

EVENT PERMIT



Ordinance 14-15

DRIVE ELECTRIC SWFL

PERMIT NUMBER:

TMP2015-00230

Date(s) of Event:

September 19, 2015 from 10:00am until 4:00pm

Property Owner:

LEE COUNTY

Applicant:

EDWARD ELLYATT

Contact: EDWARD ELLYATT

Description:

Reading proclamation on courthouse steps and electric car display/show in

parking lot adjacent to it

Location of event:

2115 SECOND ST FORT MYERS 33901

Corner of Main St and Monroe St ***239-410-8826

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

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

1mp2015-00230



Event Application

PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

Check the appropriate box(es) below:	
SPECIAL EVENT PERMIT	
□ USE OF COUNTY PROPERTY PERMIT	

FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)				
Title of Event / Name of Production	Drive Electric SWFL				
Date(s) of Event / Production:	September 19, 2015				
Location(s) of Event:	On courthouse steps and in parking lot				
Name of Applicant:	Edward Ellyatt				
Applicant Address:	13519 Marquette Blvd, Fort Myers, FL 33905				
Applicant Phone Number:	239-410-8826				
Contact Person: (If different from applicant)					
Contact Phone Number: (If different from applicant)					
Email Address:	eellyatt@leegov.com				
Estimated Attendance:	20-25				
Event Description: Include each activity, when activities take place, etc.	Reading proclamation on counrthouse steps and electric car display/show in parking lot adjacent to it.				
Hours of Operation:	10:00am-4:00pm				
STRAP # of Parcel:	13-44-24-P4-00406.0030 134494P400401003B				
Owner of Premises*:	Lee County				

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



Fill out the following questions for all permit types:

further details

What is the Zoning Classification of the	premises? City of Ft Myers	
Are any temporary structures to be insi	talled for the event? 💢 Yes 🦳 No 📑	Type: Tent without sidewalls
Do you have the appropriate permits fo	or the temporary structures?	▼ Yes
* For a 'Special Event' and 'Use of Cour indentified, including all parking areas.	nty Property' permit, submit a site plan wit	h all proposed facilities and activities
Insurance Company Insuring the Event	. N-Surance Outlets	4
Note: Certificate of Insurance must be submitted	ed at time of application	
Surety Company Bonding this Event (N	ame and Address): N/A	
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	┌─ Yes	⊤ 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:	nla	
Type of Food being Served:		
Section II - USE OF COUNTY F	PROPERTY PERMIT	
Organization Sponsoring the Event:	lug In America, Electric Auto Association, Sierr	a Club
Fill out this portion for applications for	or Solicitation in the County Rights-of-Way	<i>':</i>
Name of Charity:	,	
Address of Charity:		
Phone Number:		
Non-profit certificate/registration number	mber:	
(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/CONSUMP	TION OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being sold/consumed on Co	unty Property? d. Only non-profit organizations can sell alcohol on Count	┌─ Yes
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	mber:	
Please note: A permit from the State of Floric	la Division of Alcoholic Beverages and Tobacco may	also be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

TV Movie	uction (choose all tha	сарріу).						
	or Special	┌ TV Ser	ries / Pilot		TV Comme	rcial F S	Still Photos	
Public Ser	vice Announcement	☐ Industr	rial / Documentary	Γ	Other:			
ill any of th	e following be neede	ed or include	d*?				/	
	Street Closure				┌ Yes	┌ No		
	Traffic / Crowd Con	trol			┌ Yes	L No		
	Fire or Burning				┌ Yes	No		
	Explosives or Pyrote	echnics			┌ Yes	┌ No		
	Animals, Large or Si	mall			☐ Yes	┌ No		
	Construction of Any	/ Kind			Yes	┌ No		
	Large and/or Nume	rous Vehicle	S		┌ Yes	┌ No		
	Helicopters, Boats,	etc.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		┌ Yes	┌ No		
	Stunts		00		┌─ Yes	┌ No		
	Other		\ /		┌ Yes	┌ No		
Special Par	rking Requirements:							
	/_					-		
City or Coi	unty Services Require	ed: (Personn	el, equipment, faci	lities, e	etc.)			
The follow	ring information is re ry. If exact figures ar	quired for lo	cal and state record	ds on p	roduction in sely as possi	Florida to tra ole. mber of locals		nic impac
The follow the indust	ring information is rery. If exact figures ar	quired for lo	cal and state record ble, please estimate Number in Crew:	ds on p	roduction in sely as possi Nu	ole.		nic impaci
The follow	ring information is rery. If exact figures ar	quired for lo	cal and state record ble, please estimate	ds on p	roduction in sely as possi Nu	ole.		nic impact

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.

his/her knowledge.	Aidish
Signature of Applicant	Witness
EDWARD ELLSYATT	Andra Ennis
Print Name of Applicant and Title	Print Name of Witness
8/19/15	8-19-15
Date	Date



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

*	ENT PERMIT UNTY PROPERTY SELL AND CONSU		
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGA LY WITH FOR THEIR EVENT.	ANIZATIOI
Parking:	In authorized par	king areas only.	
Deputies (How Many?):	None required.		
Fee for Services:			
Special Arrangements:	None.		
	Print Name:	Capt. Scott Lucia	
	Signature:	Capt. Scott H. Lucia	

Special events, Permits and Details

24 August 2015

Title:

Date:



JAM Tent

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 PERM	MIT
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIO ICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	0
Fee for Services:	0
Flammable Vegetation:	0
First Aid Equipment:	6
Fire Extinguishing:	NONEROID FOR 10 X 10 Tent.
Special Arrangements:	
į	Print Name: Jeunifer (AMP) Classification: Signature: Signature: File Marshall Date: 9/2/15



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

MA Medical Supplies / Equipment: MA: Safety Requirements: MA Fee for Services Philled @ time e-l Service Special Arrangements: (Call 9-1-1 as weeked In Emergincology)	Check the appropria	te box(es) below:
F 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: MA Medical Personnel: MA Medical Supplies / Equipment: Safety Requirements: MA Fee for Services PLA ILLEA T. W. Of Service Special Arrangements: Call 9-1-1 as Needed In Emergency tegs	SPECIAL EVE	NT PERMIT
MA Medical Personnel: MA Medical Supplies / Equipment: Safety Requirements: MA Fee for Services Ph billed @ fire a Service Special Arrangements: Call 9-1-1 as weed In Emergence beginning the supplies of the suppli		
WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Treatment Facilities: MA Medical Personnel: MA Medical Supplies / Equipment: MA Safety Requirements: MA Fee for Services PA B. I Led @ f. w. @ f. Service Special Arrangements: Call 9-1-1 as weeld fine emergency beginning.	ž	
Medical Personnel: MA Medical Supplies / Equipment: MA Safety Requirements: MA Fee for Services Pholibed @ fine and Service Special Arrangements: Call 9-1-1 as meded in Emergence of	AFTER REVIEWING THE A	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
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MA Medical Supplies / Equipment: MA: Safety Requirements: MA Fee for Services Philled @ time e-l Service Special Arrangements: (Call 9-1-1 as weeked In Emergincology)	Treatment Facilities:	NA
Medical Supplies / Equipment: MA: Safety Requirements: MA Fee for Services Ph billed a time and Service Special Arrangements: Call 9-1-1 as weeld In Emergencies	Medical Personnel:	
Equipment: MA Fee for Services Phoiled at the at Service Special Arrangements: Call 9-1-1 as weeded for Emergencies		MA
Safety Requirements: MA Fee for Services Ph billed @ time of Service Special Arrangements: Call 9-1-1 as weeded In Emergencies	Medical Supplies /	
MA Fee for Services Ph billed @ time @ f Service Special Arrangements: Call 9-1-1 as weeded In Emergencies	Equipment:	N/A:
Special Arrangements: Call 9-1-1 as weeded In Emergencies	Safety Requirements:	
Special Arrangements: Call 9-1-1 as weeded In Emergencies		MA
Special Arrangements: Call 9-1-1 as weeded In Emergencies	Fee for Services	Pt billed @ time of Service
Print Name: Scott Tites	Special Arrangements:	Call 9-1-1 as weeded In Emergencies
Print Name: Scott Wite		
Print Name: Scott Tite		
		Print Name: Scott Tites
Signature:		Signature:
Title: Derty Dreets		Title: Dreft Dreft
Date: \$\(\frac{2}{19} \) / 5		Date: \$/19/15

(* . . .) ^(*)



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

Check the approprio	ate box(es) belo	w:		
SPECIAL EV SUSE OF COU PERMIT TO FILM PERM	UNTY PROPERTY F SELL AND CONSU	PERMIT ME ALCOHOLIC BEVERA	AGES WITHIN LEE COUNTY	FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL ICANT TO COMPL	EASE INDICATE BELOW Y WITH FOR THEIR EVE	/ WHAT ARRANGEMENTS NT.	YOUR ORGANIZATION
Parking:	Park in designated a	and /or public parking areas		
	6)	i V		
Ingress and Egress:	Use all established r	means of ingress and egress	;.	
Special Arrangements:	None.			
	Print Name:	Bryan Miller		_
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2015.08.20 11:55:15 -04'00'	
	Title:	Senior Project Manager		-
	Date:	August 20, 2015		_



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

FILM PERMIT TO FILM PERM AFTER REVIEWING THE	ENT PERMIT UNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES IT APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION
WILL REQUIRE THE APPL	ICANT TO COMPLY WITH FOR THEIR EVENT.
Illumination:	NA
Parking Areas:	N/A - Event not on Parks; Rec property and will not affect parks; Recreations operations or programs.
Special Arrangements:	N/A -
	Print Name: Alise Flaggek Signature: Alise Flaggek Title: Deputy Director Date: 8/19/15
Sept 19, 2015. Drive Flection	I Swee 10



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

Check the appropriat	e box(es) bel	ow:
SPECIAL EVEI USE OF COUI PERMIT TO S FILM PERMIT	NTY PROPERTY ELL AND CONSI	PERMIT JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Insurance Requirements:	occurrence to pro	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to the applicants use of event on Lee County property.
Special Arrangements:	A certificate of in Board of County additional insure	surance shall be submitted as evidence of the required coverage listing Lee County Commissioners, P.O. Box 398, Fort Myers, Fl 33902 as the certificate holder and as an d.
	Print Name:	Mike Figueroa
	Signature:	
; ,	Title:	Risk Program Manager
	Date:	August 19, 2015



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/19/2015

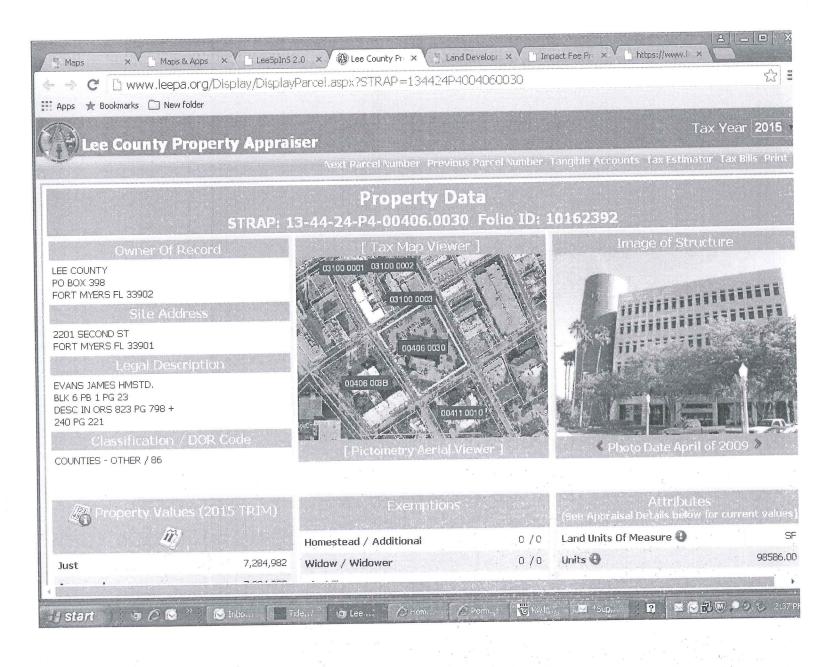
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN 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 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 N-Surance Outlets, Inc. PHONE (A/C, No, Ext): E-MAIL ADDRESS; FAX (A/C, No): P O Box 2600 GA 30077 Roswell INSURER(S) AFFORDING COVERAGE NAIC # WESTERN HERITAGE INSURANCE COMP INSURER A: Edward Ellyatt INSURER B : 13519 Marquette Blvd INSURER C FL 33905 Fort Myers INSURER D : INSURER E : 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. ADDI ISLIBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER 1,000,000 GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) SCP1037710 09/19/2015 09/20/2015 100,000 X COMMERCIAL GENERAL LIABILITY 1,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) PERSONAL & ADV INJURY 1,000,000 2,000,000 GENERAL AGGREGATE Incl GEN'L AGGREGATE LIMIT APPLIES PER:

X POLICY PRO- LOC PRODUCTS - COMP/OP AGG COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY (Ea accident) BODILY INJURY (Per person) ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS BODILY INJURY (Per accident) PROPERTY DAMAGE HIREO AUTOS UMBRELLA LIAB EACH OCCURRENCE OCCUR EXCESS LIAB CLAIMS-MADE AGGREGATE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY WC STATU-TORY LIMITS E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE . POLICY LIMIT \$ DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Description of Operations: Special Event/Car Show Location: 2120 Main St. Forl Myers, FL Certificate Holder Is listed as an Additional Insured. CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE Lee County Board of Commisioners THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. PO Box 398 FI 33902 Fort Myers AUTHORIZED REPRESENTATIVE

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Google Google CHARGE STATION



PROCLAMATION AND READING OF THE

PROCLAMATION BY COMMISSIONER

BRIAN HAMMON ON THE OLD

COURT HOUSE STEPS
2) DISPLAY AND CHARGING OF ELECTRIC

CARS IN THE PARKING GOT ADJACENT