



Miami-Dade Fire Rescue Department
Fire Prevention Division
Special Events Bureau

**OFF REGULAR DUTY SERVICES
APPLICATION**

EVENT INFORMATION

Date of Request: _____ Permit #: _____

Name of Organization: _____

Address: _____
City State Zip Code

Phone: () _____ Fax: () _____

Type of Event: _____ Estimated Attendance: _____

Site Address: _____

Site Contact Person: _____ Phone: () _____

Date of Service: From: _____ To: _____

Hours of Operation: From: _____ To: _____

BILLING INFORMATION

Company / Person Name: _____

Address: _____ Federal I.D.# _____

City: _____ State: _____ Zip Code: _____

Telephone: () _____ Fax: () _____

TYPE OF EVENT

- | | | |
|---|--|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Fireworks, Explosive | Pay Type: |
| <input type="checkbox"/> Code Requirements | <input type="checkbox"/> Movie Shoot | <input type="checkbox"/> In Kind |
| <input type="checkbox"/> Fair / Festival | <input type="checkbox"/> Sporting Event | <input type="checkbox"/> Regular |
| <input type="checkbox"/> Standpipe Test | <input type="checkbox"/> Concert | <input checked="" type="checkbox"/> Overtime |
| <input type="checkbox"/> Use of Flammable | <input type="checkbox"/> Meeting | |
| <input type="checkbox"/> Cooking Tents | <input type="checkbox"/> Display | |
| <input type="checkbox"/> Disable Fire Alarm | <input checked="" type="checkbox"/> Other (Specify): _____ | |

See Next Page For Additional Important Information



Permit #:

AUTHORITY: - Section 1-16 of the Florida Fire Prevention Code empowers the local jurisdiction to establish and issue permits, certificates, notices and approvals, or orders pertaining to fire control and /or hazardous conditions. Requirements of permitting shall be established by the Fire Chief or his designee. Whenever, in the opinion of the designated fire official, rescue or firewatch may, be essential for the public safety in any place of assembly or due to the nature of the event, exhibition, display, contest or activity, the owner, agent or leasee shall employ one or more State Certified Firefighter, Fire Inspector, Paramedic or EMT's, as determined by section 2-56.2 of the Dade County Code. The cost of said personnel, equipment and administrative fees will be in accordance with Miami-Dade County Fire Rescue Department Administrative order 7-33, Special Events Off-Duty Fire Rescue Services. Vendors engaged in activities or functions for which such services are required and would be seen as necessary, shall comply with all rules, ordinances and laws.

DEPARTMENTAL POLICY: - The Fire Rescue Department requires that all first time users of off regular duty services obtain an application until credit approval has been established. This application must be accompanied by FULL PAYMENT FOR THE ESTIMATED TOTAL COST. *ALL COMPENSATION DUE FOR SERVICES REQUEST WILL BE PREPAID BY MONEY ORRDER, CERTIFIED CHECK, TRAVELERS CHECK OR CASHIER'S CHECKS AT THE TIME OF APPLICATION OR AS DETERMIND BY THE CHIEF FIRE OFFICIAL RESPONSIBLE FOR OFF REGULAR DUTY SERVICES. ANY COMPENSATION OVER AND ABOVE THE RATE ESTABLISHED IS STRICTLY PROHIBITED. ALL FUNDS PREPAID AND NOT OBLIGATED WILL BE REFUNDED TO THE APPLICANT.*

The estimated cost of the requested service is: \$ _____

The applicant is restricted to the general assignment of duties to be performed and has no authority over Fire Rescue Personnel. To avoid a minimum fee for Off Regular Duty Services, the Fire Rescue Department must be notified at least 24 hours in advance of any changes or termination of required services. An administrative charge for processing has been included in the total cost. If an event lasts longer than the prescribed period of time, the vendor agrees to pay any and all additional costs. IF a vendor fails to pay total cost or part there of, within (60) days, an additional (10%) administrative fee may be added.

I HAVE READ AND UNDERSTOOD THE PROVISIONS OF THEIS APPLICATION AND WILL ACT IN FULL COMPLIANCE OF THIS AGREEMENT.

Authorized Agency Representative

Date

Signature of the Firewatch Clerk

Date

For further information and assistance, please contact the Special Events Bureau at (786) 331-5000 or Fax (786) 331-4435. Address 9300 NW 41st Street, Doral, Florida 33178

(For Fire Department Use Only)

Final Cost: \$ _____

Signature: _____

Chief Alan R. Cominsky, or Designee
Fire Prevention Division
Special Events Bureau

Date