

City of Dania Beach
West Dania Beach, FL 33004 SPECIAL EVENTS APPLICATION - EVENTS ON PRIVATE / PUBLIC PROPERTY

Please PRINT or TYPE

NOTE: ALL APPLICATIONS MUST FE COMPLETED AND SUBMITTED TO THE CITY FOR APPROVAL 60 DAYSPRIOR TO THE EVEN T INCLUDING PAYMENT OF ALL APPLICATION FEES (SEE (TTACHED).

Event Name, Date, and Time: 4th of July - State Approved Sparkler Sale
"Brief Description of the Event Seasunal Temporary Use for
Ath of July Sparkter Sales  Address/Location of Event: 1301 S. Federal Huy, Dania Beach, FL  Event Coordinator: Park 1610 Tarme
Address/Location of Event: 1301 S. Federal Huyg Balla General
Event Coordinator: PATRICIA TAIME
Telephone #1: 754-422.2861 E-mail Address: PATY 1C44 (*** True Comp.)  Telephone #2: Fax. 454-659.3157 Comp.
Additional Contact Person for the Event.
Telephone #1: E-r iail Address:
Telephone #2:
Organization or Sponsor of Event: FIREWORKS LADY & Cog LLC.
Address: 246 2006 Cale
City, State, Zip Code: Wester FL 33336
Tolophono: 954 4-22 2261 Fax: 454-659-3157 Cell:
Is this a Non-Profit Organization? [] Yes [X] No Tax ID#: 24 - 2519329
Corporation Name (As it appears in the Articles of Incorporation):
FIREWORKS LADY & CO, LLC
Date of Incorporation: 3 2010 State of Incorporation:
Federal ID#: 24-25 1932G
Authorizing Official for the Organization: PATRICE TAIRE  Telephone #1: 754 422 2761 E-mail Address PATRICE TICECE THE FIRE FULL KS LOCKY.
Telephone #2:
Authorizing Official for the Organization: PAIRISIA TAINE.

Telephone #1:	F-mi il Addres	e e e e e e e e e e e e e e e e e e e		
Telephone #2:	L man Madres.		36.	international desiration of the state of the
*Property Owner: Cushman -	Wakefiel	d of 5 F	lorida, Inc	
*Please Note - <u>A letter of Consent is requir</u>				
is the letter attached? [ ] Yes No				
Will any portion of this event take place on	Public or City Pro	nerty? [] Vos 10	₹ No.	
Will there be a charge for admission? [ ]			Q NO A	
Has this event been held in the past? [ ] Y			address	
If so, indicate the city location of last event is the event to take place: [ ] Indoors	Multiple	in Miami-I		Count
Number of Expected Daily Attendants:	<b>16</b> (BSO or	Fire Details may be re	equired - refer to page 6)	
Please indicate the duration of the event:			,	
DAY DATE	STAR TIME	END TIME	TOTAL # OF HOURS	
THIRSTAY JUNE 27 TRIDAY JUNE 27 TRIDAY JUNE 29 SATURLAY JUNE 30 SINIAY JUNE 30 HIGHARD JUNE 30 HIGHARD JUNE 30 HIGHARD JUNE 3 WIRESTAY JUNE 3 THORSDAY JUNE 3 THORSDAY JUNE 3	And	# 1711 9 1711 9 1711 9 1711 17 1711 18 17 17 17 17 17 17 17 17 17 17 17 17 17	77 17 10 10 10	ni His
Anticipated Date and Time to Begin Set-Up:	June 1	1.2013		
Anticipated Date and Time for Completion of		i.	13	
**Do you have a site plan for the event to be **Please Note**—A site plan indicating the follow rejected, resulting in a significant time delay. The site plan must include the following: envehicular drive pathsy fire hydrant locations, grandstand, bleacher or other seating locating pyrotechnical material, fireworks, etc. In additional material, petting zoos, exhibits, DJ's, based on the process of the process of the process of the process of the plants of the	submitted with this ving cor ditions must the fire department or differences and exits, or fire department or tons, tent and stag dition, the site plan ands, performers, s	s application? [24] accompany the applications that applications are applications, street of the locations, cooking must include the locations.	Yes [] No lication or the application witcess to the special event a access routes, parking, genosure requests, fenced and areas, and locations of areas, any rides (apima	rea. V eral eas, any
is there a request for any road closures? [	*		1	
Please identify the street name(s) and/or loc	cations for closure	requests:	la	

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Please Note - These stree	ets must also be ide	entified on the site	plan.		
*Are you requesting to fer *Please Note - You must id	nce the event area? entify any fencing are	ˈ[]Yes _[∕ၨ} No ea on the site plan.		, Ç	•
*Will Canopies (tent struc *Please Note - All tent structure)  building permits and inspect of the canopy fabric for flek be obtained from the canopies  Department located at 100	ictures with canopies itions. All canoples r d testing must be sul by manufacturer or the	s in excess of 400 must b∈ flame retar bmittec for product he canopy rental c	square feet [Per NFl dant. A certificate of approval with this ap ompany. Please app	PA 1: Table 1.12.19(a flame retardency and optication. This informally for the permit at the	a sample nation can
"Will Tents (With Sides) b "Please Note — All tents in inspections. All tents must testing must be submitted manufacturer or the tent re separate exits remotely locaddition, they must have eindicating the location of a Permits must be obtained located at 100 W. Dania Be	n excess of 200 squibe flame retardant. for product approvalental company. If the eated from each other emergency egress light Exits, Exit Signs, for all tents and elementary exceptions.	Jare feat [Per NFP A cert ficate of flan I with this application tents have sides, or with electrically ill ghting and fire extinction work. Pleatrica work. Pleatrica work.	A 1: Table 1.12.19(a retardancy and a soun. This information they are treated as luminated exit signs inguishers. Provide a ling, Aisle Spacing, Fise apply for all permits and a second control of the second control of th	sample of the tent fabra can be obtained from buildings. They must that have a battery ba life safety plan for the Fire Extinguisher loca mits at the Building D	ric for field in the tent have two ack-up. In nese tents tions, etc.
*Will electricity be require (for lighting, sound, cook		eeds, etc.) 🔀 Ye	s [] No		
*How will this electricity by Please Note — The use of inspections. Please apply Beach Blvd. Events requires its. Please allow 8-10 works.	f generators, tempo r for the permit(s) pr ring electricity are th	irary viriñg, tempo rior to setting up a le responsibility of	rary electrical connect the Building Deparathe applicant and mu	ctions, etc. require per tment located at 100 ust have a master ele	W. Dania ctrician on
Will there be live entertal			,		
Please indicate the type (		formers, etc.):	N2	traple was a supple and while the translation opposite and distribution opposite and distributio	
Please specify the hours DAY	of entertainment: DATE	START TIME	END TIME	TOTAL # OF HOUR	S
			1	1 /	ş

\*Will a stage(s) be used in this event? [ ] Yes [ No

\*Do you have adequate fire extinguishers for this event? [ ] Yes [ ] No

<sup>\*</sup>Please note Fire Extinguisher Requirement in the next question.

<sup>\*</sup>Please Note - Fire extinguishers must be supplied for each tent, canopy, dooking appliance and stage. They must be accessible from anywhere in the tent or on the stage without having to travel any further than 75 feet for access. Extinguishers must be easily accessible and not obscured from view. Fire extinguishers must be commercial "ABC V Multi-Purpose" (minimum 5lbs.) fire extinguishers that are currently certified and tagged by a licensed company. You

need to demonstrate that this requirement will be met by making a note on the site plan indicating compliance with all of the above requirements or providing a letter to the City fire prevention bureau to that effect.

Ann mete pe coucessims of sales of 1000 at this evaluate [ ] Les [X] No	
Please specify: N/a-	
*Please Note STATE HEALTH INSPECTIONS FOR FOOD: Pursuant to Florida Statutes) event sponsors are required to contact the State Health Inspector no les event. Advance notification of 7 to 10 days is advisable. Please send a fax with you information to Fax Number (954) 956-5699. The Inspector's office will contact you to amounts and types of food you plan to make available to the public, whether it is be	ss than 3 days prior to the ur event plans and contact discuss food vendors and
An original Certificate of Liability Insurance and Workers' Compensation Certificate is recommust ensure that the Liability Certificate is for this specific event, has the proper dates, seech as an Additional Insured. No event will be approved without this insurance.	quired from all vendors. You and names the City of Dania
*Will any type of cooking appliances be used by either the Sponsor of the Event or 17-No	any of its vendors?[] Yes
"If so, indicate the type of appliance(s) to be used and the number of each appliance [NA]. N/A  [] Electric Grill(s); #  [] Gas Grill(s); #  [] Charcoal Grill(s); #  [] Smoker Grills(s); #  [] Grease Fryer(s); #  [] Oven(s); #  [] Electric Range Burner(s); #  [] Gas Range Burner(s); #	e to <b>be</b> used:
<u>*Please Note</u> – Grease Fryers are not permitted in toors unless they are protected w UL300 Compliant Wet Chemical Automatic Fire Suppression System in accordance with	ith an approved Hood and a NFPA 96.
*Does each cooking appliance have its own dedic ited Fire Extinguisher? [ ] Yes *Please Note - Each cooking appliance must have its own dedicated fire extinguisher. required for fryers. You need to demonstrate that his requirement will be met by maindicating compliance with all of the above requirements or providing a letter to the fire pr	Class K fire extinguishers are eking a note on the site plane evention bureau.
*Does each cooking area have the proper clearances from all other event areas? [ *Please Note - Cooking areas can be located no closer than 30 feet from any tent or cleases, grandstands or bleachers, etc. Ensure that this measurement is demonstrated or	ca <b>nopy structu</b> re, event rides
*Will there be sales of alcohol at this event? [] `fes [] No *Please Note — An original certificate of liquor liability insurance naming the City of Daniand a 1/2/3 Day Special Sales License is required to be submitted with this application, from the State of Florida Department of Business and Professional Regulation.	a Beach as additional insure The license must be obtained
If Yes, Please Specify Types of Alcohol to be Sol I: [ ] N/A [ ] Beer [ ] Wine [ ] Mixed Drinks [ ] Other:	[ ] Liquor
If alcohol is being served, please indicate how the beverages will be served: [ ] N/. [ ] Draft Truck [ ] Cold Plate [ ] Mini-Bar [ ] Beer Tub [ ] Table Service	<b>A</b>

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Other:	
Will there be alcohol given away at this event? [ ] Yes ⋈ No	
Please Specify Types of Alcohol to be given away:  X N/A []Beer [] Wine [] Mixed Drinks []Other:	[]Liquor
Will there be retail sales at this event? [4] Yes [ ] No	
Please Specify: State Approved Sparkles for	r 4th of July.
*Will there be any carnival rides, mechanical or veh cular rides, or animal rides [ ] Yes [ ] No	
*If yes, please describe: n.a.	
What is the name of the vendor or vendors providing the rides? 1/4 N/A	
"Please Note - If carnival rides are to be present, the rides must be inspected by inspector, and fire inspector 48 hours prior to the rides opening.	y a state inspector, city electrical
Are you providing to us a copy of the ride ver dor's Certificate of Liabilit Insurance with this application? [] Yes [K] No *Please Note — An original Certificate of Liability and Vorkers' Compensation Insurances. Ensure that the Certificate is for this specific event, has the proper dates, and an Additional Insured. No event will be approved without this insurance.  *Will recreational vehicles be used for temporary c vernight housing? [] Yes *Please Note — Indicate the locations of these on the site plan.	nce is required for any and all names the City of Dania Beach as
*Will there be any use of pyrotechnics or fireworks displays at this event? []  *Please Note - Pyrotechnics fireworks displays require special applications, perm original Certificate of Liability and Workers' Compensation Insurance. In addition, a Persent during set-up and displays. This expense will be passed on to the event. (BS - refer to page 6)	its and inspections as well as an ire inspector will be required to be
*Will there be use of any Grandstands or Bleachers for seating at this event? [ *Please Note - Bleachers and Grandstands may have to meet special safety code indicated on the site plan. Plumbing permit is required for portable toilets.	
*Are portable, ADA compliant sanitary facilities being provided for this event?	⊠ Yes [] No
If so, How many? [ ] N/A  *Please Note - Provide the locations of all sanitary fricilities on the site plan.	
"Is there a request for any temporary signage for this event? [ ] Yes [ ] No *Please Note – Any questions regarding temporary signage should be dire 954)924-6810.	cted to City Code Compliance,
Are there any services being requested from the City of Dania Beach? [ ] Yes	
f yes, please explain:n/a	
Please list any other conditions, terms or relevant information related to this he City:	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )

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## **BSO DETAIL REQUIREMENT**

Based upon anticipated attendance, site or building size site location, and ability to assure public safety requirements, a Broward Sheriff's Office Detail may be required.

## FIRE WATCH REQUIREMENT

A Fire-Watch may be imposed depending on the type of event, number of persons present and hazards involved. The number of personnel and apparatus required may vary depending on the type of event and hazards involved. Below are the current rates charged for the presence of a fire watch detail, fire inspector or both:

Off-Duty detail assignment services performed by Dania Beach Fire Rescue Personnel will be paid at their current overtime rate of pay with benefits (3 Hour Minimum). In addition, a City at inistrative fee of 10% will also be charged based on the total cost of personnel and apparatus. Personnel costs are currently estimated to be \$84.42 per hour, per person (3 hour minimum).

The cost of apparatus is as follows: Rescue Truck - \$32,00 per hour Engine (1500 gpm) - \$71,00 per hour Ladder (1500 gpm) - \$80,00 per hour

The City of Dania Beach requires payment 14 days in advance for the detail services and fees are to be made payable to The City of Dania Beach by means of <u>cash advance or a cashier's check</u>. Fees are based on individual employee's overtime rates which vary from person to person. The amount estimated is based on the highest overtime rate currently payable in addition to fees for FICA, Medicara, Worker's Compensation and Administrative fees. In the event that the entire estimated amount is not required for se vices, the City will refund the money, less the expenses incurred for the service. Should the amount of time required for the fire watch detail exceed that agreed upon before the event, the Event sponsor will be required to pay for any everage based on the actual cost for the Fire Watch. The Event sponsor will be responsible to pay the actual service price incurred.

The information I have provided on this application is true and complete to the best of my knowledge. I understand that approval of this event is contingent upon review and approval of all City Disciplines, the City Attorney's Office and the City Commission.

Dunen

Signature of Applicant

101F

rint name of Applicant

MARCH 27 2013

STATE OF FLORIDA COUNTY OF BROWARD

The foregoing instrument was acknowledged before me on	Harch	27 2063.
by Patricia Anne Toime, who is personally known to	o me, or, if not, s	such person produced the
following form of identification: R. D.		FIGURE STEEL
		My comm. expires Nov. 14, 28.

**NOTARY PUBLIC** 

My Commission expires: NOV 14 2016

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My Commission number:

Special Events Application - Page 8 - Revised FEBRUARY, 2010



## TENT PLACEMENT WORKSHEET

ADDRESS 1301 S. Federal High way  DESCRIPTION OR STORE NAME Gated Vacant Property  TENT SIZE 30' x 70'  TYPE OF EVENT - Retail Sparkler Tent (4th of July & New Years).  EXIT UNITY  PARKING area  Storage Container  Storage Container  Storage Stora	CITY OF		WUKKS	HEET	
DESCRIPTION OR STORE NAME TENT SIZE  30' x 70'  TYPE OF EVENT  - Retail Sparkler Tent (4th of July & New Years)  EXIT BRLT  PARKING area  Stronger Container  S. Federal Highway  ECIAL INSTRUCTIONS: This drawing is not to scale, to be used for layout purposes only.  Container Placement - Door Face s de ctool		Dania Beac	h > Broward County		
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