

EVENT PERMIT

Ordinance 14-15

LARGEST HUMAN PINK RIBBON

PERMIT NUMBER: TMP2015-00223

Date(s) of Event: October 17, 2015 from 9:00am until 11:00am

Property Owner: NESV FLORIDA REAL ESTATE LLC

Applicant: PARTNERS FOR BREAST CANCER CA **Contact:** JANET DARNELL
239-454-8583

Description: Attendees to stand in the shape of the Susan G Komen pink ribbon with pink umbrellas, photograph to be taken

Location of event: 11400 FENWAY SOUTH DR FORT MYERS 33913
JET BLUE PARK ***239-454-8583

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

Will the event be held on County Owned Property ? No

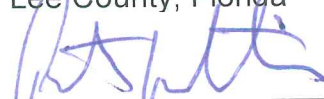
Will there be alcohol consumed or sold at the event ? No

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

 9-4-15
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

TMP2015-00223

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	Largest Human Pink Ribbon in the United States
Date(s) of Event / Production:	October 17, 2015
Location(s) of Event:	Jet Blue Park
Name of Applicant:	Partners for Breast Cancer Care, Inc.
Applicant Address:	9470 Healthpark Circle Fort Myers, FL 33908
Applicant Phone Number:	239-454-8583
Contact Person: (If different from applicant)	Janet Darnell
Contact Phone Number: (If different from applicant)	
Email Address:	janetdarnellpfbcc@yahoo.com
Estimated Attendance:	3,000
Event Description: Include each activity, when activities take place, etc.	Registration open at 9:00AM Attendees to stand in the shape of the Susan G. Komen pink ribbon with pink umbrellas Photograph to be taken at 10:30AM Attendees to exit Jet Blue Park at 11:00AM
Hours of Operation:	9:00AM to 11:00AM
STRAP # of Parcel:	#24-45-25-02-00001.0000, #24-45-25-02-00002.0000, #24-45-25-02-00003.0000, #24-45-25-02-00004.0000, #24-45-25-02-00005.0000
Owner of Premises*:	Boston Red Sox

*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? CPD3

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: Wells Fargo Insurance Services, Inc.

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

Surety Company Bonding this Event (Name and Address): Wells Fargo Insurance Services USA, Inc.
90 S. Cascade Ave. 2nd Floor

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: N/A

Type of Food being Served: N/A

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Partners for Breast Cancer Care, Inc.

Fill out this portion for applications for Solicitation in the County Rights-of-Way:

Name of Charity: Partners for Breast Cancer Care, Inc. & Susan G. Komen SWFL

Address of Charity: 9470 Healthpark Circle Fort Myers, FL 33908

Phone Number: 239-454-8583

Non-profit certificate/registration number: Tax ID 65-0290568

(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: N/A

(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 checked="" type="checkbox"/> No
Traffic / Crowd Control	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Fire or Burning	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Explosives or Pyrotechnics	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Animals, Large or Small	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Construction of Any Kind	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Large and/or Numerous Vehicles	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Helicopters, Boats, etc.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Stunts	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Other	<input type="checkbox"/> Yes	<input checked="" 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 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.

Janet Darnell
Signature of Applicant

JANET DARNELL
Print Name of Applicant and Title

8/24/15
Date

Fran Natio
Witness

FRAN NATIO
Print Name of Witness

8-27-15
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:

In authorized parking areas only.

Deputies (How Many?):

Two(2) for security.

Fee for Services:

Special Arrangements:

Depending on traffic or safety concerns, additional detail deputies may be required and will be requested to respond.

Print Name: Capt. Scott Lucia

Signature: Lucia, Scott

Digitally signed by Lucia, Scott
DN: dc=org, dc=sherifflefl, ou=LCSO Users, cn=Lucia, Scott,
email=SLucia@sherifflefl.org
Date: 2015.08.25 17:42:35 -0400

Title: Special Events, Permits and Details

Date: 25 August 2015

Lee County Event Permit Application



FIRE DEPARTMENT

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

Check the appropriate box(es) below:

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

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

Fire Guards (How Many?)

N/A

Fee for Services:

None

Flammable Vegetation:

N/A

First Aid Equipment:

CALL 911 IF NEEDED

Fire Extinguishing:

N/A

Special Arrangements:

NONE

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: 2015.08.27 11:28:36 -0400

Title: FIRE MARSHAL

Date: Aug 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 the time of service.

Special Arrangements:

Call 9-1-1 as needed for emergencies.

Print Name: Scott M Tuttle

Signature: Scott M Tuttle

Digitally signed by Scott M Tuttle
DN: cn=Scott M Tuttle, c=US, ou=Public Safety, email=tuttlecm@lee.gov
Date: 2015.08.26 17:08:43 -0400

Title: Deputy Director

Date: Aug 26, 2015

Lee County Event Permit Application



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

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
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☐ FILM PERMIT

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

Parking:

No event parking on or within ten 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 as needed

Print Name: Bryan Miller

Signature: Bryan Miller

Digitally signed by Bryan Miller
DN: cn=Bryan Miller, o=Lee County DOT, ou=DOT Engineering,
email=bmiller@leegov.com, c=US
Date: 2015.08.17 10:44:08 -0400

Title: Senior Project Manager

Date: August 17, 2015

Lee County Event Permit Application



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

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
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☐ 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 being held on the Red Sox property and not on County property

Special Arrangements:

Event is not being held on County Parks and Rec property and will not affect the parks operations or programs. Event is not being held inside stadium, but outside the park property.

Print Name: Alise Flanjack

Signature: Alise Flanjack

Digitally signed by Alise Flanjack
DN: cn=Alise Flanjack, o=Lee County Parks and Recreation, ou,
email=alise@leegov.com, c=US
Date: 2015.08.17 16:33:16 -0400

Title: Deputy Director

Date: August 17, 2015

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT
COUNTY ADMINISTRATION BUILDING - 4TH FLOOR
2115 SECOND STREET
FORT MYERS, FLORIDA 33901
(239) 533-2221

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
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☐ FILM PERMIT

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

Insurance Requirements: 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: August 25, 2015



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/24/2015

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 Commercial Lines - (800)-332-9256 Wells Fargo Insurance Services USA, Inc. 90 S. Cascade Ave, 2nd Floor Colorado Springs, CO 80903	CONTACT NAME: Julie Gutierrez PHONE (A/C, No, Ext): 303-863-6572 FAX (A/C, No): 855-669-8729 E-MAIL ADDRESS: julie.gutierrez@wellsfargo.com														
INSURED The Susan G. Komen Breast Cancer Foundation, Inc. 5005 LBJ Freeway Suite 250 Dallas TX 75244-6125	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A : Great Divide Insurance Company</td> <td>25224</td> </tr> <tr> <td>INSURER B : Nautilus Insurance Company</td> <td>17370</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Great Divide Insurance Company	25224	INSURER B : Nautilus Insurance Company	17370	INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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INSURER C :															
INSURER D :															
INSURER E :															
INSURER F :															

COVERAGES

CERTIFICATE NUMBER: 9464708

REVISION NUMBER: See below

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			CPA 1004002-18(AOS)	7/1/2015	7/1/2016	EACH OCCURRENCE \$ 1,000,000
B	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			CPA 1004003-18(AZ)	7/1/2015	7/1/2016	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
							MED EXP (Any one person) \$ 5,000(LBJ Off)
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							Medical Exp \$ Excluded
A	AUTOMOBILE LIABILITY			CAA 1024620-18	7/1/2015	7/1/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
							\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB			CUA2012024-11	7/1/2015	7/1/2016	EACH OCCURRENCE \$ \$10,000,000
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE \$ \$10,000,000
							\$
	DED						
	RETENTION \$						
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WCA 1004006-18(AOS)	7/1/2015	7/1/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
B	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			WCA 1004004-18(AZ)	7/1/2015	7/1/2016	E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

CG20260413,WC000313(4-84)13-14) CG20260413 Affiliate: Southwest Florida Affiliate

Event Type: Other

Detail if "other": The Largest Human Pink Ribbon

Event Date: 10/17/2015

Event Location: Fort Myers, FL

CERTIFICATE HOLDER

CANCELLATION

Boston Red Sox Baseball Club Limited Partnership
 Attn: Brett Bodine
 Boston Red Sox Baseball Club Limited Partnership, its owners and affiliate
 11500 Fenway South Drive
 Fort Myers, FL 33913

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



Application Process

- **Application due date is 30 days prior to the event.**
- The applicant completes the first pages of the application with details about the event and contacts each agency whose signature is required. Contact information is provided at the top of each signature page and in this user guide on pp. 9-11. Each agency must complete **AND SIGN** their page. Please see Table 1 on p. 5 to determine the signatures needed. After the application is **COMPLETE WITH ALL NECESSARY SIGNATURES AND INSURANCE CERTIFICATE**, submit the entire package:

Applications for Special Event, Use of County Property, Alcohol within County Facilities	Application for Film
Lee County Permitting Department Attn: Event Permitting 1500 Monroe Street Fort Myers, FL 33901 (239) 533-8329 - Call for other options	Lee County Visitor & Convention Bureau Attn: Film Office 2201 Second Street, 6 th Floor Fort Myers, FL 33901 (239) 338-3500/(800) 237-6444 - Call for other options

- For 'Special Event' and 'Use of County Property' permits, attach a **detailed site plan**, including location of tents, entertainment, proposed parking accommodations, etc.
- **A Certificate of Insurance must be provided with the application packet.** Please see page 10 for specific insurance information.
- Lee County's Noise [Ordinance 14-18](#) regulates noise and attempts to minimize disturbances for local residents. Please review this ordinance if you plan to have **amplified noise** at your event.
- As part of the approval process, the amount of the **bond** required, if any, will be established.
- Applications for Special Event, Use of County Property and Sale/Consumption of Alcohol within Lee County Facilities are reviewed by the Lee County Permitting Department and submitted to the County Manager for approval. Film permits are reviewed by the Visitor & Convention Bureau.
- Questions regarding the application for Special Event, Use of County Property and Sale/Consumption of Alcohol within Lee County Facilities should be directed to the Lee County Permitting Department by calling (239) 533-8329. Questions regarding the application for Film should be directed to the Visitor & Convention Bureau by calling (239) 338-3500.

County Fees

Any applicable permit fees must be submitted with the application. The applicant must pay for any additional fees charged by sign-off agencies or other required county permitting, if applicable.

- **Special Event** - \$75.00 payable by cash or check to Lee County Board of County Commissioners.
- **Use of County Property** – No Charge.
- **Sell & Consume Alcoholic Beverages within Lee County Facilities & Public Parks** – No Charge.
- **Film Permit** – No Charge.

Late Fee: Applications are due 30 days prior to the event. Applications submitted after the deadline will be charged a fee of \$5 per business day.

Ordinances

Please review the following ordinances and administrative codes for details pertaining to each event type:

- [Ordinance 14-15](#) – All permit types
- [Administrative Code 8-1](#) – All permit types
- [Ordinance 11-02](#) – Sell/Consume Alcoholic Beverages within Lee County Facilities & Public Parks

