

MAINTENANCE OF TRAFFIC (MOT) FORM

SECTION 1: APPLICANT INFORMATION

Applicant Name: Howard Alan Events Applicant Phone: 561-746-6615
 Applicant Email: Megan@artfestival.com
 Applicant Address: 270 Central Blvd, Suite 107 Jupiter FL 33458
(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: _____

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: 36th Annual Las Olas Art Fair (Fort Lauderdale, FL)
 Project Address: 620 E Las Olas Blvd, 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: January 6th, 2024 / March 2nd, 2024 Begin Time: 4AM
 End Date: January 7th, 2024 / March 3rd, 2024 End Time: 9PM

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.).

North and south side of E. Las Olas Blvd from SE 6th Ave to SE 11th Ave.

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.)

TA-20

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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.

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North and south side of E. Las Olas Blvd from SE 6th Ave to SE 11th Ave.

Explorers will be stationed in neighborhood.

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

- | | |
|--|--|
| <input type="checkbox"/> Completed Required Signatures Form | <input 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 type="checkbox"/> Color aerial(s)/MOT Plan with index overlay | <input type="checkbox"/> Plan of work (optional, but preferred) |
| <input type="checkbox"/> County and State approvals (if required) | |
| <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.

Megan McMahan
(APPLICANT SIGNATURE)

Megan McMahan / Operations Manager
(PRINT NAME/TITLE)

11/28/23
(DATE SIGNED)

As a consideration for the permission granted herein, _____ 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.

(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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<p>_____ Print Name</p> <p style="text-align: center;">Police Department 1300 W. Broward Boulevard Tel: 954-828-5477 <i>Call for Appointment</i></p> <p>*Required only if MOT includes a detour for any direction of travel.</p>	<p>_____ Signature</p> <p style="text-align: right;">(Date)</p>
<p>Bruce Strandhagen _____ Print Name</p> <p style="text-align: center;"><i>Bruce Strandhagen</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>*Required only if MOT includes a detour for any direction of travel.</p>	<p style="text-align: right;">1/4/2024 _____ (Date)</p>
<p>_____ Print Name</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>*Required only if MOT/detour affects Broward County road or intersection.</p>	<p>_____ Signature</p> <p style="text-align: right;">_____ (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>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: right;">1/4/24 _____ (Date)</p>
<p style="text-align: center;"><i>Milos Majstorovic</i> _____ Signature</p> <p style="text-align: center;">Transportation and Mobility Department Ben Rogers, Director</p>	<p style="text-align: right;">_____ (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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<p>_____ Print Name</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><small>*Required only if MOT includes a detour for any direction of travel.</small></p>	<p>_____ Signature</p> <p style="text-align: right;">_____ (Date)</p>
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OFFICE USE ONLY
Department Director's Signature (requested by City staff if required)

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<p style="text-align: center;"><u>Milos Majstorovic</u> Signature</p> <p style="text-align: center;">Transportation and Mobility Department Ben Rogers, Director</p>	<p style="text-align: right;">_____ (Date)</p>
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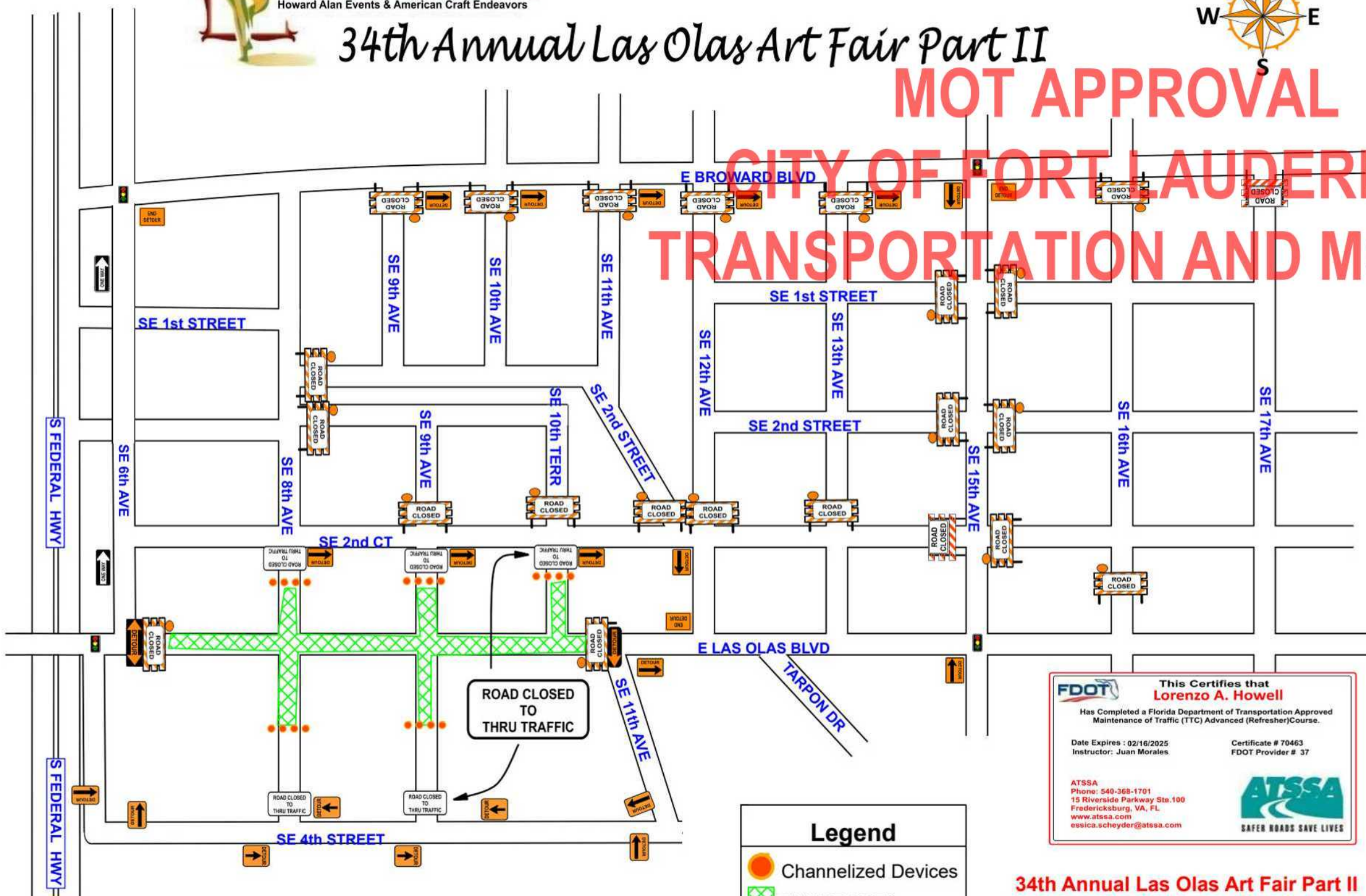
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34th Annual Las Olas Art Fair Part II

MOT APPROVAL

CITY OF FORT LAUDERDALE TRANSPORTATION AND MOBILITY



FDOT This Certifies that **Lorenzo A. Howell**
 Has Completed a Florida Department of Transportation Approved Maintenance of Traffic (TTC) Advanced (Refresher) Course.
 Date Expires : 02/16/2025 Certificate # 70463
 Instructor: Juan Morales FDOT Provider # 37

ATSSA
 Phone: 540-365-1701
 15 Riverside Parkway Ste.100
 Fredericksburg, VA, FL
 www.atssa.com
 essica.scheyder@atssa.com

ATSSA
 SAFER ROADS SAVE LIVES

Legend

- Channelized Devices
- EVENT AREA

34th Annual Las Olas Art Fair Part II
Megan McMahan / Operations Manager
Cell: (609) 330-6504

All American Barricades
ATA
 ARIEL GARCES
 ALL AMERICAN BARRICADES, CORP.
 ATSSA CERTIFICATE #60071
Ariel Garces

DATE	REVISIONS	ALL AMERICAN BARRICADES	DESIGNER	COMPANY NAME	PROJECT NAME / NO.	SHEET NO.
		2300 SW 41ST AVENUE FT. LAUDERDALE, FL 33317 1-888-4 SAFETY (888-472-3389) www.barricades.com / email: ariel@barricades.com	Lorenzo Howell ATSSA Cert. No. 70463	HOWARD ALAN EVENTS	34th Annual Las Olas Art Fair Part II Ft. Lauderdale, FL	1 OF 1

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.

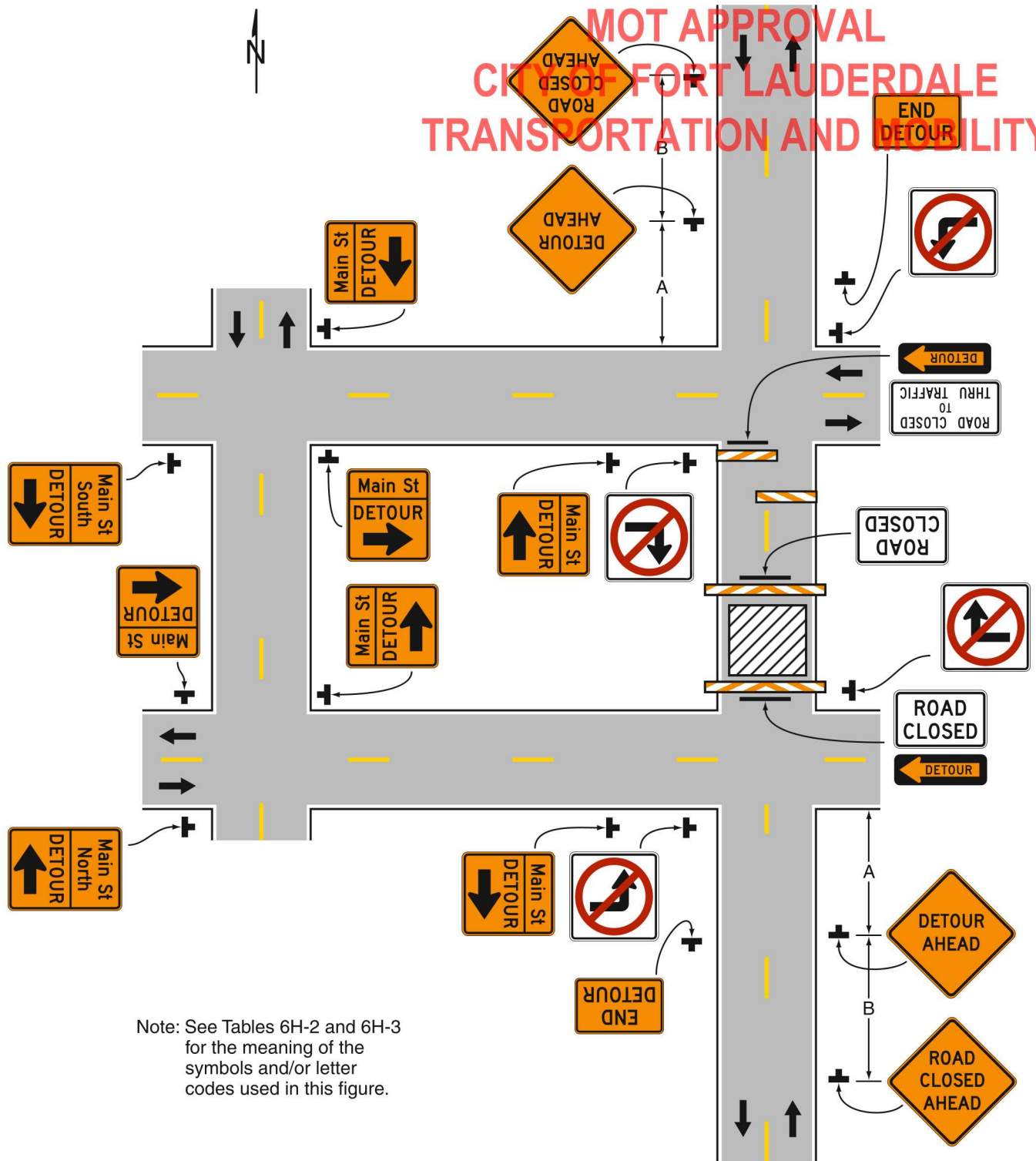
Standard:

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-23110084 - Las Olas Art Fair

Final Audit Report

2024-01-05

Created:	2024-01-04
By:	Morgan Dunn (MDunn@fortlauderdale.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAqQzmaqjls9zm7Bk9mSpv5XHPLUGS4bM

"TAM-MOT-23110084 - Las Olas Art Fair" History

-  Document created by Morgan Dunn (MDunn@fortlauderdale.gov)
2024-01-04 - 7:00:29 PM GMT- IP address: 73.138.223.18
-  Document emailed to Milos Majstorovic (MMajstorovic@fortlauderdale.gov) for signature
2024-01-04 - 7:00:46 PM GMT
-  Email viewed by Milos Majstorovic (MMajstorovic@fortlauderdale.gov)
2024-01-05 - 2:10:54 AM GMT- IP address: 104.47.64.254
-  Document e-signed by Milos Majstorovic (MMajstorovic@fortlauderdale.gov)
Signature Date: 2024-01-05 - 2:12:11 AM GMT - Time Source: server- IP address: 66.176.25.69
-  Agreement completed.
2024-01-05 - 2:12:11 AM GMT

