

EVENT PERMIT



Ordinance 14-15

REDFISH THROWDOWN

PERMIT NUMBER:

TMP2015-00216

Date(s) of Event:

August 8, 2015 from 11:30am until 3:30pm

Property Owner:

LEE COUNTY

Applicant:

FELLOWSHIP OF CHRISTIAN ATHLET

Contact: BUDDY KEY

Description:

Fishing tournament weigh in location

Location of event:

SANIBEL CSWY FORT MYERS

Sanibel Island B Span Beach (north side) near restrooms ***904-302-1787

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

County Manager

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography





Event Application

Check the appropriate box(es) below:

- F SPECIAL EVENT PERMIT
- X USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Title of Event / Name of Production	High School Redfish Throwdown , Fellowship of Christian Athletes
Date(s) of Event / Production:	August 8th, 2015
Location(s) of Event:	Sanibel Island B Span Beach (North Side) near the restrooms
Name of Applicant:	Buddy Key, Area Representative with Fellowship of Christian Athletes
Applicant Address:	3975 E. River Dr. Ft. Myers, Florida 33916
Applicant Phone Number:	
Contact Person: (If different from applicant)	Same
Contact Phone Number: (If different from applicant)	Same
Email Address:	bkey@fca.org
Estimated Attendance:	30
Event Description: Include each activity, when activities take place, etc.	Fishing Tournament weigh in location, boats will come in from 12:00 noon - 3:00 at various times to weigh in.
Hours of Operation:	11:30 - 3:30
STRAP # of Parcel:	09467800000090100
Owner of Premises*:	Lee County Government

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



Fill out the following questions for allpermit types:

further details

What is the Zoning Classification of the	premises?			
Are any temporary structures to be insta	alled for the event? ☐ Yes No	Туре:		
Do you have the appropriate permits for the temporary structures?				
* For a 'Special Event' and 'Use of Coun indentified, including all parking areas.	ty Property' permit, submit a site plan wi	th all proposed facilities and activities		
Insurance Company Insuring the Event:	Cretcher Heartland 4551 West 107th, Third	Floor , Overland Park KS 66207		
Note: Certificate of Insurance must be submitted	d at time of application			
Surety Company Bonding this Event (Na	me 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	├─ Yes		
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: Fel	lowship of Christian Athletes			
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	<i>!</i>		
Name of Charity:	neph.			
Address of Charity:	红节			
Phone Number:				
Non-profit certificate/registration num	ber:			
	Consumer Services §496.405 or proof the organization i	s exempt from this requirement. §316.2045)		
Section III - SALE/CONSUMPTI	ON OF ALCHOLIC BEVERAGES P	ERMIT		
Is alcohol being sold/consumed on Cour If Yes, then a "Lee County Alcohol Permit" is required.	nty Property? Only non-profit organizations can sell alcohol on County	├─ Yes No Property.		
Non-profit certificate/registration numl (Required if alcohol is to be <u>SOLD</u> at the event)	per:			

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



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply):						
TV Movie or Special TV Se	eries / Pilot	Γ	TV Commercial	Γ	Still Photos	
☐ Public Service Announcement ☐ Indust	trial / Documentary	Γ	Other:			
Will any of the following be needed or include	ed*?					
Street Closure			┌ Yes 🖂	No		
Traffic / Crowd Control			┌─ Yes	No		
Fire or Burning			∫ Yes ⊼	No		
Explosives or Pyrotechnics			┌ Yes 区	No		
Animals, Large or Small			┌ Yes 🖂	No		
Construction of Any Kind			Γ Yes ⊼	No		
Large and/or Numerous Vehicle	es ·		┌ Yes 🖂	No		
Helicopters, Boats, etc.			Yes	No		
Stunts			┌ Yes 🔀	No		
Other			┌ Yes 区	No		
	PPROSECULAR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR		-			
Special Parking Requirements:						
City or County Services Required: (Personne	el equipment facilit	ios ot				
The state of the s	er, equipment, racino	ies, et	L- J			
The following information is required for loc the industry. If exact figures are not availab	al and state records le, please estimate a	on pro s close	oduction in Florida ely as possible.	a to tr	ack the economic impa	ct of
Number in Cast:	Number in Crew:	~~~~~	Number of	flocals	hired:	
Total budget:	Estimate amount spe	nt in Le	ee County:			
Hotel room nights:	Number of shooting o	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



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.

Buddy Key

Digitally signed by Buddy Key

DN: cn=Buddy Key, o, ou, email=bkey@fca.org, c=US

Signature of Applicant

Buddy Key

Digitally signed by Buddy Key DN: cn=Buddy Key, o, ou, email=bkey@fca.org, c=US Date: 2015.07.15 11:18:04 -04'00

Print Name of Applicant and Title

7-15-2015

Date

Witness

Print Name of Witness

7-15-2015

Date



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

Check the approprie	ate box(es) be	low:
☐ SPECIAL EV	ENT PERMIT	
☑ USE OF CO	UNTY PROPERTY	PERMIT
F PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IT	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	In authorized parki	ng areas only.
Deputies (How Many?):	None required.	
Fee for Services:		
Special Arrangements:	None.	
1		Her.
	Print Name:	Capt. Scott Lucia
	Signature:	Capt. Scott Lucia Status Lucia Status Lucia Control Lucia and Cont
	Title:	Special Events, Permits and Details
	Date:	15 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.

Check the appropriate box(es) below:

F SPECIAL EVENT PERMIT

FILM PERMIT

▼ USE OF COUNTY PROPERTY PERMIT

Fire Guards (How Many?)	N/A		
Fee for Services:	N/A		
Flammable Vegetation:	N/A		
	1 (A)	Gu.	
First Aid Equipment:	N/A		
Fire Extinguishing:	N/A		
Special Arrangements:	N/A		
	Print Name:	Matthew Scott	
	Signature:	Matthew Scott	
	Title:	Assistant Chief	
	Date:	July 15,2015	



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

Check the appropriate box(es) below:

☐ SPECIAL EV	ENT PERMIT			
□ USE OF CO	UNTY PROPERTY F	PERMIT		
FILM PERM	IIT A			
AFTER REVIEWING THE WILL REQUIRE THE APPL			/ WHAT ARRANGEMENTS NT.	YOUR ORGANIZATION
Treatment Facilities:	N/A			
Medical Personnel:	N/A		,	
Medical Supplies / Equipment:	N/A			
Safety Requirements:	N/A			
Fee for Services	Patients are billed at	the time of services.		
Special Arrangements:	Call 9-1-1 as needed	for emergencies.		
	Print Name:	Scott M Tuttle		_
	Signature:	Scott M Tuttle	Digitally sligned by Scott NF Turtle ON car-Scott MF Turtle, or MATS, our Department of Public Salety, erral-introducing Regor zone, ord, Date: 2015.07.15 1;416.03 0-010."	-
	Title:	Deputy Director		
	Date:	July 15, 2015		



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

Check the appropriat	te box(es) be	rlow:		
F SPECIAL EVE	NT PERMIT			
∪SE OF COU	NTY PROPERTY	Y PERMIT		
PERMIT TO S	ELL AND CONS	SUME ALCOHOLIC BEVER	AGES WITHIN LEE COUNT	TY FACILITIES
FILM PERMIT	Γ			
AFTER REVIEWING THE A				'S YOUR ORGANIZATION
Parking: N	o event parking	within ten (10) feet of the ed	ge of paved road shoulder.	
Ingress and Egress:	se all established	d means of ingress and egress	S.	
Special Arrangements:	oordinate with Pa	arks & Recreation for all on-si	te activities.	
rest and proper restaurant				
en e				
e de la constitución de la const				
1				
	Print Name:	Bryan Miller		•
	Signature:	Bryan Miller	Olgrady signed by Reyan Miller Dit: con-Reyan Miller, Once County DOT, ou-DOT Engineering, equal-miller-beloguezon, c-MS Date: 2011.697.28 14.23.59-6900	_
	Title:	Senior Project Manager		-
	Date:	Jul 28, 2015		



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

Check the appropr	iate box(es) be	elow:
⋉ USE OF CO		Y PERMIT SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION IPLY WITH FOR THEIR EVENT.
Illumination:	N/A	
Parking Areas:	public so it will be	It has never been permitted before and is not intended to be blocked off to the general eyour responsibility to secure the area by 8:00 a.m. to avoid conflict with other park ganizer must ensure emergency vehicles have clear and open access through the vays.
Special Arrangements:	Boat are not perm	be permitted in the future for this event and is only being permitted this time only! itted to pull up on to the shoreline; they must stay anchored off the shoreline. Event ermitted to sell any products on site and must remove all trash and debris
	Print Name:	Alise Flanjack
	Signature:	Alise Flanjack Chandles Fleiphold: Outce County Furths and Florescotion; Out, outce Florescotion; Out, out, out, out, out, out, out, out, o
	Title:	Lee County Parks & Recreation Deputy Director
	Date:	7/15/2015
	** *	



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

Check the appropriat	te box(es) below:
	NTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	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 15, 2015

	-	, married	-
			1 60
AC	C	PIK	
4			

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/15/2015

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 endorsements).

delinitate notati in nea or good organization.	CONTACT			
PRODUCER Cretcher Heartland	RAME: Certificate Department FAX (A/C, No. Extr. 913.341.8998 (A/C, No. Extr. 913.643.4148			
4551 West 107th Street, Third Floor	E-Mail Abbress:Certificates@CretcherHeartland.com			
Overland Park KS 66207	INSURERISI AFFORDING COVERAGE NAIC #			
Temporal Managaran Systematical Programme (1997)	INSURER A :Church Mutual Insurance Co18767			
INSURED	INSURER B:			
Fellowship Of Christian	INSURER C:			
Athletes	INSURER 0:			
8701 Leeds Rd. Kansas City MO 64129	INSURER E:			
Ransas Otty WO 04125	INSURER F:			
COVERAGES CERTIFICATE NUMBER: 1802222463	REVISION NUMBER:			
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORD EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE	VE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS ED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, BEEN REDUCED BY PAID CLAIMS.			
NSR	POLICY EFF POLICY EXP LIMITS			
A GENERAL LIABILITY 0261B5602726555 X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	9/1/2014 9/1/2015 EACH CCCURRENCE \$2,000,000 DAMAGE TO RENTED \$300,000 PREMISES (En occurrence) \$300,000 MED EXP (Any one person) \$5,000			
CLAIMS-MADE [11] GOODA	PERSONAL & ADV INJURY \$2,000,000			
The second secon				
No man 1 / 1	GENERAL AGGREGATE \$5,000,000 PRODUCTS - COMP/OP AGG \$2,000,000			
GEN'L AGGREGATE LIMIT APPLIES PER:	PRODUCTS - COMP/OP AGG \$2,000,000 \$			
POLICY PRO- JECT LOC	COMBINED SINGLE LIMIT			
	(Ea accident) 5 BODILY INJURY (Per person) \$			
ANY AUTO ALL OWNED SCHEDULED	BODILY INJURY (Per accident) 5			
AUTOS AUTOS	PROPERTY DAMAGE c			
HIRED AUTOS AUTOS	(Per accident)			
UMBRELLA LIAB OCCUR	EACH OCCURRENCE S			
EXCESS LIAB . CLAIMS-MADE	AGGREGATE S			
DED RETENTIONS	WC STATU- OTH-			
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N	TORYLUMITS! ! ER!			
ANY PROPRIETORIPARTNERIEXECUTIVE N/A	E.L. EACH ACCIDENT S			
(Mandatory In NH)	E.L. DISEASE - EA EMPLOYEE S			
If yes, describe under DESCRIPTION OF OPERATIONS below	E.L. DISEASE - POLICY LIMIT \$			
1				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks	Schedule, if more space is required)			
FCA 1st Annual "High School Redfish Throwdown" August 8th, 2015				
The Lee County Board of County Commissioners is additional insured.	103			
V. de June	OK MF 115/15			
štru.	04 -11513			
	0.0			
CERTIFICATE HOLDER	CANCELLATION			
Lee County Board of County Commissioners P.O. Box 398	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
2115 Second Street Fort Myers FL 33901	AUTHORIZED REPRESENTATIVE			
1 Off Mind of C 2000	Whole of Them			
	4 200			

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ACORD 25 (2010/05)

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

Check the appropria	te box(es) below:
FILM PERM	IT ONLY
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Special Arrangements:	
Other:	
	Print Name:
	Signature:
	Title:
	Date:
Str. 122 March Mills in 2011. If it is all	Page 12



This map doesn't contain any items.

Notes

AllySON, NORTH SIDE, WESTOR THE BATH ROOM BUILDING. AT THE X! THANKS Find high school yearbooks



I graduated in:

1998 ^ 1988 1978 ~

classmates



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ThAMLS,

BUDDKEY FCA 904-302-1787

Buddy Key

From:

Loomis, Kathleen <LOOMISKA@leegov.com>

Sent:

Monday, July 20, 2015 5:22 PM

To:

Buddy Key

Subject:

Redfish Throwdown

Hey Buddy, We received your check for \$500.00. How are you coming with the permitting process. Please let me know if you need anything. Thanks!

Kathy Loomis, CPRP

Parks & Recreation Manager West District 239-707-7033 (cell) Loomiska@Leegov.com

www.leeparks.org

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.