

EVENT PERMIT



Ordinance 14-15

BOCA GRANDE FARMERS MARKET 3: 44

PERMIT NUMBER:

TMP2015-00213

Date(s) of Event:

October 1 thru April 30, 2016, Fridays from 9:30am until 1:30pm

Property Owner:

LEE COUNTY

Applicant:

BOCA GRANDE FARMERS MARKET

Contact: SHAUNA LEE LANGE

COUNTY ADMINISTRATION

Description:

Open-air farmers market per LDC Sec. 34-3048, held on Fridays

Location of event:

305 WHEELER RD BOCA GRANDE 33921

BOCA GRANDE BALLFIELD SITE/US41 N to Gasparilla Rd to Wheeler Rd

***941-875-5190

Will the event be attended by 1000 or more people?

Will the event be held on County Owned Property? Yes

No

Will there be alcohol consumed or sold at the event?

No

Will a bond be posted for this event?

No

Permit Conditions:

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

Board of County Commissioners Lee County, Florida

County Manager



Event Application

Special Event

Use of County Property

Alcohol within Lee County Facilities

Film, Video & Photography





Event Application

Check the appropriate box(es) l	below:
SPECIAL EVENT PERMIT	
USE OF COUNTY PROPER	
PERMIT TO SELL AND CO	NSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Boca Grande Farmers Market
Date(s) of Event / Production:	Oct-Apr 2015/2016 Feedays 09:30a-1:30p
Location(s) of Event:	305 Wheeler Road Ball Field, Boca Grande, PL
Name of Applicant:	Shauna Lee lange
Applicant Address:	BOX 3564 Placida, PL 33946
Applicant Phone Number:	941.875.5190
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	900 peple per veel
Estimated Attendance:	900 people per week
Event Description: Include each activity, when activities take place, etc.	Open-air farmers market of lucial parduce and other arts I seniors vendors
Hours of Operation:	Market hours 09:30a - 1:30 pm - 1 hr each margin setup
STRAP # of Parcel:	
Owner of Premises*:	Ly Co. Board of Co. Commissioners

^{*}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	premises?	
Are any temporary structures to be insi	talled for the event? Yes No	Type: /UX/Otents
Do you have the appropriate permits fo	or the temporary structures?	TYES TNO NA
* For a 'Special Event' and 'Use of Cour indentified, including all parking areas.	nty Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event	: Ley Insurance Engleund	,h
Note: Certificate of Insurance must be submitted	ed at time of application	
Surety Company Bonding this Event (Na	ame 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	T 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:		
Type of Food being Served:		
Section II - USE OF COUNTY P	ROPERTY PERMIT	
Organization Sponsoring the Event:		
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	<i>:</i> :
Name of Charity:	. 77	
Address of Charity:	,	
Phone Number:		
Non-profit certificate/registration num	ıber:	
(Proof of registration with the Dept. of Agriculture &	Consumer Services §496.405 or proof the organization i	is exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being sold/consumed on Cou If Yes, then a "Lee County Alcohol Permit" is required.	nty Property? Only non-profit organizations can sell alcohol on County	Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber:	
Please note: A permit from the State of Florida	Division of Alcoholic Beverages and Tobacco may a	also be required; please call (239) 344-0885 for

further details



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply)):				
TV Movie or Special T	TV Series / Pilot	TV Comme	rcial	Still Photos	
Public Service Announcement In	ndustrial / Documentary	Other:			
Will any of the following be needed or inc	cluded*?				
Street Closure		Yes	┌ No		
Traffic / Crowd Control		Yes	┌ No		
Fire or Burning		Yes	┌ No		
Explosives or Pyrotechnics		Yes	┌ No		
Animals, Large or Small		J Yes	┌ No		
Construction of Any Kind	1	Yes	┌ No		
Large and/or Numerous Vel	hicles	Yes	┌ No		
Helicopters, Boats, etc.		Yes	┌ No		
Stunts		Yes	┌ No		
Other	1 1 1	Yes	No		
Special Parking Requirements:					
City or County Services Required: (Pers	sonnel, equipment, facilities, et	cc.)			
	491				
The following information is required fo the industry. If exact figures are not available.				ack the econom	nic impact of
Number in Cast:	Number in Crew:	Num	ber of locals	hired:	
Total budget:	Estimate amount spent in L	ee County:			
Hotel room nights:	Number of shooting days:	_			

Applicant Agreement - Signature Required



SECTION I - SAFETY

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

SECTION II - INSURANCE

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

SECTION III - INDEMNIFICATION

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

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

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SECTION V - AGREEMENT

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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 sald 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/hex knowledge.



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

Check the appropriate box(es) below:

SPECIAL EV	ENT PERMIT	
USE OF COL	JNTY PROPERTY F	PERMIT
PERMIT TO	SELL AND CONSU	ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM		
1		
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL ICANT TO COMPL	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION. Y WITH FOR THEIR EVENT.
Parking:	In authorized parl	king areas only.
	TO SEE THE PROPERTY OF THE PARTY OF THE PART	45
		,a)
Deputies (How Many?):	None required.	
Fee for Services:		
	and the same and the same at	
Special Arrangements:	None.	
	Same and the set of	and the second s
	Print Name:	Capt. Scott Lucia
	Signature:	Capt. Sect H. Sucia
	Title:	Special Events, Permits and Details
	Date:	27 July 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.

FILM PERM	VENT PERMIT UNTY PROPERTY PERMIT IIIT
AFTER REVIEWING THE WILL REQUIRE THE APPLI	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	
Fee for Services:	
Flammable Vegetation:	P
First Aid Equipment:	Ø
Fire Extinguishing:	
Special Arrangements:	Allow for emergency vehicle access Dial 911 in the exect of an emergency
	Print Name: Signature: Title: Fire Chief Date: 7/25/15

Page



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

Check the appropria	ite box(es) below:
┌─ SPECIAL EVI	ENT PERMIT
	JNTY PROPERTY PERMIT
FILM PERM	IT ·
AFTER REVIEWING THE WILL REQUIRE THE APPLI	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Treatment Facilities:	MA
Medical Personnel:	MA
Medical Supplies / Equipment:	NA
Safety Requirements:	MA
Fee for Services	pt. billed at the of deruse
Special Arrangements:	Call 9-1-1 as meded on emergence
	Print Name: Scott m The Signature: Lynn Dinech Title: Manach
	Date: 7/29/15



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

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

FILM PERMIT

□ USE OF COUNTY PROPERTY PERMIT

AFTER REVIEWING THE WILL REQUIRE THE APPI			OW WHAT ARRANGEMENTS \ EVENT.	YOUR ORGANIZATION
Parking:	Park in designated	areas. County maintaine	d road rights-of-way should not be u	ised for event parking.
ngress and Egress:	Use all established	means of ingress and eq	ress.	
Special Arrangements:	Use Lee County Sh	eriff's Office for assistanc	e with traffic control, as needed.	
	Print Name:	Bryan Miller		
	Signature:	Bryan Miller	Digitally Ligned by Bryan Niller DN crellypan Miller art-set County DOT, our-DOT Engineering, email-millet bempletego-conc. crtSt. Date 2015.07.29 112959-0400	
	Title:	Senior Project Manage		
	Date:	July 29, 2015		



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

Check the appropri	iate box(es) be	low:		
SPECIAL EV	/ENT PERMIT			
⋉ USE OF CO	UNTY PROPERTY	/ PERMIT		
PERMIT TO	SELL AND CONS	SUME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNT	Y FACILITIES
FILM PERM	⁄IIT			
AFTER REVIEWING THE WILL REQUIRE THE APP			W WHAT ARRANGEMENTS 'ENT.	S YOUR ORGANIZATION
Illumination:	Weekly daytime ev	vent. Illumination will not b	e required.	
Parking Areas:	Parking will be ava Ball Field site on 30		for the patrons and market vend	dors at the Boca Grande
Special Arrangements:	See Attached - Fari	mers Market Special Arrang	ements at the Boca Grande Ball	Field Site 2015-16.
	Print Name:	Alise Flanjack	Joe Wier	
	Signature:	Alise Flanjack	Digitally signed by Alise Flanjack DN: cm=Alise Flanjack, o=Lee County Parks and Recreation, ou, email=alise/belegon; com, c=US Date: 2015.07.24 1258.37 -04'00'	_
	Title:	Deputy Director	Supervisor	
	Date:	7/24/15	7/23/15	



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

Check the appropria	te box(es) bel	low:			
FILM PERMI	T ONLY				
AFTER REVIEWING THE A				GEMENTS YOUR	R ORGANIZATION
Special Arrangements:					
Other:					·
	Print Name: Signature: Title:				
	Date:	t ::			



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

	(200) 000 1111
Check the appropria	te box(es) below:
<i>r</i> - ·	NTY PROPERTY PERMIT
PERMIT TO S	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI	Γ
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT 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, FI 33902 as the certificate holder and as an additional insured.
	Print Name: Mike Figueroa
	Signature:
	Title: Risk Program Manager
	Date: July 23, 2015

	Anna Continue	Salaran Commercia
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Jane Vinne	Sand It	6.2.1
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CERTIFICATE OF LIABILITY INSURANCE

BOCA-11 OP ID: YE

> DATE (MINIDD/YYYY) 07/07/2015

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(les) must be endorsed. If SUBROGATION IS WAIVED, subject to

		arms and conditions of the polic				ndorse	ment, A stat	ement on th	is certificate does not t	onfer r	lghts to the
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Key Agency Inc. 1201 South McCall Road Englewood, FL 34223					PHONE [AIC, No. Ext.: 941-474-9511 [AIC, No.): 941-474-7283						
Eng	Englewood, FL 34223					E-MAIL ADDRESS:					
Key Agency Inc.						INSURER(S) AFFORDING COVERAGE				NAIC #	
1.60						INSURER A: Seneca Insurance Co.					
INGL	INSURED Boca Grande Farmers Market						INSURER 8:				
PO Box 3564 Placida, FL 33946						INSURER C:					
Placida, PL 33946					Insurer D :						
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						INSUR	RF:				
CO	VER	RAGES CE	RTIF	CATI	NUMBER:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			REVISION NUMBER:		
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		CAMBANAGE DOGGOTT	1						MED EXP (Any one person)	s	5,000
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Name and Address of	,						1				
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CERTIFICATE HOLDER	AND THE OWNER WHEN THE PROPERTY OF THE PROPERT	(P) 17 Charles (T) 2 (P)
Lee County Board of County Commissioners P O Box 398 Ft Myers, FL 33902	LEECO06	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DAYE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
		1 6 6 11 10 1 2 NOW 19 1



Lee County Parks and Recreation 3410 Palm Beach Blvd. Fort Myers, FL. 33916 Phone: 239-533-7275

Invoice	Number	
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This permit entitles holder to exclusive use of the following facilities during the hour and date shown below. This permit also serves as a bill. All reservations must be paid for in advance. A non-refundable \$10 cancellation fee will be applied to facility rental transfers or cancellations received at least 72 hours prior to the facility rental date. Any cancellation made less than 72 hours prior to the facility rental date will not be entitled to any refund. Exceptions to this policy will be made at the discretion of the Parks and Recreation administration staff based on circumstances surrounding the cancellation.

Date issued: 7/21/15

Name: Shauna Lange	Type of Activity: Farmers Mar	rket			
Address: P.O. Box 3564	Organization/Team: N/A				
City/State/Zip: Placida, Fl 33946	Phone Number: 1-941-875-5190				
	Times				
Date: October 2 nd , 2015 thru April 29 th , 2016 (every Friday)	From: 8:30a	To: 2:30p			
Date:	From:	То:			
Name of Facility: Boca Grande Ball Field	Bldg. / Field #: Boca Grande Ball Field				
Other Comments: Farmers Market will begin on October 2 nd , 2015 thru April 29 th , 2016 every Friday. Payment due no later than 10 days after invoice date. An invoice will be given to permit holder the last Friday of every month. See attached arrangements for permit holder.					
Hours: 6 hours per week (every Friday)	Rate: \$20.00 per hour	Total Fee: \$120.00 weekly			

Approved by: Joe Wier

Title: Supervisor

Date: 7/21/15

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK FOR LEE COUNTY PARKS AND RECREATION PROGRAMS/ACTIVITIES PLEASE READ THIS FORM CAREFULLY and be aware that in signing up and participating in Lee County Parks and Recreation program/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with Lee County Park programs/activities (including transportation services/vehicle operation, when provided). I recognize and acknowledge that there may be certain risks involved in participating in park programs/activities, and I voluntarily agree to assume the full risk of any injuries, damages or loss, that my minor child/ward as a result of participating in such program/activity against the County, including their respective officials, officers, employees, and volunteers (hereinafter collectively referred as "Parties"). I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with these programs/activities.

I indemnify and hold harmless Lee County, any of its employees and/or agents from any and all claims from my use of county property or participation in any county programs. I will further indemnify and "hold harmless" the County, its employees and/or agents from all costs, expenses and liabilities resulting from any claim brought from my child's/children's use of county property and/or participation in county programs to the extent of the County's liability under general law.

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above and, for myself, my heirs, assigns, and my minor child(ren)'s involvement or participation in the program as provided above.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering via fax, your facsimile signature shall be substitute for and have the same legal effect as an original form signature.

PĂRTICIPANT'S SIGNATURE

PRINT NAME OF PARTICIPANT

DATE