City of Dania Beach 100 West Dania Beach Blvd., Dania Beach, FL 33004

SPECIAL EVENTS APPLICATION - EVENTS ON PRIVATE / PUBLIC PROPERTY
Please PRINT or TYPE

Please PRINT OF TYPE

NOTE: ALL APPLICATIONS MUST BE COMPLETED AND SUBMITTED TO THE CITY

FOR APPROVAL 60 DAYS PRIOR TO THE EVENT INCLUDING PAYMENT OF ALL APPLICATION FEES (SEE

ATTACHED).

3 pm
Event Name, Date and Time: Community Outreach Festival (Feb 20, 2016)
*Brief Description of the Event: With Job fairs, Aids testing, blood Bank
Singing + tree food. (hot dogs, soulds, & water)
Address/Location of Event: S19 SW JA Ely Blvd Dania, FL 33004
Event Coordinator: Pastor Vanessa Williams
Telephone #1: 954-465-4462 E-mail Address: \(\frac{1}{2}\) Williams 250 i Cloud. Com
Additional Contact Person for the Event: 50 CHEVEL DOGS
Telephone #1: 954-548-5110 E-mail Address: Jeff deus Les (gmail. Com
Telephone #2: Fax:
Organization or Sponsor of Event: Biblical House of God None Other Church
Address: 819 SW JA Ely BIVC
City, State, Zip Code: <u>Van Va</u> , FL. 35004
Telephone: Fax: Cell:
Is this a Non-Profit Organization? No. Yes [] No. Tax ID#: 85-8012583809C-3
Corporation Name (As it appears in the Articles of Incorporation):
Biblical House of God none other Church
Date of Incorporation: 6 124 1 1996 State of Incorporation: Florida
Federal ID #:
Authorizing Official for the Organization: Vanessa Williams Telephone #1: 954-465-4462 E-mail Address: Vr Williams 256 i Cloud.com
Telephone #2:
Authorizing Official for the Organization: TOMMIE KOBINSON

Telephone #1: 454 Telephone #2:	-643-1282	E-mail Addres	s: Dmmle	152002 (yaho	<u>٥</u>
*Property Owner: Bi	blice H	ouse of (al none	pproval of this application.	لأ
is the letter attached? [Yes [(LNo	ed ironi trie prope	TV Owner for the a	pproval of this application.	
Will any portion of this e	-	Public or City Broad	north/O F.T.V.		
Will there be a charge fo	r admission? [] \	(es IVNo Ifvo	e pom mneps	LYN0	
Has this event been held			e, now much?		
If so, Indicate the city loc			la		
Is the event to take place			Roth		
Number of Expected Dail	y Attendants: a	5 DIUS (BSQ or	Fire Details may be		
Please indicate the durat	ion of the event:	(300)	pen to t	he Public)	
DAY	DATE	START TIME	END TIME	TOTAL # OF HOURS	
Saturday	120,2016	10 Am	3pm	5hrs	
Anticipated Date and Time	-	Feb 20,	2016 48	Am	
Anticipated Date and Time	for Completion of	Break-Down:	eb 20,2	2016 asam	
*Do you have a site plan for *Please Note — A site plan is rejected, resulting in a signification of the site plan must include wehicular drive paths, fire grandstand, bleacher or other or other paths, fireweather than the protection of the plan for *please *plan for *pla	or the event to be sindicating the following: ificant time delay. The following: entrhydrant locations, fither seating location works, etc. In additional exhibits, DJ's, banding the seating location works, etc.	rubmitted with this and conditions must a runce and exits, earned the department corrus, tent and stage tion, the site plan runds, performers, sa	application? [U] accompany the app must have easy ac mergency vehicle a nections, street cl locations, cooking	Yes [] No lication or the application will be cess to the special event area access routes, parking, genera osure requests, fenced areas g areas, and locations of any ocation of any rides (animal or creation vehicles for overnight	i. il
s there a request for any r					
Please identify the street n	ame(s) and/or loca	tions for closure re	equests:		

Please Note - The	ese streets must also b	e identified on the	site plan.		_
*Are you requesti	ng to fence the event a	mag 2 2 2 2 4			
Please Note - You	must identify any fencir	of area on the cite of	No		
	any lonon	ig area on the site pi	an.	Site Plan	(8)
*Will Canopies (te	nt structure with no side	des) be used for thi	a avanta taku	SITE FIRE!	IOKID
huilding namits	tent structures with can	opies in excess of 4	00 somete fort ine		
of the carony fobrid	inspections. All canop	ies must be flame re	tardant A certificat	NFPA 1: Table 1.12.19(a)] re of flame retardency and a s	equire
be obtained from the	or field testing must be	submitted for produced	uct approval with this	e of flame retardency and a s s application. This information	ample
Department located	at 100 W Danie Basel	or the canopy renta	company. Please	s application. This information apply for the permit at the Butter permit at the Butter permit at the Butter permit appropriate the Butter permit at the Butter permit and Butter permit appropriate the Butter permit a	n can
				or permit approvale	ulding
TILL LEDISK (VVITA S	idoo\ ba		•		
*Please Note - All	tents in excess of 200	School took [Des vin	I No		
inspections. All tent	s must be flame retarda	oduale leet [Per Ni	PA 1: Table 1.12.1	9(a)] require building permit a sample of the tent fabric fo	s and
testing must be sub	mitted for product appre	Oval with this applicate	ame retardancy and	a sample of the tent fabric for ion can be obtained from the	r field
manufacturer or the	tent rental company. If	the tents have side	s thou are treat	ion can be obtained from the as buildings. They must have	e tent
indicating the least	have emergency egress	lighting and fire ex	tinguishere Broyids	as buildings. They must have a battery back-up a life safety plan for these	p. In
					, etc.
Outon at 100 VV. De	nnia Beach Blvd. Please	allow 8-10 working	days for permit appr	ovals	ment
Will electricity be r	equired for this avenue			ovais.	
for lighting, sound	cooking, other power	, maada ata kan aa			
	assimila, other bower	needs, etc.) [] Ye	s [] No	•	
How will this electr	icity be supplied? [] use of generators, tem	On-Site 122 Com			
Please Note - The	use of generators, temp	Octav Miring tempo	rator [] Combin	ation of Both ections, etc. require permits	
ispections. Please	apply for the permit(s)	prior to setting up	t the Building Door	ections, etc. require permits	and
. loadd allow 8=	o working days for pern	nit approvals. Any o	enerator loss than 5	nust have a master electrician KW does not require a permit	n on
Vill there be live and	ertainment at this ever	/	The state of the state of	New does not require a permit	•
20 110 011	ortainment at this ever	nt?[]/Yes [] No	•		
lease indicate the t	VDe (Band, D.I. I ive De	Mormon et .	TON	inging of praise	1
	, , , , , , , , , , , , , , , , , , ,	Tomers, etc.):	2, yours	inging to praise	dancina
lease specify the h				J 1- (
Where	DATE	START TIME	END TIME	TOTAL "	
which	Feb 20,2016	12:30pm	1:3000	TOTAL # OF HOURS	
		Therefore	1.3001	Lhr.	
Vill a stage(s) he	ad in this arranta =				
lease note Fire Extin	ed in this event?[] \ guisher Requirement in	es [L] No			
			_		
o you have adequa	te fire extinguishers fo	r this events			
lease Note - Fire ex	tinguishers must be sup	Died for each tont	es [] No	iance and stage. They must	
cessible from anywh	nere in the tent or on the	ne stage without he	ving to travel and	lance and stage. They must	be
manishers must be	and the second second	arage without US	ving to travel any f	urther than 75 foot 6	

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 Multi-Purpose" (minimum 5lbs.) fire extinguishers that are currently certified and tagged by a licensed company. You

need to de of the abov	monstrate that this requirement will be met by making a note on the site plan indicating compliance with all e requirements or providing a letter to the City fire prevention bureau to that effect.
*Will those	ha annound and a second a second and a second a second and a second a second and a second a second and a second a second and a second a second and a second and a second and a second and a second a sec
Please spec	The same of the sa
event. Advi information amounts ar	ote STATE HEALTH INSPECTIONS FOR FOOD: Pursuant to Florida law (Chapter 509, Florida event sponsors are required to contact the State Health Inspector no less than 3 days prior to the ance notification of 7 to 10 days is advisable. Please send a fax with your event plans and contact in to Fax Number (954) 956-5699. The Inspector's office will contact you to discuss food vendors and not types of food you plan to make available to the public, whether it is being given away or sold.
An original (must ensure Beach as an	Certificate of Liability Insurance and Workers' Compensation Certificate is required from all vendors. You at that the Liability Certificate is for this specific event, has the proper dates, and names the City of Dania Additional Insured. No event will be approved without this insurance.
*Will any ty [] No	pe of cooking appliances be used by either the Sponsor of the Event or any of its vendors? Lives
[] Electric ([] Gas Grill [] Charcoal [] Smoker ([] Grease F [] Oven(s); [] Electric F [] Gas Ran	I(s); # I Grill(s); # Grills(s); # Fryer(s); # Range Burner(s); # ge Burner(s); #
	— Grease Fryers are not permitted indoors unless they are protected with an approved Hood and a poliant Wet Chemical Automatic Fire Suppression System in accordance with NFPA 96.
required for an adicating cor	cooking appliance have its own dedicated Fire Extinguisher? [1] Yes [1] No e - Each cooking appliance must have its own dedicated fire extinguisher. Class K fire extinguishers are fryers. You need to demonstrate that this requirement will be met by making a note on the site plan mpliance with all of the above requirements or providing a letter to the fire prevention bureau.
	cooking area have the proper clearances from all other event areas? [12 Yes [] No end of cooking areas can be located no closer than 30 feet from any tent or canopy structure, event rides, distands or bleachers, etc. Ensure that this measurement is demonstrated on the site plan.
and a 1/2/3 Drom the State	e sales of alcohol at this event? [] Yes [] No 2 — An original certificate of liquor liability insurance naming the City of Dania Beach as additional insured Day Special Sales License is required to be submitted with this application. The license must be obtained the of Florida Department of Business and Professional Regulation.
Yes, Please Mixed Dr	e Specify Types of Alcohol to be Sold: [// N/A [] Beer [] Wine [] Liquor inks [] Other:
alcohol is i	being served, please indicate how the beverages will be served: [i] N/A ck [] Cold Plate [] Mini-Bar [] Beer Tub [] Table Service

Other:	
Will there	be alcohol given away at this event? [] Yes [] No
Please Sp	ecify Types of Alcohol to be given away: [] N/A [] Beer [] Wine [] Liquor
	be retail sales at this event? [] Yes [(] No
	cify:
*Will there	be any carnival rides, mechanical or vehicular rides, or animal rides at this event?
*If yes, plea	se describe:
What is the	name of the vendor or vendors providing the rides? [V] N/A
*Please No inspector, ar	te - If carnival rides are to be present, the rides must be inspected by a state inspector, city electrical and fire inspector 48 hours prior to the rides opening.
rides. Ensur an Additiona	oviding to us a copy of the ride vendor's Certificate of Liability and Workers' Compensation with this application? [] Yes [] No 2 — An original Certificate of Liability and Workers' Compensation Insurance is required for any and all that the Certificate is for this specific event, has the proper dates, and names the City of Dania Beach as Insured. No event will be approved without this insurance.
Will recreat Please Note	ional vehicles be used for temporary overnight housing? [] Yes [U] No e locations of these on the site plan.
original Certif	e any use of pyrotechnics or fireworks displays at this event? [] Yes [L] No 2 - Pyrotechnics fireworks displays require special applications, permits and inspections as well as an inspection and Workers' Compensation Insurance. In addition, a Fire Inspector will be required to be set-up and displays. This expense will be passed on to the event. (BSO or Fire Details may be required
Will there be Please Note indicated on the	e use of any Grandstands or Bleachers for seating at this event? [] Yes [/] No he site plan. Plumbing permit is required for portable to let.
Are portable so. How ma	ADA compliant sanitary facilities being provided for this event? Yes [] No
rease Note	 Provide the locations of all sanitary facilities on the site plan.
54)924-6810	uest for any temporary signage for this event? [Yes [] No Any questions regarding temporary signage should be directed to City Code Compliance,
re there any	services being requested from the City of Dania Beach? [V] Yes [] No
ves, please e	explain: We would like 20 Cones parel in the Middle of the street to other conditions, terms or relevant information related to this event that may be of interest to of the City of Dania in
e City: B	HOS extend can information related to this event that may be of interest to

LETTER OF PERMISSION

Greetings St. James Primitive Baptist Church Inc.,

We the <u>BIBLICAL HOUSE OF GOD CHURCH</u> are hosting our <u>3 red</u> Annual Community Outreach Festival <u>2/20/16</u>. The event will take place between the hours of 10am to 2pm. As before, we're expecting a great number of residents to attend the event.

We greatly appreciate you allowing us to utilize your property for our event parking last year and if your schedule will allow, we're humbly asking your permission to utilize your property for our event parking again this year..

Paper, garbage or anything to that nature that is left behind, we will be responsible for clean up

Comment from Property Owner:

Below is the signature of Elder James Touchstone, (Pastor of the St. James Primitive Baptist Church Inc.) andharizon the Biblical House of God Church to utilize their property for their
Touchstone (Pastor of the St. James Primitive
Baptist Church Inc.) andhorizone the Biblical House
of God Church to utilize their property for their
event parking.

Elder James Touchstone

The Biblical House of God Church Thanks You in advance

Biblical House of God, None Other Church Inc. 819 J.A. Blvd. Dania, Fl. 33004 Pastor Vanessa Williams

Support of helping aid our Community

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 administrative 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, Medicare, Worker's Compensation and Administrative fees. In the event that the entire estimated amount is not required for services, 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 overage 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.

Signature of Applicant

Title

Print name of Applicant

Date

STATE OF FLORIDA
COUNTY OF BROWARD