

CITY OF FORT LAUDERDALE **OUTDOOR EVENT APPLICATION**

\$100 Fee must accompany application

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
- Compliance with City ordinances
 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: Michelob Ultra 13.1 For	t Lauderdale Half Mara	thon & 5K	
Purpose of event (check one): 🗆 Fur	ndraiser 🗆 Awareness	s □ Recreation 🛚 🗷 Otl	her Running Event
Requested location: Start Line: SW 1 *See attached map	st Ave/ SW 2nd St and	Finish Line/ Post Race Are	ea: South Beach Park
Estimated daily attendance: 3,000			
Requested dates and time of event: DATE	DAY	BEGIN	END
EVENT DAY 1:11/15/2015	Sunday	6:30AM _{AM/PM}	11:00AMAM/PM
EVENT DAY 2:	_	AM/PM	AM/PM
EVENT DAY 3:		AM/PM	AM/PM
SETUP: 11/14/2015	Saturday	_7AM _AM/PM	
BREAKDOWN:	Sunday		1PM AM/PM
Has this event been held in the past?	X_YesNo		•
If yes, please list past dates a	nd locations: Every N	lovember since 2008 (upco	oming 8th year)
<u>Detailed</u> event description (include a	ctivities, entertainment,	, vendors, etc.): 8th Annu	ual Michelob Ultra 13.1
Fort Lauderdale Half Marathon & 5K			
downtown las olas & Rio Vista areas	combined with a unique	e run through the Henry Ki	inney Tunnel. Runners will also

PART II: APPLICANT						
Organization name: Life Time Fitness Triathlon Series, LLC						
Address: 8879 SW 131st Street	City, State, Zip: Miami FL 33176					
Phone: 305-278-8668 Fax: 305-278-4166						
Corporation name: Life Time Fitness Triathlon Series, LLC						
(as it appears in artic	les of incorporation)					
Date of incorporation: State incorporated	in: Federal ID #: 20-3369967					
Two authorizing officials for the organization: President: Frankie Ruiz (Chief Running Officer) Phon	e:					
Secretary: Phon	e:305-278-8668					
Event Coordinator: Meryl Leventon	Will you be on-site? X Yes No					
Title: Event Manager Phone: 305-278-866	⁸ Cell: <u>610-659-2613</u>					
E-mail address:mleventon@lifetimefitness.com	Fax:					
Additional Contact: Alex DeGracia	Will you be on-site? X_YesNo					
Title: Event Manager Phone:	Cell: 786-427-9744					
E-mail address: adegracia@lifetimefitness.com	Fax:					
Event production company (if other than applicant): N/A						
Address: Cit	y, State, Zip:					
Contact person:Titl	e:					
Phone: (day) (night)	(cell)					
E-mail address:	Fax:					
PART III: EVENT INFORMATION						
Are you planning to charge admission? If yes, how much? \$_60-95	X YesNo					
Are you requesting to fence the event?	YesX_No					
Are you planning on having any type of concession? If yes, State Health Dept. must be notified 10 days price.	Yes _X_No or to event. Call John Litscher at 954-632-8094.					

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? X Yes No If yes, to whom will it be given? Participants over the age of 21, CSC Event Security will ID and manage.
Are you planning to have any type of amusement rides? Yes X No If yes, name of company:
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 prior to opening. Contact Ron Jacobs at (850) 921-1530.
Are you planning to play or have music? If yes, what music format(s) will be used? (amplified, acoustic, recorded, live, disc jockey, etc):
Recorded- National Anthem & Live Band for Post Race Party
List the type of equipment you will use (speakers, amplifier, drums, etc):
Speakers & Amps, basic equipment
Will you use any type of soundproofing equipment? Yes X_No
List the days and times music will be played: 11/15/15 starting at 7:45AM
How close is the event to the nearest residence? See attached map
Will your event require road closings? X Yes No If yes, list requested streets and times in detail : See attached turn by turn list. Will need all road closed by
6AM in order to safely secure and properly cone the race route.
****PLEASE NOTE***** 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? X Yes 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 Keela Black at 828-3794.
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?Emeralds Irish Cleaning Service
Contact Name: Meryl Leventon Phone: 610.659.2613 *****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

Will you require electricity? Events requiring electricity are the responsibility of the Department of Sustainable Development Building Serv	applicant. All permits must be obtained through the City's						
Company:	License #:						
Name of electrician:	Phone:						
PART IV: APPLICANT'S ACCEPTANCE							
The information I have provided on this application is t	true and complete to the best of my knowledge.						
applicable) must furnish an original certificate of Gene additionally insured in the amount of at least one milli	ssion, I understand that I (and the production company, if eral Liability insurance naming the City of Fort Lauderdale as on dollars ($$1,000,000$) or greater as deemed satisfactory by uor liability insurance in the amount of $$500,000$ if alcohol is						
I understand that a Parks and Recreation sponsored a notified if any conflicts arise.	ctivity has precedence over the above schedule and I will be						
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.							
enforcement personnel, code enforcement personnel representative that the entertainment or music is calculated to an acceptable level as determined by City's may be directed to shut down the music or entertain.	If at any time during the event it is determined by law nel, parks and recreation personnel, or any other city ausing a noise disturbance, I will be directed to lower the staff. If a second noise disturbance arises during the event, I ment for the remainder of the event. I agree to abide by all and that my failure to do so may result in a civil citation, a						
Meryl Leventon , Life Time Athletic Events	Event Manager						
Name of applicant	Title						
1/28/2015							
Date							
Please email completed application at least 96 days at imeehan@fortlauderdale.gov	nead of your planned event to:						

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 OUESTIONNAIRE

PREVENTION

1.	Are you planning to have canopies (no sides) for this event? X YesNo
	How many and what sizes?10x10's
	Name of Company: Glen's Tents
	A building permit is required. Please contact Capt. Bruce Strandhagen at 954-828-5080.
2.	Are you planning to have tents (with sides) for this event? X YesNo
	How many and what sizes?1- Medical Tent, 10x20
	Name of Company: LTF using Glen's Tents
	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 Capt. Bruce Strandhagen at 954-828-5080.
Bul	** <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?Yes _XNo
	Name of company conducting the show:
4.	Are you having food vendors?Yes _XNo
	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, 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. I	Does your event require EMS medical standby services based on the guidelines above? YES_XNO
2. V	What is your estimated sustained attendance?
3. (On-site contact? NAME Meryl Leventon PHONE 610.659.2613
Δm	sinimum 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.

EPARTMENT OUEST	IONNAIRE		
les?	Yes_X	No	•
ust be signed and Liabi rovided.	ility coverage o	f a <u>minimum</u> of	F
	New	Previous X	-
mber since 2008			-
ppropriate plan(s)?	Yes_X	No	
who will you be using etc.)	for this plan?		
ssisting in various area	as of the event	that can be ide	entified in volunteer
ŕ	Yes	No_X	
	· ·		-
	Yes	No_X	
	Yes_X	No	
ached turn by turn			
requirement to avoid vent organizer will be t the Special Events lo	the 3 hour min quoted on the gistics meeting	imum payment e City of Ft. La	per officer. The auderdale Special
1/28/2015	•		
Date			
	ist be signed and Liabiovided. Inber since 2008 Inber since 2008 Inpropriate plan(s)? Who will you be using etc.) Inditional security needs is sisting in various area by officers? Inces scheduled for your ached turn by turn In ached turn by turn In ached turn by turn In ached for ALL special every requirement to avoid went organizer will be to the Special Events loof the payroll being such that is the special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof that is a special Events loof that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof the payroll being such that is a special Events loof	res? Yes X Inst be signed and Liability coverage of sovided. New	Ist be signed and Liability coverage of a minimum of ovided. New Previous X