



# EVENT PERMIT

Ordinance 17-08



## Race 2 For Florida Interscholastic Cycling League

**PERMIT NUMBER:** TMP2021-00174

**Date(s) of Event:** MARCH 19, 2022 FROM 8AM UNTIL 5PM  
AND MARCH 20, 2022 FROM 6:30AM UNTIL 4:30PM

**Property Owner:** TIITF/COUNTIES CALOOSAHATCHEE RIVER COUNTY PARK C/O: DEPT

**Applicant:** MAXWELL GLEDHILL  
904-687-8215

**Description:** BICYCLE RACE TO BE HELD ON THE EXISTING TRAIL SYSTEM FOR KIDS IN GRADES 6-12 TO BE HELD ON MARCH 19, 2022 FROM 8AM UNTIL 5PM AND MARCH 20, 2022 FROM 6:30AM UNTIL 4:30PM


**Location of event:** 19130 N RIVER RD, ALVA, FL 33920  
**CALOOSAHATCHEE REGIONAL PARK**

- Will the event be attended by 1000 or more people ? No
- Will the event be held on County Owned Property ? Yes
- Will there be alcohol consumed or sold at the event ? No
- Will a bond be posted for this event ? No

**Permit Conditions:**

- \* Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- \* The premises is to be left in the same condition as it was prior to the event.
- \* The permit is to be readily available for inspection during the entire event.
- \* If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners  
Lee County, Florida

  
County Manager Date 10/6/2021



# Temporary Permit

Special Event per Ord. 17-08

**Permit Number: TMP2021-00174**

**Issued Date: 03/19/2022**

**Expiration Date: 03/20/2022**

Owner Name: TITF/COUNTIES CALOOSAHATCHEE RIVER COUNTY PARK C/O: DEPT OF ENVIR PROTECTION

Applicant: MAXWELL GLEDHILL

Project Name: Race 2 For Florida Interscholastic Cycling League

Description: BICYCLE RACE TO BE HELD ON THE EXISTING TRAIL SYSTEM FOR KIDS IN GRADES 6-12 TO BE HELD ON MARCH 19, 2022 FROM 8AM UNTIL 5PM AND MARCH 20, 2022 FROM 6:30AM UNTIL 4:30PM

Job Address: 19130 N RIVER RD, ALVA, FL 33920

GENERAL INFORMATION	
Current Florida Building Code: Florida Building Code 7th Edition (2020)	Directions: CALOOSAHATCHEE REGIONAL PARK
Event End Date: 03/20/2022	Event End Time: 16:30 04:30 PM
Event Start Date: 03/19/2022	Event Start Time: 08:00 08:00 AM
Type of Permit: Special Event per Ord. 17-08	
SPECIAL EVENTS	
Alcoholic Beverages?: No	Bond Required?: No
Date(s) of Event: MARCH 19, 2022 FROM 8AM UNTIL 5PM AND MARCH 20, 2022 FROM 6:30AM UNTIL 4:30PM	Event on County Property?: Yes
Special Event > 1000?: No	

- NO SMOKING SIGNS ARE REQUIRED.
- Tents up to 2500 sq. ft. must have Two (2) classification type 2A fire extinguishers. Flame resistance certificates must be on the job site for inspection.
- Tents will be at least twelve (12) feet from all property lines and have an unobstructed passageway or fire road not less than twelve feet wide and free from guy ropes or other obstructions on all sides of tent. Tents must maintain minimum 25' setback from all road right of way. Tents will not block any driveway, fire hydrant or fire access to any building.
- Tents that will be occupied after sunset will have lights and emergency lighting at each exit.
- All other applicable requirements of N.F.P.A. 102 will be complied with.

REQUEST AN INSPECTION ONLINE @ <https://accelaaca.leegov.com> or CALL 239-533-8997 OPTION 1 WHEN PROMPTED FOR THE PERMIT NUMBER ENTER TMP2021-00174

Required Inspections	
DATE:	BY:
902 Fire Final Request inspection through the IVR or eConnect website, then contact the Alva fire district to schedule a time at 239-728-2223	_____
Tent Fire Dept Insp Fire department inspection required on ALL TENTS, contact the fire department directly. 239-728-2223	_____
Other Inspection	_____

**This temporary use permit is valid for one year from the date of issuance. This permit does not allow more than 8 scheduled events from date of issuance. A scheduled event is to allow for the sale of flowers, vegetables or other crops grown on this property each year. Each event may not exceed two days.**

**Separate permits would be required for the construction of any structures, buildings, or the installation of any utilities.**

**NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES OR FEDERAL AGENCIES.**

**THIS PERMIT IS VOID IF THE FIRST INSPECTION IS NOT MADE WITHIN (6) MONTHS FROM THE DATE ISSUED OR IF NO INSPECTION HAS BEEN MADE FOR A PERIOD OF SIX (6) MONTHS FROM THE MOST RECENT PASSED INSPECTION. BUILDING PLANS MUST BE ON JOB AT TIME OF INSPECTION. REINSPECTION FEE \$50.00**

**THIS CARD MUST BE PLACED ON A BOARD AT EYE LEVEL SO IT CAN BE READ FROM THE STREET AND BE PROTECTED FROM THE WEATHER.**



**Lee County**  
*Southwest Florida*

# Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

*Race 2 For Florida Interscholastic Cycling League*

*JMP2021-00174*

## Lee County Event Permit Application



### Event Application

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

<b>Section I - GENERAL INFORMATION (All Permit Types)</b>	
<b>Title of Event / Name of Production</b>	Race #2 for the Florida Interscholastic Cycling League (we will have an event name soon)
<b>Date(s) of Event / Production:</b>	March 19-20, 2022
<b>Location(s) of Event:</b>	Caloosahatchee Regional Park
<b>Name of Applicant:</b>	Maxwell Gledhill
<b>Applicant Address:</b>	53 Salt Pt. St. Augustine, FL 32086
<b>Applicant Phone Number:</b>	904-687-8215
<b>Contact Person:</b> (If different from applicant)	
<b>Contact Phone Number:</b> (If different from applicant)	
<b>Email Address:</b>	maxwell@floridamtb.org
<b>Estimated Attendance:</b>	250 racing; 500 in total attendance
<b>Event Description:</b> Include each activity, when activities take place, etc.	This is race #2 in a 5 race series across the state of FL. All participants in the race are kids in grades 6-12 and are on one of 13+ teams spread throughout FL from Tallahassee to Miami. It is a two day event for teams and student-athletes/families. Saturday morning is time for set up (course, infield, team tents area and parking) then starting around noon on Saturday the course opens for pre-rides. We close things down by 5PM Saturday. Sunday is our race day and we begin racing around 9:30AM but staff will be there starting at 6:30AM. We will run 3 waves (groups) of kids starting at 9:30AM and 12:30PM and 3:30PM. <span style="float: right;">12</span>
<b>Hours of Operation:</b>	Friday the 18th: A few of the core staff will arrive around noon to premark and survey the course and set up parking. We will finish by 5PM. Saturday: 8AM - 5PM. Sunday: 6:30AM-4:30PM <span style="float: right;">12</span>
<b>STRAP # of Parcel:</b>	
<b>Owner of Premises*:</b>	

\*Notarized statement from the property owner specifically consenting to the proposed use required.

## Lee County Event Permit Application



**Fill out the following questions for all permit types:**

What is the Zoning Classification of the premises? \_\_\_\_\_

Are any temporary structures to be installed for the event?  Yes  No Type: \_\_\_\_\_

Do you have the appropriate permits for the temporary structures?  Yes  No

\* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event: \_\_\_\_\_

Note: Certificate of Insurance must be submitted at time of application

Surety Company Bonding this Event (Name and Address): \_\_\_\_\_

<p>Will Vehicles be Used as Part of This Event?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, automobile coverage must be included on the certificate of insurance.</p>	<p>Will Food be Available at this Event?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, products liability coverage must be included on the certificate of insurance.</p>	<p>Will Alcoholic Beverages be served/consumed at this Event?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, liquor liability coverage must be included on the certificate of insurance.</p>
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Name & Address of Organization Providing Food: \_\_\_\_\_

Type of Food being Served: \_\_\_\_\_

### Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Florida Interscholastic Cycling League

**Fill out this portion for applications for Solicitation in the County Rights-of-Way:**

Name of Charity: \_\_\_\_\_

Address of Charity: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Non-profit certificate/registration number: \_\_\_\_\_

(Proof of registration with the Dept. of Agriculture & Consumer Services §496.405 or proof the organization is exempt from this requirement. §316.2045)

### Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property?  Yes  No

If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number: \_\_\_\_\_

(Required if alcohol is to be **SOLD** at the event)

**Please note:** A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details



**Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT**

Type of Production (choose all that apply):

<input type="checkbox"/> TV Movie or Special	<input type="checkbox"/> TV Series / Pilot	<input type="checkbox"/> TV Commercial	<input type="checkbox"/> Still Photos
<input type="checkbox"/> Public Service Announcement	<input type="checkbox"/> Industrial / Documentary	<input type="checkbox"/> Other: _____	

Will any of the following be needed or included\*?

Street Closure	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Traffic / Crowd Control	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fire or Burning	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Explosives or Pyrotechnics	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Animals, Large or Small	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Construction of Any Kind	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Large and/or Numerous Vehicles	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Helicopters, Boats, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Stunts	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No

\* For any marked Yes, provide further details below:

Special Parking Requirements:

City or County Services Required: (Personnel, equipment, facilities, etc.)

The following information is required for local and state records on production in Florida to track the economic impact of the industry. If exact figures are not available, please estimate as closely as possible.

Number in Cast: \_\_\_\_\_ Number in Crew: \_\_\_\_\_ Number of locals hired: \_\_\_\_\_

Total budget: \_\_\_\_\_ Estimate amount spent in Lee County: \_\_\_\_\_

Hotel room nights: \_\_\_\_\_ Number of shooting days: \_\_\_\_\_  
number of rooms x number of nights



**SECTION I - SAFETY**

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

**SECTION II - INSURANCE**

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

**SECTION III - INDEMNIFICATION**

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted premises or improvement thereto, or arising from the use of the premises.

**SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES**

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.



**Applicant Agreement - Signature Required**



**SECTION V - AGREEMENT**

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

Maxwell Gladhill  
Signature of Applicant

Maxwell Gladhill; League Director  
Print Name of Applicant and Title

8/23/2021  
Date

Sarah Gladhill  
Witness

Sarah Gladhill  
Print Name of Witness

8/23/2021  
Date

Lee County Event Permit Application



LEE COUNTY SHERIFF'S DEPARTMENT  
14750 SIX MILE CYPRESS PARKWAY  
FORT MYERS, FLORIDA 33912  
(239) 477-1199

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:	Parking in authorized areas within the park only. The right-of-way will not be impeded.
Deputies (How Many?):	None
Fee for Services:	None
Special Arrangements:	It is understood by this office through the permit application that the race course will remain on one side of the park. There will be no need for participants to cross the road during the event.

Print Name: Lt. S. Brady  
Signature: Lt. Steven T Brady  
Title: Special Events, Permits and Details  
Date: 8-24-21

Lee County Event Permit Application



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.  
Please see User's Guide for contact information and Fire District Map.

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Fire Guards (How Many?)	na
Fee for Services:	na
Flammable Vegetation:	na
First Aid Equipment:	na
Fire Extinguishing:	na
Special Arrangements:	Alva Fire Dept does not need to provide EMS coverage contingent upon Lee County EMS or another agency providing the necessary medical coverage for the event.

Print Name: Brandon Kuhn  
Signature:   
Title: Chief  
Date: 9/23/2021



Lee County Event Permit Application

EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY
2000 Main St., Suite #100
FORT MYERS, FL 33901
(239) 533-3911

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
USE OF COUNTY PROPERTY PERMIT
FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Treatment Facilities: None necessary.
Medical Personnel: Request was for at least 3 EMS personnel. We will recommend one cart and one bicycle team (total staff would be 4), as we staff and bill per resource per hour. (not billed per personnel)
Medical Supplies / Equipment: None necessary.
Safety Requirements: Applicants shall follow all CDC and FDOH directives, and the Florida Governor's Executive Orders concerning health and safety, especially with regards to COVID-19 and the number of people congregating at the event.
Fee for Services: As set forth by the Board of County Commissioners, published in the Lee County External Fee Manual. Attached to the email response with this approval. Guidelines for resources: Ambulance (2 personnel) = \$100/hour, Bicycle Team (2 personnel) = \$80/hour, Ambulance Cart (2 personnel) = \$80/hour. There is an additional one hour billed per resource for setup.
Special Arrangements: Please call 911 in the event of an emergency. To arrange special event coverage, contact our office at 239 533-3911.

Print Name: Douglas B. Higgins
Signature: Douglas B. Higgins
Title: Division Chief
Date: September 21, 2021

Lee County Event Permit Application



DEPARTMENT OF TRANSPORTATION  
1500 MONROE STREET  
FORT MYERS, FL 33901  
(239) 533-8580

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:

Park in designated areas. No event parking on any portion of Lee County maintained road rights-of-way.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

Use Lee County Sheriff's Office for assistance with traffic, if needed.

Print Name: Bryan Miller

Signature: Bryan Miller

Digitally signed by Bryan Miller  
Date: 2021.08.24 06:23:20 -04'00'

Title: Senior Project Manager

Date: August 24, 2021

Lee County Event Permit Application



**LEE COUNTY PARKS AND RECREATION**  
**3410 PALM BEACH BOULEVARD**  
**FORT MYERS, FLORIDA 33916**  
**(239) 533-7275**

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Illumination:

Event organizer will need to provide temporary lighting if needed for pre-dawn set up.

Parking Areas:

Event organizer is responsible to direct patrons to the designated parking areas on-site. Must ensure that vehicles do not block driveways or the roadway. Organizer must provide adequate staff/volunteers along with directional signage for the event.

Special Arrangements:

The event organizer is responsible to provide adequate staff/volunteers throughout the event for Safety/First Aid stations, course monitoring, litter control and debris clean up during and after the event. Must provide at least Four (4) portable toilet units (3 unisex + 1 ADA) and two (2) wash stations. Work with the on-site staff to designate the placement of restroom units.

Event set-up on Friday and breakdown should be coordinated with Park Staff.

Print Name: Alise Flanjack

Signature: Alise Flanjack

Digitally signed by Alise Flanjack  
Date: 2021.08.30 12:43:54 -04'00'

Title: Deputy Director

Date: 8/30/2021

*FLA Interscholastic Cycling League*  
*CRP*  
*March 19:20, 2022*

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT  
COUNTY ADMINISTRATION BUILDING - 4<sup>TH</sup> FLOOR  
2115 SECOND STREET  
FORT MYERS, FLORIDA 33901  
(239) 533-2221

Check the appropriate box(es) below:


- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Insurance Requirements: Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.

Special Arrangements: A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured.  
  
Subject to proof of insurance.

Print Name: Mike Figueroa

Signature: 

Title: Risk Program Manager

Date: August 31, 2021



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/31/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Insurance Office of America, Inc. 501 S. Cherry Street Suite 600 Denver CO 80246		<b>CONTACT NAME:</b> Melinda Romero <b>PHONE (A/C, No, Ext):</b> 303-565-1123 <b>FAX (A/C, No):</b> 720-524-6544 <b>E-MAIL ADDRESS:</b> melinda.romero@ioausa.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>NAIC #</b>	
		INSURER A : HDI GLOBAL SPECIALTY SE	
		INSURER B : United States Fire Insurance Company	
		INSURER C :	
		INSURER D :	
		INSURER E :	
		INSURER F :	

**INSURED** National Interscholastic Cycling Association (NICA) 2414 Sixth St. Berkeley CA 94710 NATIINT-01



**COVERAGES** **CERTIFICATE NUMBER:** 954914229 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE		ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY	Y	Y	18LB3014	4/11/2021	4/11/2022	EACH OCCURRENCE	\$ 1,000,000
	<input type="checkbox"/>	CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000
								MED EXP (Any one person)	\$
								PERSONAL & ADV INJURY	\$ 1,000,000
								GENERAL AGGREGATE	\$ 3,000,000
								PRODUCTS - COMP/OP AGG	\$ 1,000,000
								Abuse/Molestation	\$ 1,000,000
								COMBINED SINGLE LIMIT (Ea accident)	\$
								BODILY INJURY (Per person)	\$
								BODILY INJURY (Per accident)	\$
								PROPERTY DAMAGE (Per accident)	\$
									\$
A	<input type="checkbox"/>	UMBRELLA LIAB	Y	Y	18EX2140	4/11/2021	4/11/2022	EACH OCCURRENCE	\$ 2,000,000
	<input checked="" type="checkbox"/>	EXCESS LIAB						AGGREGATE	\$ 2,000,000
		DED							\$
		RETENTION \$							\$
								PER STATUTE	OTHER
								E.L. EACH ACCIDENT	\$
								E.L. DISEASE - EA EMPLOYEE	\$
								E.L. DISEASE - POLICY LIMIT	\$
A		Participant Legal Liability			18LB3014	4/11/2021	4/11/2022	Occurrence	1,000,000
B		Participant Accident			US1517043	4/11/2021	4/11/2022	Per Injury/Deductible	10,000/1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Under General Liability: Abuse & Molestation: \$2,000,000 Aggregate; Participant Legal Liability: \$1,000,000 Aggregate. Under Participant Accident: Aggregate Limit: \$500,000 per policy term; Deductible: \$1000 per claim

The certificate holder is named as an Additional Insured per form CG2026 0704 when required by written contract, but only with respect to the operations of the Named Insured. Waiver of Subrogation per form CG2404 0509 in Favor of the Certificate Holder when required by written contract. This certificate is issued on behalf of all valid National Interscholastic Cycling Association registered and approved participants and staff participating with: Florida Interscholastic Cycling League Race #1 03/18/2022 - 03/20/2022.

<b>CERTIFICATE HOLDER</b>  OK 08/31/2021   Lee County Board of County Commissioners P.O. Box 398 Fort Myers FL 33902	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  
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# CRP

## Untitled layer

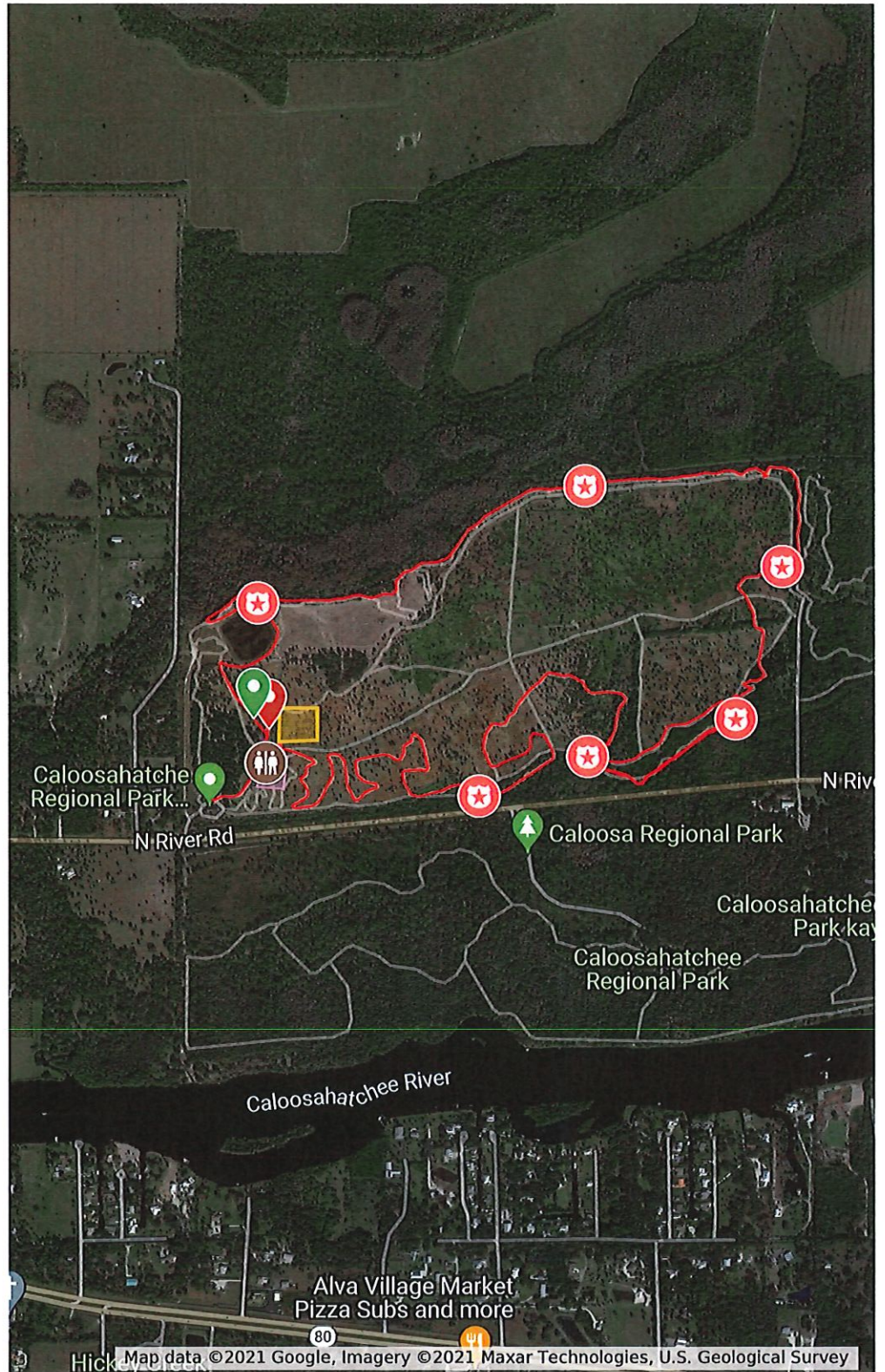
- Timing
- Finish
- Start
- EMS/First Aid
- Parking
- Road Crossing to staging
- 

## Registration, Volunteer, Merch

- MP 1
- MP 2
- MP 4
- MP 5
- MP 6
- MP 7
- Pit Zone
- Portapotties
- Staging
- Feed Zone
- Course Crossing to parking

## tracks

- NICA @ Alva, proposed route



# CRP

## Untitled layer

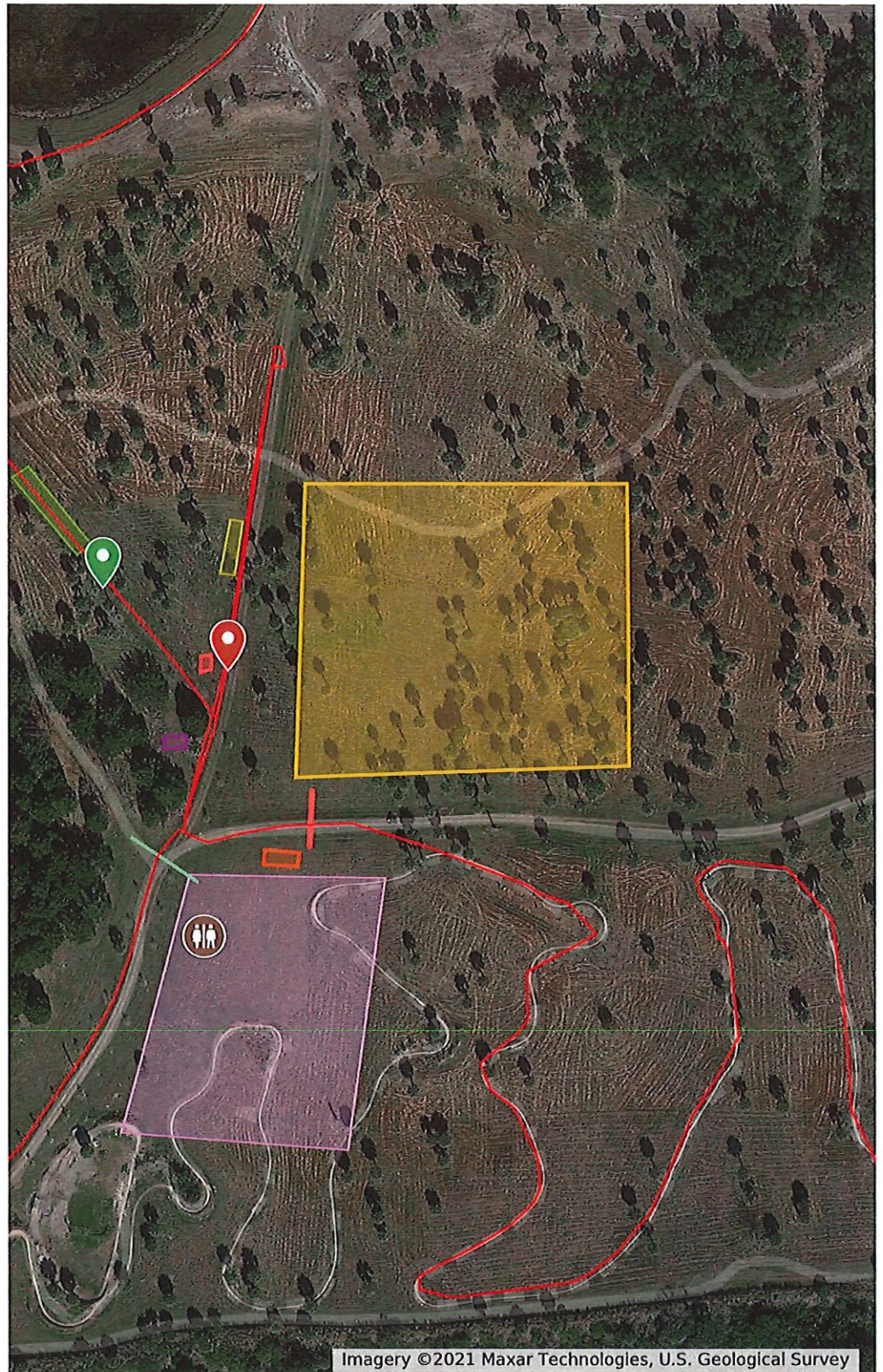
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**2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000005243

**Entity Name:** NATIONAL INTERSCHOLASTIC CYCLING ASSOCIATION, INC.

**Current Principal Place of Business:**

2414 6TH STREET  
BERKELEY, CA 94710

**Current Mailing Address:**

2414 6TH STREET  
BERKELEY, CA 94710 US

**FEI Number:** 13-4234305

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GLEDHILL, MAXWELL  
53 SALT POINT  
ST. AUGUSTINE, FL 32086 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CFO  
Name HAUGHEY, LAUREN  
Address 2414 6TH STREET  
City-State-Zip: BERKELEY CA 94710

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAUREN HAUGHEY

CFO

02/02/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date