

EVENT PERMIT



Ordinance 14-15

2015 SOUTHWEST FLORIDA WALK MS

PERMIT NUMBER:

TMP2015-00056

EFFECTIVE DATE: 02/21/15

, a

EXPIRATION DATE: 02/21/15

Property Owner Name: LEE COUNTY

Start Time:

6:00 AM

End Time:

2:00 PM

Description:

Applicant:

Walk to raise awareness and funds for programs and research for MS. Event scheduled to take place

February 21, 2015, 6am-2pm

DENISE DIXON

954-731-4224

Location of event: 9190 9398 CORKSCREW PALMS BLVD ESTERO 33928

Estero Community 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 alchohol 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 alcholic 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



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



Event Application

Check the appropriate box(es) below:	
SPECIAL EVENT PERMIT	
USE OF COUNTY PROPERTY PERMIT	,
PERMIT TO SELL AND CONSUME ALCHO	DLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	2015 Southwest Florida Walk MS
Date(s) of Event / Production:	Saturday, February 21, 2015
Location(s) of Event:	Estero Community Park 9200 Conhecrew Palms
Name of Applicant:	National Multiple Sclerosis Society
Applicant Address:	3201 W Commercial Blvd, Suite 127 Fort Lauderdale, FL 33309
Applicant Phone Number:	954-731-4224
Contact Person: (If different from applicant)	Denise Dixon
Contact Phone Number: (If different from applicant)	ext. 3912
Email Address:	denise.dixon@nmss.org
Estimated Attendance:	400
Event Description: Include each activity, when activities take place, etc.	Walk MS, an annual event, is an opportunity for the community to help raise awareness and vital funds. The dollars raised support life changing programs and cutting-edge research for more than 7,500 South Florida residents living with MS.
Hours of Operation:	6am-2pm
STRAP # of Parcel:	34-46-25-01
Owner of Premises*:	LEE COUNTY PARKS & RECREATION

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TMP2015-00050

^{*}Notarized statement from the property owner specifically consenting to the proposed use required.



Fill out the following questions for allpermit types:

What is the Zoning Classification of the	e premises?	
Are any temporary structures to be ins	stalled for the event? 🔀 Yes 🦰 No T	ype: Tents
Do you have the appropriate permits f	or the temporary structures?	⊠ Yes
* For a 'Special Event' and 'Use of Coundentified, including all parking areas.	nty Property' permit, submit a site plan with	all proposed facilities and activities
Insurance Company Insuring the Even	t: MARSH	All the second s
Note: Certificate of Insurance must be submit	ted at time of application	
Surety Company Bonding this Event (N	Name and Address):	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
▼ Yes No	🔀 Yes 🦰 No	├ Yes No
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food:	National Multiple Sclerosis Society	
Type of Food being Served: Breafast it	ems, fruit, snacks	
Section II - USE OF COUNTY Organization Sponsoring the Event:	PROPERTY PERMIT	
Fill out this portion for applications f	or Solicitation in the County Rights-of-Way:	
Name of Charity: National Multiple Sc	lerosis Society	
Address of Charity: 3201 W Commerci	al Blvd, Suite 127, Fort Lauderdale, FL 33309	VALUE OF THE PARTY
Phone Number: 954-731-4224		
Non-profit certificate/registration nu	mber: 85-8012674254C-6	
(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/CONSUMP	TION OF ALCHOLIC BEVERAGES PE	RMIT
Is alcohol being sold/consumed on Co	ounty Property? ed. Only non-profit organizations can sell alcohol on County	┌─Yes
Non-profit certificate/registration nu (Required if alcohol is to be <u>SOLD</u> at the event)		
Please note: A permit from the State of Florid further details	da Division of Alcoholic Beverages and Tobacco may a	so be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

pe of Production (cho TV Movie or Special		ıy): TV Series / Pilot		TV Comme	rcial I	Still Photos	
	-	Industrial / Documentary		Other:		named.	
			Se mad	-			
ll any of the followin		nciuaea*?		- Vos	r 1	lo.	
Street Clo				Yes		lo Io	
	Crowd Control			Yes			
Fire or Bu	_			Yes	Page and	lo In	
	s or Pyrotechnic	cs		Yes			
	Large or Small			Yes			
	tion of Any Kind			┌ Yes	L		
	d/or Numerous \	Vehicles		Yes			
	ers, Boats, etc.			Yes			
Stunts				Yes	d at	lo	
Other				Yes		lo	
Special Parking Requi	rements:		202240300000000000000000000000000000000				
	5 / 1 /0	l control of Early	م مدادا	4- \			
City or County Servic	es Required: (P	ersonnel, equipment, facil	ities, e	tc.)	***************************************		***************************************
The following informathe industry. If exact	ation is required figures are not	for local and state record available, please estimate	s on pr as clos	oduction in sely as possib	Florida t ole.	o track the econo	mic impa
Number in Cast:		Number in Crew:	ennesses of 17883 and an entry on	Nur	nber of Ic	ocals hired:	
Total budget:		Estimate amount sp	ent in	Lee County:			
Hotel room nights:		Number of shooting	g days:				
100	ber of rooms x number			•			

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 permises 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.

| Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/her knowledge. | Compared to the best of his/



LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

PERMIT TO	NT PERMIT NTY PROPERTY PERMIT ELL AND CONSUME ALCOHOLIC BEVERAGES T	WITHIN LEE COUNTY FACILITIES HAT ARRANGEMENTS YOUR ORGANIZATION
Parking:	In authorized parking areas only	
Deputies (How Many?):	None required.	
Fee for Services:		
Special Arrangements:	None.	
	Print Name: Capt. Scott Lucia	
	Signature: Lipt , had H. Jinn	
	Title: Detail Unit Comman	uder
	Date: 3 February 2015	



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.

ent permit JNTY PROPERTY PERMIT IT
APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
N/A
Any tent over 900 square feet will require inspection. Contact Estero Fire Rescue at 239-390-8000 to schedule
All vegetation in activity area to be cut low and removed.
911 AS NEEDED. M.W.
Any cooking operations shall be required to have a portable fire extinguisher.
No cooking under tents. Access shall be provided for emergency vehicles/
Print Name: Phillip Green Signature: Title: Fire Marshal Date: 2/9/2015

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EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 14752 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912 (239) 533-3911

Check the appr	opriate box(es	below:
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- F SPECIAL EVENT PERMIT
- X: 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.

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Treatment Facilitles:	MA					eggenggen mar skind of de disk (1986) bellet i		ggeographic data di casco casti di ta
Medical Personnel:	MA	v, 9.5 p		article Share			***	
Medical Supplies / Equipment:	NA							
Safety Requirements:	MA				y			
Fee for Services	Patents	av.	lo. The	at	tou	of	Serva	_
Special Arrangements:	Call	9-1-1	a)	Nee	ded	Α.	eursm	cres
	Print Name: Signature: Title: Date:	SCU Depty 1/2	M	Jan P	Sh kc	Sil	4	
			T					

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DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

Check the appropri	ate box(es) bel	ow:		
SPECIAL EV	ENT PERMIT			
⊠ USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVER	AGES WITHIN LEE COUNT	Y FACILITIES
FILM PERM	1IT			
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELOV LY WITH FOR THEIR EVE	V WHAT ARRANGEMENTS INT.	YOUR ORGANIZATION
Parking:	No event parking o	n or within ten (10) feet of L	ee County maintained road rig	hts-of-way.
Ingress and Egress:	Use all established	means of ingress and egres	5.	
Special Arrangements:	Use Lee County Sh	eriff's Office for assistance w	rith traffic control, if needed.	
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller	Englisher signised by Proposity Advised Dee on Organised Maken, or CLEAR's over Links, estimative violent hampline open A sem SAND Online 2013 0 14.15.37 +9730	
	Title:	Senior Project Manager		
	Date:	January 30, 2015		



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

Check the appropr	rlate box(es) below:	
Name and	EVENT PERMIT OUNTY PROPERTY PERMIT	
	O SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES	
FILM PERI	MIT ,	
AFTER REVIEWING THI WILL REQUIRE THE APP	E APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLICANT TO COMPLY WITH FOR THEIR EVENT.	
Illumination:	NO LIGHT needed 700 Set up. NO LIGHT needed for actual work.	
Parking Areas:	Musicontact medical Buildings in Front to get authorisation for over flow parking, Contact is Estero Park Commons Made Assoc. Inc Dela Escente or Otephanie Miller at 234277. All nehicles must be stationalin parking (of offer drop off.	<u>-</u> 1615
Special Arrangements:	Na Stakingiato the Ground	
500000000000000000000000000000000000000	none.	
1	,	
	Print Name: Temp Press	
	Signature: Kayas	
	Title: Supervisoe	
	Date: 2/-1/15	
	•	

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LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR 2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221

Check the appropriat	te box(es) below:
SPECIAL EVE USE OF COU PERMIT TO S FILM PERMIT	NTY PROPERTY PERMIT ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE A	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Insurance Requirements:	The insurance shall have a limit of not less than one million dollars (\$1,000,000.00) per occurrence for the general aggregate. The certificate of insurance shall name Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, Florida 33902 as the certificate holder an additional insured.
Special Arrangements:	The certificate of insurance shall name Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, Florida 33902 as the certificate holder an additional insured.
	Print Name: Mlke Figueroa Signature:
	Title: Risk Program Manager
	Date: , February 3, 2015



LEE COUNTY VISITOR & CONVENTION BUREAU 2201 SECOND STREET, SUITE 600 FORT MYERS, FLORIDA 33901 (239) 338-3500

Check the appropriat	e box(es) below:
FILM PERMI	ONLY
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	PPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ANT TO COMPLY WITH FOR THEIR EVENT.
Special Arrangements:	NA
Other:	
	Print Name: Signature: Title: Date:

February 21, 2015 Team Photos 40401401 Sholdly Oltor OUTUR OUTURO C 60010101 Volunteer/Staff Color Display Tables Parking Food Service Popules 00ex Posicialismos (239) 498-0415

stero Community Park

Street View