

EVENT PERMIT

Ordinance 14-15

16TH ANNUAL HAVE A BLAST EVENT

PERMIT NUMBER: TMP2015-00191

Date(s) of Event: July 3, 2015 from 4:30pm until 11:59pm

Property Owner: MIROMAR OUTLET WEST LLC

Applicant: MIROMAR OUTLET WEST. LLC

Contact: JEFF STANER

Description: Musical entertainment with fireworks display

Location of event: 10801 CORKSCREW RD ESTERO 33928
MIROMAR OUTLETS AND GERMAIN ARENA, I75 south to Germain Arena exit
***239-948-3766

Will the event be attended by 1000 or more people ? Yes

Will the event be held on County Owned Property ? No

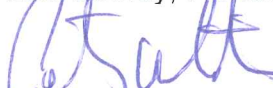
Will there be alcohol consumed or sold at the event ? Yes

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

 7-9-15
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

IMP2015-00191

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	16th Annual "Have a Blast" fireworks celebration
Date(s) of Event / Production:	Friday, July 3, 2015
Location(s) of Event:	Miromar Outlets and Germain Arena
Name of Applicant:	Miromar Outlet West, LLC/Miromar Outlet East, LLC KTB Florida Sports Arena, LLC
Applicant Address:	10801 Corkscrew Road, Suite 199, Estero, FL 33928 1100 Everblades Parkway, Estero, FL 33928
Applicant Phone Number:	239-948-3766 and 239-948-7825
Contact Person: (If different from applicant)	Jeff Staner/Scott Bryant
Contact Phone Number: (If different from applicant)	Same
Email Address:	jstaner@miromar.com
Estimated Attendance:	20,000 people
Event Description: Include each activity, when activities take place, etc.	Musical Entertainment 6:00 p.m. - 9:30 p.m. Fireworks display approximately 9:30 p.m. - 10:00 p.m.
Hours of Operation:	4:30 p.m. - 11:59 p.m. <i>264625E3210M10000 264625E3U 23104100</i>
STRAP # of Parcel:	26-46-25-27 000M1.0000 / 26-46-25-27000M2.0000 26-46-25-270000001/1030
Owner of Premises*:	Miromar Outlet West, LLC / Miromar Outlet East, LLC KTB Florida Sports Arena, LLC

*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? Commercial

Are any temporary structures to be installed for the event? ☒ Yes ☐ No Type: Tents

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: Zurich and Lexington

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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, automobile coverage must be included on the certificate of insurance.	Will Food be Available at this Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, products liability coverage must be included on the certificate of insurance.	Will Alcoholic Beverages be served/consumed at this Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, liquor liability coverage must be included on the certificate of insurance.
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Name & Address of Organization Providing Food: Existing Miromar Outlet Restaurants

Type of Food being Served: Hamburgers, Cheese Burgers, Hot Dogs, Pizza, etc....

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: _____

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

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

Print Name of Applicant and Title

Print Name of Witness

Date

Date

Signature of Applicant

Witness

Print Name of Applicant and Title

Print Name of Witness

Date

Date



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: _____ <small>number of rooms x number of nights</small>	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.

Florida Highway Patrol Secondary Employment Operational Plan

10041 Daniels Pkwy.
Fort Myers, FL 33913
239-225-9605

AFTER REVIEWING THE APPLICATION, PLEASE ADVISE IF THERE ARE ANY OTHER ARRANGEMENTS REQUIRED.

PARKING: N/A

STATE TROOPERS/OFFICERS: 33

SPECIAL ARRANGEMENTS: FHP/STATE LAW ENFORCEMENT OFFICERS WILL PROVIDE EVENT SECURITY WITHIN THE GROUNDS AS WELL AS PROVIDE TRAFFIC CONTROL SERVICES TO THE PERIMETER ACCESS POINTS, MAJOR ADJOINING INTERSECTIONS AND OTHER SITUATIONS AS DETERMINED TO BE NEEDED.



Print Name of Person Signing / In Charge of Detail's Logistics
Signature

Date: May 13, 2015

OPERATIONAL DETAIL PLAN FOR MIROMAR JULY FIREWORKS EVENT

May 13, 2015

EVENT: Miromar July Fireworks Detail

DATE: July 3, 2015

TIME: 5:00 pm – 11:00 pm (or until events conclusion)

LOCATION Miromar Outlets Mall, 10880 Corkscrew Road, Estero, Florida 33928, County Road 850, Ben Hill Griffin Parkway and I75.

OBJECTIVE: To Provide Traffic Control for vehicle Traffic Entering and Exiting the Event. To Provide Limited Security within the Events Facilities –Securing area of firework staging area, parking lots and crowd security.

The 2015 Miromar Fireworks Event is scheduled for Wednesday, July 3, 2015. The event is scheduled to begin at approximately 6:00 pm and continue until the conclusion of the fireworks show at approximately 11:00 pm. The Florida Highway Patrol and Florida Highway Patrol Auxiliary, with assistance from other state law enforcement agency personnel, have been asked to assist with the security and traffic control that an event of this magnitude warrants.

Lt. Greg Bueno is overseeing the logistics of this event.

The following operational plan is in effect when the detail commences and will cease at the conclusion of the detail:

1. Provide traffic control at various intersections in the immediate areas of Corkscrew Road, Ben Hill Griffin Parkway, I-75 and at the entrances/exit to the Miromar/Germain Arena Facilities before, during and after the fireworks display.
2. Provide limited security within the grounds of the Miromar property to include the parking lots areas, firework staging access points and crowd security. Alcohol will not be sold at the firework event itself. FHP will not be monitoring or securing any restaurants serving alcohol within the Miromar Outlet Shopping Plaza.
3. A detail briefing will be held at 5:30 pm in the Bank of America's Parking Lot (next to Miromar) to go over the event's expectations and responsibilities and to ensure traffic control equipment is functioning properly.
4. Respond to, investigate and handle all emergencies and incidents that arise during the detail. Lt. Greg Bueno is to be made aware of every emergency during this event, example: crashes, injuries, arrest etc...). FHP TBA Trooper will be at the command center if contact is needed with EMS, Fire, or any other emergency on scene agency.
5. Use radio channel "Ft Myers – Detail 1" for FMRCC communication. Fort Myers – Detail 1 is a monitored channel. Please carry and monitor your cell phone at all times also.
6. Arrive at post no later than 6:00 pm. All traffic control personnel must wear their issued reflective vest, campaign hats and use flashlights when in the intersection directing traffic.
7. Remain at post until verbally relieved by Lt. Bueno or designee. The majority of the detail personnel will conclude at 11:00 pm. If your post is not relieved by 11:00 pm, you should contact Lt Bueno for clearance to be dismissed.
8. Advise Lt Bueno of your departure time.
9. The following post assignments will remain in effect for the entirety of the detail unless adjusted by Lt. Bueno.

Lt. Greg Bueno 239-872-5525

Post: 1

Location: Roaming Corkscrew Road Supervisor

Trooper/Officer: TBA

Requirement: Supervise Traffic Operations on Corkscrew Road and Ben Hill. **ARRIVE AT 5:00PM** for Executive Briefing.

Post: 2

Location: Intersection of WB Corkscrew Road / Entrance to Miromar

Trooper/Officer: TBA

Requirement: Will monitor and limit as needed, the traffic flow into Miromar. . Upon the parking lot filling, the intersection will be closed. Excess vehicles will be directed to park at Germain entrances or Design Center. Once the entrance is closed, use discretion as to any vehicles that enter. Will be re-opened at conclusion of event to allow traffic to exit. Designate the inside lane for cars turning out of Miromar onto WB Corkscrew Rd.

Post: 3

Location: Intersection of WB Corkscrew Road / SB Ben Hill Griffin Pkwy.

Trooper/Officer: TBA

Requirement: Provide traffic / pedestrian control for intersection. No U-turns permitted from EB Corkscrew Rd.

Post: 4

Location: Intersection of NB Ben Hill Griffin Pkwy / WB Corkscrew Road

Trooper/Officer: TBA

Requirement: Provide pedestrian traffic control for intersection. For exiting, ensure SB Ben Hill Griffin traffic turning right on WB Corkscrew Rd is prioritized.

Post: 5

Location: Corkscrew Road / Ben Hill Griffin Pkwy

Trooper/Officer: TBA

Requirement: Provide traffic / pedestrian control assistance within the intersection for entire detail.

Post: 6 - Traffic Light Control with Traffic Light Key

Location: Corkscrew Road / Ben Hill Griffin Pkwy

Trooper/Officer: TBA

Requirement: Will monitor and oversee traffic control within the intersection for entire detail. Will control intersection by use of traffic light key.

Post: 7

Location: Corkscrew Road / Ben Hill Griffin Pkwy

Trooper/Officer: TBA

Requirement: Provide traffic control assistance within the intersection for entire detail. AT exit: No U-turns for EB Corkscrew Road at intersection prioritize traffic turning from SB Ben Hill Griffin Rd onto WB Corkscrew Rd

Post: 8

Location: Stoneybrooke Community and CVS Intersection

Trooper/Officer: TBA

Requirement: Provide traffic / pedestrian control assistance at Stoneybrook Community and CVS intersection. Assist Post 4, 5 and 6 at Corkscrew intersection if needed.

Post: 9

Location: Corkscrew Road Median across from south side Miromar entrance / exit

Trooper/Officer: TBA

Requirement: Will close the intersection (left turn only) with cones once parking lot fills or traffic become backed up. Once the parking lot is full, this entrance point will remain closed the entire event. Direct traffic wanting to turn left at the intersection to proceed east to Ben Hill Griffin Pkwy to turn left. Will assist Post #4 and Post # 1 in coning off WB Corkscrew Road's turn lane.

Post: 10

Location: EB Corkscrew Rd. at Design Center intersection

Trooper/Officer: TBA

Requirement: Provide traffic / pedestrian control assistance at intersection for entire detail. Excess vehicles will be directed to park either at Germain or the Design Center. Advise pedestrians to cross at Corkscrew and Ben Hill Intersection.

Post: 11

Location: NB I75 Off Ramp at Corkscrew Rd. Traffic Light Control with Traffic Light Key

Trooper/Officer: TBA

Requirement: Provide traffic control supervision to the intersection during the entire event detail. Will monitor traffic flow and will use the light "pickle" as needed. Will monitor I75 ramps to ensure no vehicles remain stopped to view the firework display.

Post: 12

Location: SB I75 Off Ramp at Corkscrew Rd Traffic Light Control with Traffic Light Key

Trooper/Officer: TBA

Requirement: Provide traffic control supervision to the intersection during the entire event detail. Will monitor traffic flow and will use the light "pickle" as needed. Will monitor I75 ramps to ensure no vehicles remain stopped to view the firework display.

Post: 13

Location: EB Corkscrew Road at the south entrance from WB Corkscrew Road

Trooper/Officer: TBA

Requirement: Will close the intersection (left turn only) with cones once parking lot fills or traffic become backed up. Once the parking lot is full, this entrance point will remain closed the entire event. Direct traffic wanting to turn left at the intersection to proceed east to Ben Hill Griffin Pkwy to turn left. Will assist Post #4 and Post # 1 in coning off WB Corkscrew Road's turn lane.

Post: 14

Location: I75 Traffic Monitor

Trooper/Officer: TBA

Requirement: Provide oversight for traffic congestion on I75; prevent cars from stopping on Shoulder.

Post: 15-

Location: NB Ben Hill Griffin Pkwy between Miromar entrances and Publix Plaza

Trooper/Officer: TBA

Requirement: Provide traffic control at intersection Monitor and assist pedestrian traffic across Ben Hill Griffin Pkwy. Will monitor and limit as needed, the traffic flow into Publix Shopping Plaza. Upon the parking lot filling, vehicles will be directed to travel north toward Germain Arena for additional parking. At events conclusion, force all traffic exiting Publix Plaza to turn right onto NB Ben Hill Griffin Pkwy. May pickle the light if needed.

Post: 16

Location: NB Ben Hill Griffin Pkwy median near McDonalds

Trooper/Officer: TBA

Requirement: Provide traffic control on NB Ben Hill Griffin Pkwy adjacent to McDonalds. Will monitor and limit as needed, the traffic flow into Publix Shopping Plaza. Excess vehicles will be directed to travel north toward Germain Arena for additional parking. At events conclusion, force all traffic exiting Publix Plaza to turn right onto NB Ben Hill Griffin Pkwy.

Post: 17

Location: NB Ben Hill Griffin Pkwy between Miromar entrances and Publix Plaza

Trooper/Officer: TBA

Requirement: Provide traffic control at intersection Monitor and assist pedestrian traffic across Ben Hill Griffin Pkwy. Will monitor and limit as needed, the traffic flow into Publix Shopping Plaza. Upon the parking lot filling, vehicles will be directed to travel north toward Germain Arena for additional parking. At events conclusion, force all traffic exiting Publix Plaza to turn right onto NB Ben Hill Griffin Pkwy. Work closely with Post 15.

Post: 18

Location: North Entrance Germain Arena Traffic Control – SB Ben Hill Side

Trooper/Officer: TBA

Requirement: Provide traffic control at intersection as needed. Additional Parking at Germain Arena will be directed to enter at this North or south Entrance. At event conclusion traffic exiting onto SB Ben Hill Griffin Pkwy will be forced into the SB Ben Hill Griffin outside lane. All traffic exiting onto NB Ben Hill Griffin Pkwy will be forced to turn into the coned off inside NB Ben Hill Griffin Pkwy inside lane.

Post: 19

Location: NB Ben Hill Griffin @ South Entrance / Exit Germain Arena Traffic Control

Trooper/Officer: TBA

Requirement: Provide traffic control at South Germain entrance/exit onto Ben Hill Griffin. Trooper post 22 TBA will assist. Post 19 will need to monitor the flow of traffic on NB Ben Hill Griffin assisting with traffic from Germain to merge. Reassess traffic if southbound ben Hill backs up from Miromar outlet traffic exiting force all Germain traffic to exit to the north.

Post: 20

Location: North Entrance Germain Arena Traffic Control – NB Ben Hill Side

Trooper/Officer: TBA

Requirement: Provide traffic control at intersection as needed. Additional Parking at Germain Arena will be directed to enter at this North or south Entrance. At event conclusion traffic exiting onto SB Ben Hill Griffin Pkwy will be forced into the SB Ben Hill Griffin outside lane. All traffic exiting onto NB Ben Hill Griffin Pkwy will be forced to turn into the coned off inside NB Ben Hill Griffin Pkwy inside lane.

Post: 21

Location: North - South Entrance Germain Arena Traffic Control – Assist both North and South Entrances to Germain

Trooper/Officer: TBA

Requirement: Provide traffic control at North Germain entrance/exit onto Ben Hill Griffin. Trooper TBA will assist.

Post: 22

Location: SB Ben Hill @ South Entrance / Exit Germain Arena Traffic Control

Trooper/Officer: TBA

Requirement: Provide traffic control at South Germain entrance/exit onto Ben Hill Griffin. Trooper Post 19 TBA will assist. At event conclusion traffic exiting onto SB Ben Hill Griffin Pkwy will be forced into the SB Ben Hill Griffin outside lane. All traffic exiting onto NB Ben Hill Griffin Pkwy will be forced to turn into the coned off inside

NB Ben Hill Griffin Pkwy outside lane. Post 19 will need to monitor the flow of traffic on NB Ben Hill Griffin assisting with traffic from Germain to merge. Reassess traffic if southbound Ben Hill backs up from Miromar outlet traffic exiting force all Germain traffic to exit to the north.

Post: 23

Location: SB Entrance / Exit to Miromar on SB Ben Hill Griffin Pkwy

Trooper/Officer: TBA

Requirement: Will monitor and limit as needed, the traffic flow into Miromar. Upon the parking lot filling, the intersection will be closed. Excess vehicles will be directed to park at Germain's entrances or Design Center. Once the entrance is closed, use discretion as to any vehicles that enter. Will be re-opened at conclusion of event to allow traffic to exit all traffic onto south Ben Hill Griffin.

Post: 24

Location: SB Entrance / Exit to Miromar on SB Ben Hill Griffin Pkwy

Trooper/Officer: TBA

Requirement: Will monitor and limit as needed, the traffic flow into Miromar. Upon the parking lot filling, the intersection will be closed. Excess vehicles will be directed to park at Germain's entrances or Design Center. Once the entrance is closed, use discretion as to any vehicles that enter. Will be re-opened at conclusion of event to allow traffic to exit all traffic onto south Ben Hill Griffin.

Post: 25

Post: 26-Inside Security Supervisor

Location: Germain Grounds Security

Trooper/Officer: TBA

Requirement: Provide security inside event at Germain side. Monitor/Secure area fireworks. Work with Post 26.

Post: 26-Inside Security Supervisor

Location: Germain Grounds Security

Trooper/Officer: TBA

Requirement: Provide security inside event at Germain side. Monitor/Secure area fireworks. Work with Post 25.

Post: 27 –Inside Security

Location: Firework display Grounds inside Security

Trooper/Officer: TBA

Requirement: Provide limited security within Germain Facilities / Grounds; Monitor/Secure area where fireworks are dispersed.

Post: 28

Location: Miromar Grounds Security

Trooper/Officer: TBA

Requirement: Provide security inside event at Germain side. Monitor/Secure area fireworks. Work with Post 29.

Post: 29

Location: Miromar Grounds Security

Trooper/Officer: TBA

Requirement: Provide security inside event at Germain side. Monitor/Secure area fireworks. Work with Post 28.

Post: 30

Location: Roaming inside Security Supervisor

Trooper/Officer: TBA

Requirement: Provide limited security / supervision of Miromar and Germain's side. **ARRIVE at 5PM for executive Briefing.**

Post: 31

Location: Communications

Trooper/Officer: TBA

Requirement: Provide oversight for communications function of this detail. **ARRIVE at 5PM for executive Briefing.**

Post: 32- Detail Commander

Location: Miromar

Trooper/Officer: Lt. Greg Bueno

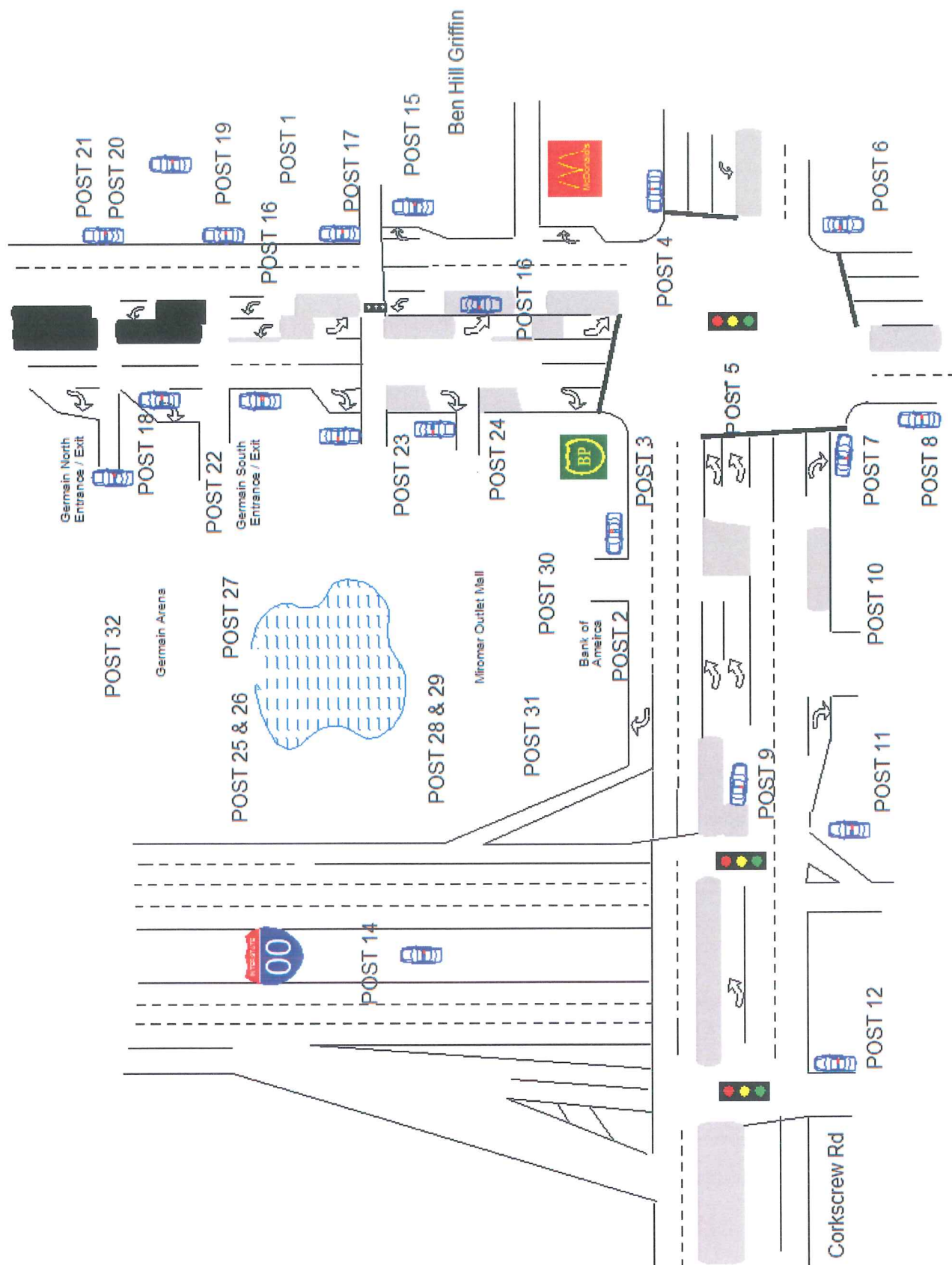
Requirement: Oversee entire detail. **Arrive at 5pm** for executive meeting.

Post: 33

Location: Firework Staging Area

Trooper/Officer: TBA

Requirement: Provide security to firework staging area



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:

N/A

Deputies (How Many?):

NONE

Fee for Services:

Special Arrangements:

This entire event is the sole responsibility of the Florida Highway Patrol. Any and all incidents, traffic control, security issues will be handled by the Florida Highway Patrol. The Lee County Sheriff's Office will have no participation in this event whatsoever.

Print Name: Captain Scott Lucia

Signature: Capt. Scott H. Lucia

Title: Special Event/ Detail Unit Commander

Date: 26 May 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
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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.

Fire Guards (How Many?)

4 EMS Personnel
2 Fire Inspectors for Pyro

Fee for Services:

Brush Truck @ \$250 per hour plus \$30 per hour each
Firefighter assigned to truck Inspectors @ \$60/hour

Flammable Vegetation:

NA

First Aid Equipment:

EMS service provided by EFR

Fire Extinguishing:

1 Engine and 1 brush truck by EFR

Special Arrangements:

Pryotechnics per NFPA 1123 submit plan to EFR

Print Name:

Phillip Green

Signature:

Title:

Division Chief of Prevention

Date:

June 2, 2015

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:

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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.

Treatment Facilities:

N/A

Medical Personnel:

N/A

Medical Supplies /
Equipment:

N/A

Safety Requirements:

N/A

Fee for Services

as negotiated. If EMS trans pnts, pt. will be
billed at time of service.

Special Arrangements:

must arrange medical coverage in event of one A/S
non transport with Estero Fire Department or
Lee County EMS

Print Name:

SCOTT TUTTLE

Signature:

[Handwritten Signature]

Title:

Deputy Director

Date:

5/21/15

Lee County Event Permit Application



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

Check the appropriate box(es) below:

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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 or within 10 feet 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 control.

Print Name: Bryan Miller

Signature: Bryan Miller

Digitally signed by Bryan Miller
DN: cn=Bryan Miller, o=Lee County DOT, ou=DOT Engineering,
email=millerbm@leegov.com, c=US
Date: 2015.05.21 10:41:57 -0400

Title: Senior Project Manager

Date: May 21, 2015

Ennis, Audra

From: Miller, Bryan
Sent: Friday, June 05, 2015 2:55 PM
To: Ennis, Audra
Subject: RE: TMP2015-00191, Fireworks celebration at Miromar Outlets

YES.

From: Ennis, Audra
Sent: Friday, June 05, 2015 2:54 PM
To: Miller, Bryan
Subject: TMP2015-00191, Fireworks celebration at Miromar Outlets

Hello Bryan,

Your sign off for this event, scheduled for July 3, 2015 has a note that the applicant must coordinate with the LCSO for traffic control. I wanted to bring to your attention that the traffic control for this event is being handled by the Florida Highway Patrol. Is the department okay with the use of the FHP instead of the LCSO? Thank you.

Audra Ennis
Permit Support Supervisor
Lee County Development Services
Phone (239)533-8327
Fax (239)485-8340
AEnnis@leegov.com

Please note: Florida has a very broad public records law. Most written communications to or from County Employees and officials regarding County business are public records available to the public and media upon request. Your email communication may be subject to public disclosure.

Under Florida law, email addresses are public records. If you do not want your email address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.

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:

N/A

Parking Areas:

Event is not on Lee County Parks property and will not affect any county Parks and Recreation operations or programs.

Special Arrangements:

Print Name: Alise Flanjack

Signature: Alise Flanjack

Digitally signed by Alise Flanjack
DN: cn=Alise Flanjack, o=US, ou=Lee County Parks and Recreation,
email=alflan@leegov.com
Date: 2014.09.10 12:04:26 -0400

Title: Deputy Director

Date:

5/26/15

Miromar Outlet
Fireworks July 3

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.

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:

May 20, 2015



CERTIFICATE OF LIABILITY INSURANCE

3/1/2016

DATE (MM/DD/YYYY)

5/18/2015

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	Lockton Companies Three City Place Drive, Suite 900 St. Louis MO 63141-7081 (314) 432-0500	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL: ADDRESS:	FAX (A/C, No):
INSURED	Miomar Development Corporation 1387932 10801 Corkscrew Road, Ste. 305 Estero FL 33928	INSURER(S) AFFORDING COVERAGE	
		INSURER A: Zurich American Insurance Company	NAIC # 16535
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES MIRDEV

CERTIFICATE NUMBER: 13171737

REVISION NUMBER: XXXXXXXX

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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	N	CPO 0082914-01	3/1/2015	3/1/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPOD AGG \$ 2,000,000 \$
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	NOT APPLICABLE			PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

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

RE: INDEPENDENCE DAY CELEBRATION EVENT DATE: JULY 3RD, 2015 LEE COUNTY BOARD OF COUNTY COMMISSIONERS IS ADDITIONAL AS REQUIRED BY WRITTEN CONTRACT. FLORIDA STATUTE MANDATES 10 DAYS NOTICE OF CANCELLATION FOR NONPAYMENT OF PREMIUM.

on MP
5/20/15

CERTIFICATE HOLDER

CANCELLATION

13171737
LEE COUNTY BOARD OF COUNTY COMMISSIONERS
P.O. BOX 390
FORT MYERS FL 33902-0390

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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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/13/2015

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.

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PRODUCER Cornish, Zack, Hill & Associates 24225 W. Nine Mile Road Suite 204 Southfield MI 48033	CONTACT NAME: Sheri Concord PHONE (A/C, Ho, Ext): (248) 353-5850 FAX (A/C, Ho): (248) 353-1432 E-MAIL ADDRESS: sconcord@cornishzack.com
INSURED KTB Florida Sports Arena, LLC 11000 Everblades Parkway Estero FL 33928	INSURER(S) AFFORDING COVERAGE INSURER A: Lexington Insurance Company INSURER B: Auto-Owners Insurance Company INSURER C: Travelers Indemnity Company INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 14-15

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 INSR	SUBR VVO	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			001322601	11/5/2014	11/5/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ Not Cover PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJ. <input type="checkbox"/> LOC						
	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS						
	48-995-832-00						
A	UMBRELLA LIAB EXCESS LIAB				11/5/2014	11/5/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			007020650	11/5/2014	11/5/2015	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? (Mandatory in NH) If yes describe under DESCRIPTION OF OPERATIONS below						WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E L EACH ACCIDENT \$ E L DISEASE - EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$
C	Property			XTK-CRB-2908L-13-5-14	6/1/2014	6/1/2015	All Risk - Blanket Limit \$45,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Lee County Board of County Commissioners is an additional insured with respect to the General Liability Policy as required by written agreement from July 3, 2015 to July 5, 2015.

on MF
5/20/15

CERTIFICATE HOLDER

CANCELLATION

Lee County Board of County Commissioners P. O. Box 398 Ft. Myers, FL 33902	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 Kathy Zack/SHERIC
---	--

ACORD 25 (2010/05)
INS025 (2010/05) 01

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May 5, 2015

To Whom It May Concern:

Please allow this letter to serve as consent for Firepower Displays Unlimited Inc. to hold a special event (fireworks display) at Miromar Outlet West, LLC and Miromar Outlet East, LLC 10801 Corkscrew Road Estero, Florida 33928 on Friday, July 3, 2015.

Sincerely,
Miromar Development Corporation

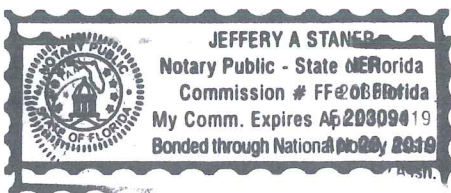

Margaret Antonier
President

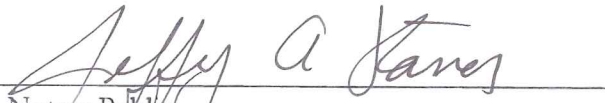
State of Florida
Lee County

On this the 5 day of May, 2015, before me Margaret Antonier

Personally appeared and executed the within instrument for the purposes therein contained.

My Commission Expires:




Notary Public



"Home of the Florida Everblades"

11000 EVERBLADES PARKWAY ■ ESTERO, FLORIDA 33928

(239) 948-PUCK (7825)

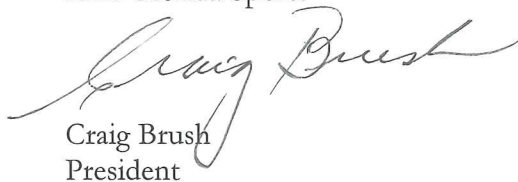
www.Germainarena.com

May 5, 2015

To Whom It May Concern:

Please allow this letter to serve as consent for Firepower Displays Unlimited Inc. to hold a special event (fireworks display) at KTB Florida Sports (Germain Arena) 11000 Everblades Parkway, Estero, Florida 33928 on Friday, July 3, 2015.

Sincerely,
KTB Florida Sports

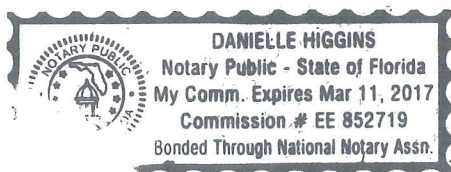

Craig Brush
President


State of Florida
Lee County

On this the 5th day of May, 2015, before me Craig Brush

Personally appeared and executed the within instrument for the purposes therein contained.

My Commission Expires: 3/11/17




Notary Public



CERTIFICATE OF LIABILITY INSURANCE

3/1/2016

DATE (MM/DD/YYYY)

5/18/2015

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.

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PRODUCER Lockton Companies Three City Place Drive, Suite 900 St. Louis MO 63141-7081 (314) 432-0500	CONTACT NAME:	
	PHONE (A/C, No, Ext): FAX (A/C, No):	
INSURED 1387932 Miromar Development Corporation 10801 Corkscrew Road, Ste. 305 Estero FL 33928	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Zurich American Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES MIRDEV

CERTIFICATE NUMBER: 13171737

REVISION NUMBER: XXXXXXXX

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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	N	CPO 0082914-01	3/1/2015	3/1/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) \$ XXXXXXXX BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	NOT APPLICABLE			PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ XXXXXXXX E.L. DISEASE - EA EMPLOYEE \$ XXXXXXXX E.L. DISEASE - POLICY LIMIT \$ XXXXXXXX

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

RE: INDEPENDENCE DAY CELEBRATION EVENT DATE: JULY 3RD, 2015 LEE COUNTY BOARD OF COUNTY COMMISSIONERS IS ADDITIONAL AS REQUIRED BY WRITTEN CONTRACT. FLORIDA STATUE MANDATES 10 DAYS NOTICE OF CANCELLATION FOR NONPAYMENT OF PREMIUM.

CERTIFICATE HOLDER

13171737
LEE COUNTY BOARD OF COUNTY COMMISSIONERS
P.O. BOX 390
FORT MYERS FL 33902-0390

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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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/13/2015

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PRODUCER Cornish, Zack, Hill & Associates 24225 W. Nine Mile Road Suite 204 Southfield MI 48033		CONTACT NAME: Sheri Concord PHONE (A/C No. Ext): (248) 353-5850 E-MAIL ADDRESS: sconcord@cornishzack.com FAX (A/C No): (248) 353-1432	
INSURED KTB Florida Sports Arena, LLC 11000 Everblades Parkway Estero FL 33928		INSURER(S) AFFORDING COVERAGE INSURER A: Lexington Insurance Company INSURER B: Auto-Owners Insurance Company INSURER C: Travelers Indemnity Company INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 14-15

REVISION NUMBER:

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INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			001322601	11/5/2014	11/5/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ Not Cover
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 4,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						\$
B	AUTOMOBILE LIABILITY			48-995-832-00	11/5/2014	11/5/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
A	UMBRELLA LIAB			007020650	11/5/2014	11/5/2015	EACH OCCURRENCE \$ 10,000,000
	EXCESS LIAB						AGGREGATE \$ 10,000,000
	DED <input checked="" type="checkbox"/>	RETENTION \$ 10,000					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
C	Property			KTG-CMB-2908L-13-5-14	6/1/2014	6/1/2015	All Risk - Blanket Limit \$45,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Lee County Board of County Commissioners is an additional insured with respect to the General Liability Policy as required by written agreement from July 3, 2015 to July 5, 2015.

CERTIFICATE HOLDER

CANCELLATION

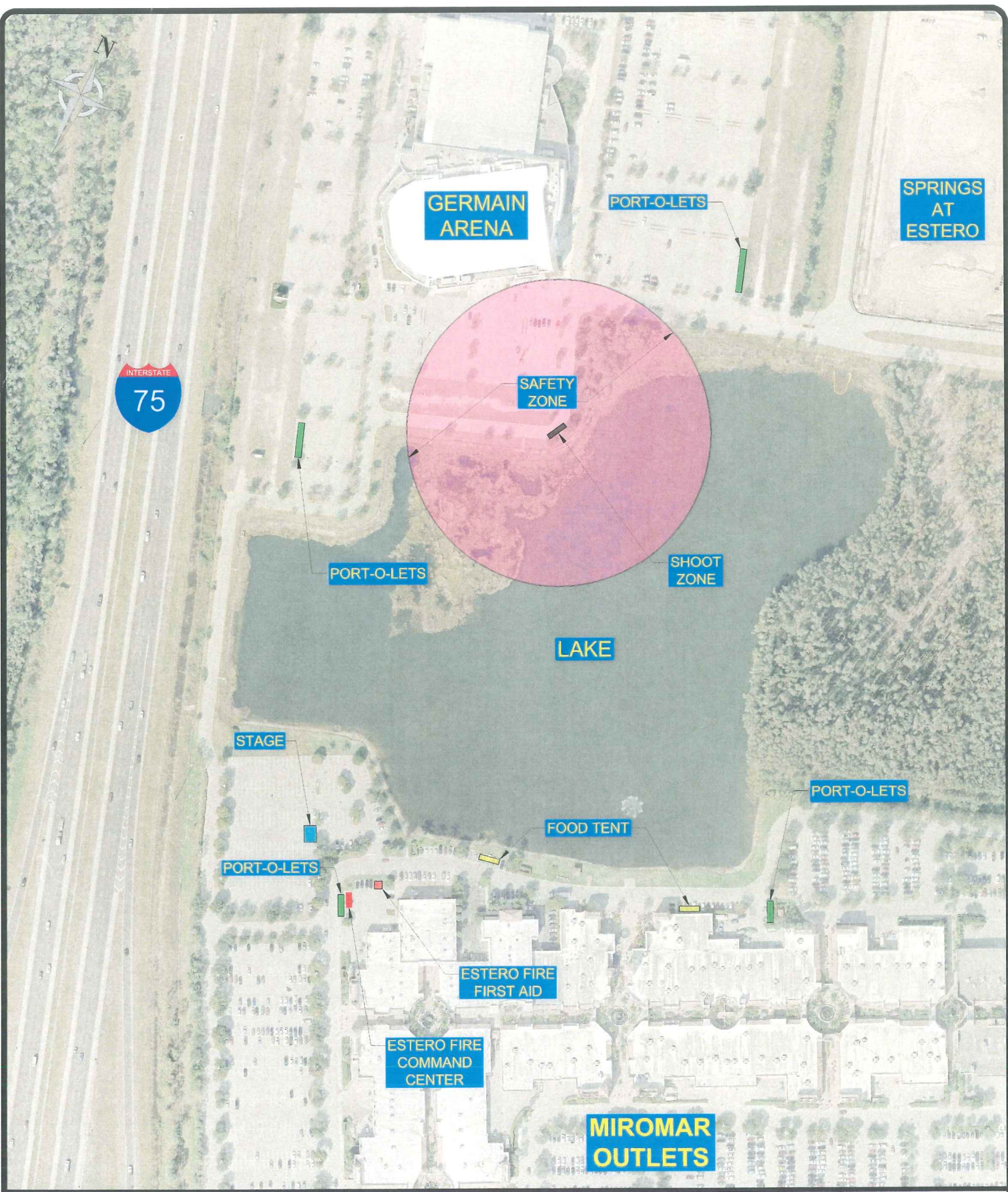
Lee County Board of
County Commissioners
P. O. Box 398
Ft. Myers, FL 33902

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

Kathy Zack/SHERIC

I:\DEVELOPMENT\PROJECTS\MIROMAR OUTLETS\DRAWINGS\SITE\EXHIBITS\HRO_OUTLETS_AERIAL_FRESHWORKS_EXHIBIT_20150514.DWG, LAYOUT, 8:51:11 EXHIBIT (2), 5/14/2015 1:31:42 AM, PLOTTED BY JASON BOWE



MIROMAR



www.Miromar.com
10801 CORKSCREW ROAD, SUITE 305
ESTERO, FLORIDA 33928
(239) 390-0100



**MIROMAR
OUTLETS**

www.MiromarOutlets.com
10801 CORKSCREW ROAD AT I-75 & EXIT 123 / ESTERO, FLORIDA 33928 / (239) 948-3766

**FIREWORKS
OPERATIONS & SAFETY
EXHIBIT**

DATE: May 14, 2015	DRAWN BY: JAB	SCALE: 1" = 250'
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