

CITY OF FORT LAUDERDALE OUTDOOR EVENT APPLICATION

Application must be filled out completely, in DARK ink or type, and submitted at least 90 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: PIIK BOCK	to sch	ool st	NOE & BE	<u>ickpack</u>	ausy
Purpose of event (check one): Fund	Iraiser Awareness	ð Recreation	ð Other		
Detailed event description:	·		· <u> </u>		
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and the second		·		·····	
Requested location: DSuali	> Park	<u></u>		··	

Estimated daily attendance: _____

Requested dates and time of event: DATE D	AY	BEGIN	END
BEGIN SETUP: 8-22-15		DAM/PM	J'NOPM
EVENT DAY 1:		AM/PM	AM/PM
EVENT DAY 2:		AM/PM	AM/PM
EVENT DAY 3:		AM/PM	AM/PM
BREAKDOWN:			AM/PM
Has this event been held in the past? X Yes If yes, please list past dates and location:			

PART II: APPLICANT
Organization name: PRINICE IF Kings
Organization name: PRINCE IF Kings Address: 550 N.W. 29 ave City, State, Zip: Ft. Laud Fl 3331
Phone: (952) 821-13910 Fax:
Non-Profit Organization? XesNo Tax ID #:
Corporation name: (as it appears in articles of incorporation)
Date of incorporation: State incorporated in: Federal ID #:
Two authorizing officials for the organization: President: <u>Hughes</u> Phone: <u>(191)</u> 821-1396
Secretary: DUAR CHRKE Phone:
Event Coordinator Name: Mrs. Sharon Will you be on-site? Xyes No
Title: RElation Coun. Phone: Cell: (952) 821-1396
E-mail address: princis Kings & gmail Fax:
Event production company (if other than applicant):
Address: City, State, Zip:
Contact person: Title: Title:
Phone: (day) (night) (cell)
E-mail address: Fax:
PART III: EVENT INFORMATION
Are you planning to charge admission?YesYYSYYS _YSYYSYYSYYSYYSYYSYYSYYSYYSYYSYYSYYSYYSYYSYYSYYS _YYSYYSYYS _YYSYYSYYS _YYSYYSYYS _YYSYYSYYS _YYSYYSYYS _YYSYYS _YYSYYSYYS _YYSYYSYYS _YYSYYS _YYSYYSYYS _YYSYYS
Are you requesting to fence the event?
Are you planning on having any type of concession?YesYesYeb 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?YesYYesYYEsYYEsYYEsYYEsYYEsYYEsYYEsYYEsYYEsYYEsYYEsYYEsYYEsYYEsYYESYYESYYESYYESYYESYYESYYESYYESYYE
Are you planning on serving free alcoholic beverages? Yes XNo If yes, to whom will it be given?

What type of rides are you planning?	
List the type of equipment you will use (speakers, amplifier, drums, etc):	
Will you use any type of soundproofing equipment? Yes Yes List the days and times music will be played:	
How close is the event to the nearest residential use?	<u> </u>
****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 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?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 Keela Black at 828-3794. Will any recyclable materials be utilized at this event?YesNo (Materials that can be recycled include all clean paper, cardboard, glass, plastic drink containers, aluminu cans, and milk or juice boxes.) Please refrain from the use of Styrofoam plates and cups.	nal sust
Who will provide clean up services for garbage and recyclables?(Company name)	
Contact Name: Phone: Phone: Phone:	
Will you require electricity?	1
Company: License #:	
Name of electrician: Phone:	

PART IV: APPLICANT'S ACCEPTANCE/SIGNATURE

The information I have provided on this application is true and 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.

gnature of applicant

24-15

YOUTH RElation Specialist

Please return completed application <u>at least 90 days ahead of your planned event</u>, along with \$100.00 application fee (payable to the City of Fort Lauderdale) and an event site plan to:

Susan Fyfe Molnar, Outdoor Event Coordinator

1350 W. Broward Boulevard, Fort Lauderdale, FL 33312

E-mail address:

Phone: (954) 828-5362 Fax: (954) 828-5650

EVENT APPLICATION SUBMISSION CHECKLIST:
Completed application form
\$100 application fee payable to the City of Fort Lauderdale
Event Site Plan, showing:
 layout of event (stage(s), other types of entertainment, activities, booths, restrooms, canopies, dumpsters, fencing, generator location or other source of electricity, etc.) traffic plan (including the placement and number of barricades, signs, directional arrows, cones, message boards, and name of the barricade and/or directional traffic signs company being used.) We are prepared to furnish our Certificate of Liability Insurance as well as our Certificate of Liquor Liability Insurance (if applicable) before submittal to the City Commission

FIRE DEPARTMENT QUESTIONNAIRE

PR	EVENTION
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?Yes \swarrow No
	How many and what sizes?
	Name of Company: In addition to a building permit, exit signs, emergency lights, fire extinguishers, and "No Smoking" signs are required for tents. A fire watch at overtime rate may apply. Contact Lt. Strandhagen at 954-828-5892.
Buil	** 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 Building Department 54-828-6520.
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?
	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 \$60 - \$70 per hour.
OP	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
Thẹ	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? YESNOX
	/hat is your estimated sustained attendance?
3. (Dn-site contact? NAMES HUGHES PHONE (9521) 821-1396
	inimum of 4 hours will be charged for all special event details. 45 minutes will be added to the pre and post It times (totaling 1.5 hours), allowing for travel and preparation for the event.

2 	POLICE DEPARTMENT QUESTIONNAIRE	and a start of the s
1.	Does your event require use of police vehicles? Yes	No <u>×</u>
2.	Is this a new or previously held event? New Previous	X
	Previous date(s)?	_
3.	Any established security, traffic, or other appropriate plan(s)? Yes	No
	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
	If yes, who is your Police department contact?	
5.	Any notable entertainers or special circumstances scheduled for your event? Yes	No
	Who/What?	-

I understand the off duty rate for Police personnel for ALL special events is calculated at a 3-hour minimum rate. 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.

Signature

<u>3-20-15</u> Date