

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 | Check #475 | 545 Mailed Separa | | | | |
|--|------------------------------|-------------------|--|--|--|--|
| PART I: EVENT REOUEST | | | | | | |
| Event name: Happyland Day School E | aster Egg t | tent | | | | |
| Purpose of event (check one): ☐ Fundraiser ☐ Awareness ☐ Recreation ☐ Other | | | | | | |
| Requested location: <u>Colee Hammock Par</u> | <u> </u> | | | | | |
| 1500 Brickell Dr. Ft. Lauder | dale, FL 3.33 | <i>v</i> | | | | |
| Estimated daily attendance: Not to exceed 15 | 50 | | | | | |
| Requested dates and time of event: | | | | | | |
| DATE DAY | BEGIN | END | | | | |
| EVENT DAY 1: March 27,2015 Friday | 9:00 AM/PM | 1:00 AM/PM) | | | | |
| EVENT DAY 2: | AM/PM | AM/PM | | | | |
| EVENT DAY 3: | AM/PM | AM/PM | | | | |
| SETUP: March 27, 2015 | <u>8:00</u> _{AM/PM} | | | | | |
| BREAKDOWN: March 27, 2015 Friday | | <u>2:00</u> AM/PM | | | | |
| Has this event been held in the past?No | | | | | | |
| If yes, please list past dates and locations: UnK | nown | | | | | |
| / | | | | | | |
| <u>Detailed</u> event description (include activities, entertainment, | vendors, etc <u>.):</u> | | | | | |
| Easter egg hunt with Eas- | | arriving ~ | | | | |
| face painting, photographs, | Α | oles and juice. | | | | |

| PART II: APPLICANT | | | | | |
|---|--|--|--|--|--|
| Organization name: Happyland Day School at First Presbyterian Church | | | | | |
| Address: 401 SE 15th Ave. City, State, Zip: Ft. Laud., FL 33301 | | | | | |
| Phone: <u>954 463-6051</u> Fax: <u>954 462-6221</u> | | | | | |
| Corporation name: First Presbyterian Church of Fort Lauderdale (as it appears in articles of incorporation) | | | | | |
| Date of incorporation: July 14, 1966 State incorporated in: FL Federal ID #: 59-0725549 | | | | | |
| Two authorizing officials for the organization: President: Physics Thomas Phone: 954 524-3934 Phone: 954 566-7176 | | | | | |
| Event Coordinator: Shari Caze Will you be on-site? Yes No | | | | | |
| Title: <u>Director Happyland</u> Phone: <u>954 463-6651</u> Cell: <u>954 552-2371</u> E-mail address: <u>ShariCal First pres. CC</u> Fax: <u>954 462-6221</u> | | | | | |
| Additional Contact: <u>Carol Jones</u> Title: <u>Directors Assistant</u> Phone: <u>954 463-6051</u> Cell: <u>954 266-9541</u> E-mail address: <u>Carol Joy First pres.</u> CC Fax: <u>954 462-6221</u> | | | | | |
| 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?YesNoYesNo | | | | | |
| Are you requesting to fence the event? We will provideYesNo tarent Volunteers our own along theYesNoYesNoYesNoYesNoYesYes | | | | | |

| Are you planning on selling alcoholic beverages?YesNo 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? |
| What type of rides are you planning? |
| Are you planning to play or have music?YesYes |
| List the type of equipment you will use (speakers, amplifier, drums, etc): $\mathcal{N}\mathcal{A}$ |
| Will you use any type of soundproofing equipment?Yes |
| List the days and times music will be played: |
| How close is the event to the nearest residence? |
| Will your event require road closings?YesNoYesNo |
| ****PLEASE NOTE**** You are required to secure barricades and/or directional traffic signs for road closing |
| Please attach a layout of your traffic plan, including the placement and number of barricades, signs, direction arrows, cones, and message boards, as well as the name of the company you will be using. Your traffic plan mus 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. |
| Who will provide clean up services for garbage and recyclables? Happyland Day School Contact Name: Shari Cazel Phone: 954 463-6051 ****NOTE***** All grounds must be cleaned up immediately after completion of event. Recycling should be |
| Contact Name: Name: Phone: 954 463-6051 |
| **** 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 |

| Will you require electricity?YesNo Events requiring electricity are the responsibility of the applica Department of Sustainable Development Building Services Div | | | | | |
|---|---|--|--|--|--|
| | License #: | | | | |
| Name of electrician: | Phone: | | | | |
| PART IV: APPLICANT'S ACCEPTANCE | | | | | |
| The information I have provided on this application is true an | d 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. | | | | | |
| Shari Cazel Name of applicant | Director Happyland Day School Title | | | | |
| 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?Yes |
| | 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: |
| Buil | ** <u>PLEASE NOTE</u> ***** All permits required by the Florida Building Code must be obtained through the Iding 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: |
| 4. | Are you having food vendors?YesNo |
| | How many and what kind? |
| <u>OP</u> | 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. I 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? YES NO |
| 2. V | What is your estimated sustained attendance? |
| 3. (| What is your estimated sustained attendance? <u>75 children</u> adults On-site contact? NAME Dave Sesstrich PHONE 954 504 - 346/ |

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.

| Does your event require use of police vehicles? | Yes | No | |
|---|---|------------------------------------|--------------------------------------|
| If yes, A Hold-Harmless Agreement must be sig ONE MILLION DOLLARS <u>must be provided.</u> | ned and Liability coverage o | of a <u>minimum</u> of | |
| 2. Is this a new or previously held event? | New | _ Previous <u>//</u> | |
| If yes, Previous date(s)? | | | |
| 3. Any established security, traffic, or other appropriate | e plan(s)? Yes | No | |
| If yes, besides Fort Lauderdale Police, who will (private security company, volunteers, etc.) Volunteer Parents ~ | you be using for this plan? | | |
| | | | |
| 4. Do you have an established detail of off-duty officers If yes, who is your Police department contact? | | No | |
| We use Office | | on Su | ndays |
| 5. Any notable entertainers or special circumstances sc | heduled for your event? | , event. | l |
| | Yes | No | |
| Who/What? The Easter 1 | Sunny | | |
| 6. Is there alcohol being sold or given away? | Yes | No | |
| 7. Are there any road closures required? | Yes | _ No_V | |
| If so what roads/intersections? | | | |
| | | | |
| 8. What is your estimated attendance? | | | |
| | | | |
| | | | |
| I understand the off duty rate for Police personnel for A also understand there is a 24 hour cancellation requiren hourly rate and costs to be incurred by the event org Events "Cost Estimate" worksheet developed at the Spe All payments will be paid within two (2) weeks of the page | nent to avoid the 3 hour min anizer will be quoted on the ecial Events logistics meetin | nimum payment ne City of Ft. La | per officer. The uderdale Special |
| Name | Date | | |

POLICE DEPARTMENT OUESTIONNAIRE