

# EVENT PERMIT

Ordinance 14-15

## POP WARNER LITTLE SCHOLARS

**PERMIT NUMBER:** TMP2015-00217**Date(s) of Event:** August 1, 2015 thru December 31, 2015, Mon-Fri from 5:30pm-9:00pm and Sat from 6:00am-10:00pm

Property Owner: LEE COUNTY

Applicant: THE GREATER FORT MYERS JFA

Contact: ERIC RIVERA

Description: Youth football and cheer league for Pop Warner Little Scholars/Peace River Conference practices/games on both fields for the 2015 season

Location of event: 20 50 SOUTH RD FORT MYERS 33907  
JERRY BROOKS COMMUNITY PARK/Corner of South Rd and S Danley Dr  
\*\*\*239-229-0874

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

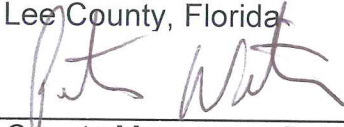
Will the event be held on County Owned Property ? Yes

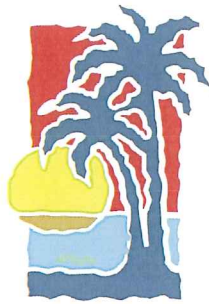
Will there be alcohol consumed or sold at the event ? No

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



**Lee County**  
*Southwest Florida*

# Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

**RECEIVED**  
AUG 06 2015

COMMUNITY DEVELOPMENT  
**TMF2015-00217**

# 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)	
<b>Title of Event / Name of Production</b>	Youth football and cheer league for Pop Warner Little Scholars / Peace River Conference
<b>Date(s) of Event / Production:</b>	August 1, 2015 - December 31, 2015
<b>Location(s) of Event:</b>	Jerry Brooks Community Park 50 South Road, Fort Myers, FL 3907
<b>Name of Applicant:</b>	The Greater Fort Myers Junior Football Association
<b>Applicant Address:</b>	PO Box 776 Fort Myers, FL 33902
<b>Applicant Phone Number:</b>	(239) 229-0874 or (239) 209-2775
<b>Contact Person:</b> (If different from applicant)	Eric Rivera, President or Samuel Miller, Vice President
<b>Contact Phone Number:</b> (If different from applicant)	(239) 229-0874 or (239) 209-2775
<b>Email Address:</b>	ericjr90@me.com / <i>aperkins676@gmail.com</i>
<b>Estimated Attendance:</b>	250 - 500
<b>Event Description:</b> Include each activity, when activities take place, etc.	Youth football and cheer league for Pop Warner Little Scholars / Peace River Conference practices and games to be held at Jerry Brooks Community Park on both fields for the 2015 season
<b>Hours of Operation:</b>	Monday - Friday 5:30pm to 9:00pm and Saturdays 6:00am to 10:00pm
<b>STRAP # of Parcel:</b>	<i>12452401000060000</i>
<b>Owner of Premises*:</b>	Lee County Parks and Recreation

\*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 / Industrial

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

Do you have the appropriate permits for the temporary structures? ☐ Yes ☒ No

\* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event: K & K Insurance Group, Inc

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

Surety Company Bonding this Event (Name and Address): \_\_\_\_\_

Will Vehicles be Used as Part of This Event?

☐ Yes ☒ No

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

Will Food be Available at this Event?

☒ Yes ☐ No

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

Will Alcoholic Beverages be served/consumed at this Event?

☐ Yes ☒ No

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

Name & Address of Organization Providing Food:

The Greater Fort Myers Junior Football Association

Type of Food being Served: Concessions - Hot and Cold food and beverages

### 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



## 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.





**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.

A handwritten signature in black ink, appearing to read "April Perkins", is written over a horizontal line.

Signature of Applicant

April PERKINS, TREASURER

Print Name of Applicant and Title

8/6/15

Date

A handwritten signature in red ink, appearing to read "Ally Hall", is written over a horizontal line.

Witness

Ally Hall

Print Name of Witness

8/6/15

Date

## Lee County Event Permit Application



LEE COUNTY SHERIFF'S DEPARTMENT  
14750 SIX MILE CYPRESS PARKWAY  
FORT MYERS, FLORIDA 33912  
(239) 477-1199

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
☐ USE OF COUNTY PROPERTY PERMIT  
☐ PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES  
☐ FILM PERMIT

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

Parking:

To be handled by event staff. If a large crowd is anticipated, additional deputies should be hired to contain and limit any parking issues.

Deputies (How Many?):

This permit and the Detail Request Forms have been filled out according to the schedule that was turned over by the league and may not include any additional play off games. Any additional games that may be added to the Greater Fort Myers Junior Football Association schedule at a later date need to be called in or emailed leaving an appropriate amount of time for the particulars to be reviewed and a decision be made on the amount of deputies required and the times of the details.

Fee for Services:

There is a four (4) hour minimum per deputy on all LCSO details. Security details are \$40/hour per deputy. The hourly rate for a supervisor, should one be deemed necessary, is \$50/hour. There is a \$15 vehicle fee per deputy/per detail that is added as well.

Special Arrangements:

9/5/15- 2 DEPUTIES 1500-2200 | 9/12/15- 2 DEPUTIES 1500-2200 | \*10/10/15 1 SUPERVISOR 1300-2230 2 DEPUTIES 1300-2230 & 2 DEPUTIES 1700-2230 | 10/17/15 2 DEPUTIES 1500-2200 All details will need to be paid for in advance no less than one (1) week prior to the start of the event. If the detail is not paid for in advance, Lee County Parks & Rec will be notified and cancellation of the event may be the result. LCSO is not responsible for seeking out payments. Payment dates have been outlined in the Details Request Forms. The League is responsible for confirming game dates and times prior to the start of the event to ensure proper coverage. Anything over the four (4) hour minimum is billed out at regular time.

Print Name:

Capt. Scott Lucia

Signature:

Capt. Scott Lucia

Title:

Special Events, Permits and Details

Date:

28 July 2015



## Lee County Event Permit Application



### FIRE DEPARTMENT

*The Fire Department serving the area where the event is to be held signs this form.  
Please see User's Guide for contact information and Fire District Map.*

*Check the appropriate box(es) below:*

- ☒ SPECIAL EVENT PERMIT  
☐ USE OF COUNTY PROPERTY PERMIT  
☐ FILM PERMIT

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

Fire Guards (How Many?)	1 Certified Crowd Manager
Fee for Services:	None.
Flammable Vegetation:	N/A
First Aid Equipment:	Call 911 as needed
Fire Extinguishing:	Minimum 2a 10 bc Extinguisher in kitchen, and a purple K extinguisher if Frying any foods in concession
Special Arrangements:	None Requested

Print Name: James Tanner

Signature: James Tanner

Digitally signed by James Tanner  
DN: cn=James Tanner, o=South Trail Fire District, ou=Fire Marshal,  
email=jtanner@southtrailfire.org, c=US  
Date: 2015.07.27 15:23:36 -0400

Title: Fire Marshal

Date: July 27, 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:

- ☐ SPECIAL EVENT PERMIT  
☐ USE OF COUNTY PROPERTY PERMIT  
☐ FILM PERMIT

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

Treatment Facilities:	N/A
Medical Personnel:	N/A
Medical Supplies / Equipment:	N/A
Safety Requirements:	N/A
Fee for Services	Patients are billed at time of service
Special Arrangements:	call 9-1-1 as needed for emergencies

Print Name: SCOTT TUTTLE  
Signature:   
Title: Deputy Director  
Date: 8/3/15

## Lee County Event Permit Application



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

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
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☐ 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:

Use designated parking areas. No parking on County-maintained travel lanes or shoulders.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

Use Lee County Sheriff's Office for assistance with traffic control, as needed.

Print Name: Bryan Miller

Signature: Bryan Miller

Digitally signed by Bryan Miller  
DN: cn=Bryan Miller, ou=Lee County DOT, ou=DOT Engineering,  
email=millerm@leegov.com, c=US  
Date: 2015.07.28 15:21:01 -0400

Title: Senior Project Manager

Date: Jul 28, 2015



Lee County Event Permit Application



LEE COUNTY PARKS AND RECREATION  
3410 PALM BEACH BOULEVARD  
FORT MYERS, FLORIDA 33916  
(239) 533-7275

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
☐ 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:

Must follow local ordinance and codes to shut field lights off by designated times

Parking Areas:

Event Organizer must develop a parking plan with parking attendants to ensure all emergency access and egress remain open and clear for emergency vehicles.

Special Arrangements:

Event organizer must provide adequate staff to ensure crowd control and safety of players, coaches and fans. Follow established guidelines set by Lee County Sheriffs office. Follow building codes, parks & recreation ordinances as per life safety and fire codes. Event organizer must ensure they have adequate staff for litter control and cleanup during and after the event.

Print Name: Dana Kasler

Signature: Dana Kasler

Digitally signed by Dana Kasler  
DN: cn=Dana Kasler, o=Lee County, ou=Parks & Recreation,  
email=dkasler@leegov.com, c=US  
Date: 2015.07.28 15:43:30 -0400

Title:

Date:

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT  
COUNTY ADMINISTRATION BUILDING - 4<sup>TH</sup> 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: July 28, 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).

<b>PRODUCER</b> K&K INSURANCE GROUP, INC. 1712 MAGNAVOX WAY PO BOX 2338 FORT WAYNE IN 46801		<b>CONTACT NAME:</b> Cheryl Pettibone <b>PHONE (A/C, No. Ext):</b> 800-441-3994 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> Cheryl.Pettibone@kandkinsurance.com																						
<b>INSURED</b> The Greater Fort Myers Junior Football Association 804 Zana Drive Ft. Myers, FL 33905		<b>MEMBER NO:</b> <table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>Scottsdale Insurance Company</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td>Hartford Life &amp; Accident Ins. Co.</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Scottsdale Insurance Company		INSURER B:	Hartford Life & Accident Ins. Co.		INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER F:																								

## COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL 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 type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	X		KRS-54323-00	08/01/2015 12:01 AM	08/01/2016 12:01 AM	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE NONE PRODUCTS-COMP/OP AGG \$1,000,000 PARTICIPANT LEGAL LIABILITY \$1,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea Accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE AGGREGATE
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION						
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
B	PARTICIPANT ACCIDENT			OFE-3600204975-01	08/01/2015 12:01 AM	08/01/2016 12:01 AM	AD&D EXCESS MEDICAL \$ 10,000 \$ 100,000

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

THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED, BUT SOLELY WITH RESPECT TO THE ACTIVITIES OF THE NAMED INSURED.

(RE: Owner/Lessor of Premises Utilized for insured's activities)

SEXUAL ABUSE/MOLESTATION: \$1,000,000 PER OCCURRENCE/\$2,000,000 AGGREGATE

see MF  
07/28/15

## CERTIFICATE HOLDER

## CANCELLATION

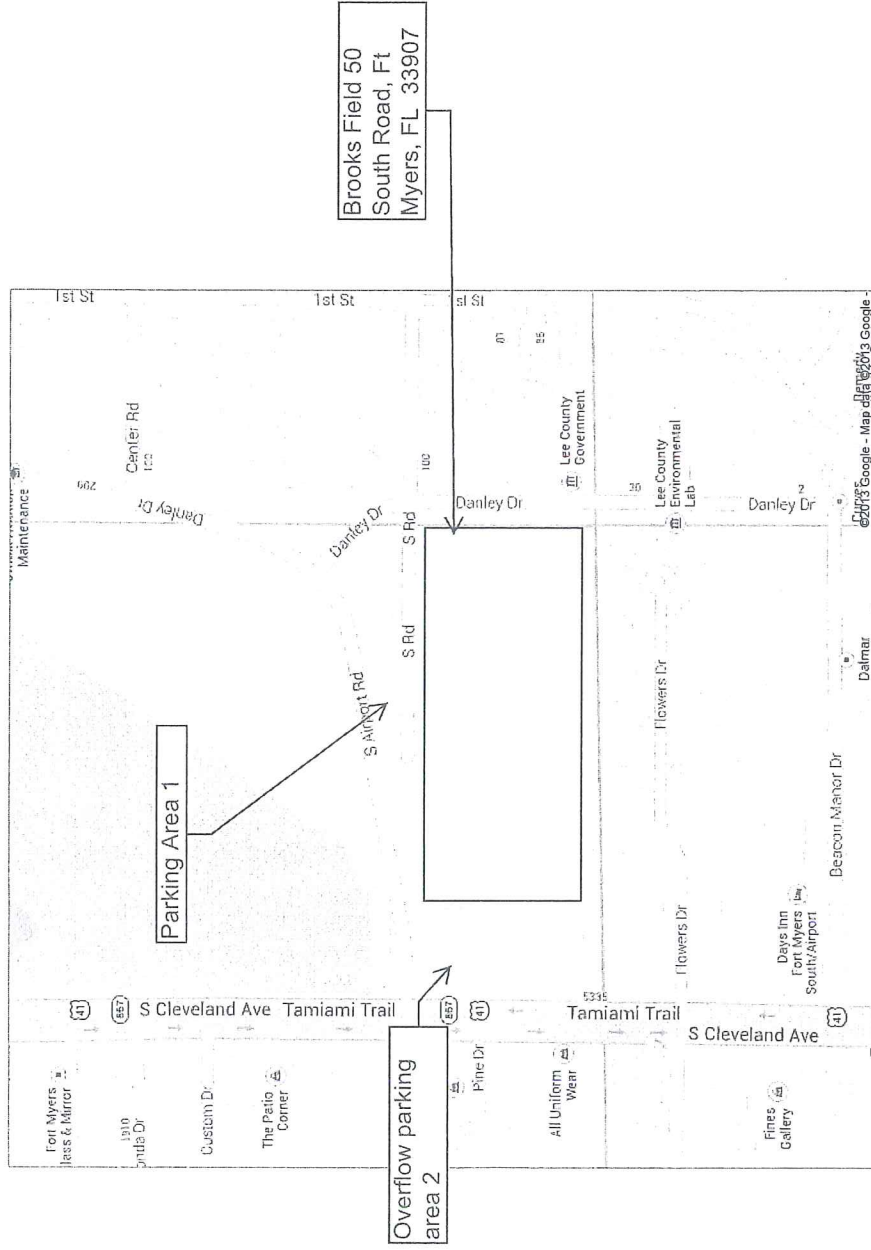
Lee County BOCC  
 PO Box 398  
 Ft. Myers, FL 33902

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

Scott Furbush







**Extra Duty Detail Request Form**

Please fill out the Extra Duty Request form attached to this document completely. All details are a minimum of four (4) hours with the exception of boat details which are a minimum of six (6) hours and a half hour drive time to and from the detail location. When five (5) or more deputies are assigned to an event, a supervisor with the rank of Sergeant or above will be assigned at an upgraded hourly charge. Depending on the type of event or crowd size, it will be at the discretion of the Sheriff's Office to determine the number of deputies needed.

**The current detail rates are:**

<b>Security</b>	<b>\$40/hr</b>	<b>Traffic</b>	<b>\$50/hr</b>
<b>Funeral Escort</b>	<b>\$40/hr</b>	<b>Security Supervisor</b>	<b>\$50/hr</b>
<b>Escort</b>	<b>\$40/hr</b>	<b>Traffic Supervisor</b>	<b>\$60/hr</b>
<b>Boat</b>	<b>\$40/hr</b>	<b>Civil Stand-by</b>	<b>\$60/hr</b>
<b>Holiday/Last Minute</b>	<b>\$60/hr</b>	<b>Prisoner Transport</b>	<b>\$60/hr</b>

*Details are charged a \$15 per deputy vehicle rate.*

*All boat details are charged a \$20 per hour boat rate.*

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

The Lee County Sheriff's Office will be the only armed personnel at any event where the detail is taking place. Any private security company that is hired to work alongside the Sheriff's Office will be a reputable, licensed and insured company whose employees are State D licensed unarmed security guards. Proof of the signed contract with private security company will be required.

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

Unless otherwise specified, full payment of all details must be received one (1) week prior to the start of the event in the form of a cashier's check, money order, business check or cash. The Lee County Sheriff's Office does not accept credit cards or personal checks. **Payments can be sent to: The Lee County Sheriff's Office 14750 Six Mile Cypress Pkwy., Fort Myers, FL 33912 ATTN: Details Unit.**

LEE COUNTY SHERIFF'S OFFICE USE ONLY			
Total Deputy(s) <u>2 &amp; 5</u>	Total Hours <u>7 &amp; 9.5</u>	Rate per Hour <u>\$40</u>	Vehicle Rate <u>\$15</u>
Total Cost for Detail <u>\$3,520</u>			
Vender Signature _____		Date _____	



**14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000**

May 18, 2015

Page 2

LCSO Details Main Phone Number: 239-477-1199

Vendor Information

Business Name: Greater Fort Myers Junior Football Association  
Street: P.O. Box 776  
City: Fort Myers State: FL Zip Code: 33902  
Business Contact: Eric Rivera Phone: 239-229-0874  
Email Address: ericjr90@me.com

Event Information

Detail Location: Jerry Brooks Community Park  
Street: 50 South Road  
City: Fort Myers State: FL Zip Code: 33907  
Contact During Event: Eric Rivera Phone: 239-229-0874  
Event Date: See schedule below Event Time: 1500-2200hrs  
Anticipated Crowd Size : 250-500 Type of Event: Football Games  
Additional Security Working Detail: ☐ Yes ☒ No If Yes, how many? \_\_\_\_\_  
Permits Attached: ☒ Yes ☐ No Alcohol Served: ☐ Yes ☒ No

Detail Information

Security	<input checked="" type="checkbox"/>	Traffic	<input type="checkbox"/>	Prisoner Transport	<input type="checkbox"/>
Escort	<input type="checkbox"/>	Holiday	<input type="checkbox"/>	Funeral Escort	<input type="checkbox"/>
Last Minute	<input type="checkbox"/>	Stand-by	<input type="checkbox"/>		
Marked Vehicle	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Unmarked Vehicle	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Uniformed Deputy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Plain Clothes Deputy	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Detail Description:

9/5/15 1500-2200hrs 2 DEPUTIES | 9/12/15 1500-2200hrs 2 DEPUTIES | 1\*10/10/15 1 SUPERVISOR  
1300-2230 2 DEPUTIES 1300-2230 & 2 DEPUTIES 1700-2230| 10/17/15 1500-2200HRS 2 DEPUTIES  
SECURITY AND PRESENCE IN THE PARKING LOT AND ONE THE FIELD DURING FOOTBALL GAMES.  
SEE ATTACHED PERMIT AND SUPPLEMENTAL TO THIS CONTRACT FOR ADDITIONAL INSTRUCTIONS.  
9/5, 9/12 & 10/17 Games are \$590 per game  
10/10/15 is \$1,750



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