

MAINTENANCE OF TRAFFIC (MOT) FORM

SECTION 1: APPLICANT INFORMATION

Applicant Name: Max Newhart Applicant Phone: 954-828-5382
 Applicant Email: mnewhart@fortlauderdale.gov
 Applicant Address: 3351 NE 33 Avenue, Fort Lauderdale, FL, 33308
(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: Max Newhart 954-383-9346

SECTION 2: PROJECT INFORMATION

ENG Permit # (obtain from Department of Sustainable Development (DSD)): Special Event
 Project Name: Pre-Labor Day Event
 Project Address: NE 32st between A1A and NE 33ave & NE 33st & NE 32 Ave between
(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: September 1, 2024 Begin Time: 5am
 End Date: September 1, 2024 End Time: 11pm

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.).

NE 33 Street & Northeast 32 street between A1A & Northeast 33ave

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

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.

Streets will be closed 5am -11pm on September 1, 2024

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.

Max Newhart
Digitally signed by Max Newhart
Date: 2024.07.10 09:52:32 -0400'

(APPLICANT SIGNATURE)

July 10, 2024

(DATE SIGNED)

Max Newhart/Recreation Program Supervisor

(PRINT NAME/TITLE)

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.



(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.

<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>	_____ (Date)
<p style="text-align: center;"> Jason W Miller _____ Print Name </p> <p style="text-align: center;"> Jason W Miller _____ Signature </p> <p style="text-align: center;"> <small>Digitally signed by Jason W Miller Date: 2024.08.28 09:59:03 -04'00'</small> </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>	_____ (Date)
<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>	_____ (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.	
OFFICE USE ONLY Department Director's Signature (requested by City staff if required)	
<p style="text-align: center;"> Morgan Dunn _____ Print Name </p> <p style="text-align: center;">  _____ 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>	_____ 8/28/24 (Date)
<p style="text-align: center;">  <u>Ekaete Ekwere (Aug 30, 2024 09:08 EDT)</u> _____ Signature </p> <p style="text-align: center;"> Transportation and Mobility Department Ben Rogers, Director </p>	_____ (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 954-828-4349 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>M. Ferrer _____</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;">8/13/24 _____</p> <p style="text-align: center;">(Date)</p>
<p>Police Department 1300 W. Broward Boulevard Tel: 954-828-5477 <i>Call for Appointment</i> *Required only if MOT includes a detour for any direction of travel.</p>		
<p>_____ _____</p> <p style="text-align: center;">Print Name</p>	<p>_____ _____</p> <p style="text-align: center;">Signature</p>	<p>_____ _____</p> <p style="text-align: center;">(Date)</p>
<p>Fire Rescue Department 528 N.W. 2nd Street Tel: 954-828-6800 <i>Call for Appointment</i> *Required only if MOT includes a detour for any direction of travel.</p>		
<p>_____ _____</p> <p style="text-align: center;">Print Name</p>	<p>_____ _____</p> <p style="text-align: center;">Signature</p>	<p>_____ _____</p> <p style="text-align: center;">(Date)</p>
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<p>_____ _____</p> <p style="text-align: center;">Print Name</p>	<p>_____ _____</p> <p style="text-align: center;">Signature</p>	<p>_____ _____</p> <p style="text-align: center;">(Date)</p>
<p>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>_____ _____</p> <p style="text-align: center;">Signature</p> <p>Transportation and Mobility Department Ben Rogers, Director</p>		<p>_____ _____</p> <p style="text-align: center;">(Date)</p>

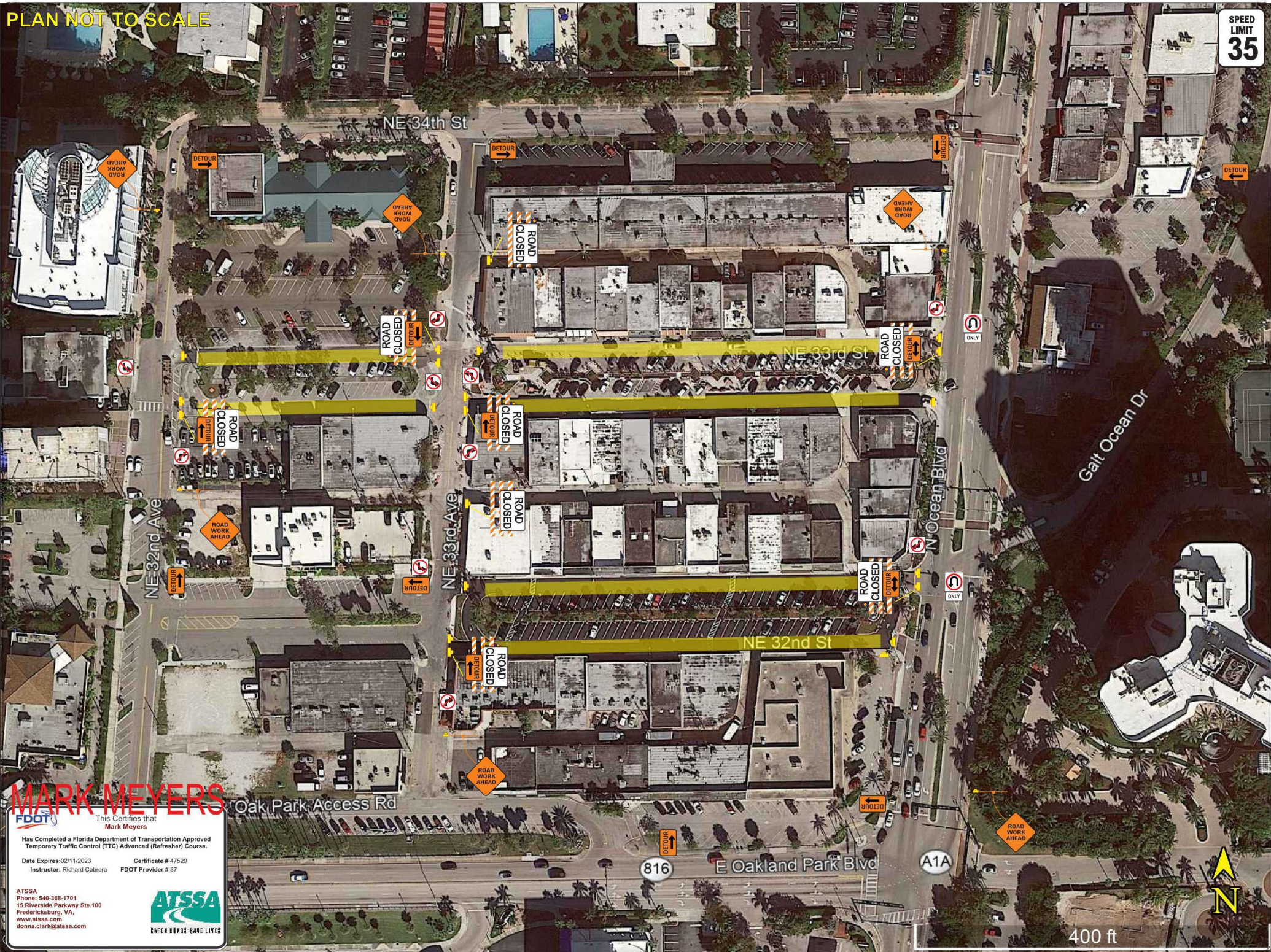
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PLAN NOT TO SCALE

SPEED LIMIT 35



MARK MEYERS

FDOT This Certifies that Mark Meyers
Has Completed a Florida Department of Transportation Approved
Temporary Traffic Control (TTC) Advanced (Refresher) Course.
Date Expires: 02/11/2023 Certificate # 47529
Instructor: Richard Cabrera FDOT Provider # 37

ATSSA
Phone: 540-368-1701
15 Riverside Parkway Ste. 100
Fredericksburg, VA
www.atssa.com
donna.clark@atssa.com



DRAWN BY MM

MOT Plans

PROJECT NAME: PRE LABOR DAY FESTIVAL

SITE LOCATION: NE 33 AVE

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:

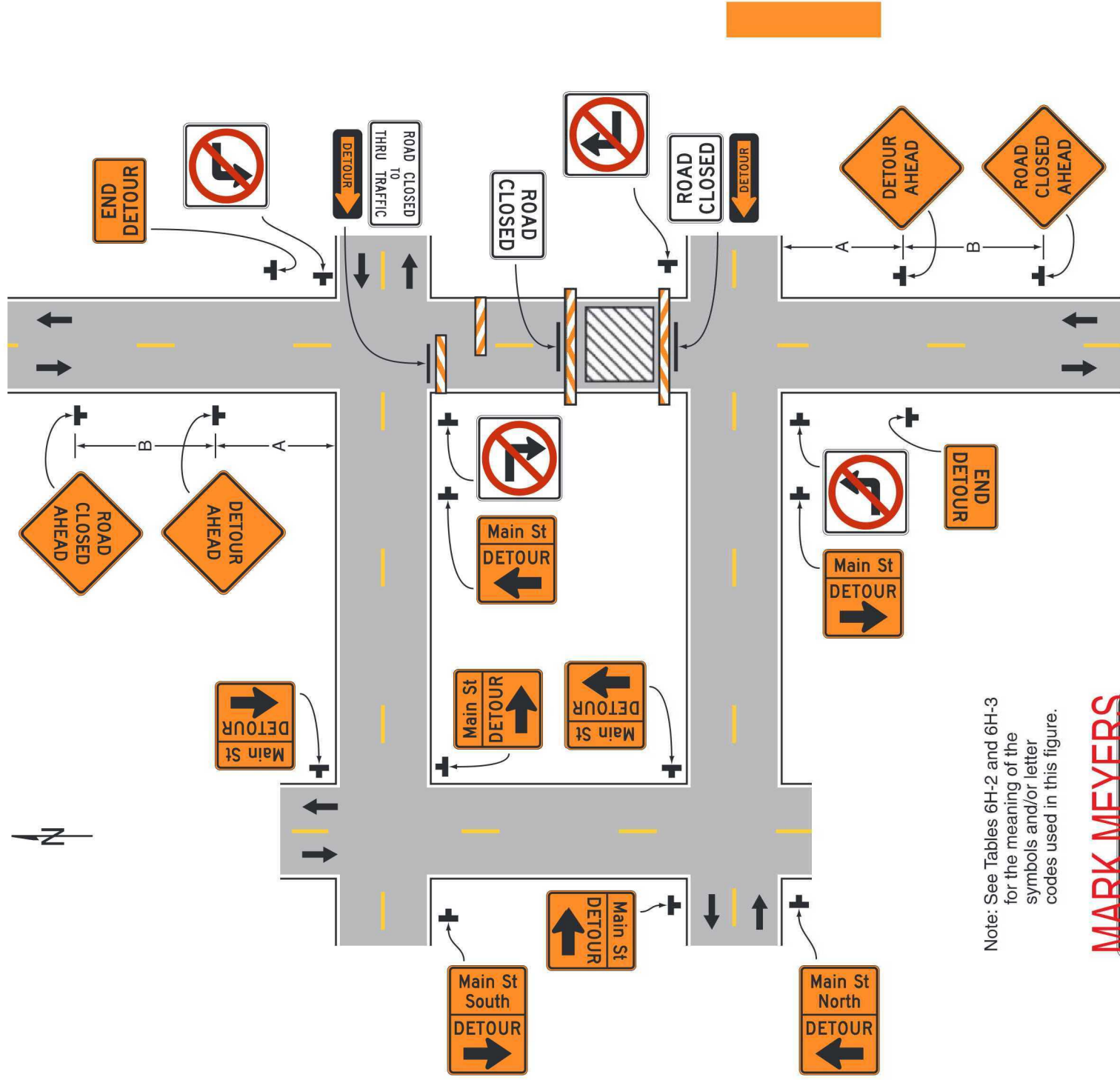
7. **When used, the Street Name sign shall be placed above the Detour sign.**

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.

MARK MEYERS
 FDOT The Certified Instructor
 Mark Meyers
 Has Completed a Florida Department of Transportation Approved Temporary Traffic Control (TTC) Advanced (Refresher) Course
 Date Expires: 02/11/2023 Certificate # 47529
 Instructor: Richard Cabrera FDOT Provider # 37

ATSSA
 15 Riverside Parkway, Ste. 100
 Fredericksburg, VA
 www.atssa.com
 contact@atssa.com

NEED ROAD RAGE LIVES

Typical Application 20





TAM-MOT-24080031 - City Labor Day Event

Final Audit Report

2024-08-30

Created:	2024-08-28
By:	Morgan Dunn (MDunn@fortlauderdale.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAALCBAyW4bT9kLxf45RmgiD9IW1OvTgqGJ

"TAM-MOT-24080031 - City Labor Day Event" History

-  Document created by Morgan Dunn (MDunn@fortlauderdale.gov)
2024-08-28 - 3:27:18 PM GMT
-  Document emailed to Ekaete Ekwere (eekwere@fortlauderdale.gov) for signature
2024-08-28 - 3:27:51 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: 2024-08-30 - 1:08:35 PM GMT - Time Source: server
-  Agreement completed.
2024-08-30 - 1:08:35 PM GMT



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