

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: <u>Market days at Plaza 3</u> | 800 | | |
|--|------------------------|-----------------------------|-----------------------------|
| Purpose of event (check one): Fundrai | iser X Awareness | ☐ Recreation ☐ Otl | her |
| Requested location: 3000 N Fe | deral Hwy Fort Lauderd | ale, Florida | |
| Estimated daily attendance: | | | |
| Requested dates and time of event: DATE | DAY | BEGIN | END |
| EVENT DAY 1: <u>March</u> AM/PM | 1 | 11am_ | AM/PM4pm |
| EVENT DAY 2: | | AM/PM | AM/PM |
| EVENT DAY 3: | | AM/PM | AM/PM |
| SETUP: | | AM/PM | |
| BREAKDOWN: | | | AM/PM |
| Has this event been held in the past? _ | Yes <u>x</u> No | | |
| If yes, please list past dates and l | ocations: | | |
| | | | |
| <u>Detailed</u> event description (include activistores and wares | | dors, etc <u>.): vendor</u> | s shops and Displays of loc |
| | | | |

Organization name: <u>atwell Enterprises inc</u> Address: 3000 N Federal Hwy , Fort Lauderdale, Fl 33306 City, State, Zip: Phone: <u>954-263-0768</u> Fax: _____ Corporation name: <u>Atwell Enterprises Inc</u> (as it appears in articles of incorporation) Date of incorporation: _____ State incorporated in: _fl____ Federal ID #:_____27-0265876 Two authorizing officials for the organization: Phone: _____ President: Phone: _____ Secretary: Event Coordinator: <u>Jack Atwell</u> Will you be on-site? <u>x</u> Yes No Title: _____ Phone: 954-263-0768 _____ Cell: E-mail address: Jatwell22@gmail.com Fax: __ Additional Contact: ______ Will you be on-site? ____Yes ____No Title: ______ Phone: _____ Cell: _____ E-mail address: _____ Fax: _____ Event production company (if other than applicant): _____n/a Address: _____ City, State, Zip: _____ Contact person: Title: Phone: (day) (night) (cell) ______ Fax:_____ E-mail address: PART III: EVENT INFORMATION Are you planning to charge admission? ____Yes ___x_No If yes, how much? \$_____

PART II: APPLICANT

Are you requesting to fence the event?

___Yes <u>x</u>No

| Are you planning on having any type of concession?Yesx_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?Yesx_NoYes, 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?YesYesYes |
| Are you planning to have any type of amusement rides?Yesx_NoYesx_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 <u>prior</u> to opening. Contact Ron Jacobs at (850) 921-1530. |
| Are you planning to play or have music?YesNoYes, what music format(s) will be used? (amplified, acoustic, recorded, live, disc jockey, etc): |
| Recorded , Disc Jockey |
| List the type of equipment you will use (speakers, amplifier, drums, etc): Speakers |
| Will you use any type of soundproofing equipment?Yesx_No |
| List the days and times music will be played: |
| How close is the event to the nearest residence? |
| Will your event require road closings?YesX_No If yes, list requested streets and times in detail : |
| |
| **** <u>PLEASE NOTE</u> ***** 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?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?Yesx_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? | Atwell Enterprises inc |
|--|--|--|
| Contact Name: | Jack Atwell | Phone: 954-263-0768 |
| done at all City facilities a cases by the City of Fort | and parks. Recycling may be provided | Lely after completion of event. Recycling should be by your organization, a private company or in some ecuring recycling services. Contact Janet Townsend |
| | y are the responsibility of the applican | t. All permits must be obtained through the City's ion at (954) 828-5191 before setting up. |
| Company: | | _ License #: |
| Name of electrician: | | _ Phone: |
| PART IV: APPLICANT | 'S ACCEPTANCE | |
| Before receiving final applicable) must furnish a additionally insured in the the City Risk Manager, an being served. I understand that a Parks notified if any conflicts ari | proval from the City Commission, I of an original certificate of General Liabile amount of at least one million dollar and an original certificate of liquor liabile and Recreation sponsored activity has see. | complete to the best of my knowledge. understand that I (and the production company, if lity insurance naming the City of Fort Lauderdale as s (\$1,000,000) or greater as deemed satisfactory by ity insurance in the amount of \$500,000 if alcohol is as precedence over the above schedule and I will be not will determine all security requirements and that or events. |
| enforcement personnel, representative that the evolume to an acceptable may be directed to shut of | code enforcement personnel, parlentertainment or music is causing a level as determined by City staff. If a down the music or entertainment for ontrol ordinance and understand that | by time during the event it is determined by law as and recreation personnel, or any other city noise disturbance, I will be directed to lower the second noise disturbance arises during the event, I the remainder of the event. I agree to abide by all my failure to do so may result in a civil citation, a |
| Jack Atwell | | |
| Name of applicant | Ti | tle |
| <u>2/2/15</u> Date | | |
| | | |

Please **email** completed application at least 60 days ahead of your planned event to: **imeehan@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 QUESTIONNAIRE

PREVENTION

| 1. | Are you planning to have canopies (no sides) for this event?Yesx_No |
|------------------|---|
| | How many and what sizes? |
| | Name of Company: |
| 2. | Are you planning to have tents (with sides) for this event?Yesx_No |
| | How many and what sizes? |
| | Name of Company: |
| Bui | ** <u>PLEASE NOTE</u> ***** 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?YesxNo |
| | Name of company conducting the show: |
| 4. | Are you having food vendors? Yes x No |
| | How many and what kind? |
| 0.5 | 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> | PERATIONS/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 | e 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? YES NOx |
| 2. \ | What is your estimated sustained attendance?75 |
| 3. <u>076</u> | On-site contact? NAME_Jack Atwell PHONE_954-263- |

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.

1. Does your event require use of police vehicles? Yes No<u>x</u> If yes, A Hold-Harmless Agreement must be signed and Liability coverage of a minimum of **ONE MILLION DOLLARS** must be provided. 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 for this plan? (private security company, volunteers, etc.) 4. Do you have an established detail of off-duty officers? Yes No x If yes, who is your Police department contact? 5. Any notable entertainers or special circumstances scheduled for your event? Yes No x Who/What?____ Yes____ 6. Is there alcohol being sold or given away? No<u>x</u> 7. Are there any road closures required? Yes____ No x If so what roads/intersections? 8. What is your estimated attendance? 75 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. ____Jack Atwell _____ 2/2/15 Date Name

POLICE DEPARTMENT OUESTIONNAIRE