

CITY OF FORT LAUDERDALE **OUTDOOR EVENT APPLICATION**

\$100 Fee must accompany application

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

- Facility requested
 Compliance with City ordinances
 Special permits required
 Charges your organization will incur when City assistance and/or services are required
 Security requirements
- 6. Environmental issues/effects on surrounding areas

PART I: EVENT REQUEST
Event name: 9th Annual Duck Fist Durby
Purpose of event (check one): DFundraiser
Requested location: Esplanade Park in down-from Fort Landerdate.
Estimated daily attendance: 500 - 1000
Requested dates and time of event: CHING DAY BEGIN EVENT DAY 1: 3 28 15 SATURAL LAMPS AMPS AMPS
EVENT DAY 2:AM/PMAM/PM
EVENT DAY 3:AM/PMAM/PM SETUP:
BREAKDOWN:
If yes, please list past dates and locations:SWLE2007 - Esplande, Park
Detailed event description (include activities, entertainment, vendors, etc.): KUNDAL AUCK SACE, CASINIVAL AMULL, SOUR TOURS, VIP area, DJ ENGLAGENMENT. MINE PETING LOD, GOOD PUNTING, etc.

PART II: APPLICANT			3.2 mg/s	
Organization name: Kills IN	Distress Inc.	•		2
Address: 819 NE ab Stree			FOX Kenderd	CHE PL 333
Phone: 954 390 7654 (x 12				
Corporation name: Kids IN 1	1			
Date of incorporation: 1979	State incorporated in:	FL Fede	eral ID #: <u>59 - 19</u>	27289
Two authorizing officials for the organize President: MUK DWDMU				*
Secretary: <u>BCM BUNNS</u> , f	MIN MEMILIER Phone: 45	340·	11054	
Event Coordinator: KMW GUTAM		Will you be	on-site? X Yes	No
Title: DEV. ASSOC Skunnlehip				
E-mail address: QMYEVINS D	ar			
Additional Contact:				
Title: DV-4550 Marketing				
E-mail address: 125/1 cartaya	@ Kidine.org	F	Fax: 954.507.	5636
Event production company (if other tha	n applicant):			
Address:	City, Sta	te, Zip:		
Contact person;	Title:			
Phone: (day)	(nìght)	(cel	l)	
E-mail address:	NATURAL CONTRACTOR CON	Fax:		·
PART III: EVENT INFORMATION				
Are you planning to charge admission? If yes, how much? \$		Yes	<u>X</u> No	
Are you requesting to fence the event?		Yes	<u> </u>	
Are you planning on having any type of If yes, State Health Dept. must	concession? be notified 10 days prior to	Yes event. Call Jo	∑No ohn Litscher at 954-63	32-8094.

	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? X Yes No If yes, to whom will it be given? XYI AYI - ID CHILL
Are-you-	planning to have any type of amusement rides? Yes No
	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):
,	DJ, (possibly live - TBD)
	List the type of equipment you will use (speakers, amplifier, drums, etc):
,	speakers, amplifiers, microphones, etc.
	Will you use any type of soundproofing equipment? Yes X_No
	List the days and times music will be played: Saturday, Formany 21, 2015 1-4p
	How close is the event to the nearest residence? Not Vent close
Will you	r event require road closings? If yes, list requested streets and times in detail :
	SW anast between SW 4th Are & SW 5th Avenue
Please a arrows,	Who simple without the proper use of barricades. LEASE NOTE***** You are required to secure barricades and/or directional traffic signs for road closings, attach a layout of your traffic plan, including the placement and number of barricades, signs, directional cones, and message boards, as well as the name of the company you will be using. Your traffic plan must oved by the Police Dept. which may terminate any event occurring without the proper use of barricades.
****PI	r road closings affect access to parking spaces or parking lots? <u>\(\lambda\)</u> YesNo L EASE NOTE ***** All road closings which result in loss of revenue from inaccessible parking spaces will to the event organizer and must be paid in full before the event. Please call Keela Black at 828-3794.
_	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: Phone: Phone:

Company:	Lićense #:
Name of electrician:	Phone:
PART IV: APPLICANT'S ACCEPTA	ANCE
The Information I have provided on the	nis application is true and complete to the best of my knowledge.
applicable) must furnish an original conditionally insured in the amount of	the City Commission, I understand that I (and the production company, if ertificate of General Liability insurance naming the City of Fort Lauderdale as at least one million dollars (\$1,000,000) or greater as deemed satisfactory by a certificate of liquor liability insurance in the amount of \$500,000 if alcohol is
understand that a Parks and Recreanotified if any conflicts arise.	tion sponsored activity has precedence over the above schedule and I will be
understand that the City of Fort La EMS is required by City Ordinance to I	uderdale Police Department will determine all security requirements and that be onsite during all outdoor events.
enforcement personnel, code enfor representative that the entertainmer rolume to an acceptable level as deter may be directed to shut down the m	noise ordinance. If at any time during the event it is determined by law reement personnel, parks and recreation personnel, or any other city at or music is causing a noise disturbance, I will be directed to lower the ermined by City staff. If a second noise disturbance arises during the event, I usic or entertainment for the remainder of the event. I agree to abide by all lince and understand that my failure to do so may result in a civil citation, a

Please email completed application at least 96 days ahead of your planned event to:

jmeehan@fortlauderdale.gov

Please mail the \$100.00 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? X YesNo
	How many and what sizes? ADX AD - 2 8 x 8 or 10 x 10
	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:
Ви	** <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?YesX_No
	Name of company conducting the show:
4.	Are you having food vendors? X YesNo
	How many and what kind? 10 or 1844 - KITA Trucks
<u>OP</u>	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. 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? YES X NO
2, \	What is your estimated sustained attendance? 500 - 1,000
3.	On-site contact? NAME AWW EVENT PHONE 954. 816.2266
Αn	thinimum of 4 hours will be charged for all special event details. 45 minutes will be added to the pre and post on times (totaling 1.5 hours), allowing for travel and preparation for the event.

POLICE DEPARTMENT OUESTIG	ONNAIRE		
1. Does your event require use of police vehicles?	Yes	No_X	
If yes, A Hold-Harmless Agreement must be signed and Liabili ONE MILLION DOLLARS must be provided.	ity coverage (of a <u>minimum</u> of	
2. Is this a new or previously held event?	New	_ Previous <u>X</u>	-
If yes, Previous date(s)? SIMM 2006			
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 (private security company, volunteers, etc.)	or this plan?		4
Do you have an established detail of off-duty officers? If yes, who is your Police department contact?	Yes_X	No	
H. Patrick Houst & Soft. Frank Sc	nu66a	······································	
5. Any notable entertainers or special circumstances scheduled for you		No_ <u>X</u>	
Who/What?			
6. Is there alcohol being sold or given away?	Yes <u> </u>	. No	
7. Are there any road closures required?	Yes_X	No	اد
· · · · · · · · · · · · · · · · · · ·	•	tween SW 4	is SW5 th Ave
8. What is your estimated attendance? _500 - 1,000			
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I understand the off duty rate for Police personnel for ALL special everals also understand there is a 24 hour cancellation requirement to avoid the hourly rate and costs to be incurred by the event organizer will be Events "Cost Estimate" worksheet developed at the Special Events log All payments will be paid within two (2) weeks of the payroll being sub-	ne 3 hour mir quoted on th listics meeting	nimum payment pe e City of Ft. Laude	r officer. The erdale Special
Name (Date Date	3.14		