Office Use Only MOT ID#: TAM-MOT-23040009

# **MAINTENANCE OF TRAFFIC (MOT) FORM**

SECTION 1: APPLICANT INFORMATION	MOT APPROVALA
Applicant Name: Brian Pittman	MOT APPROMAS 75 Applicant Phone:
Applicant Email: BrianPittman@LiveNation.com	CITY OF FORT LAUDERDALE
Applicant Address: 410 Chestnut St Nashville, TN	RANSPORTATION AND MOBILITY
City Project Manager (if applicable):	Phone:
Agency responsible for this project:  ☑ City ☐ County	□ FDOT □ Other:
On-site/Emergency Contact Phone: 615-498-0575	
SECTION 2: PROJECT INFORMATION	
ENG Permit # (obtain from Department of Sustainable D	evelopment (DSD)). Special Event
Project Name: Tortuga Music Festival	
Project Address: 1100 Seabreeze Fort Lauderdale, FL	
(Address,	City, State, Zip Code)
Specific Dates and Times Requested for MOT Imple	
require up to two weeks from the time that all required	m the submittal date. The approval of an MOT application may documents are received by TAM staff
	Begin Time: 7:00am
	End Time: 7:00pm
SECTION 3: PROJECT DETAILS	
☐ Partial or Shoulder Closure	Daily Setup/ Breakdown ☐ YES
☐ Full Road Closure (detour): Under 72 Hours	Using Crane in ROW* ☐ YES <b>☑</b> NO
☐ Sidewalk Closure: Under 72 Hours	Parking Meters Impacted* <b>☑</b> YES □ NO
☑ Full Road/Sidewalk Closure: More than 72 Hours	*Crane and parking meter mitigation must be done prior to MOT approval. Please refer to the MOT Guidelines for crane definitions.
SECTION 4: TYPE OF WORK DESCRIPTION	
Please make sure to include the following informat	tion in the description:
	ersection. Use complete street names, including directionals.
	sing plans. A separate MOT application is required for each phase. k may produce during construction (i.e., large holes, etc.).
	reeze South Bound. We will use this road for production load in prior to
event and loud out post event. Show days we will operate our	staff shuttle program on SE 5th St.
Southbound Seabreeze one lane will be closed to create pedest	trian walk way. Due to construction on Seabreeze
SECTION 5: FDOT DESIGN STANDARD INDEX DRAW	ING NUMBERS/MUTCH TYPICAL APPLICATION
	wed. The indexes must include the north arrow and the names of
the main and cross streets. Also, state whether trenches	

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## **MAINTENANCE OF TRAFFIC (MOT) FORM**

### SECTION 6: MOT DESCRIPTION Please make sure to include the following information in the description List the lanes that will be open and closed on each street and les (1) Fary locks by defauts in less I) Atour are not required, please state that below. State if flagmen will be provided. State if the MOT will be continuous or intermittent. If intermittent, state the times of the day the MOT will be in effect. State any other special considerations related to this request. SE 5th Street between A1A and Seabreeze Blvd will be closed. Vehivcles will be detoured north to E Las Olas Blvd Flagmen not required. MOT will be continuous during event **SECTION 7: MOT FORM CHECKLIST** (Provide one copy of each attachment.) ☐ Completed Required Signatures Form ☐ Certification(s) for Traffic Control Technician or Traffic Control Supervisor must be embedded ☐ Color aerial(s)/MOT Plan with index overlay on MOT plans along with FDOT indexes/MUTCD ☐ County and State approvals (if required) documents ☐ Plan of work (optional, but preferred) ☐ Crane and Parking Mitigation (if required) ☐ FDOT Index MUTCD Reference Drawing(s) **SECTION 8: ADDITIONAL COMMENTS** Please Note: The approval of an MOT application may require up to two weeks from the time that all required documents in the checklist above are received by TAM staff. Any rejected MOT submittal that is corrected and sent back will be considered a new submittal, which may require up to two additional weeks to approve. Additional time may be needed for more complex plans or plans requiring additional coordination/information. In signing this application, I understand that separate City and/or County and/or State permits may be required for this project. Furthermore, I am aware that I am responsible for ensuring that the project is completed in accordance with the plans and specifications as stipulated in the permit approval condition. Brian Pittman - Site Director (APPLICANT SIGNATURE) (PRINT NAME/TITLE) 4/5/23 (DATE SIGNED) Tortuga Music Festival As a consideration for the permission granted herein, (APPLICANT) indemnify and hold harmless the City of Fort Lauderdale for any damages, claims, or injuries that may result from the MOT plan approved under the PERMIT.

(NAME OF COMPANY)

(COMPANY AUTHORIZED AGENT)

Office Use Only	MOT ID#:	ENG Permit#:

### **REQUIRED SIGNATURES FORM**

Applicant must collect all required signatures. To expedite processing, individual signatures may be obtained and submitted to MOT@fortlauderdale.gov separately on this page. A light ure and continued to MOT@fortlauderdale.gov before two-week review process begins. DIETRICH Print Name Police Department 1300 W. Broward Boulevard | Tel: 954-828-5477 (Date) Call for Appointment \*Required only if MOT includes a detour for any direction of travel. Print Name Signature **Fire Rescue Department** 528 N.W. 2nd Street | Tel: 954-828-6800 (Date) Call for Appointment \*Required only if MOT includes a detour for any direction of travel. Print Name Signature **Broward County Traffic Engineering Division** 2300 W. Commercial Boulevard | Tel: 954-847-2653 (Date) Call for Appointment. Walk-ins NOT accepted. \*Required only if MOT/detour affects Broward County road or intersection. After all applicable signatures are collected, applicant should submit the MOT plan and this routing form to the Transportation and Mobility Department at mot@fortlauderdale.gov. **OFFICE USE ONLY** Department Director's Signature (requested by City staff if required) Morgan Dunn
Signature Morgan Dunr 4/6/23 **Transportation and Mobility Department** (Date) 290 N.E. 3<sup>rd</sup> Avenue | Tel: 954-828-4997 | Email: MOT@fortlauderdale.gov Call for Appointment. Walk-ins and hard copies NOT accepted. Lisa Marie Glover for Ben Rogers
Lisa Marie Glover for Ben Rogers (Apr 7, 2023 12:22 EDT) **Transportation and Mobility Department** (Date) Ben Rogers, Director

A copy of the final permit and this MOT form shall be kept on site and be made available to the City inspector at all times.

Traffic modifications required for special events shall be coordinated through the Parks and Recreation's Special Events Department. Please call 954-828-4349 or email BHenry@fortlauderdale.gov.

MOT plans for City Capital Improvement Projects shall be coordinated through the City of Fort Lauderdale Public Works Department. Please call 954-828-5772 or email ralvarez@fortlauderdale.gov.

Office Use Only	MOT ID#:	ENG Permit#:
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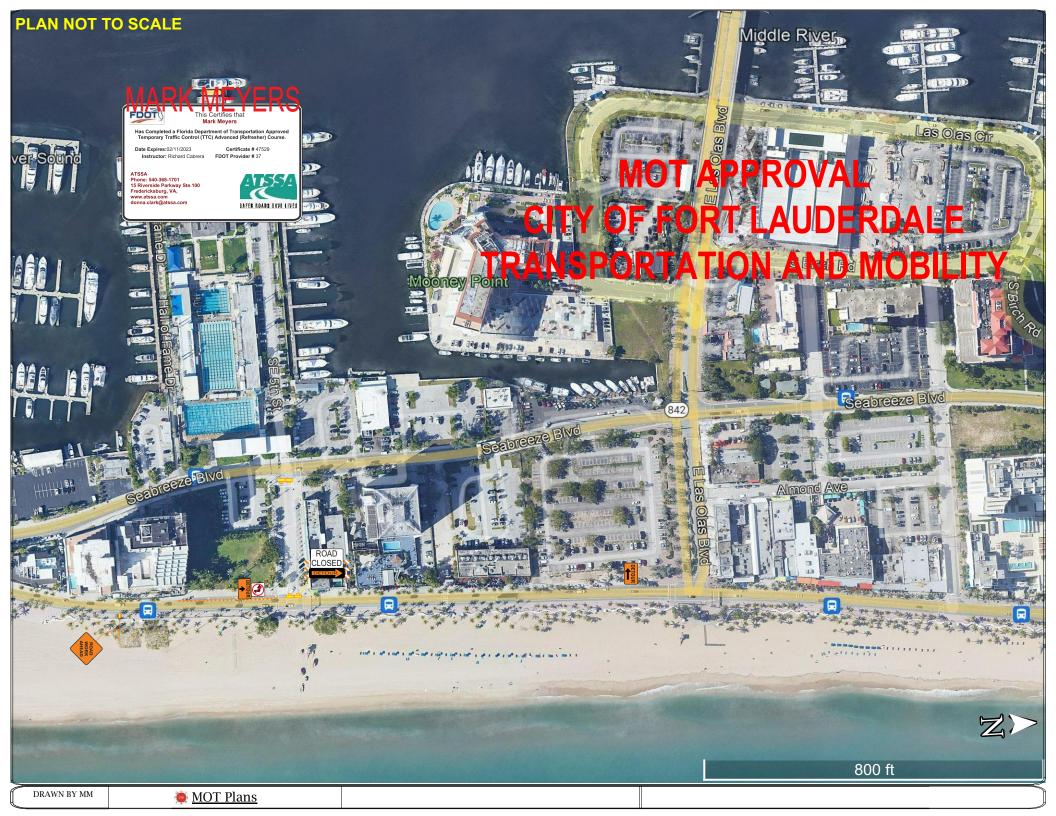
## **REQUIRED SIGNATURES FORM**

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Print Name  Police Department RANSPORTATION  1300 W. Broward Boulevard   Tel: 954-828-5477  Call for Appointment  *Required only if MOT includes a detour for any direction of travel.					
John F. San Angelo  Print Name  John F. San Angelo  Signature					
Fire Rescue Department  528 N.W. 2 <sup>nd</sup> Street   Tel: 954-828-6800  Call for Appointment  *Required only if MOT includes a detour for any direction of travel.	04/06/23 (Date)				
Print Name  Broward County Traffic Engineering Division  2300 W. Commercial Boulevard   Tel: 954-847-2653  Call for Appointment. Walk-ins NOT accepted.  *Required only if MOT/detour affects Broward County road or intersection.	(Date)				
After all applicable signatures are collected, applicant should submit the MOT plan and this routing form to the Transportation and Mobility Department at mot@fortlauderdale.gov.					
OFFICE USE ONLY  Department Director's Signature (requested by City staff if required)					
Print Name Signature  Transportation and Mobility Department  290 N.E. 3 <sup>rd</sup> Avenue   Tel: 954- 828-4997   Email: MOT@fortlauderdale.gov  Call for Appointment. Walk-ins and hard copies NOT accepted.	(Date)				
Signature  Transportation and Mobility Department  Ben Rogers, Director	(Date)				

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#### Notes for Figure 6H-20—Typical Application 20 **Detour for a Closed Street**

#### Guidance:

- 1. This plan should be used for streets without posted route numbers.
- On multi-lane streets, Detour signs with an Advance Turn Arround barppiroux a turn.

#### Option:

- 3. Flashing warning lights and/or flags may be used to call a warning lights and/or flags may be used to call a warning lights may be used on Type 3 Barricades.
- Detour signs may be located on the far side of ITRIANS PORT ATVIN AAND IN MINES TY used in advance of a turn.
- 6. A Street Name sign may be mounted with the Detour sign. The Street Name sign may be either white on green or black on orange.

#### **Standard:**

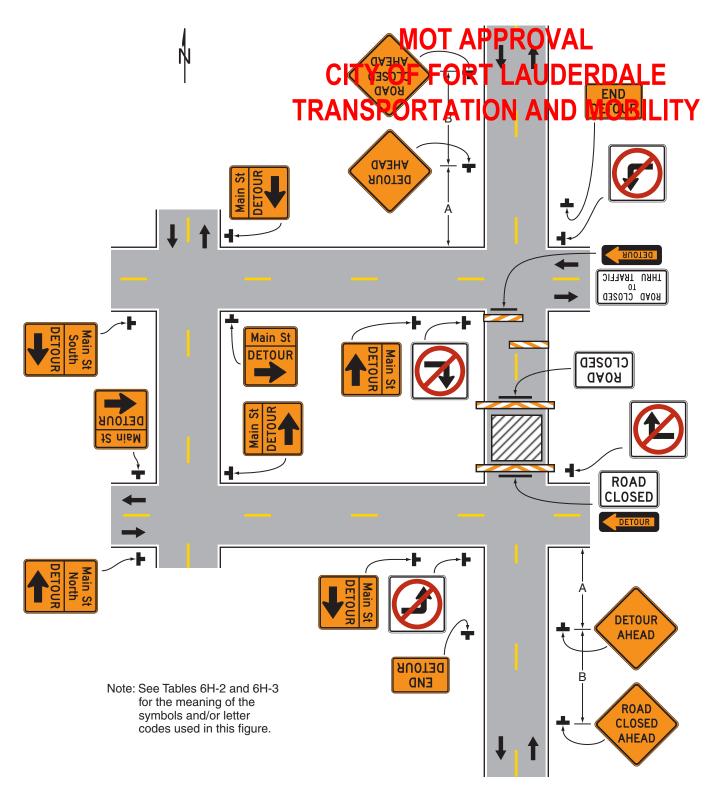
7. When used, the Street Name sign shall be placed above the Detour sign.

#### Support:

8. See Figure 6H-9 for the information for detouring a numbered highway.

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Figure 6H-20. Detour for a Closed Street (TA-20)



**Typical Application 20** 

December 2009 Sect. 6H.01

# TAM-MOT-23040009 Special Event

Final Audit Report 2023-04-07

Created: 2023-04-06

By: Morgan Dunn (MDunn@fortlauderdale.gov)

Status: Signed

Transaction ID: CBJCHBCAABAAiXIk7XjcPNG5uEgdRtFCEpGKT2QM3EjL

### "TAM-MOT-23040009 Special Event" History

Document created by Morgan Dunn (MDunn@fortlauderdale.gov) 2023-04-06 - 8:00:16 PM GMT- IP address: 207.203.28.2

- Document emailed to Lisa Marie Glover (LGlover@fortlauderdale.gov) for signature 2023-04-06 8:01:00 PM GMT
- Email viewed by Lisa Marie Glover (LGlover@fortlauderdale.gov)

  2023-04-07 4:22:14 PM GMT- IP address: 207.203.28.2
- Signer Lisa Marie Glover (LGlover@fortlauderdale.gov) entered name at signing as Lisa Marie Glover for Ben Rogers

2023-04-07 - 4:22:28 PM GMT- IP address: 207.203.28.2

- Document e-signed by Lisa Marie Glover for Ben Rogers (LGlover@fortlauderdale.gov)

  Signature Date: 2023-04-07 4:22:30 PM GMT Time Source: server- IP address: 207.203.28.2
- Agreement completed.

2023-04-07 - 4:22:30 PM GMT

Names and email addresses are entered into the Acrobat Sign service by Acrobat Sign users and are unverified unless otherwise noted.

