



MAINTENANCE OF TRAFFIC (MOT) FORM

SECTION 1: APPLICANT INFORMATION

Applicant Name: Nigeria Livingston Applicant Phone: 954-828-6409
 Applicant Email: nigerial@fortlauderdale.gov
 Applicant Address: 1150G 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

ENG Permit # (obtain from Department of Sustainable Development (DSD)): City Special Event
 Project Name: Light Up the Beach
 Project Address: 3000 E 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: 11/19/2025 Begin Time: 12pm
 End Date: 11/19/2020 End Time: 11:59pm

SECTION 3: PROJECT DETAILS

Partial or Shoulder Closure Daily Setup/ Breakdown YES NO
 Full Road Closure (detour): Under 72 Hours Using Crane in ROW* YES NO
 Sidewalk Closure: Under 72 Hours Parking Meters Impacted* YES NO
 Full Road/Sidewalk Closure: More than 72 Hours
*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.).

East Las Olas 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.)
102-600 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.

Full closure of East Las Olas Blvd from Seabreeze

Closure of Almond Ave- iustt south of Banvan Street(south of parking lot entrance)to East Las Olas Blvd

closed from 12:00mm-11:59 or as quickly as inflatables can be removed from the sstreet

Special Event closure

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 checked="" 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.

Nigeria Livingston

 (APPLICANT SIGNATURE)
 10/2/2025

 (DATE SIGNED)

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.

 (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.

MOT APPROVAL

<p>M Ferrer _____ <i>M Ferrer</i> _____ Print Name Signature</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>10/14/25 _____ (Date)</p>
<p>Katie Burnette _____ <i>Katie Burnette</i> _____ Print Name 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>10/14/25 _____ (Date)</p>
<p>_____ Print Name 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>*Required only if MOT/detour affects Broward County road or intersection.</p>	<p>_____ (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 Department Director's Signature (requested by City staff if required)</p>	
<p>Martha Parfait _____ <i>Martha Parfait</i> _____ Print Name 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>10/14/25 _____ (Date)</p>
<p>_____ Signature</p> <p style="text-align: center;">Transportation and Mobility Department Ben Rogers, Director</p>	<p>_____ (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.

PLAN NOT TO SCALE

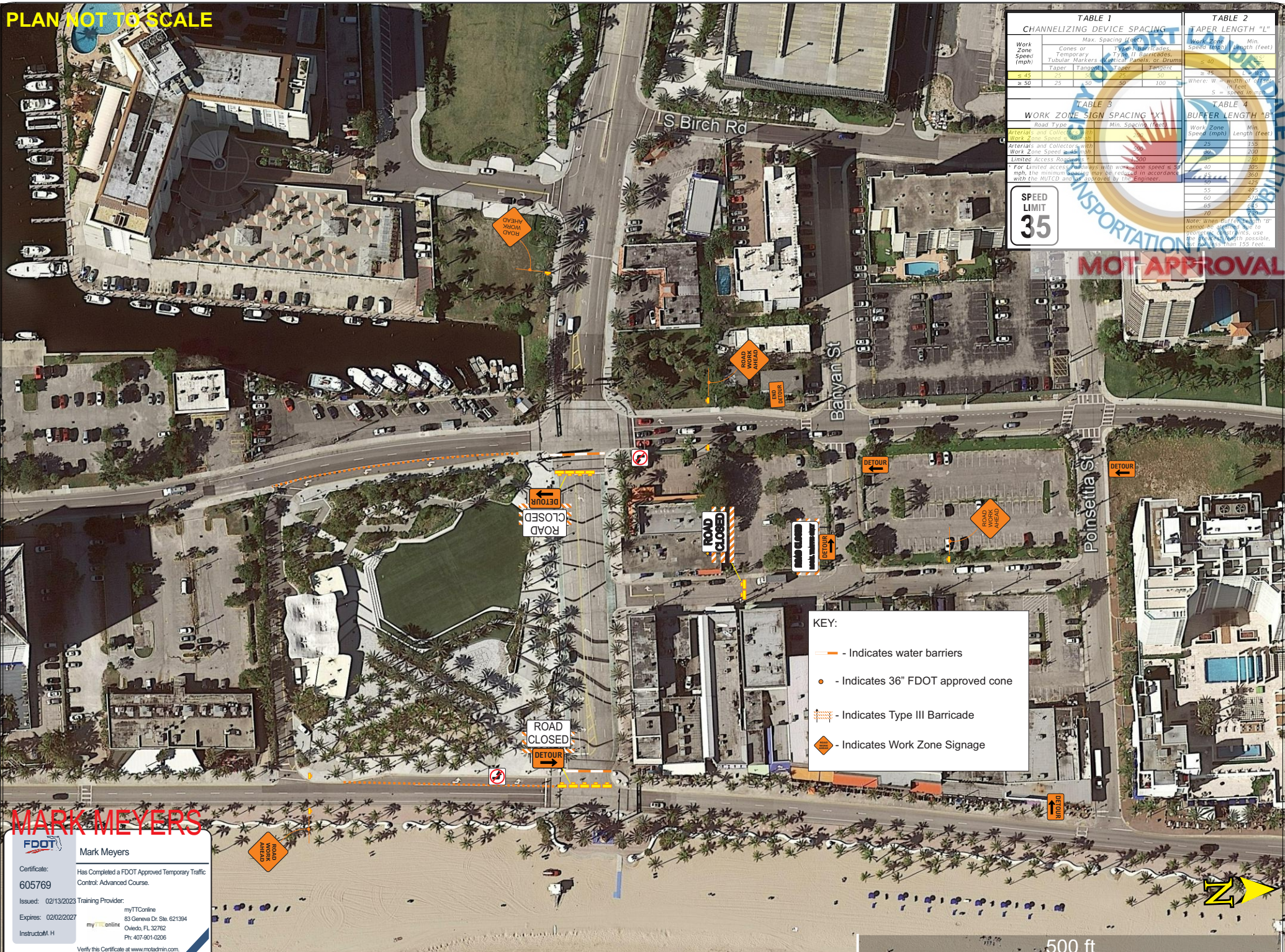
TABLE 1 CHANNELIZING DEVICE SPACING				TABLE 2 TAPER LENGTH "L"	
Work Zone Speed (mph)	Max. Spacing (feet)		Work Zone Speed (mph)	Min. Length (feet)	
	Cones or Temporary Taper 1	Type III Barriers, Type II Barricades, Traffic Markers, Conical Panels or Drums		W	S
≤ 45	25	50	≥ 30	150	150
≤ 50	25	50	≥ 35	150	150
			≥ 40	150	150
			≥ 45	150	150
			≥ 50	150	150

TABLE 3 WORK ZONE SIGN SPACING "X"			TABLE 4 BUFFER LENGTH "B"	
Road Type	Min. Spacing (feet)	Work Zone Speed (mph)	Work Zone Speed (mph)	Min. Length (feet)
Arterials and Collectors with Work Zone Speed ≤ 45 mph	300	25	155	155
Arterials and Collectors with Work Zone Speed ≤ 50 mph	300	30	200	200
Limited Access Roadways	150	30	205	205
For limited access roadways with work zone speed ≤ 50 mph, the minimum spacing may be reduced in accordance with the MUTCD and approved by the Engineer.				
		35	25	360
		40	25	360
		45	25	360
		50	25	360
		55	25	360
		60	25	360
		65	25	360
		70	25	360

Note: When Buffer Length "B" cannot be achieved, use geometric constraints, use the minimum spacing associated with the applicable work zone speed.

SPEED LIMIT
35

MOT APPROVAL



KEY:

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

MARK MEYERS

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
Instructor: M.H. myTTonline Okeada, FL 32762
Piv: 407-901-0206

Verify this Certificate at www.motadmin.com.

500 ft





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1	General Notes, TTC Tables
2	Definitions Temporary Traffic Control Devices Overhead Work Railroads Sight Distance Above Ground Hazard
3	Clear Zone Widths For Work Zones Superelevation Length Of Lane Closures Overweight/Oversize Vehicles Lane Widths High-Visibility Safety Apparel Speed Reduction Signing
4	Flagger Control Survey Work Zones Signs
5	Work Zone Sign Supports
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10	Channelizing Devices Notes Temporary Barrier Notes
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GENERAL NOTES:

- This Index contains information specific to the Federal and State guidelines and standards for the preparation of traffic control plans and for the execution of traffic control in work zones, for construction and maintenance operations and utility work on highways, roads and streets on the State Highway System. Certain requirements in this Index are based on the high volume nature of State Highways. For highways, roads and streets off the State Highway System, the local agency (City/County) having jurisdiction may adopt requirements based on the minimum requirements provided in the MUTCD.
- Use this Index in accordance with the Plans and Indexes 102-601 through 102-680. Indexes 102-601 through 102-680 are Department-specific typical applications of commonly encountered situations. Adjust device location or number thereof as recommended by the Worksite Traffic Supervisor and approved by the Engineer. Devices include, but are not limited to, flaggers, portable temporary signals, signs, pavement markings, and channelizing devices. Comply with MUTCD or applicable Department criteria for any changes and document the reason for the change.
- Except for emergencies, any road closure on State Highway System must comply with Section 335.15, F.S.

**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	
	Taper	Tangent	Taper	Tangent
≤ 45	25	50	25	50
≥ 50	25	50	50	100

**TABLE 2
TAPER LENGTH "L"**

Work Zone Speed (mph)	Min. Length (feet)
≤ 40	$L = \frac{WS^2}{60}$
≥ 45	$L = WS$

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

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

**TABLE 4
BUFFER LENGTH "B"**

Work Zone Speed (mph)	Min. Length (feet)
25	155
30	200
35	250
40	305
45	360
50	425
55	495
60	570
65	645
70	730

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

SYMBOLS:

- Work Area
- Channelizing Device
- Work Zone Sign
- Type III Barricade
- Lane Identification and Direction of Traffic

MARK@MOTPLANS.COM

Mark Meyers

Certificate: 605769
Has Completed a FDOT Approved Temporary Traffic Control: Advanced Course.

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.

9/10/2024 10:42:48 AM



**Notes for Figure 6P-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:

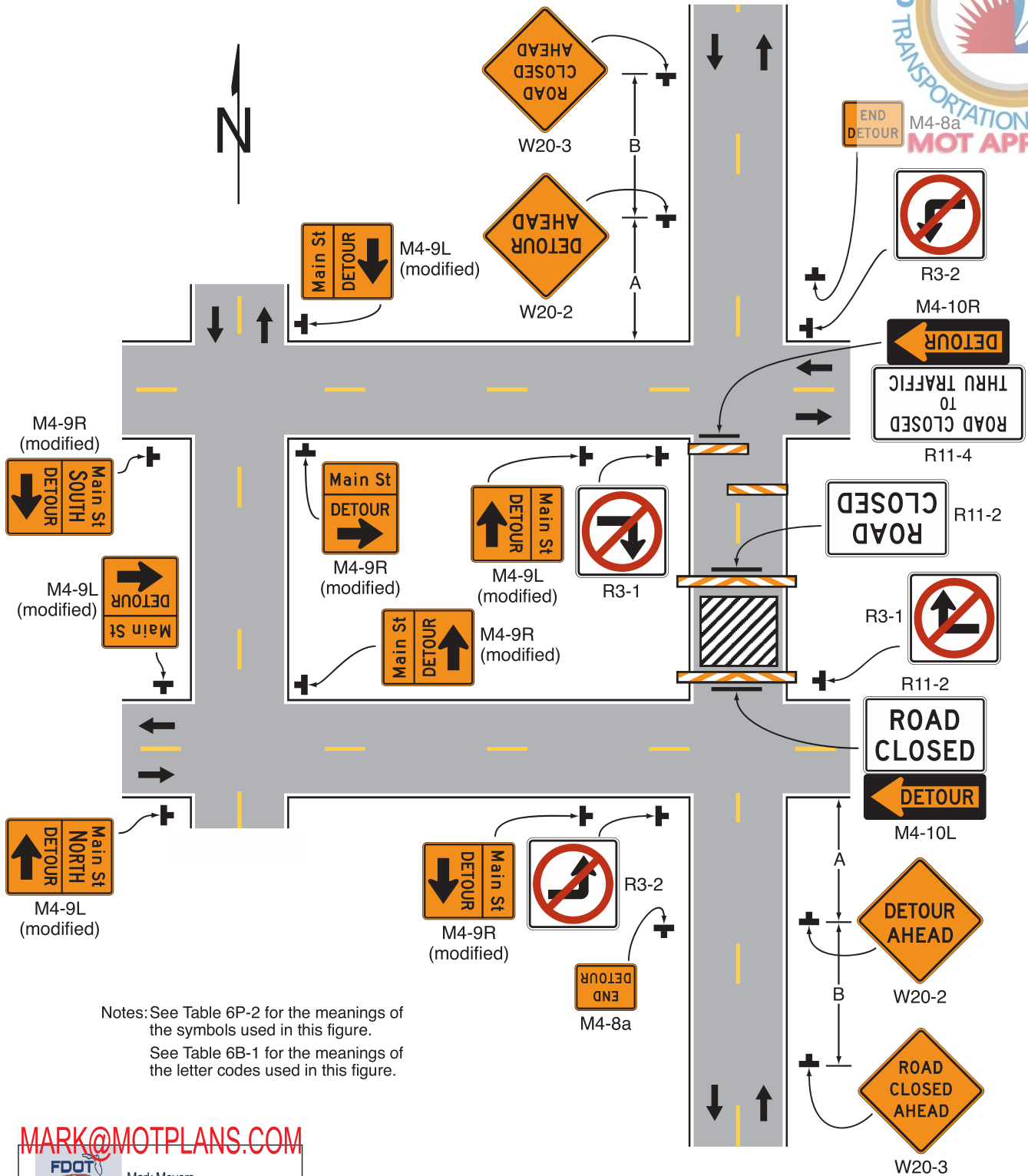
7. **When used, the Street Name sign shall be placed above the Detour sign.**

Support:

8. Figure 6P-9 contains the information for detouring a numbered highway.



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



Notes: See Table 6P-2 for the meanings of the symbols used in this figure.
 See Table 6B-1 for the meanings of the letter codes used in this figure.

Typical Application 20

MARK@MOTPLANS.COM

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