

5.

CITY OF FORT LAUDERDALE SPECIAL EVENT APPLICATION

Submit a <u>COMPLETED APPLICATION</u>, SITE PLAN and SITE PLAN NARRATIVE by email <u>60 days</u> before your planned event. Events Planned for July or August must be submitted by **May 1**[#].

After you submit the application with your fee you will be contacted to meet with the Special Events team to review:

- 1. Facility/Location requested
- 2. Compliance with City ordinances
- 3. Special permits required
- 4. Other Charges for City Services
- 5. Security requirements
- 6. Environmental issues/effects on surrounding areas

Fee must accompany application

At least 60 days prior to event \$200.00

59 to 30 days prior to event \$400.00

Less than 30 days prior to event Denied unless approved by City Manager or designee

PART I: EVENT REOUEST

sun, sand, and sex ED 57 Event Name

Purpose of event (check one): 🗆 Fundraiser	XAwareness	Recreation	Other	
Expected maximum attendance	Expe	cted sustained a	attendance	
Has this event been held in the past?Ye	s <u>X</u> No			
If yes, please list past dates, locations and atte	endahèe			

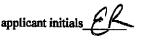
Detailed Description (Activities, Vendors, Entertainment, etc.)

Gex E	Jucational	Beach F	THRESS EVENTS	To include mu	sic, food.
NON-alcoholic bearages, HIV/STI TESTING, COMPETINE, EDUCATIONAL,					
GAMES TO I NOCKLOS VOLLEYBALL, TUG OF WAR, DODGE BALL ETC.					
Location Pract between Sebastian St. Alahambra St.					
Date and Time		DAY	BEGIN	END	Attendance
SETUP:	2/21	<u> GUN</u>	S AMPM	11 AND/PM	20
EVENT DAY 1:	2/21	Sur		_2_AM/M	100
EVENT DAY 2:			AM/PM	AM/PM	
EVENT DAY 3:		<u></u>	AM/PM	АМ/РМ	
BREAKDOWN:	<u>2/21</u>	SUN	2_AMPM	AM/PM	20

*events scheduled for more than 3 days will be subject to special council approval

PART II: APPLICANT

Organization Name AIDS Health Care Fairont INC Phone: 954-577-3132 For-Profit Non-profit X Private (as registered)



Address: 110 SE GTE 196	<u>Ə 1100 -</u> City, s	itate, Zip: FORT LAUDERDALE, FL 35301
Date of registration: <u>3/4/1999</u> s		
Email Address: AJ. Alegria 6		· · · · · · · · · · · · · · · · · · ·
President: AJ Alegria	م	Phone: 310-592-6769
Secretary: BRAD PAPE		Phone: 507-820-0242
Event Coordinator Name ELIC		Will you be on-site? XYesNo
Title: DIRECTOR of EVENTS Phone		
E-mail address: ELIC. RUSSD@	IMPULSEGRP. ORG,	Fax: N/A
Additional Contact Name Star		Will you be on-site? YesNo
Title: VICE PRESIJENT Phone	ə:	Cell: 954-205-5333
E-mail address: Steve, McALE	ER@ IMPULSEGULD	LG Fax: N/A
Event Production Company (if other the	in applicant): <u>N/A</u>	
Address:	City, State	e, Zip:
Contact Name:		
Phone: (day)	_ (night)	
Phone: (day) E-mail address:	_ (night)	
	_ (night)	Cell
E-mail address:	gh the City's Department of it Form - Apply and pay for	Cell Fax: Sustainable Development Building the permits at least 30 days before the
E-mail address: PART III: EVENT INFORMATION All City permits must be obtained throug Services Division using the Building Perm event. Contact the DSD Building Service	gh the City's Department of it Form - Apply and pay for	Cell Fax: Sustainable Development Building the permits at least 30 days before the th any questions.
E-mail address: PART III: EVENT INFORMATION All City permits must be obtained throug Services Division using the Building Perm event. Contact the DSD Building Service Admission	gh the City's Department of it Form - Apply and pay for es Division (954) 828-5191 wi _Yes X_No If yes, hi	Cell Fax: Sustainable Development Building the permits at least 30 days before the th any questions. ow much? \$
E-mail address: PART III: EVENT INFORMATION All City permits must be obtained throug Services Division using the Building Perm event. Contact the DSD Building Service Admission Alcohol For Sale If yes, how will the beverages be contro *Provide State of Florida alcohol licenses and	gh the City's Department of it Form - Apply and pay for es Division (954) 828-5191 wi _YesNo If yes, h YesNo <u>Alcoho</u> illed and served? (Draft truc d \$500,000 of Liquor Liability Inst	Cell Fax: Sustainable Development Building the permits at least 30 days before the ith any questions. ow much? \$ For FreeYesNo k, bar tender, beer tub, etc.) urance 30 days before event.
E-mail address: PART III: EVENT INFORMATION All City permits must be obtained throug Services Division using the Building Perm event. Contact the DSD Building Service Admission Alcohol For Sale If yes, how will the beverages be control	gh the City's Department of it Form - Apply and pay for es Division (954) 828-5191 wi _YesNo If yes, h YesNo <u>Alcoho</u> illed and served? (Draft truc d \$500,000 of Liquor Liability Inst	Cell Fax: Sustainable Development Building the permits at least 30 days before the ith any questions. ow much? \$ For FreeYesNo k, bar tender, beer tub, etc.) urance 30 days before event.
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E-mail address:	gh the City's Department of it Form - Apply and pay for es Division (954) 828-5191 wi _YesNo If yes, hi _YesNo <u>Alcoho</u> illed and served? (Draft truc d \$500,000 of Liquor Liability Inst _YesNo 0) 921-1530 must be contacted and rides <u>prior</u> to use.	Cell Fax: Sustainable Development Building the permits at least 30 days before the ith any questions. ow much? \$ For FreeYesNo k, bar tender, beer tub, etc.) urance 30 days before event.

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* Events requiring electricity ONUY _1 Company:			LICENSE #1	SKHOL
Name of electrician:				
		~		
Entertainment If yes, what type of enterto	Yes Jinment will b	<u> </u>		
NORK		*	periormers?	4
Fencing or Barricades * Include proposed fences in t	your Site Plan &	<u>X</u> No & Narrative		
Fireworks & Flame Effects	Yes_	X_No		
Name & Contact of Comp	any conduct	ing the show-		
*A permit and Fire Watch is rea	quired for all p	yrotechnics displays. <u>fir</u>	emarshal@fortlauc	lerdale.gov
Food Vendors	Yvar	No		-
* State Health Dept. Tara Pain	10 F M+ 70 E /1 201	7 09// maximal later in the second	10 days prior to ex	ent. All Food Vendors must be
nspected by the Fire Rescue [Department, C	apt. Bruce Strandhager	1 at (954) 828-508(rent. All Food Vendors must be to ensure compliance prior to
ecured on the outside of the l	or is required to 200th, inspect	r each food booth. If a jons during non-working	propane tank is u) to ensure cómpliance prior to sed for a fuel source, it must be
		ions doning horeworking	nours cost will co	st \$75 per hour.
Ausic.	Yes _	_No		1
yes, what music format(s)	will be used?	(amplified, acoustic,	recorded, live,	MC, DJ, etc):
PRAVERSTIFIC	OMIMP	3 PLAVER		
	· •			
ist the type of equipment y	ou will use (sp	oeakers, amplifier, dr.	ums, etc):	
BIDSELMORILE	PA	SVGEM		
ays and times music will be	played:	500 2/2)	llan -	ZPM
ow close is the event to the	nograat raat	300 F	T	
			1	
oundproofing equipment?	Yes	No		
arking Impact X Il Parking Spaces that are imp obility Dept. and must be paid		T		
\mathbb{N} Parking Spaces that are imp	sNo		·	
obility Dept. and must be paid	in full before	the event, eventiam@i	event organizer iortlauderdale co	through the Transportation &
				<u>_</u>
Closing roads requires submittin	S <u>A</u> NO W	/hich Roads ?		ecial Events Director for each
ency affected BEFORE the C			mic plan to the Sp	ecial Events Director for each s can be found in the Special
ents manual Appendix. To ex	pedite the pro	cess you may want to s	elect a pre-appro	ved MOT plan.
initation & Waste				
ill the event encourage Rea ne Green Checklist in the Even	cycling and s	iustainahility2	V	Vin
he Green Checklist in the Even	ts Manual car	help. Recýcling must b	e provided at all (<u>_X_</u> NO City events facilities & parks
amaany Name		· - · ·		
ompany Name grounds must be cleaned up ponsible for securing recycling	immediately c	Contact	ot or you will be -	Phone
ponsible for securing recycling	services.			pject to tees. You are
ş	,			
curity/Police Yes	XNO	Who is your Pallas	control to m	
			contact for offic	ers and security planning?
		A		pianing.
7 10/20/15	. (policent initial OL		ers and security planning? 3 of 5

CAM 16-0106 Exhibit 1 Page 3 of 6 Name

_____ Phone_

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security comparises and meir plans must be approved and you may still be required to hire City Palice.	Concernation of the second
	Jee helow

Security Company	Contact	Phone
Tents or Canopies XyesNo		
Quantity and size of each () 103. (C) foot by 10	foot
Company Name <u><i>N(A,</i></u> *A defailed Site Plan showing the locations and is required if there are multiple canopies, if they	Lontact l size of each canopy o r are going to be used f	r tent is required. A permit and final inspection or cooking or if there are Tents (with walk)
TotletsYesNo *All toilets must be removed within 24 hours. Por your contract or invoice to be faxed to (954) 46	table Toilets are regula 7-4898 to ensure comp	ed by Broward County. They require a copy of
Transportation PlanYesNo * Any events larger than 5,000 people must hav	e an approved Transpo	rtation Plan, eventtam@fortlauderdale.gov
Part IV: SECURITY AND EMERGENCY SE	RVICES	

Your Event may require Security and Emergency Services which will be determined using this application, your Site Plan and Narrative, MOT, transportation plan and any additional information requested during your Special Events meeting. The hourly rate and costs for services will be quoted on the "Cost Estimate" worksheet developed at the meeting and provided to the organizer. The cost may change after the meeting.

If Fire Rescue or Police staff are scheduled for the event then a minimum of four (4) hours for each Fire Rescue staff and a minimum of three (3) hours for each Police staff will be charged. Fire Rescue also charges 45 minutes to set up and 45 minutes to break down for each event. If the event is canceled then an event representative must call each department at least 24 hours before the event is expected to begin or the organization will be charged.

Fire Prevention and Emergency Medical Services

Fire Rescue may need to inspect your event or provide services based on your Building Permit, expected attendance and other risk factors such as alcohol, time, day, location, event type or weather. When you complete your Building Permit Form with Department of Sustainable Development (DSD) indicate all the permits and inspections you need and immediately pay DSD directly. All other payments for services will be invoiced to the event coordinator and must be paid within thirty (30) days. For questions call the Fire Marshal at (954) 828-6370.

On-site Contact Name ELIC LISSD

Police

Your event may require security services based on expected attendance and other risk factors such as alcohol, time, day, location, event type or weather. Depending on your event it may be possible to supplement some of the City Police services with a private third-party security company if their security plan is approved by the City Police department. If you want to use a private security company, their proposed security plan must be presented along with their business license and contact information with this event application. The Police will review the plan and inform you if it meets City requirements.

If a Fort Lauderdale Police vehicle is required then a Hold-Harmless Agreement must be signed and Liability coverage of a minimum of one million dollars (\$1,000,000) must be provided.

rev 10/20/15

applicant initials

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PART V: APPLICANT'S ACCEPTANCE

The information l'have provided on this application is true and complete to the best of my knowledge.

If I have not submitted my application with the necessary plans, within the deadline and according to the rules outlined in the Special Events Manual it may be denied.

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 the satisfactory by the City Risk Manager, and an original certificate of liquor liability insurance in the amount of five hundred thousand dollars (\$500,000) if alcohol is being served. Other liability insurance and fees may also be required up to thirty (30) days in advance of the event.

I understand that City of Fort Lauderdale Parks and Recreation sponsored activities have precedence over the event requested above 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 the City of Fort Lauderdale Fire Rescue department will determine all fire and Emergency Medical Services requirements.

I understand that any cancelations for City scheduled services must be made by phone to each department representative at least 24 hours before the scheduled event time or the organizer will be liable for any associated fees.

I understand that I may be required to provide a deposit based on historical performance or lack thereof.

I understand that the City has a noise ordinance that my event must follow. 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. 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.

event coordinators signature

PART VI: SUBMISSION

Email application and plans 60 days before your planned event to: specialevents@fortlauderdale.gov

Include theses plans with application for:

- 1. ALL events Event Site Plan & Narrative show stages, restrooms, fencing, tents etc.
- 2. Closed Roads Maintenance of Traffic Plan show barricades, directions, cones, etc.
- 3. 5000+ people Transportation Plan show transportation options for attendees.
- 4. Security needs Security Plan detail how event coordinator will manage security.

<u>Mail</u> application fee (payable to **City of Fort Lauderdale**) to: Jeff Meehan, Special Events Coordinator 1350 W. Broward Boulevard Fort Lauderdale, FL 33312

Questions ? (954) 828-6075

rev 10/20/15

applicant initials

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