

## 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 illed out completely. Rease submit by FMATLat 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 I: EVENT REQUEST				
Event name: William Grant & Son	ns Afternaon	Beach Party		
Purpose of event (check one):   Fundra	iser □ Awareness	S □ Recreation 10 Ot	her Private Corporate	<u>Doire</u>
Requested location: South Beach				
Estimated daily attendance: 200	guests			_
Requested dates and time of event:  DATE	DAY	BEGIN	END	
EVENT DAY 1: 2-12-15	Thursday	1:30 AMPM	4'.30_AM/EM)	
EVENT DAY 2:		AM/PM	AM/PM	
EVENT DAY 3:		AM/PM	AM/PM	
SETUP: 2-12-15	Thurs day	(АМУРМ		
BREAKDOWN: 2-12-15	Thursday			
Has this event been held in the past?	Yes <u>_X</u> No			
If yes, please list past dates and	locations:			
<b><u>Detailed</u></b> event description (include activ	ities, entertainment,	, vendors, etc <u>.):</u>		
Private Beach Party - to in	relade alosho	ol & food, tables/	Chairs, Beach gan	NES .
such as corn hole, laddy			/	
posible water sports	<u> </u>	· .	re unknown at	•
Khis Doint.	1			

PART II: APPLICANT
Organization name: Koncept Events
Address: 3400 NE 12th Avewe City, State, Zip: Oakland Park, FC 33334
Phone: 954-390-0898 Fax: 954-390-0897
Corporation name: Same (as it appears in articles of incorporation)
Date of incorporation: Nov 2007 State incorporated in: FL Federal ID #: 26-138 4974
Two authorizing officials for the organization:  President: ANGLE NEISM Phone: 954 816 0563
Secretary: Hillary Smith Phone: 954 390 0898
Event Coordinator: XMain Lad UNKINSON X Will you be on-site?Yes No
Title: Phone: Phone: Cell:
E-mail address: Fax:
Additional Contact: Hygie NUSon Will you be on-site? X YesNo
Title: OWNER Phone: 954 390 0898 Cell: 954 816 0563
E-mail address: On gie @ Konceptevents. com Fax: 954 390 0897
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?YesX_No  If yes, how much? \$
Are you requesting to fence the event?
Are you planning on having any type of concession?  Yes YNO  If yes, State Health Dept, must be potified 10 days prior to event. Call John Liteshor at 054,633,9004

Are you planning on selling alcoholic beverages?Yes
Are you planning on serving free alcoholic beverages?  If yes, to whom will it be given? All guests - of which 100% are over 21 yrs of age
Are you planning to have any type of amusement rides? Yes XNo  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?  If yes, what music format(s) will be used? (amplified, acoustic, recorded, live, disc jockey, etc):  Disc Tock and the standard Party MARKET & Complete to
Disc Jockey W/ Standard Equipment + Speakers
List the type of equipment you will use (speakers, amplifier, drums, etc):  Speakers only
Will you use any type of soundproofing equipment? Yes $X$ No
List the days and times music will be played: Feb. 12 1.339 - 4.339
How close is the event to the nearest residence?
Will your event require road closings? Yes X No  If yes, list requested streets and times in <b>detail</b> :
****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, directions 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?YesX_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?  (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: Phone: **** NOTE **** 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 Itownsend@fortlauderdale.gov or (954) 828-5956.

Will you require electricity? YesNo Events requiring electricity are the responsibility of the applicant. Department of Sustainable Development Building Services Division	
Company:	License #:
Name of electrician:	Phone:
PART IV: APPLICANT'S ACCEPTANCE	
The information I have provided on this application is true and co	omplete to the best of my knowledge.
Before receiving final approval from the City Commission, I unapplicable) must furnish an original certificate of General Liability additionally insured in the amount of at least one million dollars the City Risk Manager, and an original certificate of liquor liability being served.	y insurance naming the City of Fort Lauderdale as (\$1,000,000) or greater as deemed satisfactory by
I understand that a Parks and Recreation sponsored activity has notified if any conflicts arise.	precedence over the above schedule and I will be
I understand that the City of Fort Lauderdale Police Department EMS is required by City Ordinance to be onsite during all outdoor	t will determine all security requirements and that events.
I understand that the City has a noise ordinance. If at any enforcement personnel, code enforcement personnel, parks representative that the entertainment or music is causing a novolume to an acceptable level as determined by City staff. If a smay be directed to shut down the music or entertainment for the provisions of the noise control ordinance and understand that rephysical arrest, or the shutting down of the event.	and recreation personnel, or any other city oise disturbance, I will be directed to lower the econd noise disturbance arises during the event, I he remainder of the event. I agree to abide by all my failure to do so may result in a civil citation, a
Name of applicant Title	Owner
11-26-14 Date	

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

jmeehan@fortlauderdale.gov

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

PR	<u>EVENTION</u>
1.	Are you planning to have canopies (no sides) for this event? X YesNo
	How many and what sizes? 10 x 10 Pop-up text for DJ
	Name of Company: Tents-n-Events 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?YesX_No
	How many and what sizes?
	Name of Company:
Buil	** <u>PLEASE NOTE</u> ***** All permits required by the Florida Building Code must be obtained through the ding 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?YesYo
	Name of company conducting the show:
4.	Are you having food vendors? X Yes No
	How many and what kind? Potentially Food Trucks and/or Catering Service
	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
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 units/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. C	oes your event require EMS medical standby services based on the guidelines above? YESNOX
	hat is your estimated sustained attendance? <u>400</u>
3. C	On-site contact? NAME_ANGIE_NELSON PHONE_954-816-0563
A mi even	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.

POLICE DEPARTMENT QUEST.	IONNAIRE	
Does your event require use of police vehicles?	Yes_X_	No
If yes, A Hold-Harmless Agreement must be signed and Liab <b>ONE MILLION DOLLARS</b> <u>must be provided.</u>	ility coverage of	a <u>minimum</u> of
2. Is this a new or previously held event?	New_X_	Previous
If yes, Previous date(s)?		
3. Any established security, traffic, or other appropriate plan(s)?	Yes	No_X
If yes, besides Fort Lauderdale Police, who will you be using (private security company, volunteers, etc.)	for this plan?	
4. Do you have an established detail of off-duty officers?  If yes, who is your Police department contact?	Yes	
5. Any notable entertainers or special circumstances scheduled for yo		No_X
Who/What?		70.
5. Is there alcohol being sold or given away?	Yes $X$	No
7. Are there any road closures required?	Yes	No_X
If so what roads/intersections?		
3. What is your estimated attendance? 200		40
understand the off duty rate for Police personnel for ALL special evalso understand there is a 24 hour cancellation requirement to avoid the nourly rate and costs to be incurred by the event organizer will be exert "Cost Estimate" worksheet developed at the Special Events of the payroll being sure.	the 3 hour minim quoted on the ( gistics meeting a	ium payment p City of Ft. Laud
tame 11-2	6-14	
Name // Date	,	