

Office Use Only MOT ID#: TAM-MOT-24010030

# MAINTENANCE OF TRAFFIC (MOT) FORM

## SECTION 1: APPLICANT INFORMATION

Applicant Name: AIDS Healthcare Foundation Inc./Max Alvarez Applicant Phone: c/o Ozzie Perez 872-310-4134  
 Applicant Email: AHF max.alvarez@ahf.org Event Contact: Ozzie Perez, Event 360, Inc. operez@event360.com  
 Applicant Address: AIDS Healthcare Foundation c/o Event 360, Inc: 55 E. Jackson Blvd; Chicago, IL 60604  
(Address, City, State, Zip Code)  
 City Project Manager (if applicable): \_\_\_\_\_ Phone: \_\_\_\_\_  
 Agency responsible for this project:  City  County  FDOT  Other: \_\_\_\_\_  
 On-site/Emergency Contact Phone: Ozzie Perez / 872-310-4134

MOT APPROVAL  
 CITY OF FORT LAUDERDALE  
 TRANSPORTATION AND MOBILITY

## SECTION 2: PROJECT INFORMATION

ENG Permit # (obtain from Department of Sustainable Development (DSD)): Special Event  
 Project Name: Florida AIDS Walk  
 Project Address: 1000 Seabreeze Blvd, Fort Lauderdale, FL, A1A/Seabreeze Blvd between Vistamar St & South Beach Parking Lot  
(Address, City, State, Zip Code)

### Specific Dates and Times Requested for MOT Implementation:

Please identify a start date that is at least two weeks from the submittal date. The approval of an MOT application may require up to two weeks from the time that all required documents are received by TAM staff.

Begin Date: Saturday, March 09, 2024 Begin Time: 6:30 am; Walk Start 10:00am  
 End Date: Saturday, March 09, 2024 End Time: 12:00pm walk ends

## SECTION 3: PROJECT DETAILS

Partial or Shoulder Closure Daily Setup/ Breakdown  YES  NO  
 Full Road Closure (detour): Under 72 Hours Using Crane in ROW\*  YES  NO  
 Sidewalk Closure: Under 72 Hours Parking Meters Impacted\*  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 information in the description:

- List the names of affected streets and the nearest intersection. Use complete street names, including directionals.
- Describe the nature of the construction and any phasing plans. A separate MOT application is required for each phase.
- Describe any specific safety hazards that the work may produce during construction (i.e., large holes, etc.).

North A1A curb lane from south beach, turn left (west) onto Sebastian across A1A to Birch Rd., Right (north) onto Birch Rd.  
in curb lane to Vistamar, Right (east) on Vistamar to A1A, cross A1A and turn Right (south) into curb lane and on sidewalk  
to return to Beach Park.

Please see attached maps.

## SECTION 5: FDOT DESIGN STANDARD INDEX DRAWING NUMBERS/MUTCD TYPICAL APPLICATION

(State which FDOT Standard Index 600 series will be followed. The indexes must include the north arrow and the names of the main and cross streets. Also, state whether trenches will be covered or backfilled during non-working hours.)

MUTCD TA-20 FDOT Index 600, 615



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## 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 describe any necessary detours in detail. If detours 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.

No detours needed, Ft. Lauderdale PD keeps all roads open.

Course set-up starts at 6:30am, and pick-up following the last walker. Walk route opens at 10am, complete by 12pm.

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## 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 on MOT plans along with FDOT indexes/MUTCD documents
- Color aerial(s)/MOT Plan with index overlay
- County and State approvals (if required)
- Crane and Parking Mitigation (if required)
- Plan of work (optional, but preferred)
- 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.

Russell Walker  
(APPLICANT SIGNATURE)

Russell Walker Deputy Bureau Chief  
(PRINT NAME/TITLE)

1/10/2024  
(DATE SIGNED)

As a consideration for the permission granted herein, AIDS Healthcare Foundation agrees to 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.

AIDS Healthcare Foundation  
(NAME OF COMPANY)

BY: Russell Walker  
(COMPANY AUTHORIZED AGENT)

<b>Office Use Only</b>	MOT ID#: _____	ENG Permit#: _____
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## REQUIRED SIGNATURES FORM

Applicant must collect all required signatures. To expedite processing, individual signatures may be obtained and submitted to [MOT@fortlauderdale.gov](mailto:MOT@fortlauderdale.gov) separately on this page. All signatures and comments must be submitted before two-week review process begins.

<p style="text-align: center;"><u>M. Ferrer</u></p> <p style="text-align: center;">Print Name</p> <p style="text-align: center;"><i>monica Ferrer</i></p> <p style="text-align: center;">Signature</p> <p style="text-align: center;"><b>Police Department</b> 1300 W. Broward Boulevard   Tel: 954-828-5477 <i>Call for Appointment</i></p> <p style="text-align: center;">*Required only if MOT includes a detour for any direction of travel.</p>	<p style="text-align: center;"><u>2/27/24</u></p> <p style="text-align: center;">(Date)</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------

<p style="text-align: center;">_____ Print Name</p> <p style="text-align: center;">_____ Signature</p> <p style="text-align: center;"><b>Fire Rescue Department</b> 528 N.W. 2<sup>nd</sup> Street   Tel: 954-828-6800 <i>Call for Appointment</i></p> <p style="text-align: center;">*Required only if MOT includes a detour for any direction of travel.</p>	<p style="text-align: center;">_____ (Date)</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------

<p style="text-align: center;">_____ Print Name</p> <p style="text-align: center;">_____ Signature</p> <p style="text-align: center;"><b>Broward County Traffic Engineering Division</b> 2300 W. Commercial Boulevard   Tel: 954-847-2653 <i>Call for Appointment. Walk-ins NOT accepted.</i></p> <p style="text-align: center;">*Required only if MOT/detour affects Broward County road or intersection.</p>	<p style="text-align: center;">_____ (Date)</p>
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**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](mailto:mot@fortlauderdale.gov).**

**OFFICE USE ONLY**  
Department Director's Signature (requested by City staff if required)

<p style="text-align: center;"><u>Morgan Dunn</u></p> <p style="text-align: center;">Print Name</p> <p style="text-align: center;"><i>Morgan Dunn</i></p> <p style="text-align: center;">Signature</p> <p style="text-align: center;"><b>Transportation and Mobility Department</b> 290 N.E. 3<sup>rd</sup> Avenue   Tel: 954- 828-4997   Email: <a href="mailto:MOT@fortlauderdale.gov">MOT@fortlauderdale.gov</a> <i>Call for Appointment. Walk-ins and hard copies NOT accepted.</i></p>	<p style="text-align: center;"><u>2/28/24</u></p> <p style="text-align: center;">(Date)</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------

<p style="text-align: center;"><u>Ekaete Ekwere</u></p> <p style="text-align: center;">Ekaete Ekwere (Mar 1, 2024 10:13 EST)</p> <p style="text-align: center;">Signature</p> <p style="text-align: center;"><b>Transportation and Mobility Department</b> Ben Rogers, Director</p>	<p style="text-align: center;">_____ (Date)</p>
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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](mailto: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](mailto:ralvarez@fortlauderdale.gov).



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CITY OF FORT LAUDERDALE

TRANSPORTATION AND MOBILITY

<p>_____ Print Name</p> <p style="text-align: center;"><b>Police Department</b> 1300 W. Broward Boulevard   Tel: 954-828-5477 <i>Call for Appointment</i></p> <p><i>*Required only if MOT includes a detour for any direction of travel.</i></p>	<p>_____ Signature</p>	<p>_____ (Date)</p>
<p><b>Jason W Miller</b> Print Name</p> <p style="text-align: center;"><b>Fire Rescue Department</b> 528 N.W. 2<sup>nd</sup> Street   Tel: 954-828-6800 <i>Call for Appointment</i></p> <p><i>*Required only if MOT includes a detour for any direction of travel.</i></p>	<p><i>Jason W. Miller</i> Signature</p>	<p style="text-align: center;"><u>2/26/24</u> (Date)</p>
<p>_____ Print Name</p> <p style="text-align: center;"><b>Broward County Traffic Engineering Division</b> 2300 W. Commercial Boulevard   Tel: 954-847-2653 <i>Call for Appointment. Walk-ins NOT accepted.</i></p> <p><i>*Required only if MOT/detour affects Broward County road or intersection.</i></p>	<p>_____ Signature</p>	<p>_____ (Date)</p>
<p><b>After all applicable signatures are collected, applicant should submit the MOT plan and this routing form to the Transportation and Mobility Department at <a href="mailto:mot@fortlauderdale.gov">mot@fortlauderdale.gov</a>.</b></p>		
<p><b>OFFICE USE ONLY</b> Department Director's Signature (requested by City staff if required)</p>		
<p>_____ Print Name</p> <p style="text-align: center;"><b>Transportation and Mobility Department</b> 290 N.E. 3<sup>rd</sup> Avenue   Tel: 954- 828-4997   Email: <a href="mailto:MOT@fortlauderdale.gov">MOT@fortlauderdale.gov</a> <i>Call for Appointment. Walk-ins and hard copies NOT accepted.</i></p>	<p>_____ Signature</p>	<p>_____ (Date)</p>
<p style="text-align: center;">_____ Signature</p> <p style="text-align: center;"><b>Transportation and Mobility Department</b> Ben Rogers, Director</p>	<p>_____ Signature</p>	<p>_____ (Date)</p>

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**TEMPORARY CLOSING OF STATE ROAD PERMIT**Date: 2/22/2024Permit No. 2024-F-491-00013**Governmental Entity**

Approving Local Government City of Fort Lauderdale Contact Person Brittany Henry  
 Address 100 N Andrews Fort Lauderdale, Florida 33301  
 Telephone (954) 828-4349 ext. \_\_\_\_\_ Email bhenry@fortlauderdale.gov

**Organization Requesting Special Event**

Name of Organization AIDS Healthcare Foundation Contact Person Ozzie Perez  
 Address 55 E Jackson Blvd. Suite 1030 Chicago, Illinois 60604  
 Telephone (872) 310-4134 ext. \_\_\_\_\_ Email operez@event360.com

**Description of Special Event**

Event Title 2024 Florida AIDS Walk Date of Event 3/9/2024  
 Start Time 2:00 PM (EST) End Time 4:00 PM (EST)  
 Event Route (attach map) Updated VMS Message Sign Worksheets uploaded.  
 Detour Route (attach map) No detour required. FLPD will keep traffic moving.

**Law Enforcement Agency Responsible for Traffic Control**

Name of Agency Fort Lauderdale Police Department

**US Coast Guard Approval for Controlling Movable Bridge**

Not Applicable   
 Copy of USCG Approval Letter Attached   
 Bridge Location \_\_\_\_\_

The Permittee will assume all risk of and indemnify, defend and save harmless the State of Florida and the FDOT from and against any and all loss, damage, cost or expense arising in any manner on account of the exercise of this event.

The Permittee shall be responsible to maintain the portion of the state road it occupies for the duration of this event, free of litter and providing a safe environment to the public.

**Signatures of Authorization**

Event Coordinator Russel Walker Signature Russel Walker Date 2/16/2024  
 Law Enforcement  
 Name/Title Captain Jeffery Jenkins / Captain Signature Captain Jeffery Jenkins Date 2/16/2024  
 Government Official  
 Name/Title Brittany Henry / Special Events Coordinal Signature Brittany Henry Date 2/16/2024

**FDOT Special Conditions**

Special Conditions:  
 1. Please call Versar Global Solution (888) 238-6215 ext. 700  
 Wesly Aristil  
 Permit Inspector

**FDOT Authorization**

Name/Title Anonymous User / Signature Anonymous User Date 2/22/2024

Approved  
 2024-F-491-00013  
 Anonymous User  
 2/22/2024



# FLORIDA AIDS WALK & MUSIC FESTIVAL



Route / Course Map  
Not to Scale

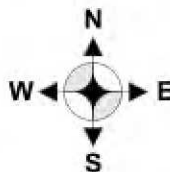
TITLE	2024 FLORIDA AIDSWALK & MUSIC FESTIVAL	SHOW DATE	Saturday March 09, 2024
VENUE	Fort Lauderdale Beach Park	JOB #	AWF24
DRAWING / DATE	v1	SCALE	Not to Scale
FILE NAME	Route / Course	DRAWN BY	

The data in this document incorporates proprietary rights of Event 360. Any party accepting this document does so in confidence and agrees that it shall not be duplicated in whole or in part, nor disclosed to others without the express written permission of Event 360.

event 360  
55 E. Jackson Blvd.  
Suite 1120  
Chicago, Illinois 60604

## LEGEND

- Walker Course - - - - -
- Route Marshal 
- Police 



**MOT APPROVAL**  
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**TRANSPORTATION AND MOBILITY**

**Pit Stop 2**

**Pit Stop 1**

**START AND FINISH LINE**

**FESTIVAL SITE**

013  
ser

**MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY**



**Pit Stop 2**

**Pit Stop 1**

**FLORIDA  
AIDS  
WALK  
& MUSIC FESTIVAL**

**Course Map**

**START AND  
FINISH LINE**

**FESTIVAL  
SITE**

Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024



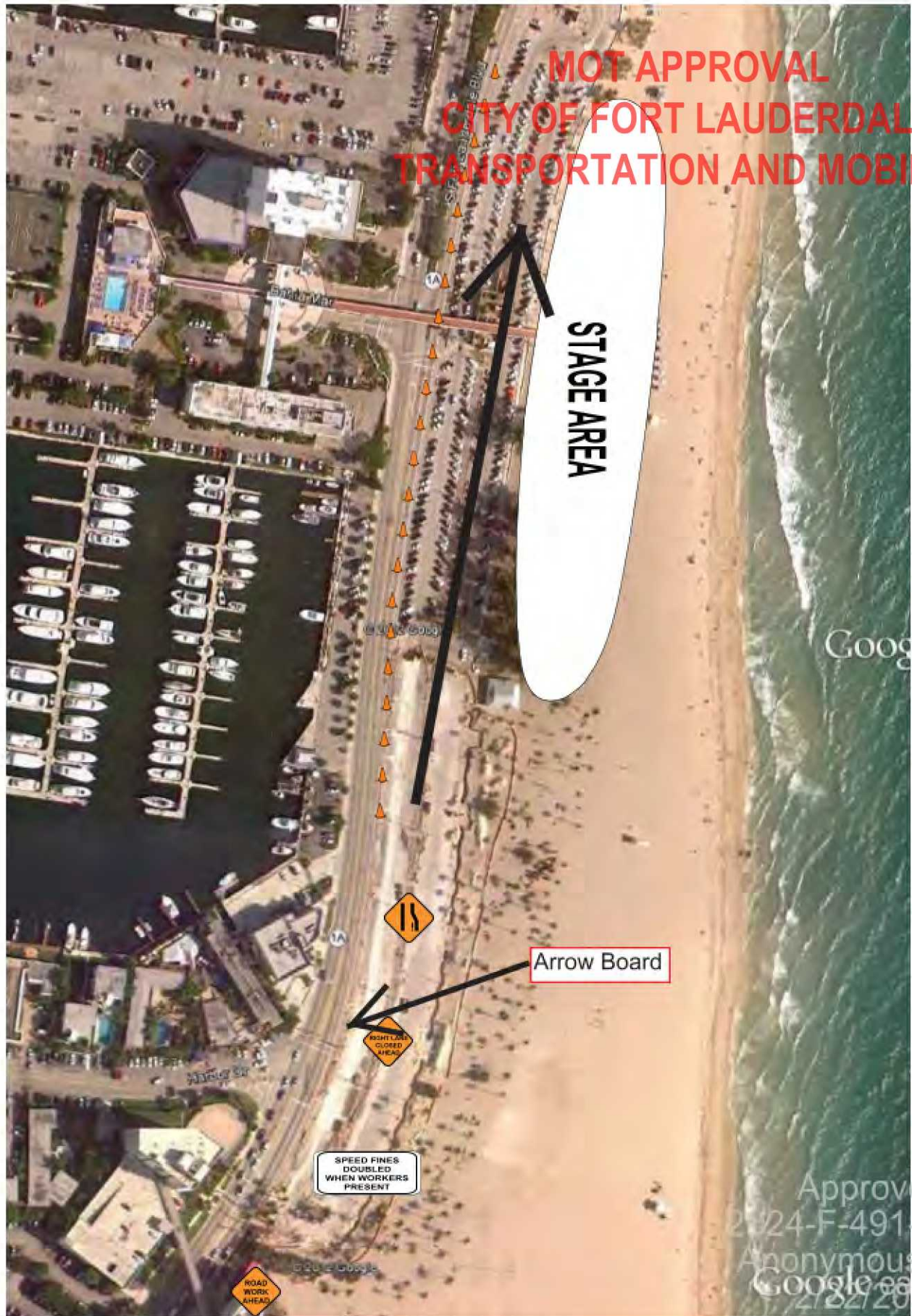


**MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY**

Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024



NB Right Lane Closure on Atlantic Blvd  
NB Right Lane Closure on Birch Rd /  
Two - Way Traffic on Birch Rd  
Road Closure on Vistamar St



**MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY**

**STAGE AREA**

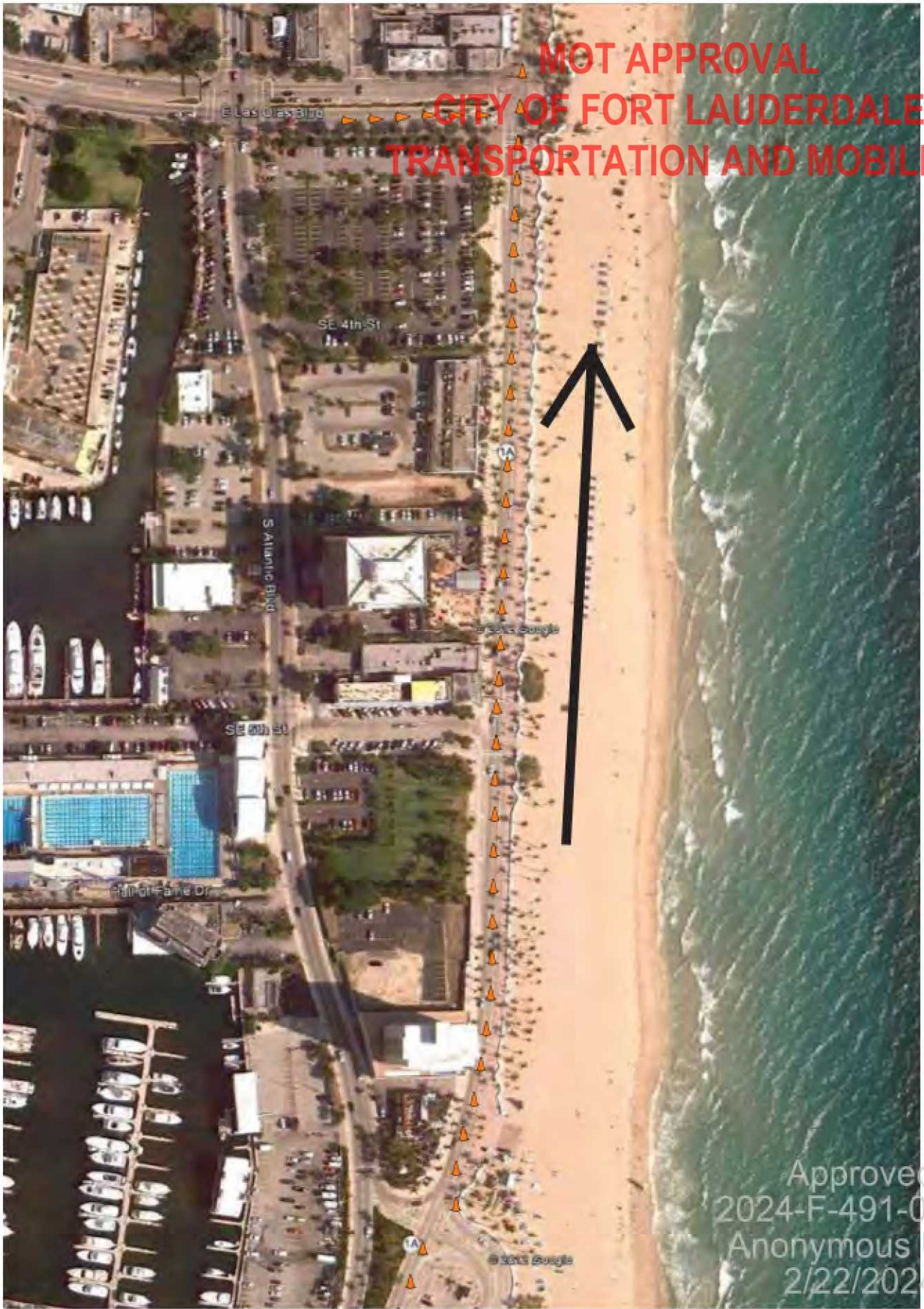
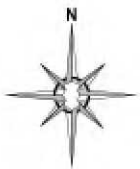
**Arrow Board**

**SPEED FINES  
DOUBLED  
WHEN WORKERS  
PRESENT**

Approved  
2024-F-491-00013  
Anonymous User  
Google  
21/21/2024



NB Right Lane Closure on Atlantic Blvd  
NB Right Lane Closure on Birch Rd /  
Two - Way Traffic on Birch Rd  
Road Closure on Vistamar St

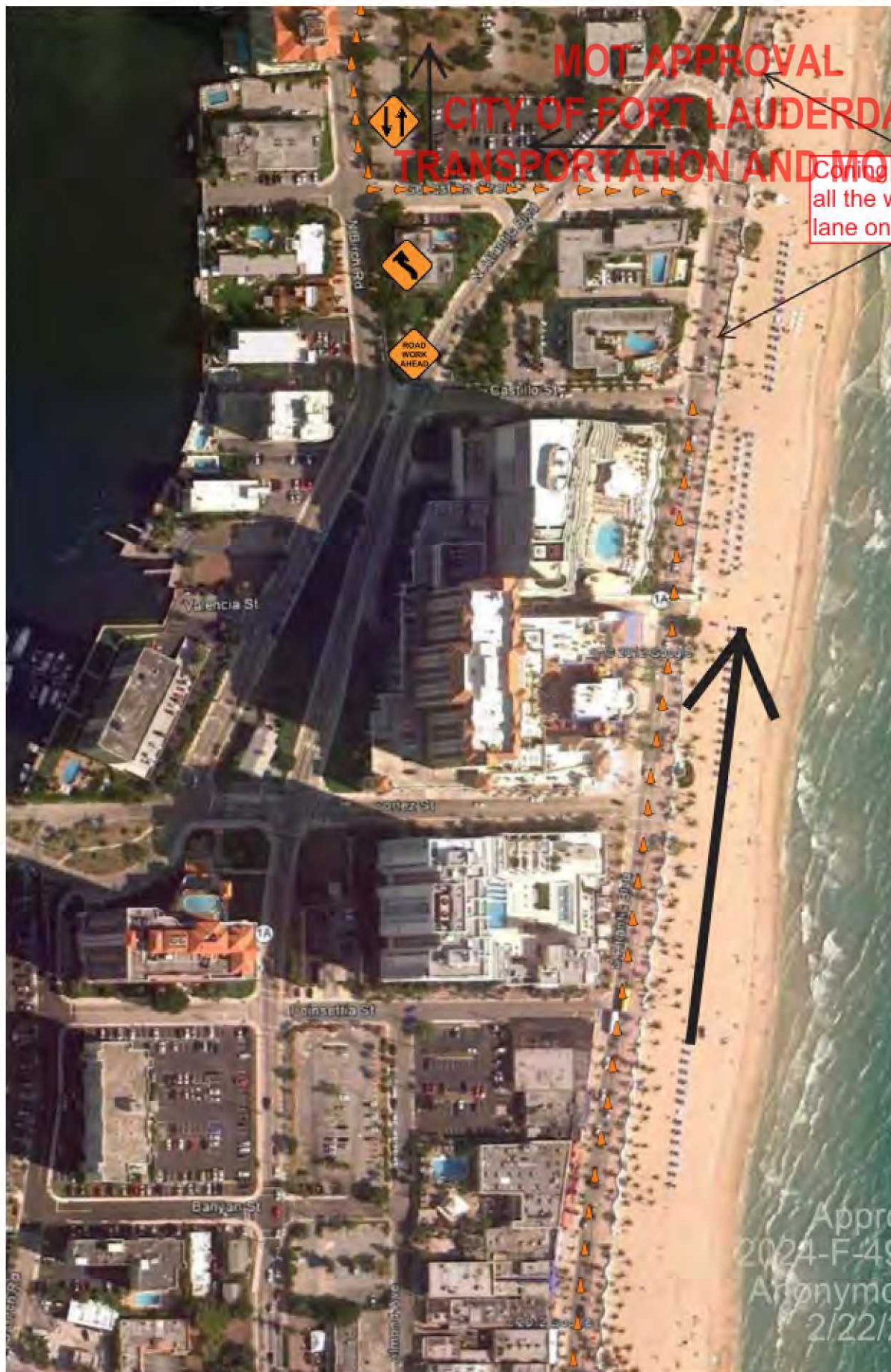
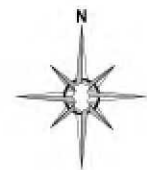


**MGT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY**

Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024



NB Right Lane Closure on Atlantic Blvd  
NB Right Lane Closure on Birch Rd /  
Two - Way Traffic on Birch Rd  
Road Closure on Vistamar St



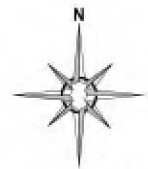
**MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY**

Cone continues  
all the way up curb  
lane on A1A

Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024



NB Right Lane Closure on Atlantic Blvd  
NB Right Lane Closure on Birch Rd /  
Two - Way Traffic on Birch Rd  
Road Closure on Vistamar St



**MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY**

Coning continues  
all the way up curb  
lane on A1A

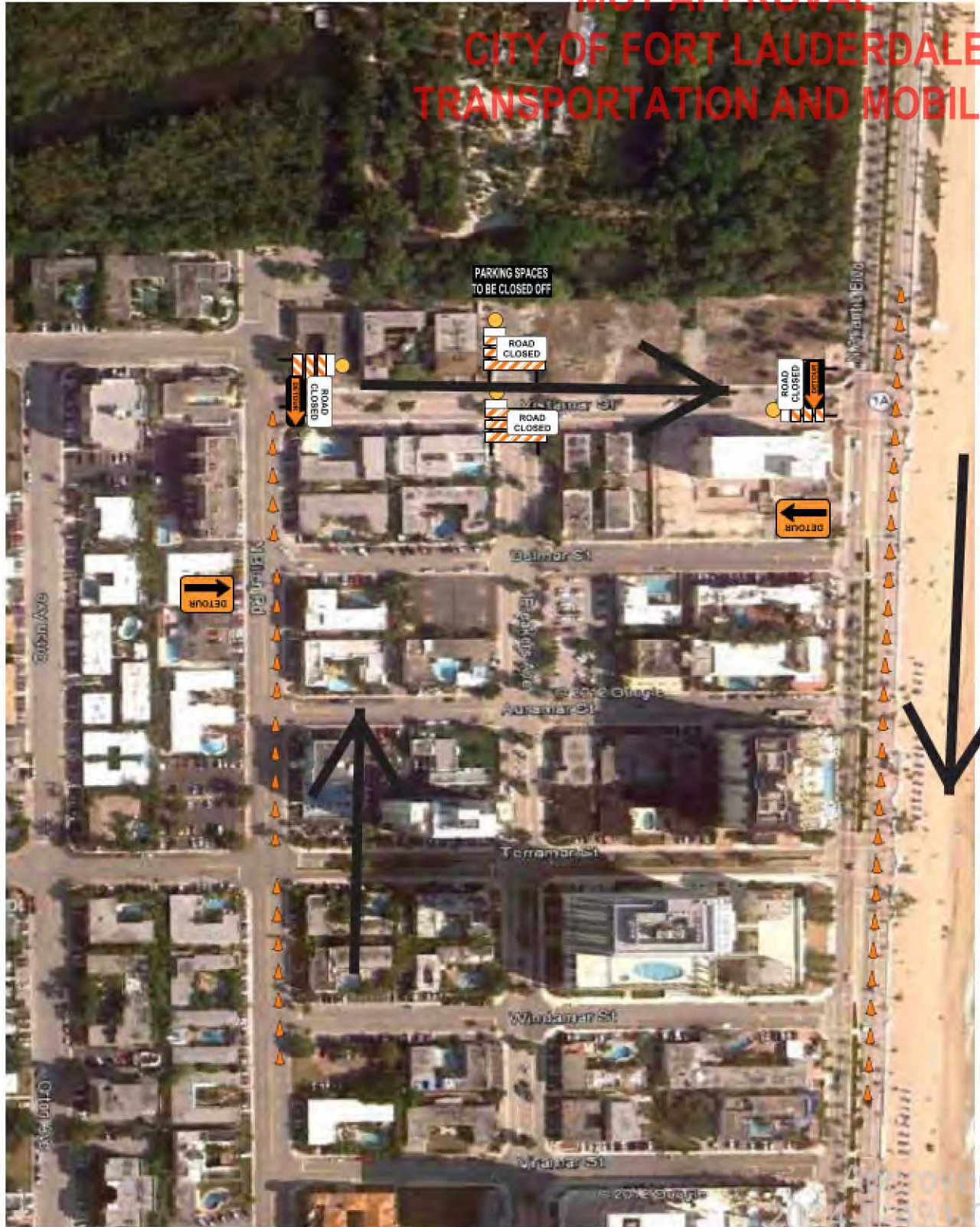
Approved  
491-00013  
Anonymous User  
1/22/2024



NB Right Lane Closure on Atlantic Blvd  
NB Right Lane Closure on Birch Rd /  
Two - Way Traffic on Birch Rd  
Road Closure on Vistamar St



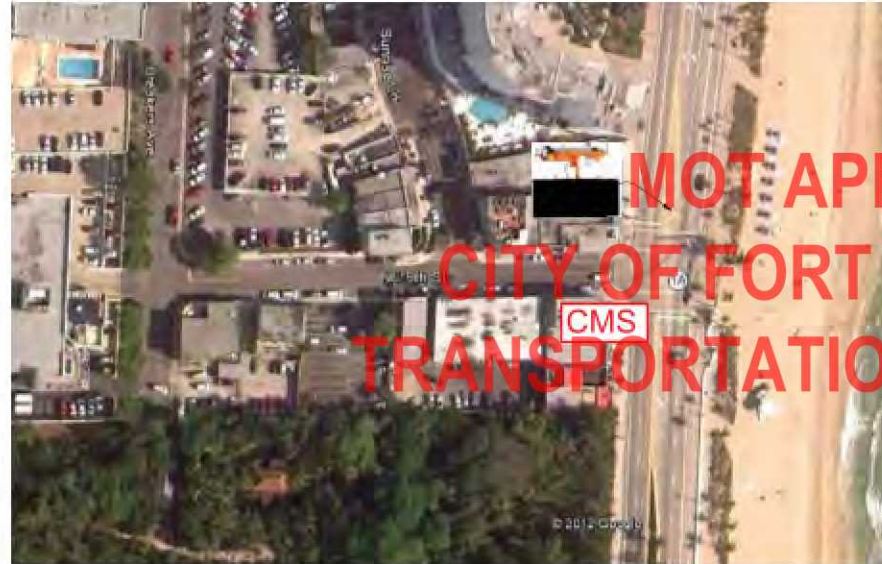
# MOT APPROVAL CITY OF FORT LAUDERDALE TRANSPORTATION AND MOBILITY





**CMS LOCATION -**

Facing north at 9th St. @ A1A  
**MESSAGE BOARDS SHALL BE  
PLACED ON MARCH 14**



**MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY**

**CMS LOCATION -**

Facing south at Harbor Dr. @ A1A  
**MESSAGE BOARDS SHALL BE  
PLACED ON MARCH 14**



Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024



PORTABLE CHANGEABLE MESSAGE SIGNS WORKSHEET

MOT APPROVAL

CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY

Location of board: Harbor Dr. at A1A facing northbound traffic

Used: from 3/06/24 at 12:00 PM

to 3/09/24 at 5:00 PM

Message programmed by: All American Baricades

MESSAGE 1

\_\_\_ \_\_\_ L A N E \_\_\_ \_\_\_  
C L O S U R E S  
\_\_\_ M A R \_\_\_ 0 9 \_\_\_

MESSAGE 2

\_\_\_ E X P E C T \_\_\_  
\_\_\_ D E L A Y S \_\_\_  
\_\_\_ M A R \_\_\_ 0 9 \_\_\_

Timing:

Message 1 will run: 5.0 seconds.

Message 2 will run: 5.0 seconds.

Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024

PORTABLE CHANGEABLE MESSAGE SIGNS WORKSHEET

MOT APPROVAL

CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY

Location of board: 9th St. at A1A facing southbound traffic

Used: from 3/06/24 at 12:00 PM

to 3/09/24 at 4:00 PM

Message programmed by: All American Baricades

MESSAGE 1

      L A N E        
C L O S U R E S  
   M A R    0 9   

MESSAGE 2

   E X P E C T     
   D E L A Y S     
   M A R    0 9   

Timing:

Message 1 will run: 5.0 seconds.

Message 2 will run: 5.0 seconds.

Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024



PORTABLE CHANGEABLE MESSAGE SIGNS WORKSHEET

MOT APPROVAL

CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY

Location of board: Harbor Dr. at A1A facing northbound traffic

Used: from 3/06/24 at 12:00 PM

to 3/09/24 at 5:00 PM

Message programmed by: All American Baricades

MESSAGE 1

\_\_\_ \_\_\_ L A N E \_\_\_ \_\_\_  
C L O S U R E S  
\_\_\_ M A R \_\_\_ 0 9 \_\_\_

MESSAGE 2

\_\_\_ E X P E C T \_\_\_  
\_\_\_ D E L A Y S \_\_\_  
\_\_\_ M A R \_\_\_ 0 9 \_\_\_

Timing:

Message 1 will run: 5.0 seconds.

Message 2 will run: 5.0 seconds.

Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024

PORTABLE CHANGEABLE MESSAGE SIGNS WORKSHEET

MOT APPROVAL

CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY

Location of board: 9th St. at A1A facing southbound traffic

Used: from 3/06/24 at 12:00 PM

to 3/09/24 at 4:00 PM

Message programmed by: All American Baricades

MESSAGE 1

\_\_\_ \_\_\_ L A N E \_\_\_ \_\_\_  
C L O S U R E S  
\_\_\_ M A R \_\_\_ 0 9 \_\_\_

MESSAGE 2

\_\_\_ E X P E C T \_\_\_  
\_\_\_ D E L A Y S \_\_\_  
\_\_\_ M A R \_\_\_ 0 9 \_\_\_

Timing:

Message 1 will run: 5.0 seconds.

Message 2 will run: 5.0 seconds.

Approved  
2024-F-491-00013  
Anonymous User  
2/22/2024






# TAM-MOT-24010030 - AIDS Walk

Final Audit Report

2024-03-01

Created:	2024-02-28
By:	Morgan Dunn (MDunn@fortlauderdale.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAARLP89cKmHZGL-rOPi7b1YB1SfnEGHmGS

## "TAM-MOT-24010030 - AIDS Walk" History

-  Document created by Morgan Dunn (MDunn@fortlauderdale.gov)  
2024-02-28 - 7:57:14 PM GMT- IP address: 50.232.252.93
-  Document emailed to Ekaete Ekwere (eekwere@fortlauderdale.gov) for signature  
2024-02-28 - 7:57:29 PM GMT
-  Email viewed by Ekaete Ekwere (eekwere@fortlauderdale.gov)  
2024-03-01 - 2:59:15 PM GMT- IP address: 50.232.252.93
-  Document e-signed by Ekaete Ekwere (eekwere@fortlauderdale.gov)  
Signature Date: 2024-03-01 - 3:13:36 PM GMT - Time Source: server- IP address: 50.232.252.93
-  Agreement completed.  
2024-03-01 - 3:13:36 PM GMT



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