

MAINTENANCE OF TRAFFIC (MOT) FORM

SECTION 1: APPLICANT INFORMATION

Applicant Name: Gregory von Hausch Applicant Phone: 954-520-3191
 Applicant Email: Greg@FLIFF.com
 Applicant Address: 503 SE 6 St, Ft Lauderdale FL 33301
(Address, City, State, Zip Code)
 City Project Manager (if applicable): _____ Phone: _____
 Agency responsible for this project: City County FDOT Other: Broward County Film Society, Inc
 On-site/Emergency Contact Phone: 954-520-3191

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CITY OF FORT LAUDERDALE
TRANSPORTATION AND MOBILITY

SECTION 2: PROJECT INFORMATION

ENG Permit # (obtain from Department of Sustainable Development (DSD)): Special Event
 Project Name: Fort Lauderdale Int'l Film Festival Oscar Party
 Project Address: 503 SE 6 St, Ft Lauderdale FL 33301
(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: 03/10/2024 Begin Time: 3pm
 End Date: 03/10/2024 End Time: 11:59pm

SECTION 3: PROJECT DETAILS

Partial or Shoulder Closure
 Full Road Closure (detour): Under 72 Hours
 Sidewalk Closure: Under 72 Hours
 Full Road/Sidewalk Closure: More than 72 Hours

Daily Setup/ Breakdown YES NO
 Using Crane in ROW* YES NO
 Parking Meters Impacted* YES NO

*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.).

Southeast 6 Street, Between Southeast 5 Avenue and SE 5 Terrace

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.)

We are just closing the street...not sure what is needed in this blank...prob N/A

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 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.

MOT APPROVAL
CITY OF FORT LAUDERDALE
TRANSPORTATION AND MOBILITY

The one block of Southeast 6th Street between SE 5th Ave and SE 5th Tr will be closed to eastbound and westbound traffic. Any traffic that needs to follow the closed portion will be detoured to SE 7th Street and then to either SE 5th Ave or 5th Tr depending the direction they are going. We have done this three times in the past.

SECTION 7: MOT FORM CHECKLIST (Provide one copy of each attachment.)

- | | |
|---|---|
| <input checked="" type="checkbox"/> Completed Required Signatures Form | <input checked="" type="checkbox"/> Certification(s) for Traffic Control Technician or Traffic Control Supervisor must be embedded on MOT plans along with FDOT indexes/MUTCD documents |
| <input checked="" type="checkbox"/> Color aerial(s)/MOT Plan with index overlay | |
| <input type="checkbox"/> County and State approvals (if required) | <input type="checkbox"/> Plan of work (optional, but preferred) |
| <input type="checkbox"/> Crane and Parking Mitigation (if required) | |
| <input type="checkbox"/> 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.

Gregory von Hausch Digitally signed by Gregory von Hausch
Date: 2024.02.07 14:30:51 -05'00'

 (APPLICANT SIGNATURE)

Gregory von Hausch, President & CEO

 (PRINT NAME/TITLE)

02/07/2024

 (DATE SIGNED)

As a consideration for the permission granted herein, Broward County Film Society, Inc 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.
(APPLICANT)

 (NAME OF COMPANY)

BY: _____
 (COMPANY AUTHORIZED AGENT)

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. All signatures and comments must be submitted before two-week review process begins.

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CITY OF FORT LAUDERDALE
TRANSPORTATION AND MOBILITY

<p style="text-align: center;">_____ Print Name</p> <p style="text-align: center;">_____ Signature</p> <p style="text-align: center;">Police Department 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;">_____ (Date)</p>
<p style="text-align: center;">Jason W Miller Print Name</p> <p style="text-align: center;"><i>Jason W. Miller</i> Signature</p> <p style="text-align: center;">Fire Rescue Department 528 N.W. 2nd 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;">2/8/24 _____ (Date)</p>
<p style="text-align: center;">_____ Print Name</p> <p style="text-align: center;">_____ Signature</p> <p style="text-align: center;">Broward County Traffic Engineering Division 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>
<p>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.</p>	
<p>OFFICE USE ONLY</p> <p>Department Director's Signature (requested by City staff if required)</p>	
<p style="text-align: center;">Morgan Dunn Print Name</p> <p style="text-align: center;"><i>Morgan Dunn</i> Signature</p> <p style="text-align: center;">Transportation and Mobility Department 290 N.E. 3rd Avenue Tel: 954- 828-4997 Email: MOT@fortlauderdale.gov <i>Call for Appointment. Walk-ins and hard copies NOT accepted.</i></p>	<p style="text-align: center;">2/26/24 _____ (Date)</p>
<p style="text-align: center;"><i>Ekaete Ekwere</i> _____ Signature</p> <p style="text-align: center;">Ekaete Ekwere (Feb 28, 2024 14:01 EST)</p> <p style="text-align: center;">Transportation and Mobility Department Ben Rogers, Director</p>	<p style="text-align: center;">_____ (Date)</p>

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.

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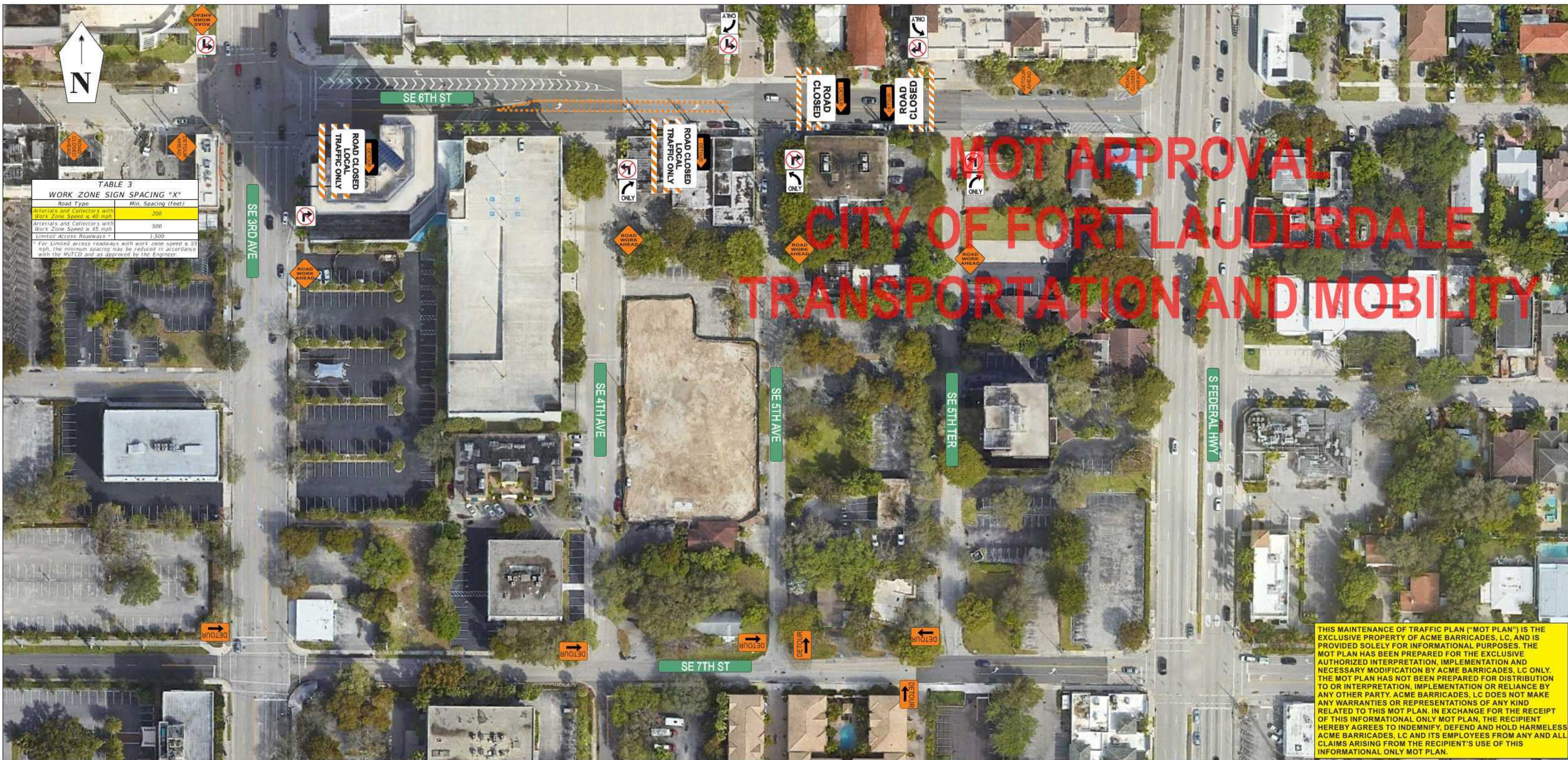
MOT APPROVAL

<p style="text-align: center;">M. Ferrer</p> <p style="text-align: center;">_____ Print Name</p> <p style="text-align: center;">_____ Signature</p> <p style="text-align: center;">Police Department 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;">_____ Signature</p> <p style="text-align: center;">2/8/24</p> <p style="text-align: center;">_____ (Date)</p>
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**TABLE 3
WORK ZONE SIGN SPACING "X"**

Road Type	Min. Spacing (feet)
Arterials and Collectors with Work Zone Speed \leq 40 mph	200
Arterials and Collectors with Work Zone Speed \geq 45 mph	500
Limited Access Roadways	1,500

* For Limited access roadways with work zone speed \geq 55 mph, the minimum spacing may be reduced in accordance with the MUTCD and as approved by the Engineer.

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THIS MAINTENANCE OF TRAFFIC PLAN ("MOT PLAN") IS THE EXCLUSIVE PROPERTY OF ACME BARRICADES, LC, AND IS PROVIDED SOLELY FOR INFORMATIONAL PURPOSES. THE MOT PLAN HAS BEEN PREPARED FOR THE EXCLUSIVE AUTHORIZED INTERPRETATION, IMPLEMENTATION AND NECESSARY MODIFICATION BY ACME BARRICADES, LC ONLY. THE MOT PLAN HAS NOT BEEN PREPARED FOR DISTRIBUTION TO OR INTERPRETATION, IMPLEMENTATION OR RELIANCE BY ANY OTHER PARTY. ACME BARRICADES, LC DOES NOT MAKE ANY WARRANTIES OR REPRESENTATIONS OF ANY KIND RELATED TO THIS MOT PLAN. IN EXCHANGE FOR THE RECEIPT OF THIS INFORMATIONAL ONLY MOT PLAN, THE RECIPIENT HEREBY AGREES TO INDEMNIFY, DEFEND AND HOLD HARMLESS ACME BARRICADES, LC AND ITS EMPLOYEES FROM ANY AND ALL CLAIMS ARISING FROM THE RECIPIENT'S USE OF THIS INFORMATIONAL ONLY MOT PLAN.

FDOT This Certifies that **ROOSEVELT BYNES**

Has Completed a Florida Department of Transportation Approved Temporary Traffic Control (TTC) Advanced (Refresher) Course.

Date Expires: 01/14/2026 Certificate # 80573
Instructor: Paul Arenth FDOT Provider # 134

A&W Consultants, Inc.
Phone: 386-788-9899
5545 Benchmark Lane
Sanford, FL 32773
www.FloridaMOT.com
nicolle@aswconsultants.com

MOT SHALL COMPLY WITH THE FDOT DESIGN STANDARDS AND THE MUTCD

OVERVIEW
REFERENCE INDEXES TA-20
FOR SET-UP DETAILS

SE 6TH ST
FORT LAUDERDALE, FLA

NOTE:
CONTRACTOR TO MAINTAIN
ROAD CLOSURE EQUIPMENT
AT ALL TIMES DURING WORK HOURS



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.*
2. *On multi-lane streets, Detour signs with an Advance Turn Arrow should be used in advance of a turn.*

Option:

3. Flashing warning lights and/or flags may be used to call attention to the advance warning signs.
4. Flashing warning lights may be used on Type 3 Barricades.
5. Detour signs may be located on the far side of intersections. A Detour sign with an advance arrow may be 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.

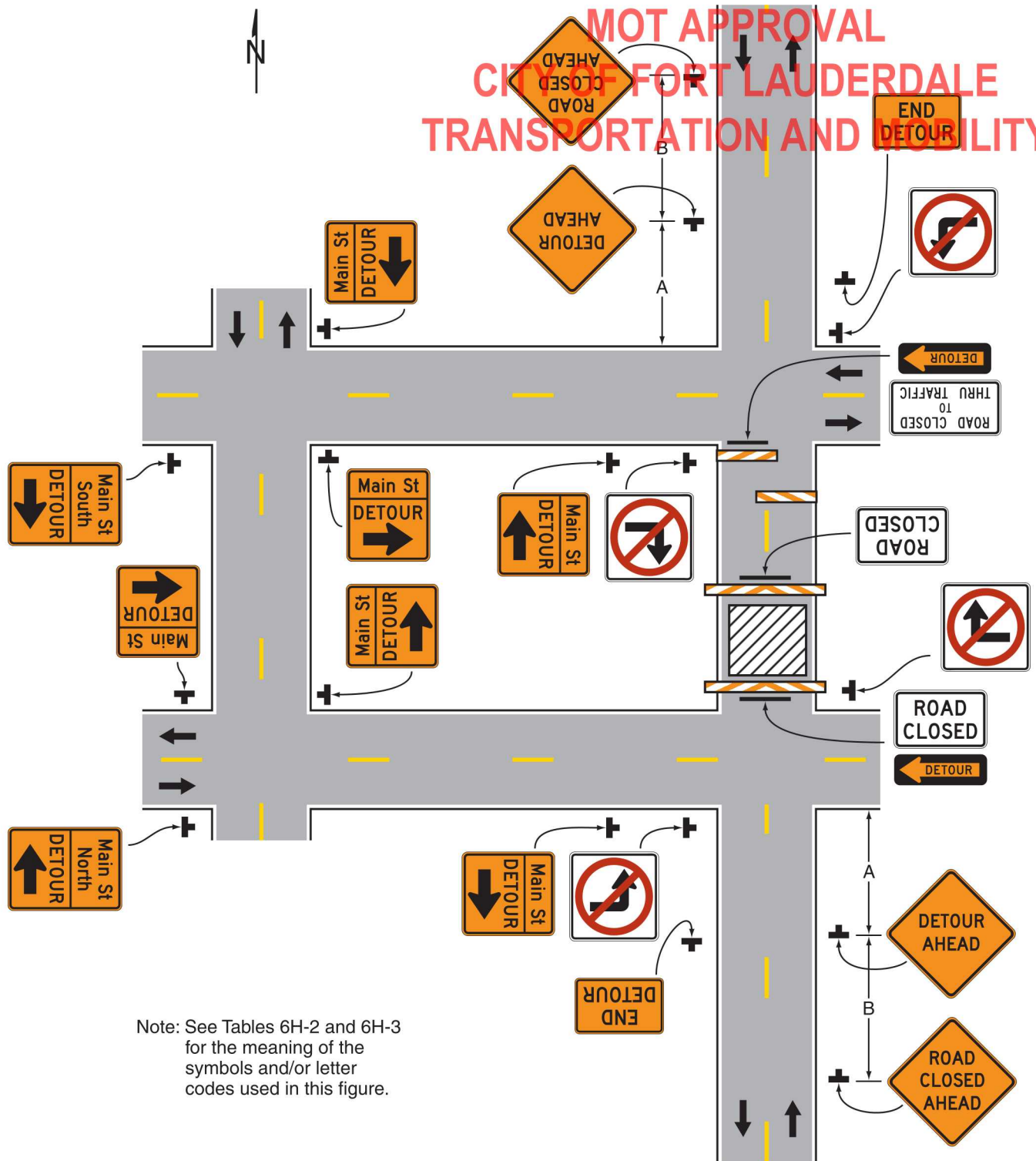
Standard:

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.

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



Note: See Tables 6H-2 and 6H-3 for the meaning of the symbols and/or letter codes used in this figure.

Typical Application 20





TAM-MOT-24020032 - FLIFF Oscar Party

Final Audit Report

2024-02-28

Created:	2024-02-26
By:	Morgan Dunn (MDunn@fortlauderdale.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAerSJ7jDMziM1qLWFCXAnoqSsloVCdx3M

"TAM-MOT-24020032 - FLIFF Oscar Party" History

-  Document created by Morgan Dunn (MDunn@fortlauderdale.gov)
2024-02-26 - 6:39:26 PM GMT- IP address: 50.232.252.93
-  Document emailed to Ekaete Ekwere (eekwere@fortlauderdale.gov) for signature
2024-02-26 - 6:39:50 PM GMT
-  Document e-signed by Ekaete Ekwere (eekwere@fortlauderdale.gov)
E-signature obtained using URL retrieved through the Adobe Acrobat Sign API
Signature Date: 2024-02-28 - 7:01:44 PM GMT - Time Source: server- IP address: 50.232.252.93
-  Agreement completed.
2024-02-28 - 7:01:44 PM GMT



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