

# MAINTENANCE OF TRAFFIC (MOT) FORM

## SECTION 1: APPLICANT INFORMATION

MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY

Applicant Name: Nigeria Livingston Applicant Phone: 954-828-6409  
 Applicant Email: nlivingston@fortlauderdale.gov  
 Applicant Address: 1150 G. Harold Martin Drive Fort Lauderdale, FL 33304  
(Address, City, State, Zip Code)  
 City Project Manager (if applicable): Nigeria Livingston Phone: 954-828-6409  
 Agency responsible for this project:  City  County  FDOT  Other: \_\_\_\_\_  
 On-site/Emergency Contact Phone: Nigeria Livingston (954) 398-3054

## SECTION 2: PROJECT INFORMATION

GMOT Permit # (obtain from Department of Sustainable Development (DSD)): City Special Event  
 Project Name: Great American Beach Party  
 Project Address: 3000 East Las Olas Blvd  
(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: 5/25/24 Begin Time: 5:00 am  
 End Date: 5/25/24 End Time: 11:59 pm

## SECTION 3: PROJECT DETAILS

Partial 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.

## 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.).

East Las Olas Blvd between Seabreeze Blvd and A1A

Almond Ave - just south of Banyan Street (south of parking lot entrance) to East Las Olas Blvd.

Special Event closure

No hazards

## 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.)

# MAINTENANCE OF TRAFFIC (MOT) FORM

**MOT APPROVAL**

**CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY**

## 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.

Full closure of East Las Olas Blvd from Seabreeze Boulevard east to A1A

Closure of Almond Ave just south of Banyan Street (south of parking lot entrance) south to Las Olas Blvd.

closed all day

Special Event Closure

## 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.

  
(APPLICANT SIGNATURE)

Senior Recreation Coordinator Nigeria Livingston  
(PRINT NAME/TITLE)

4/16/24  
(DATE SIGNED)

As a consideration for the permission granted herein, (APPLICANT) 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](mailto:MOT@fortlauderdale.gov) separately on this page. All signatures and comments must be submitted before two-week review process begins.

MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY

<p style="text-align: center;">Print Name _____ 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;">_____ (Date)</p>
<p style="text-align: center;">jason W Miller _____ Signature _____</p> <p style="text-align: center;"><b>Fire Rescue Department</b> 528 N.W. 2<sup>nd</sup> Street   Tel: 954-828-6864   Email: <a href="mailto:CBotting@fortlauderdale.gov">CBotting@fortlauderdale.gov</a> <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;">5/3/24 _____ (Date)</p>
<p style="text-align: center;">Print Name _____ 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>
<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 style="text-align: center;">Morgan Dunn _____ 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 NOT accepted.</i></p>	<p style="text-align: center;">5/10/24 _____ (Date)</p>
<p style="text-align: center;"><u>Ekaete Ekwere</u> Ekaete Ekwere (May 16, 2024 17:08 EDT) Signature</p> <p style="text-align: center;"><b>Transportation and Mobility Department</b> 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 954-828-6075 or email [basmith@fortlauderdale.gov](mailto:basmith@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).

## 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.

M. Ferrer

Print Name

*monica ferrer*

Signature

**Police Department**

1300 W. Broward Boulevard | Tel: 954-828-5477

*Call for Appointment*

\*Required only if MOT includes a detour for any direction of travel.

5/10/24

(Date)

Print Name

Signature

**Fire Rescue Department**

528 N.W. 2<sup>nd</sup> Street | Tel: 954-828-6864 | Email: [CBotting@fortlauderdale.gov](mailto:CBotting@fortlauderdale.gov)

*Call for Appointment*

\*Required only if MOT includes a detour for any direction of travel.

(Date)

Print Name

Signature

**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](mailto: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](mailto:MOT@fortlauderdale.gov)

*Call for Appointment. Walk-ins NOT accepted.*

(Date)

Signature

**Transportation and Mobility Department**

Ben Rogers, Director

(Date)

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 954-828-6075 or email [basmith@fortlauderdale.gov](mailto:basmith@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).



TABLE 1 CHANNELIZING DEVICE SPACING		
Work Zone Speed (mph)	Max. Spacing (feet)	
	Cones or Temporary Tubular Markers	Type I Barricades, Type II Barricades, Vertical Panels, or Drums
≤ 45	Taper	Tangent
≥ 50	25	50
	50	100

TABLE 2 TAPER LENGTH "L"		
Work Zone Speed (mph)	Min. Length (feet)	
	≤ 40	W
≥ 45	L = WS	L = WS

Where: W = width of offset in feet  
S = speed in mph

TABLE 3 WORK ZONE SIGN SPACING "X"	
Road Type	Min. Spacing (feet)
Arterials and Collectors with Work Zone Speed ≤ 40 mph	200
Arterials and Collectors with Work Zone Speed ≥ 45 mph	500
Limited Access Roadways *	1,500

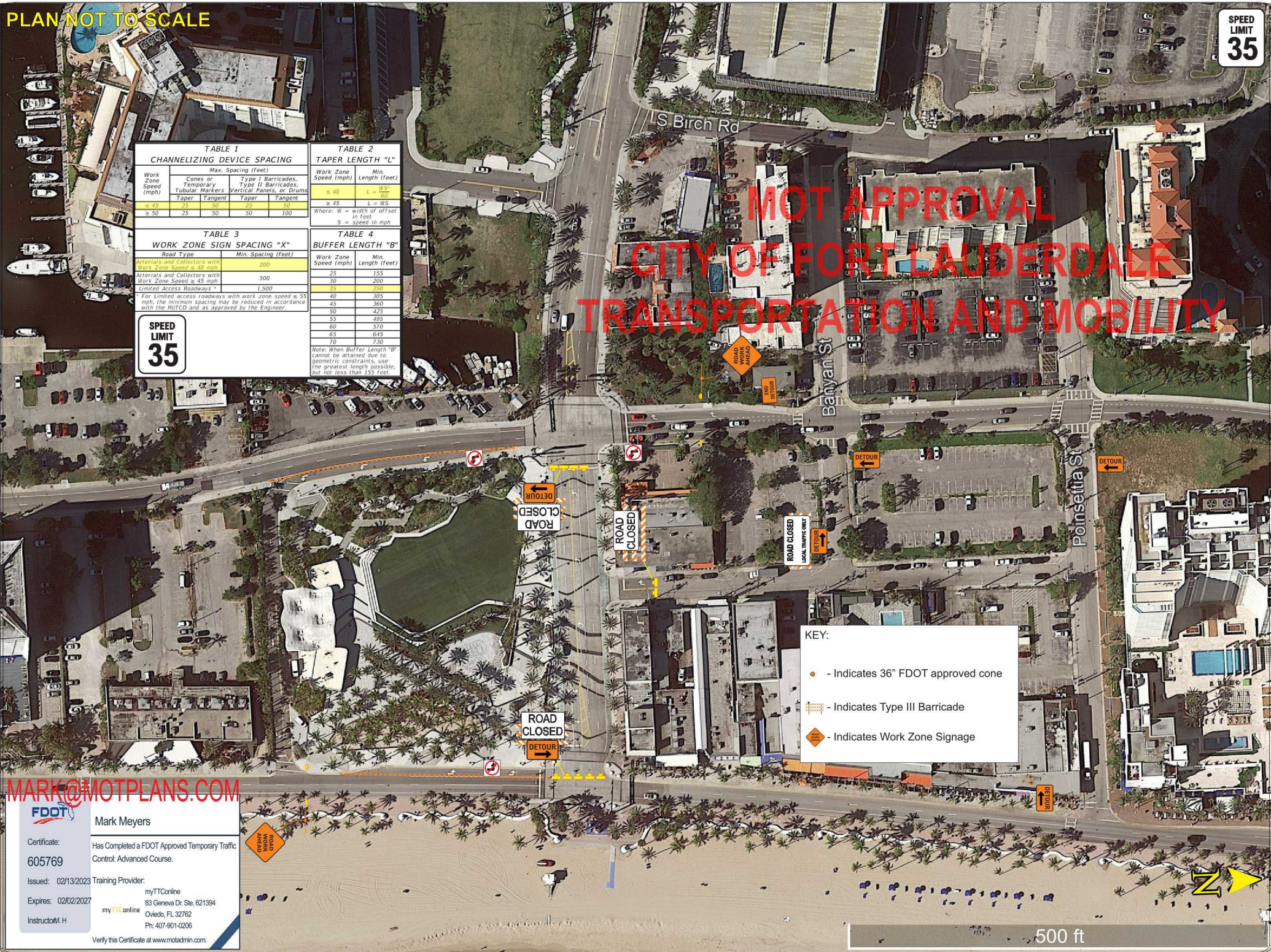
  

TABLE 4 BUFFER LENGTH "B"		
Work Zone Speed (mph)	Min. Length (feet)	
	25	155
30	200	250
40	305	360
45	360	425
50	425	495
55	495	570
60	570	645
65	645	720
70	720	

Note: When Buffer Length "B" cannot be attained due to geometric constraints, use the greatest length possible, but not less than 155 feet.

SPEED LIMIT 35

MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY



KEY:

- - Indicates 36" FDOT approved cone
- - Indicates Type III Barricade
- ◆ - Indicates Work Zone Signage

MARK@MOTPLANS.COM

**FDOT**  
Mark Meyers  
Certificate: Has Completed a FDOT Approved Temporary Traffic Control, Advanced Course.  
605769  
Issued: 02/13/2023 Training Provider: myTTOnline  
Expires: 02/02/2027 83 Geneva Dr. Ste. 621394  
Oviedo, FL 32762  
Ph: 407-901-0206  
Instructor: M.H.  
Verify this Certificate at www.motadmin.com.



# DETOUR OVERVIEW

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



[MARK@MOTPLANS.COM](mailto:MARK@MOTPLANS.COM)

**FDOT**  
Mark Meyers  
Certificate: 605769  
Issued: 02/13/2023  
Expires: 02/02/2027  
Instructor: M. H.  
Has Completed a FDOT Approved Temporary Traffic Control: Advanced Course.  
Training Provider: myTTOnline  
83 Geneva Dr. Ste. 621394  
Oviedo, FL 32762  
Ph: 407-901-0206  
Verify this Certificate at [www.motadmin.com](http://www.motadmin.com).



1000 ft

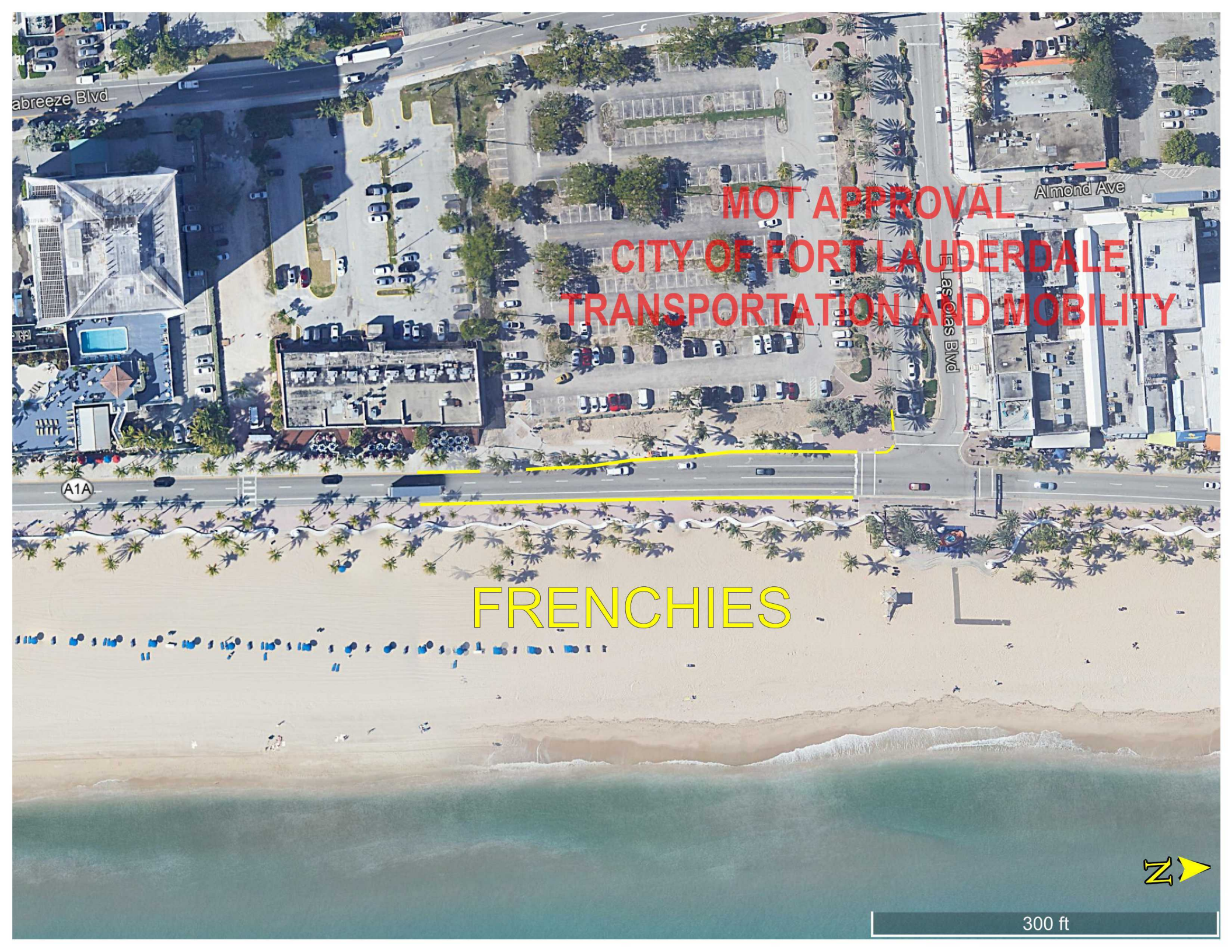


MOT APPROVAL  
CITY OF FORT LAUDERDALE  
TRANSPORTATION AND MOBILITY

FRENCHIES



300 ft





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

20

10

15

6

SE 6th St

Seabreeze Blvd

Almond Ave

S Fort Lauderdale Beach Blvd

Cortez St

S Birch Rd

S Birch Rd



1000 ft







# TAM-MOT-24050003 - Great American Beach Party

Final Audit Report

2024-05-16

Created:	2024-05-10
By:	Morgan Dunn (MDunn@fortlauderdale.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAgZFegeVuuHZ6SwZgFdoh2ld7RAmyavff

## "TAM-MOT-24050003 - Great American Beach Party" History

-  Document created by Morgan Dunn (MDunn@fortlauderdale.gov)  
2024-05-10 - 12:47:17 PM GMT
-  Document emailed to Ekaete Ekwere (eekwere@fortlauderdale.gov) for signature  
2024-05-10 - 12:47:27 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: 2024-05-16 - 9:08:42 PM GMT - Time Source: server
-  Agreement completed.  
2024-05-16 - 9:08:42 PM GMT



Powered by  
**Adobe**  
Acrobat Sign