



**BROWARD COUNTY SHERIFF'S OFFICE
DEPARTMENT OF FIRE RESCUE AND EMERGENCY SERVICES
FIRE PREVENTION BUREAU**

Main Office 954-831-8210
2601 West Broward Boulevard, Room 3061, Fort Lauderdale, FL 33312
Cooper City District Office
10550 Stirling Road, Cooper City, FL 33026-3405
Phone: 954-432-8905
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APPLICATION FOR SPECIAL EVENT PERMIT

Name of Event: _____ Setup Date & Hrs: ___/___/___ (___:___ - ___:___)

Event Date & Hours: ___/___/___ (___:___ to ___:___) & ___/___/___ (___:___ - ___:___)

Event Site Address: _____ City: _____

Site Manager/Supervisor: _____ Cell #: _____

Business Name: _____ Work#: _____

Business Owner/Agent: _____ Cell #: _____

Business Address: _____

City, State, Zip: _____ Fax # : _____

Email Contact: _____

Canopy Use: Yes No If Yes, subject to permits as required by the Building Dept.

Electrical Use: Yes No If Yes, subject to permits as required by the Building Dept.

Electrical Power provided with: Generator Temporary Power Drop Property power

*Portable Gas-powered Generators will be less than 8,000W and "Do Not" need to be grounded

Gas Fueled Equipment: Yes No If Yes, subject to permits as required by the Building Dept.

Fuel Sources: Propane gas Natural gas Diesel Fuel Gasoline

Cooking Equipment Use: Yes No If Yes, subject to permits as required by the Building Dept.

Types: Fryers Propane Grills Charcoal Grills Concession Trailer Warmers Sterno

Rides: Yes No If Yes, may require State inspection depending on the type of ride

Type: Mechanical Inflatables (bounce house, slides, etc.) Manual (not power driven)

Pyrotechnic/Fireworks Displays: Yes No If Yes requires separate approval process completed by Company or Technician.

Documents to be presented to Fire Prevention Bureau with completed application:

□ Site Plan (Include the following):

- | | |
|---|---|
| ___ Location of cooking area and barrier
Being used to separate it from the public. | ___ Location of generators and barrier being
Used to be separate from the public
*Generators will be cordoned off w/ Caution Tape and/or Orange Safety Fence |
| ___ Canopy Locations w/ sizes-Quantity
*Canopies are (10 x 10) without side. Canopies will be secured with concrete weights... Flame Retardant certificate is attached. | ___ Location of temp power drop |
| ___ Fuel storage/dispensing areas | ___ Rides w/ descriptions-Quantity ___ |
| ___ Emergency Access Area for EMS & Fire | ___ Identify any fences/gates around event |
| ___ Location of vendor booths & games | ___ Stage locations |
| ___ Residential trailers for crews (carnivals)
Show barrier from general public | ___ Table, chair, and equipment layout
under gathering canopies |
| ___ Cable covers for electrical lines & hoses
That is in path of egress for patrons | ___ Distances of structures, roadways,
cooking equipment, canopies, etc. |
| ___ Location of hazards on property such as
Ditches, canals, lakes, construction, etc. | ___ Traffic routing, road closures, separation
Of parking area from event |
| ___ Location of fire extinguishers & other
Required life safety equipment | ___ No smoking signs for large canopy
gathering areas |
- ___ Provide 2 copies of the site plan for Fire Marshal's Bureau and 2 copies for the Building Department.

- Copy of written permission from the property owner, allowing the event on their property.
- Copy of proof of public premises liability insurance in the amount of \$1,000,000, Naming **The Broward Sheriff's Office** as an additional insured.
- Copy of proof of public premises liability insurance in the amount of \$1,000,000, Naming the applicable Municipality (**The City of Cooper City**), as additional insured.
- Canopy use: provide copy of building permit, including flame retardant certificate for canopy material, schematic of canopy structure with anchors to ground.
- Electrical use: provide copy of electrical permit, generator specifications, temporary power drop circuit info.
- Gas (LP/Natural) fueled equipment use: provide copy of plumbing permit, provide piping schematic. Equipment checked in place at event and must be a certified company/technician that works with gas.
- Cooking equipment use: See, provide, vendor information sheet. If using a residential grill, the grill and the LP tanks shall be checked in place and shall have all connected hoses and couplings checked for leaks on the day of the event
- Mechanical carnival ride use: contact the Florida Dept. of Agriculture, Fair Ride Inspection, to schedule the ride inspector. Contact number 850-488-9790.

- Food preparation & sale (excluding non-profit agencies): contact the Florida Dept. of Business & Professional Regulation, Division of Hotels and Restaurants to schedule an inspector. Contact number 850-487-1395
- Firewatch may be required by Fire Prevention Bureau (FPB), this will be determined once detailed information reviewed on event. Voluntary EMS detail maybe requested.
- Check made out to the Broward Sheriff's Office for permit/inspection, firewatch, and/or EMS detail fees. Fees must be paid prior to event date and permit issuance

• **Permit Fee Break Down: (to be completed by BSO Fire Prevention Bureau)**

- Permit/Inspection Fee(s) * \$ _____ Re-inspection Fee(s)* \$ _____ (If necessary)
- Standby Firewatch Fee(s) * \$ _____/hr. x _____ hrs. X _____ = \$ _____
- Standby Rescue Service Fee(s) * \$ _____/hr. x _____ hrs. X _____ = \$ _____

****(All fees for Permits, Inspections, Firewatch and Rescue Services shall be paid in full prior to event permit approval receipt. In the event, that you will require additional fire watch hours due to extended hours, once the approval has been issued, please contact the Fire Prevention Office during regular business hours. After hours, contact our Dispatch Center (954-476-4741) to contact the On Duty Fire Prevention Officer.***

- NOTE:**
- (a) Separate permit required for each event site.
 - (b) Application must be submitted with all required attachments 30 days prior to event period Starting date.

The Broward Sheriff's Office, Fire Prevention Bureau, reserves the right to revoke this permit at Any time for non-compliance of applicable codes and/or unsafe conditions or acts.

I have completed the above information and certify that the information provided as components of the event permit are factual and accurate to the best of my knowledge.

_____ Printed Name _____ Applicant's Signature _____ Date

Permit# _____ (Assigned by Fire Prevention Bureau)