence? (MKown) |
| Will your event require road closings? If yes, list requested streets and times in detail: NW 10th Ave / 51strunk Blvd— Please See attached map 3-pm_ 4:30 pm |
| *****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?YesNo ****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? (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. |
| Nho will provide clean up services for garbage and recyclables? Church Members & Volunteers Contact Name: Patricia L. Righy Phone: 954-945-1875 |
| Phone: 954-345-1875 *****NOTE***** All grounds must be cleaned up inimediately 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 |

| Will you require electricity?YesYes | _No |
|--|---|
| Events requiring electricity are the responsibility of the appropriate the appropriate the responsibility of the appropriate the responsibility of the appropriate the responsibility of the appropriate the appropriate the responsibility of the appropriate the appropria | oplicant. All permits must be obtained through the @itv's |
| Department of Sustainable Development Building Service | s Division at (954) 828-5191 before setting up. |
| Company: W/A | License #: |
| Name of electrician: | Phone: |
| | |

PART IV: APPLICANT'S ACCEPTANCE

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

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 \$500,000 if alcohol is being served.

I 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 Department will determine all security requirements and that EMS is required by City Ordinance to be onsite during all outdoor events.

I understand that the City has a noise ordinance. 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. 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.

Name of applicant

No Vember 12, 2014

Date

Please email completed application at least 60 days ahead of your planned event to:

<u>imeehan@fortlauderdale.gov</u>

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 OUESTIONNAIRE

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| 1. | Are you planning to have canopies (no sides) for this event?Yes |
|----------------|--|
| | How many and what sizes? WH |
| | Name of Company: |
| 2. | Are you planning to have tents (with sides) for this event?Yes |
| | How many and what sizes? |
| | Name of Company: Name o |
| 44 | |
| | **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?YesNo |
| | Name of company conducting the show: |
| 4. | Are you having food vendors? Yes No |
| | How many and what kind? W/A |
| | 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>OPI</u> | ERATIONS/EMS |
| Spec | * 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. D | oes your event require EMS medical standby services based on the guidelines above? YESNO |
| | hat is your estimated sustained attendance? 400 |
| 3. O | n-site contact? NAME Patricia Rigby PHONE 954-245-1875 |
| A mir event | nimum of 4 hours will be charged for all special event details. 45 minutes will be added to the pre and post times (totaling 1.5 hours), allowing for travel and preparation for the event |

| Yes_ | No |
|-------------------|-----------------------------|
| lity coverage c | of a <u>minimum</u> of |
| New | Previous 🖊 |
| L. Feb 16, | ,2013. Feb 15,2011 |
| Yes | No_ |
| for this plan? | eam e Voluntee. |
| our event? Yes | No_/ |
| Yes | No_1 |
| Sistaur 31 m | No K Blud — - 4:30 pm |
| 1 | New |

I understand the off duty rate for Police personnel for ALL special events is calculated at a 3-hour minimum rate. I also understand there is a 24 hour cancellation requirement to avoid the 3 hour minimum payment per officer. 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. All payments will be paid within two (2) weeks of the payroll being submitted.

Patricia L. Rigby

November 12, 2014