

## 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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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 I: EVENT REQUEST   | · · · · · · · · · · · · · · · · · · ·        | 2000-2000 Water - 10 C | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | holis wis an antigans |              |
|---|--|------------------------|---|-----------------------|--------------|
| event name: <u>FASTER SUNDAY</u>  | VINTAGE                                      | CAR &                  | ART                                     | Show                  |              |
| Purpose of event (check one): Fundraise   | er 🗆 🗚 ware                                  | eness □ R              | ecreation                               | □ Othe                |              |
| Requested location: THE PARKING   |  |                        | 3 NE                                    | 3200                  | STREET       |
| FOR WOLKAGE   |  |                        |   |                       |              |
|   | <b>フ</b> ゕゟ\                                 |                        |   |                       |              |
| Estimated daily attendance: 200 -   | <i>370</i>                                   |                        |   |                       |              |
| Developed dates and time of event"  |  |                        |   |                       |              |
| Requested dates and time of event: <b>DATE</b>  | DAY  |                        | BEGIN                                   |                       | END          |
| EVENT DAY 1: APPLIC   | 5M   |                        | 12                                      | AM/EM)                | _5 am/ed     |
| EVENT DAY 2:  |  |                        |   | AM/PM                 | AM/PM        |
| 하다는 이번 보고를 하면서 하게 생각하게 있는 것 같아요즘 사람이 하게 있습니다.<br>당시 사고를 가고 있는데 하셨다면 하는데 그 것이다. 그런 사람들은 것이 보고를 |  |                        |   | AM/PM                 | AM/PM        |
| EVENT DAY 3:  |  |                        |   | AM/PM                 |              |
| SETUR:  |  | <del></del><br>wasing  |   | AW/FW                 |              |
| BREAKDOWN:  |  |                        |   |                       | AM/PM        |
| Has this event been held in the past?   | <u>/_</u> Yes                                | No                     |   |                       |              |
| If yes, please list past dates and le   | ocations:                                    | SEPT 22                | 20                                      | 14 , SA               | me warrion   |
| : 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10   |  |                        |   |                       |              |
| Detailed event description (include activi  | ties entertai                                | nment, vend            | ors, etc <u>.)</u>                      | · VINTA               | ACE CARS AND |
| SWOULS ON DISPLAY, AS   | 1-16-16.                                     | as Loc                 | AL AL                                   | T 1300                | MS AND A     |
| SET U FOR DONATION  | c fa-  | n.6 SI                 | IRCR                                    | IOFR 9                | FOUNDATION.  |
| SET UP FOR VONATION   | <u>)                                    </u> |                        |   | را الأدم              | W. LOTT AR   |
| WE HOUS CIKE TO KO  | T OST  | nor                    | Int                                     |                       |              |
| dish to the made  | LOT 6  | we c                   | 13 T                                    | 111-1-                |              |

| PART II: APPLICANT  |  |
|---|--|
| Organization name: 4:30 BOARDINON BAR   |  |
| Address: 3343 NE 32 " STREET City, St   | tate, Zp: FORT LANOTE ONE FL   |
| Phone: 727 4667149 Fax:   | 33306  |
| Corporation name: FABER BROTNENS LLC  |  |
| (as it appears in articles of in  | corporation)   |
| Date of incorporation: $3/3$ State incorporated in: $F$   | L Federal ID #: 46-2043299   |
| Two authorizing officials for the organization:  President: DAVID FABER Phone: 72                                     | 274667149  |
| Secretary: MANL FABER Phone: 7  | 24 724 9978  |
| Event Coordinator: Davin FABER  | Will you be on-site? <b>X</b> Yes No   |
| Title: <u>OW VER</u> Phone: 727466714   | The state of the |
| E-mail address: DFABER7126MALL.Com  | Fax:   |
| Additional Contact: MANY FABEL  | Will you be on-site? <u></u> Yes <u>No</u>   |
| Title: C3-6WNER Phone: 727 224 99   | こしゃださい 動 野 受力 アン・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・   |
| E-mail address: MFABEL & BENRPHM. Com   | Fax:   |
| 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?  If yes, how much? \$   | YesX_No  |
| Are you requesting to fence the event?  | Yes _ <b>/</b> _No   |
| Are you planning on having any type of concession?  If yes, State Health Dept. must be notified 10 days prior to ever | Yes  |

| Are you planning on selling alcoholic be<br>If yes, how will the beverages be   | everages?<br>e served? (Draft truck,  | Yes cold plate, mini-ba  | No beer tub, table ser  | vice, etc.)  |
|---|---|--|---|--|
| Are you planning on serving free alcohol  If yes, to whom will it be given  | olic beverages?<br>?  | Yes  | _ <b>X</b> _No  |  |
| Are you planning to have any type of ar If yes, name of company:  | musement rides?   | Yes  | X_No  | -  |
| What type of rides are you plan (All rides must be approved by to opening Contact Roy 1   | the State of Florida Bu   | ireau of Fair Rides a  | nd all permits must   | he secured   |
| prior to opening. Contact Ron Ja<br>Are you planning to play or have music?<br>If yes, what music format(s) wil   | acons at (000) 921-15   | 30.  |   |  |
| List the type of equipment you v  | will use (speakers, am  | plifier, drums, etc):  |   |  |
| Will you use any type of soundp   |   | Yes  | No  |  |
| List the days and times music wi<br>How close is the event to the ne<br>Will your event require road closings?  | earest residence?   | X Yes  | No  |  |
| If yes, list requested streets and 32 No ST Fum 12, n   | l times in <b>detail</b> : <u>イ</u><br>ハ ー ちゃれ、70   |  | ET UP AS O  | e of ur  |
| LAST EVENT  |   |  |   |  |
| **** PLEASE NOTE***** You are req<br>Please attach a layout of your traffic plants, as<br>arrows, cones, and message boards, as<br>be approved by the Police Dept. which m<br>Will your road closings affect access to plants<br>**** PLEASE NOTE**** All road close<br>be billed to the event organizer and must | quired to secure barric<br>plan, including the pla<br>well as the name of t<br>may terminate any eve<br>parking spaces or park<br>painas which result in la | rades and/or direction dir | onal traffic signs for or of barricades, sign will be using. Your tratt the proper use of the processible parking inaccessible parking. | road closir<br>ns, directio<br>ffic plan m<br>arricades. |
| Will any recyclable materials be utilized a<br>(Materials that can be recycled in<br>cans, and milk or juice boxes.) Pl   | at this event?<br>nclude all clean paper.   | Yes<br>cardboard. glass. n   | ∠No<br>lastic drink containe  |  |
| Who will provide clean up services for ga   | rbage and recyclables   | ? OWNER<br>Phone: 727  |   |  |
| Contact Name: Dov 10 FM1  *****NOTE***** All grounds must be a  |   |  | 111 - 110   |  |

| <u>-</u> . | Will you require electricity?  Events requiring electricity are the responsibility of the applicant. All permits mus Department of Sustainable Development Building Services Division at (954) 828-5   | t be obtained through the City's<br>191 before setting up.  |
|------------|--|---|
| ٠          | Company: License #:  |   |
|            | Name of electrician: Phone:  |   |
| 3          | PART IV: APPLICANT'S ACCEPTANCE  |   |
|            | The information I have provided on this application is true and complete to the be   | st of my knowledge.   |
|            | Before receiving final approval from the City Commission, I understand that I applicable) must furnish an original certificate of General Liability insurance nami additionally insured in the amount of at least one million dollars (\$1,000,000) or the City Risk Manager, and an original certificate of liquor liability insurance in the being served.   | ng the City of Fort Lauderdale as<br>creater as deemed satisfactory by  |
|            | I understand that a Parks and Recreation sponsored activity has precedence over notified if any conflicts arise.   | the above schedule and I will be  |
|            | I understand that the City of Fort Lauderdale Police Department will determine a EMS is required by City Ordinance to be onsite during all outdoor events.   | all security requirements and that  |
|            | I understand that the City has a noise ordinance. If at any time during the enforcement personnel, code enforcement personnel, parks and recreation representative that the entertainment or music is causing a noise disturbance volume to an acceptable level as determined by City staff. If a second noise disturbance was directed to shut down the music or entertainment for the remainder of provisions of the noise control ordinance and understand that my failure to do sphysical arrest, or the shutting down of the event. | personnel, or any other city, I will be directed to lower the urbance arises during the event, I the event. I agree to abide by all |
|            | DAVID FABER OWNER  Name of applicant Title   |   |
|            | Name of applicant Title  |   |
|            | Date:  |   |
|            | Please email completed application at least 60 days ahead of your planned event 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  | to:   |
|            | Please include the following with the application:  * Event site plan – including stage(s), other entertainment locations, accanopies, dumpsters, fencing, generators, etc.  * Traffic/detour plan - including the placement and number of barricad cones, message boards, and name of the barricade and/or traffic signs of the barricade.  | es, signs, directional arrows,  |

|             | FIRE DEPARTMENT QUESTIONNAIRE  |
|-------------|--|
| PR          | EVENTION   |
| 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?YesNo   |
|             | How many and what sizes?   |
|             | Name of Company:   |
| Dun         | **PLEASE NOTE***** 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?YesNo   |
| ÷.          | 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?  |
| <u>OP</u> I | A fire extinguisher is required for each food booth. If a propane tank is used for a fuel source, is 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         | cial Event Detail Guidelines:  * 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. V        | /hat is your estimated sustained attendance? 150   |

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.

PHONE 727 4667/49

3. On-site contact? NAME DAVIO FATHL

## POLICE DEPARTMENT OUESTIONNAIRE 1. Does your event require use of police vehicles? If yes, A Hold-Harmless Agreement must be signed and Liability coverage of a minimum of ONE MILLION DOLLARS must be provided. Previous \_\_\_\_ 2. Is this a new or previously held event? If yes, Previous date(s)? SEPT 21, 2014 3. Any established security, traffic, or other appropriate plan(s)? Yes 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 If yes, who is your Police department contact? 5. Any notable entertainers or special circumstances scheduled for your event? Yes Who/What? 6. Is there alcohol being sold or given away? 7. Are there any road closures required? If so what roads/intersections? THE WEST BOUND LAVE OF 32 NO STREET - SOME SEET UP AS LAST TIME 8. What is your estimated attendance? 200-300 An Dry 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. DAND FASKE