

EVENT PERMIT

Ordinance 14-15

EASTER SUNRISE SERVICE

PERMIT NUMBER: TMP2015-00070

Date(s) of Event: Sunday, April 5, 2015 from 7am - 8am

Property Owner: LEE COUNTY

Applicant: BILL LYTELL
239-980-0543

Description: Easter Sunrise Service

Location of event: 27954 HICKORY BLVD BONITA SPRINGS 34134
Bonita Beach Park on Hickory Blvd

Will the event be attended by 1000 or more people ? No

Will the event be held on County Owned Property ? Yes

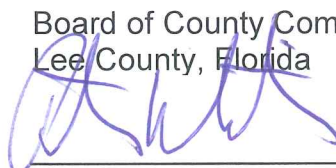
Will there be alcohol consumed or sold at the event ? No

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

 2-27-15
County Manager Date

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	Easter Sunrise Service
Date(s) of Event / Production:	April 5, 2015
Location(s) of Event:	Bonita Beach Park
Name of Applicant:	Bill Lytell, Gospel Baptist Church
Applicant Address:	24861 Old 41 Road Bonita Springs, FL 34135
Applicant Phone Number:	239-980-0543 (cell) or 239-947-1285 (church)
Contact Person: (If different from applicant)	Wendy Stone
Contact Phone Number: (If different from applicant)	239-947-1285
Email Address:	lytell.b@mygbcs.com or stone.w@mygbcs.com
Estimated Attendance:	900
Event Description: Include each activity, when activities take place, etc.	Easter Sunrise Service (Church service with Preaching and music)
Hours of Operation:	7:00 a.m. to 8:00 a.m.
STRAP # of Parcel:	Bonita Beach Park, 27954 Hickory Blvd, Bonita Springs, FL 34134 314785B4 00018 0000
Owner of Premises*:	Lee County Government

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

TMP2015-00070

Lee County Event Permit Application



Fill out the following questions for all permit types:

What is the Zoning Classification of the premises? Bonita Beach Park

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: Guide One (will be emailed directly for company)

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

Surety Company Bonding this Event (Name and Address): _____

Will Vehicles be Used as Part of This Event?

☐ Yes ☒ No

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

Will Food be Available at this Event?

☐ Yes ☒ No

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

Will Alcoholic Beverages be served/consumed at this Event?

☐ Yes ☒ No

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

Name & Address of Organization Providing Food: _____

Type of Food being Served: _____

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Gospel Baptist Church

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

Type of Production (choose all that apply):

☐ 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	<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:

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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: _____
 $\frac{\text{number of rooms} \times \text{number of nights}}{\text{number of shooting days}}$



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.

Wendy Stone
Signature of Applicant

Alisha M. Smith
Witness

Wendy Stone - OFFICE Manager
Print Name of Applicant and Title

Alisha M. Smith
Print Name of Witness

2/16/15
Date

2/16/15
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 parking areas only.

Deputies (How Many?):

Two deputies for traffic and safety for sunrise service.

Fee for Services:

Special Arrangements:

Vehicles are not to be parked on the right-of-way, blocking driveways, or impeding traffic in any way.

Print Name: Capt. Scott Lucia

Signature: Capt. Scott H. Lucia

Title: Detail Unit Commander

Date: 18 February 2015

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?)	N/A
Fee for Services:	N/A
Flammable Vegetation:	N/A
First Aid Equipment:	N/A
Fire Extinguishing:	N/A
Special Arrangements:	N/A

Print Name: Joseph Daigle

Signature:

Title:

Chief

Date:

2-17-15



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:	MA
Medical Supplies / Equipment:	N/A
Safety Requirements:	MA
Fee for Services	Pl billed @ time of services
Special Arrangements:	call 9-1-1 as needed for emergencies

Print Name: SCOTT TUTTLE
 Signature: [Signature]
 Title: Deputy Director
 Date: 2/16/15

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
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☐ 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.

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

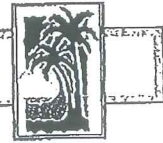
Signature: **Bryan D. Miller**

By signing this form, the applicant certifies that the information provided is true and correct to the best of their knowledge.

Title: Senior Project Manager

Date: February 25, 2015

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
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☐ 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 be responsible to supply temporary lighting as needed for event safety and event setup.

Parking Areas:

Parking in the park is limited to 95 spaces so applicant will need to prepare for overflow parking off site. Event organizer must provide adequate traffic and safety monitors to ensure traffic and vehicles do not block emergency accesses, egresses, roads or driveways.

Special Arrangements:

Deputies will be required to direct traffic to ensure safety for the event.

Print Name: Alise Flanjack

Signature: Alise Flanjack

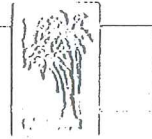
Digitally signed by Alise Flanjack
DN: cn=Alise Flanjack, o=Lee County Parks and Recreation,
email=alfl@leegov.net
Date: 2015.02.18 10:34:45 -0500

Title: Deputy Director

Date: February 18, 2015

Bonita Beach Easter Sunrise Service

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
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☐ 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: 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: Mike Figueroa

Signature:

Title:

Risk Program Manager

Date:

February 19, 2015



CERTIFICATE OF LIABILITY INSURANCE

GOSPBAP-01 CMCLAUGHLIN

DATE (MM/DD/YYYY)

2/19/2015

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

Church Asset Management, Inc.
1500 Wall St.
Saint Charles, MO 63303

CONTACT**NAME:****PHONE****(A/C, Ho, Ex):****E-MAIL****ADDRESS:****INSURER(S) AFFORDING COVERAGE****NAIC #****INSURER A:** GuldeOne Elite Insurance Company

42803

INSURER B:**INSURER C:****INSURER D:****INSURER E:****INSURER F:****INSURED**

Gospel Baptist Church & Christian School
24801 Old US 41 Road
Bonita Springs, FL 34135

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	ADDL SUBR INSD YVVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X	1205-684	06/14/2014	06/14/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB OCCUR CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$
	DED RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in FL) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: Easter Sunrise Service - April 5, 2015 - at Bonita Beach Park, 27954 Hickory Blvd., Bonita Springs, FL --Form CGCG2026, Additional Insured - Designated Person or Organization" applies."

one
ME 2/19/15

CERTIFICATE HOLDER

Lee County Board of County Commissioners
PO 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

[Signature]

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NAMED INSURED : Gospel Baptist Church and Christian School

POLICY NUMBER: 1265684

COMMERCIAL GENERAL LIABILITY
CG 20 26 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
Lee County Board of County Commissioners PO Box 398 Fort Myers, Florida 33902 Event: Easter Sunrise Service Date: April 5, 2015 Location: Bonita Beach Park, 27954 Hickory Blvd, Bonita Springs, FL 34134
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

Lee County Event Permit Application



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

Check the appropriate box(es) below:

☐ FILM PERMIT ONLY

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

Special Arrangements:

Other:

Print Name: _____

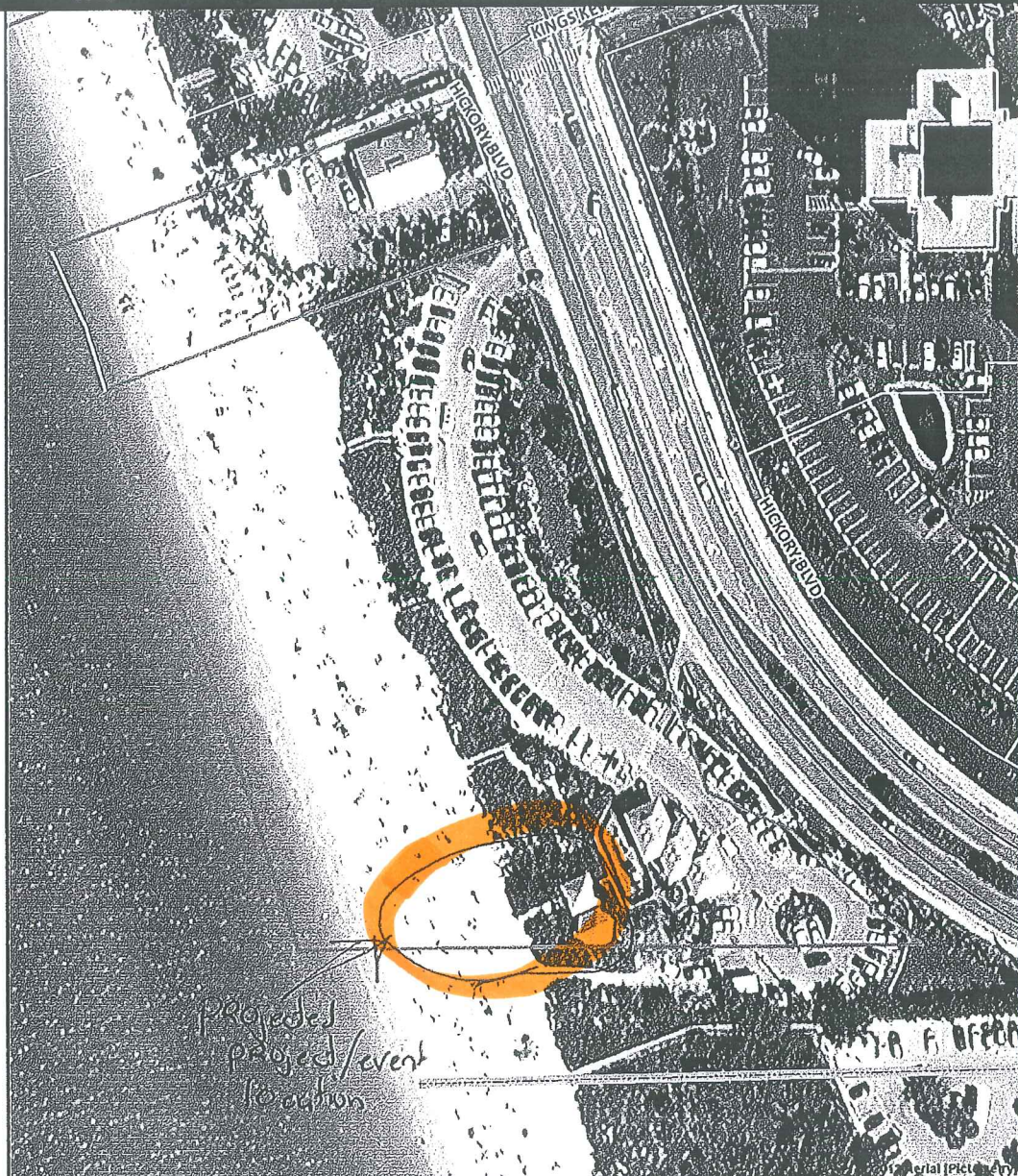
Signature: _____

Title: _____

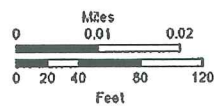
Date: _____

project number:
0112

Bonita Beach Park



Website: http://www.leeparks.org/facility-info/facility-details.cfm?Project_Hum=0112



Park Type: Regional

*GIS Calculated Acres: 3.1

Address: 27954 Hickory Blvd.
Bonita Springs FL 34134

Commissioner District: 3

Community Park Impact Fee District: 11
City of Bonita Springs

*Parcels derived from Lee County GIS Property Appraiser lines & aeriels, they do not represent a survey.
GIS acres for Interlocal sites based on the most recent Concurrence & contracted acreage number.

THIS MAP IS NOT A SURVEY. This map is for informational and planning purposes only. Created by dcalvert@leegov.com February 2013

Mike Scott
Office of the Sheriff



State of Florida
County of Lee

Dear Off-Duty Employer:

Enclosed with this letter is an Extra Duty Detail Request Form. Please fill the form out completely. All details are a minimum of four (4) hours with the exception of boat details which are a minimum of six (6) hours. When five (5) or more deputies are requested, a supervisor with the rank of Sergeant or above will be assigned at an upgraded hourly charge. Depending on the type of event or crowd size it will be at the discretion of the Sheriff's Office to determine the number of deputies needed.

All details are charged a \$15 per deputy marked vehicle rate. Also, all boat details are charged \$10 per hour boat rate.

The current detail rates are as follows:

Security:	\$40hr	Funeral Escort:	\$40hr
Security Supervisor:	\$50hr	Boat:	\$40hr
Traffic:	\$50hr	Prisoner Transport:	\$60hr
Traffic Supervisor:	\$60hr	Civil Standby:	\$60hr
Holiday*:	\$60hr	Escort:	\$40hr
Last Minute Detail:	\$60hr		
(3 hrs or less before start time)			

***Holidays Include:** Easter, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas Eve, Christmas Day, New Year's Eve and New Year's Day.

When your request is approved it will be given a job number and e-mailed or faxed to you. Payment is due in full one (1) week prior to the scheduled detail in the form of a certified check, money order, and business check or cash to the Lee County Sheriff's Office 14750 Six Mile Cypress Parkway, Ft. Myers, FL 33912 Attn: Details.

Extra duty details will not be provided to any person, firm or organization whose members, business or operations are of a questionable nature; or for any event that will discredit the assigned Deputy, Sheriff's Office or County. The Sheriff's Office reserves the right to cancel extra duty detail without notice and to recall the deputy(s) when necessary for community safety.

In order to cancel an off-duty detail, notice must be given to the Detail Coordinator twenty-four (24) hours prior to the start of the detail either by phone or email. If the cancellation is less than twenty-four (24) hours, a four (4) hour charge per deputy will be billed. In the case of weather, notice of cancellation must be received within two (2) hours of the starting time; otherwise a two (2) hour charge per deputy will be billed. In the event of a cancellation after business hours please call 239-477-1000.

If you have any additional questions please contact our office at 239-477-1199.

Mike Scott
Office of the Sheriff



State of Florida
County of Lee

Extra Duty Detail Request Form

Business/Company Information	
(Note: Failure to fully complete all applicable information may result in processing delays)	
Business Name: GOSPEL BAPTIST CHURCH	
Street: 24861 OLD 41 RD	
City: BONITA SPRINGS	State: FL Zip:
Business Contact: WENDY STONE	Phone #: 239-947-1285
Email Address: STONE.W@MYGBCS.COM	
Detail Information	
Location Name: BONITA BEACH PARK	
Address: 27954 HICKORY BLVD	
City: BONITA SPRINGS	State: FL Zip: 34134
Contact Person: WENDY STONE	Phone #: 239-980-0543
Date of Event: 04-5-15	Time of Event: 0600-1000
Type of Event: SUNRISE SERVICE	
Which service(s) is needed:	
<input type="checkbox"/> Security	<input type="checkbox"/> Traffic Control <input checked="" type="checkbox"/> Holiday <input type="checkbox"/> Last Minute
<input type="checkbox"/> Other:	
Anticipated Crowd Size: 900	Number of deputies requested: 2
Marked Vehicle: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Unmarked Vehicle: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Uniformed Deputy(s): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Plain Clothes Deputy(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Any additional security working this detail? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, how many?	
Permits Attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Will alcohol be sold? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Mike Scott
Office of the Sheriff



State of Florida
County of Lee

Describe job duties of deputy/deputies:

2 UNIFORMED DEPUTIES WITH PATROL CARS FOR TRAFFIC CONTROL DURING SUNRISE SERVICE.

Requested by

I swear and affirm that the following information is a complete and accurate reflection of the event for which I am requesting assistance from the Lee County Sheriff's Office. I understand that my failure to provide an accurate and complete description is grounds for immediate termination of this detail. I also understand that details cancelled with 24 hours or less notice I will be charged the minimum of 4 hours per Deputy.

Print Name

Signature

Date

Please e-mail your application to details@sheriffleefl.org or fax to 239-477-1177. Once the application is reviewed you will receive notification of the total cost.

Submit by Email

Detail Coordinator Use Only

Total Deputy(s): 2 Total Hours: 8

Rate per hour: \$60 Vehicle Rate per Deputy: \$15

Total Cost for Detail: \$510

Payment Information

We accept cash, money order, cashier's check, and business check.

Please mail payment to:

Lee County Sheriff's Office

Attn: Details

14750 Six Mile Cypress Pkwy

Ft Myers, FL 33912

Vendor Signature

Date



REQUEST FOR FEE WAIVER

LEE COUNTY PARKS AND RECREATION
3410 Palm Beach Boulevard
Fort Myers, FL 33916
Phone (239) 533-7275

This form must be completed and returned with a copy of the Agency's 501-C Non-Profit Status Certificate 10 days in advance of the date requested.

Date Form Completed: 2/16/15

Name of Agency or Organization: Gospel Baptist Church

Contact Person: Bill Lytell Phone #: 239-980-5081 or 239-941-1285

Address: 24201 Old 41 Road Bonita Springs FL 34135

Requested Park/Facility: Bonita Beach Park

Location within that Park/Facility: Bonita Beach Park

Date of Activity: April 5, 2015 Time of Activity: 7:30am

Type of Activity: Service Expected Number of Participants: 900

Fees you are Requesting to have Waived: Any + All Fees connected with Facility use

Reason applying for Fee Waiver (list benefits to Lee County if fee is waived): We donate ~~to~~ all we do for this service and do not charge for it Nor take on offering. Our costs for this service Run from County fees, police attendants, parking + sound equipment

For Office Use Only

Manager/Supervisor: Approved ☒ Denied ☐ 501-C Attached: Yes ☐ No ☐

Justification: NON PROFIT - NO CHARGE OR OFFERING - 50% OFF FEES

Signature: Mahe Uj Date: 2/21/15

Director of Parks and Recreation: Approved ☒ Denied ☐

Justification: Non-Profit not charging fees. 50% Fee Waived

Signature: Alie Flyak Date: 2/24/15