

CITY OF FORT LAUDERDALE SPECIAL EVENT APPLICATION

Submit a **COMPLETED APPLICATION**, SITE PLAN and SITE PLAN NARRATIVE by email **60 days** before your planned event. Events Planned for July or August must be submitted by May 1st.

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 shust 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 1: EVE	NT RECUEST				
Event Name	3311 WALK "O	ne Love, One C	Community, One W	orld"	
Expected ma Has this event	ximum attenda been held in th	nce <u>400</u> e past? <u>X</u> _	Expec YesNo	Recreation ted sustained attendo	ance
Detailed Desc	ription (Activitie	es, Vendors, Ent	ertainment, etc.)		
The event will kick off with a children's performance, and prayer. A community walk will commence at the Joseph C. Carter Park, with the half way mark at 1021 NW 6 th Street for water, return to the park. Community leaders, friends, providers, and residents unite against the fight to eliminate the statistics in the 33311 zip code area. Upon return to the park, refreshments will be served while special performances, mini informative workshops, and other activities are taking place. Community-based programs and services will be stationed and available to all participants. This year's vendors will be focused on children and youth entering the DJJ/ BSO/ DCF system and Truancy in the Broward School Board.					
	- -		-	-	
Date and Time	DATE	DAY	BEGIN	END	Attendance
SETUP:	01/28/2017	<u>Saturday</u>	<u>06:30</u> AM/PM	_09:30 _AM/PM	5
EVENT DAY 1:	01/28/2017	<u>Saturday</u>	09:30 _AM/PM	_ 03:00 _AM/PM	400
EVENT DAY 2:			AM/PM	AM/PM	
EVENT DAY 3:			AM/PM	AM/PM	
BREAKDOWN:	01/28/2017	_Saturday	_ 05:00 AM/PM	AM/PM	10
*events schedu	led for more than	3 days will be su	bject to special cour	ncil approval	
PART II: AP					
	Name Mount Be Non-profit P		vices Corporation, (as registered)	<u>Inc.</u> Phone: <u>(954)</u>	300-6522
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Address: _901 NW 11th Avenue	City, State, Zip: <u>Fort Lauderdale, FL 33311</u>
Date of registration: _May 13, 1993 _ State registered in: _	<u>FL</u> Federal ID #: <u>65-0412414-0</u>
Email Address: <u>rglover@mtbbc.org</u>	Fax: (954) 763-5627
Two Authorizing Officials for the Organization	
President: <u>Dr. C. E. Glover</u>	Phone: (954) 763-5644
Secretary: <u>Cherita Richards</u>	Phone: (954) 763-5644
Event Coordinator Name <u>Rosby Glover</u>	Will you be on-site? X YesNo
Title: <u>Executive Director</u> Phone: <u>(954) 763-5644</u>	Cell: (954) 300-6522
E-mail address: <u>RGlover@mtbbc.org</u>	Fax: (954) 763-5627
Additional Contact Name <u>Andrea Dean</u>	Will you be on-site? Yes No
Title: <u>Director of Programs</u> Phone: <u>(954) 763-5644</u>	Cell: (772) 528-6959
E-mail address:ADean@mtbbc.org	Fax: <u>(954) 763-5627</u>
Event Production Company (if other than applicant):	·
Address:	City, State, Zip:
Contact Name:	_Title:
Phone: (day) (night)	Cell
E-mail address:	Fax:
PART III: EVENT INFORMATION	
All City permits must be obtained through the City's Depa Services Division using the Building Permit Form - Apply and event. Contact the DSD Building Services Division (954) 82	d pay for the permits at least 30 days before the
AdmissionYesX_No	If yes, how much? \$
Alcohol For Sale YesX_No If yes, how will the beverages be controlled and served? (
*Provide State of Florida alcohol licenses and \$500,000 of Liquor	Liability Insurance 30 days before event.
Amusement RidesYesX_No If yes, name and contact of company:	
What type of rides are you planning?*Florida Bureau of Fair Rides, Ron Jacobs (850) 921-1530 must be inspections and final approval of all vendors and rides <u>prior</u> to us	contacted 30 days before the event to schedule se.

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applicant initials____

	must be permitted. eventpower@fortlauderdale.gov
Company:	License #:
Name of electrician:	Phone:
Entertainment If yes, what type of enter	Yes X _No tainment will be there? Any notable performers?
Fencing or Barricades * Include proposed fences	Yes X No n your Site Plan & Narrative
Fireworks & Flame Effects	Yes _ X _No
Name & Contact of Con *A permit and Fire Watch is	required for all pyrotechnics displays. sefiremarshal@fortlauderdale.gov
inspected by the Fire Rescu serving food. A fire extingui	Yes _X_No almer at (954) 397-9366 must be notified 10 days prior to event. All Food Vendors must be e Department, Capt. Bruce Strandhagen at (954) 828-5080 to ensure compliance prior to sher is required for each food booth. If a propane tank is used for a fuel source, it must be ne booth. Inspections during non-working hours cost will cost \$75 per hour.
Music If yes, what music format	X YesNo (s) will be used? (amplified, acoustic, recorded, live, MC, DJ, etc):
DJ will be playing insp	irational songs- songs with positive messages/ non-offensive to youth and
children	
List the type of equipmer	nt you will use (speakers, amplifier, drums, etc):
Days and times music wi	ll be played: <u>Saturday, January 28, 2016</u> 9:30am - 3:00pm
How close is the event to	the nearest residence?
Soundproofing equipme	nt?Yes _ _X _No
	_Yes <u>X</u> No impacted by an event will be billed to the event organizer through the Transportation & paid in full before the event. <u>eventtam@fortlauderdale.gov</u>
agency affected BEFORE t	Yes X No Which Roads? mitting an approved Maintenance of Traffic plan to the Special Events Director for each ne Commission will vote on it. Some Forms and instructions can be found in the Special expedite the process you may want to select a pre-approved MOT plan.
Sanitation & Waste Will the event encourage *The Green Checklist in the	Recycling and Sustainability? <u>X</u> YesNo Events Manual can help. Recycling must be provided at all City events, facilities & parks.
Company NameParks All grounds must be cleaned responsible for securing recy	Recycling Contact Phone Phone Outpile In Indiana Phone
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Security/PoliceY	'es <u>X</u> No	Who is your Police	contact for office	cers and security plan	ning?
<i>,</i> , , , , , , , , , , , , , , , , , ,					
Name*Security companies and their	plans must be app	oroved and you ma	y still be required t	o hire City Police. See b	elow.
Security Company		Contact		Phone	
Tents or CanopiesY	es <u>X</u> No				
Quantity and size of each?					
Company Name *A detailed Site Plan showing t is required if there are multiple	he locations and s canopies, if they c	Contact cize of each canopy are going to be used	or tent is required d for cooking or if t	Phone A permit and final insprinere are Tents (with wall	ection
*All toilets must be removed wi your contract or invoice to be					opy of
Transportation Plan Yes * Any events larger than 5,000		an approved Trans	portation Plan. <u>ev</u>	venttam@fortlauderdale	.gov
Part IV: SECURITY AND E	MERGENCY SER	RVICES			
Your Event may require Sec your Site Plan and Narrative your Special Events meeting worksheet developed at the meeting.	e, MOT, transportog. The hourly rate	ation plan and an e and costs for ser	y additional info vices will be quo	rmation requested du oted on the "Cost Estim	ring nate"
If Fire Rescue or Police staff Rescue staff and a minimum charges 45 minutes to set u then an event representative to begin or the organization	n of three (3) hou p and 45 minutes ve must call each	urs for each Police s to break down fo h department at le	staff will be cho or each event.	arged. Fire Rescue also If the event is cancele	<u>o</u> ed_
Fire Prevention and Emerge	ncy Medical Ser	vices			
Fire Rescue may need to insattendance and other risk fromplete your Building Perrpermits and inspections you be invoiced to the event comparished at (954) 828-6370.	actors such as al mit Form with Dep u need and imme	Icohol, time, day, partment of Susta ediately pay DSD	location, event t inable Developn directly. All othe	type or weather. When nent (DSD) indicate all er payments for service	n you I the es will
On-site Contact Name Re	osby Glover		Phone (954);	300-6522	
Police				e e	
Your event may require sec alcohol, time, day, location supplement some of the Cit plan is approved by the Cit proposed security plan mus this event application. The	i, event type or w ty Police services y Police departm t be presented c	veather. Dependi with a private thin nent. If you want along with their bu	ing on your ever rd-party security to use a private siness license ar	nt it may be possible to company <u>if</u> their secu security company, the ad contact information	o rity eir
If a Fort Lauderdale Police V Liability coverage of a minir					
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PART V: APPLICANT'S ACCEPTANCE

The information I 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 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.

House of the	11/28/2016	
Event Coordinators Signature	Date	

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

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