

Event Permit



Event Name:

Spaghetti Dinner

Applicant:

Nat Italiano

Contact:

941.964.0400

Location:

Louise Dupont Crowninshield House

Valid only for the Following date(s):

February 8, 2015 & March 22, 2015

Valid only for the Following time(s):

3:00pm — 9:00pm

Permit Number

15-28322CPALC

Permit Type

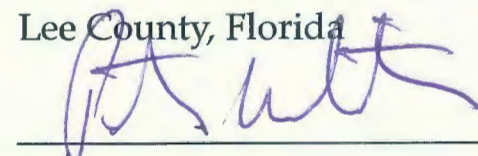
- Special Event
- Use of County Property
- Sell & consume Alcohol
- Consume Alcohol only
- Film Permit

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.
- This permit is to be readily available for inspection during the entire event.
- County-issued alcohol permits: Alcoholic beverages must not be sold/consumed 1½ hours prior to the conclusion of the event & vacating the facility.

Board of County Commissioners

Lee County, Florida



County Manager

1-9-15

Date



Lee County

Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

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

Section I - GENERAL INFORMATION (All Permit Types)	
Title of Event / Name of Production	Spaghetti Dinner (Community Event)
Date(s) of Event / Production:	February 8, 2015 & March 22, 2015
Location(s) of Event:	Louise DuPont Crowninshield Community House
Name of Applicant:	Nat Itallano
Applicant Address:	P.O. Box 100, 131 Banyan Street Boca Grande, FL 33921
Applicant Phone Number:	941-964-0400
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	italianoinsurance.com
Estimated Attendance:	150
Event Description: Include each activity, when activities take place, etc.	This is a Spaghetti Dinner for the Boca Grande Community. Spaghetti will be boiled in late afternoon and served from 4:30 - 7:30p.m. (Eating , drinking and socializing will take place).
Hours of Operation:	3:00pm - 9:00pm
STRAP # of Parcel:	14432001000050010
Owner of Premises*:	Lee County Government

*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? Public Facility

Are any temporary structures to be installed for the event? [] Yes [x] No Type:

Do you have the appropriate permits for the temporary structures? N/A [] Yes [] No

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

Insurance Company Insuring the Event: Italiano Insurance

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

Surety Company Bonding this Event (Name and Address): N/A

Will Vehicles be Used as Part of This Event?

[] Yes [x] No

If yes, automobile coverage must be included on the certificate of insurance.

Will Food be Available at this Event?

[x] Yes [] No

If yes, products liability coverage must be included on the certificate of insurance.

Will Alcoholic Beverages be served/consumed at this Event?

[x] Yes [] No

If yes, liquor liability coverage must be included on the certificate of insurance.

Name & Address of Organization Providing Food: Louise DuPont Crowninshield Community House Inc

Type of Food being Served: Spaghetti, Meatsauce, Bread, Drinks

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Louise DuPont Crowninshield Community House Inc

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? Consumed Only [x] Yes [] No

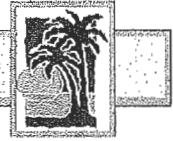
If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number: N/A - B.Y.O. Bottle of wine

(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

Lee County Event Permit Application



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply): N/A

- TV Movie or Special, TV Series / Pilot, TV Commercial, Still Photos, Public Service Announcement, Industrial / Documentary, Other:

Will any of the following be needed or included*?

- Street Closure, Traffic / Crowd Control, Fire or Burning, Explosives or Pyrotechnics, Animals, Large or Small, Construction of Any Kind, Large and/or Numerous Vehicles, Helicopters, Boats, etc., Stunts, Other. Each item has Yes/No checkboxes.

* For any marked Yes, provide further details below:

Empty rectangular box for providing details for marked 'Yes' items.

Special Parking Requirements:

Empty rectangular box for special parking requirements.

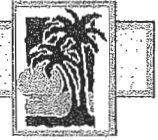
City or County Services Required: (Personnel, equipment, facilities, etc.)

Empty rectangular box for city or county services required.

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.

Form fields for: 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.

Applicant Agreement - Signature Required



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.



Signature of Applicant



Witness

NELSON A. Itliongt

Print Name of Applicant and Title

Joseph R. Wier

Print Name of Witness

12/22/14

Date

12/29/14

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:

In authorized parking areas only.

Deputies (How Many?):

None required.

Fee for Services:

Special Arrangements:

Alcohol is not allowed beyond the property boundaries.

Print Name: Capt. Scott Lucia

Signature: Lucia, Scott

Digitally signed by Lucia, Scott
DN: cn=Lucia, o=Lee County Sheriff's Department, ou=Lee County Sheriff's Department, email=Lucia.S@leesheriff.org
Date: 2014.12.22 16:43:55 -0500

Title: Detail Unit Commander

Date: 22 December 2014



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?)	None
Fee for Services:	None
Flammable Vegetation:	None
First Aid Equipment:	None
Fire Extinguishing:	None
Special Arrangements:	In case of emergency - Dial 911

Print Name: C.W. Blosser
Signature: 
Title: Fire Chief
Date: 12/22/2014

Lee County Event Permit Application



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY
14752 SIX MILE CYPRESS PARKWAY
FORT MYERS, FL 33912
(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:	N/A
Medical Personnel:	N/A
Medical Supplies / Equipment:	N/A
Safety Requirements:	N/A
Fee for Services	Patient is billed at the time of service.
Special Arrangements:	Call 9-1-1 as need for emergencies.

Print Name: Scott M Tuttle

Signature: Scott M Tuttle

Digitally signed by Scott M Tuttle
DN: cn=Scott M Tuttle, o=EMSE, ou=Department of Public Safety,
c=us, email=Scott.M.Tuttle@fla.gov, 4.1.3

Title: Deputy Director

Date: 12/19/2014

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 ~~SERVICES~~ 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:

No Event Parking on Lee County-maintained road rights-of-way. Use designated areas as directed by Parks & Recreation.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

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

Print Name: Bryan Miller

Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller
DN: cn=Bryan D. Miller, ou=CDOT, ou=Traffic, email=bmiller@leegov.com,
c=US
Date: 2014.12.19 09:09:28 -0500

Title: Senior Project Manager

Date: December 19, 2014

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:

ANY ADDITIONAL LIGHTING MUST BE PROVIDED BY PERMIT HOLDER. OPEN FLAME CANDLES ARE PROHIBITED

Parking Areas:

PARKING IS PERMITTED IN EXISTING PARKING AREAS LOCATED AT THE BOCA GRANDE COMMUNITY PARK AND CROWNINSHIELD COMMUNITY HOUSE PARKING LOT

Special Arrangements:

PERMIT HOLDER MUST FOLLOW ALL GUIDLINES UNDER ORDINANCE #95-09 (SELLING & CONSUMPTION). ALL ALCOHOL SHALL BE CONTAINED INSIDE THE LOUISE DUPONT CROWNINSHIELD COMMUNITY HOUSE. Lee County Parks & Recreation Director or Deputy Director approves this alcohol permit (2 - permits already granted at the Boca Grande Community Park) by signing below.

Print Name: Dana Kasler

Joe Wier

Signature: Dana Kasler

Digitally signed by Dana Kasler
DN: cn=Dana Kasler, ou=Lee County, ou=Lee County Parks & Recreation,
email=dan@parks.leegov.com, c=US
Date: 2014.12.19 08:24:31 -0500

Title: Deputy Director

Supervisor

Date: Dec 19, 2014

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT
COUNTY ADMINISTRATION BUILDING - 4TH 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 the applicants use of aforementioned event on Lee County property.

In addition, Host Liquor Liability Insurance will be required with minimum limits of One Million Dollars (\$1,000,000) per occurrence. Should Host Liquor Liability coverage be afforded under the Commercial General Liability policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.

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.

Print Name: Mike Figueroa

Signature:

Title:

Risk Program Manager

Date:

January 7, 2015



CERTIFICATE OF LIABILITY INSURANCE

OP ID: KY

DATE (MM/DD/YYYY)
04/23/2014

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 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).

PRODUCER ITALIANO INSURANCE-BOCA P. O. Box 1406 Boca Grande, FL 33921 Nelson A. Italiano II	Phone: 941-984-0400 Fax: 941-984-0505	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, Ext): ADDRESS: PRODUCER CUSTOMER ID #: LOUIS-6														
INSURED Louise DuPont Crowninshield Community House, Inc. P.O. Box 101 Boca Grande, FL 33921	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Firemen's Fund Insurance</td> <td>21849</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Firemen's Fund Insurance	21849	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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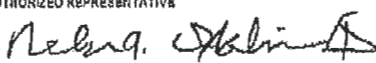
COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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	ADDITIONAL INSURANCE	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Host Liquor Liab	X	142X30529920	04/23/2014	04/23/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000 Host Liquor \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per acc/ident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE \$ RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/EMBER EXCLUDED? (Mandatory in RI) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				WORKERS COMPENSATION & EMPLOYERS' LIABILITY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Lee County, a political subdivision & Charter County of the State of Florida, its agents, employees, and public officials are Additional Insured on the General Liability as required by written contract.

OR ME 1/1/15

CERTIFICATE HOLDER Lee County Board of County Commissioners P O Box 398 Fort Myers, FL 33902	CANCELLATION 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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Parking area for
Spaghetti Dinner
Guests

Crownshield
House
Spaghetti Dinner



**MEMORANDUM
FROM
THE DIVISION OF PUBLIC RESOURCES**

DATE: January 9, 2015
TO: County Management
FROM: Samantha Westen, Administrative Assistant
RE: **Event Permit for Signature**

Attached is an event application submitted by **Nat Italiano** for the “**Spaghetti Dinner**” events which will take place at the **Louise Dupont Crowninshield House** on **February 8 & March 22, 2015 from 3:00pm – 9:00pm.**

All needed sign-off sheets are included as well as the insurance certificate and site plan.

Please sign the permit and return to Public Resources after review.

If you have any questions or concerns, please call me at 533-2112.

Thank you,



Samantha Westen

Attachment