

EVENT PERMIT



Ordinance 14-15

LAKES PARK FARMERS MARKET

PERMIT NUMBER:

TMP2015-00231

Date(s) of Event:

On-going on Fridays from October 2, 2015 thru April 29, 2016 between

9:00am and 1:00pm

Property Owner:

LEE COUNTY

Applicant:

LOCAL ROOTS. LLC

239-691-9249

Description:

Farmers Market to be held on Fridays between Oct 2, 2015 and April 29, 2016

between 9am-1pm

Location of event:

7330 GLADIOLUS DR FORT MYERS 33908

LAKES REGIONAL PARK/US41 south, right on Gladiolus ***239-691-9249

Will the event be attended by 1000 or more people?

No

Contact: JEAN BAER

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

TMP2015-00231



Event Application

Check t	he ap	propriate	box(es)	below:
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SPECIAL EVENT PERMIT

USE OF COUNTY PROPERTY PERMIT

PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Section I - GENERAL INFO	ORMATION (All Permit Types)
Title of Event / Name of Production	Lakes Park Farmers Market
Date(s) of Event / Production:	FRIDAYS Oct. 2, 2015 - Apr. 29,2016 closed xMas
Location(s) of Event:	FRIDITYS at Lakes Regional Park
Name of Applicant:	Local Roots, LLC
Applicant Address:	1418 Sandcastle Rd. San, bel, FL 33957
Applicant Phone Number:	239-691-9249
Contact Person: (If different from applicant)	Jean Baer
Contact Phone Number: (If different from applicant)	Same
Email Address:	jmbaer a) comcast. ne t
Estimated Attendance:	950
Event Description: Include each activity, when activities take place, etc.	Farmers MKt.
Hours of Operation:	9 am - 1 pm
STRAP # of Parcel:	26452400000080000
Owner of Premises*:	Lee County

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



Fill out the following questions for allpermit types:

What is the Zoning Classification of the premises?
Are any temporary structures to be installed for the event? Yes No Type:
Do you have the appropriate permits for the temporary structures?
* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities indentified, including all parking areas.
Insurance Company Insuring the Event: Heidrick Thourance
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 Will Food be Available at this Event? Will Alcoholic Beverages be served/consumed at this Event?
F Yes ▼ No ▼ Yes F No F 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.
Name & Address of Organization Providing Food: Various Vendors
Providing Food: Various Vendors Type of Food being Served: Produce, broads, bbq, honey
Section II - USE OF COUNTY PROPERTY PERMIT
Organization Sponsoring the Event: Lakes Park Enrichment Foundation
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? 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 <u>SOLD</u> 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



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply):				
TV Movie or Special TV Series	s / Pilot	Γ	TV Commercial	Still Photos
Public Service Announcement Industrial	/ Documentary		Other:	
Will any of the following be needed or included*	?			
Street Closure			Yes X	, No
Traffic / Crowd Control	÷		┌ Yes √	No
Fire or Burning			☐ Yes	No
Explosives or Pyrotechnics			Yes 5	ζ No
Animals, Large or Small			Yes 5	No
Construction of Any Kind			Yes 5	No
Large and/or Numerous Vehicles			☐ Yes 5	No
Helicopters, Boats, etc.	IN /		☐ Yes	₹ No
Stunts	10		☐ Yes 万	Č No
Other			☐ Yes ☐	Ž No
* For any marked Yes, provide further details b	elow:		ŕ	
Special Parking Requirements:	,			
City or County Services Required: (Personnel,	equipment, facili	ties, et	cc.)	
N/A				
///				
The following information is required for local the industry. If exact figures are not available				ida to track the economic impact o
Number in Cast:	Number in Crew:		Number	of locals hired:
Total budget:	Estimate amount sp	ent in 1	ee County:	
Hotel room nights:	Number of shooting	days:		

Applicant Agreement - Signature Required



SECTION I - SAFETY

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

SECTION II - INSURANCE

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

SECTION III - INDEMNIFICATION

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

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

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

Applicant Agreement - Signature Required



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.

Quar Bu	King autoracci
Signature of Applicant	Witness
Jean Baer	Kris Antonacce
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

Check the approprio	ite box(es) belo	w:
SPECIAL EV	ENT PERMIT	
USE OF COL	JNTY PROPERTY I	PERMIT
PERMIT TO	SELL AND CONSU	ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IT	
AFTER REVIEWING THE	APPLICATION, PL	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIONLY WITH FOR THEIR EVENT.
WILL REQUIRE THE APPL	ICANT TO COMP	TO WITH TOK THEM EVENT.
r		
Parking:	Parking in autho	rized parking areas only.
2)		
Deputies (How Many?):	None requir	ed.
		Arr .
Fee for Services:		
, , , , , , , , , , , , , , , , , , , ,		
Special Arrangements:	None.	
	Drint Name	
	Print Name:	Capt. Scott Lucia
	Signature:	Capt. Sett. H. Lucia
	Title:	Detail Unit Commander
	Date:	3 September 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:

SPECIAL EVENT PERMIT

⊠ USE OF CO □ FILM PERM	OUNTY PROPERTY I	PERMIT		
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLICANT TO COMPLY	EASE INDICATE BELOVEY WITH FOR THEIR EVE	W WHAT ARRANGEMENTS NT.	YOUR ORGANIZATION
Fire Guards (How Many?)	1 certified crowd ma	nager		
Fee for Services:	55.00 inspection fee	for tents over 900 sq ft.		
Flammable Vegetation:	cleared from around	l tents		
First Aid Equipment:	Call 911 as needed			
Fire Extinguishing:	trucks or trailers mus not tip over.	xtinguisher at all tents, al st be NFPA 96 compliant ,	cooking tents must be NFPA 96 All propane kept 10 feet away fr	ocompliant, Food service om tent and secured as to
Special Arrangements:	none			
	Print Name:	James Tanner		-
	Signature:	James Tanner	Ogitally signed by James Tannet DN: cns-bases Tannet: Oscult Tail Fire District, our-fire Marshal, email-ghanne@southtrailfire.org, c=U5 Date: 2015:09:21:152:150-04007	_
	Title:			-
	Date:			_



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

Check the appropriate box(es) below:

SPECIAL EVI USE OF COL	JNTY PROPERTY PER	MIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL		SE INDICATE BELOW WHAT A	Arrangements yo	organiz	'ATION
Treatment Facilities:	WA				
Medical Personnel:	NA				
Medical Supplies / Equipment:	NA				
Safety Requirements:	NA				
Fee for Services	pt billed	at time et s	ON VIZ L		e e 16
Special Arrangements:	Call 9-1-1	a & weight &	h engen	eire 5	
	Print Name:	SCOTA TUTTE			
	Signature:	Ans			
	Title:	squ'y Drech			
	Date:	8/20/15			



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

Check the appropri	rte box(es) belo	ow:		
*annand	JNTY PROPERTY			
☐ PERMIT TO		JME ALCOHOLIC BEVER	AGES WITHIN LEE COUNTY	FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL			V WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Parking:	Park in designated	parking areas. No parking o	n or within 10 feet of Lee Count	y road rights-of-way.
Ingress and Egress:	Use all established	means of ingress and egres.	S.	
Special Arrangements:	Use Lee County Sho	eriff's Office for assistance w	ith traffic control as needed.	
	Print Name: Signature: Title: Date:	Bryan D. Miller Bryan D. Miller Senior Project Manager August 20, 2015	Digitally signed by Bryan D. Miller Date: 2015.08.20 15:02:30 -04'00'	



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

Check the appropri	ate box(es) be	elow:
SPECIAL E	VENT PERMIT	
USE OF CO	UNTY PROPERTY	Y PERMIT
PERMIT TO	SELL AND CONS	SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERN	1IT	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION IPLY WITH FOR THEIR EVENT.
Illumination:	NA	
Parking Areas:	upon locations for Emergency Vehicl for entrance and e	nsible to direct patrons attending the farmers market to the designated and agreed r parking of vendors and patrons in a safe manner. Patrons must not be blocked in and les must be able to have access to all parking areas. Must have proper directional signs exit for grassy parking areas. The operator is responsible for all parking, traffic control, ape, directional signs and appropriate parking personnel.
Special Arrangements:	Operator is require through market w vendor area before 2pm. LCPR can as	nsible for set up and clean up designated Farmers market location (Parking Lot #2) ed to ensure patrons safety while vendors are still setting up patrons cannot stroll ihile set up is occurring. Patrons must walt until all vendor vehicles are out of market e opening at 9am and may not remain after 1 pm. Vendors must vacate no later than ssist with additional cones, barricades and flags. Operator to supply venue with banner merlin. Operator must have personnel onsite until last vendor vacates.
	Print Name:	Mary Beth Krause MARK Alice Floring
		M. CO. I.
	Signature:	Algo Farall
	Title:	Park Supervisor Deputy Director
	Date:	8-21-15 8 21 15
		, ,



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

Check the appropriat	e box(es) belo	pw:
SPECIAL EVER	NT PERMIT	
USE OF COU	NTY PROPERTY I	PERMIT
PERMIT TO S	ELL AND CONSU	IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT		
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Insurance Requirements:	occurrence to pro	ral llability insurance with minimum limits of One Million Dollars (\$1,000,000) per steet against bodily injury and/or property damage relative to the applicants use of event on Lee County property.
Special Arrangements:	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, FI 33902 as the certificate holder and as an d. Cificate will need to be provided before expiration in order to extend permit into April
	Print Name: Signature: Title: Date:	Mike Figueroa Rişk Program Manager August 28, 2015



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

Check the appropriate box(es) below:

FILM PERMIT ONLY

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

Special Arrangements:		,	
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	*		
Other:			
	Print Name:		
	Signature:		
	Title:		- and the second of the second
	Date;		
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			e.



CERTIFICATE OF LIABILITY INSURANCE

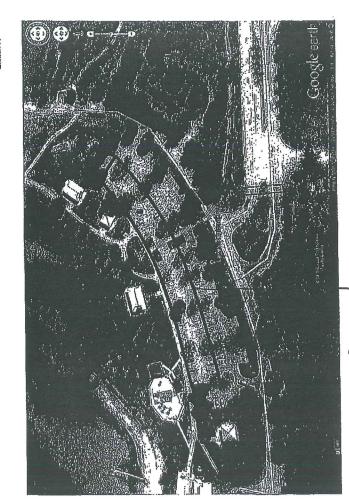
DATE (MM/DD/YYYY) 3/4/2015

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

th	e terms and conditions of the policy extificate holder in lieu of such endors	cert	aln p nt(s).	ollcles may require an e	dorsei	ment. A stat	ement on th	s certificate does not c	onfer i	lghts to the	
PRODUCER						CONTACT Chris Heidrick					
Heidrick & Company Insurance and Risk						PHONE (239) 579-0660 FAX					
Maı	nagement Services LLC				E-MAIL	ss.merrell	@Sanibell	nsurance, com			
1648 Periwinkle Way STE A						INSURER(S) AFFORDING COVERAGE					
Sanibel FL 33957						INSURER A: Colony Insurance Company				39993	
Neiber						INSURER B:					
Tanni Danta IVO						INSURER C:					
1410 0 0 0 0-						RD:					
						INSURER E :					
denile 1 Tr Onorm						INSURER F :					
CO	VERAGES CER	TIFIC	CATE	NUMBER:15-16 Ter				REVISION NUMBER:			
C	HIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RIERTIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	PERT	AIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN	Y CONTRACT	OR OTHER	DOCUMENT WITH RESPE D HEREIN IS SUBJECT T	CT TO	WHICH THIS	
NSR LTR		ADDL	SUBR		POLICY EFF POLICY EXP LIMITS						
-18	GENERAL LIABILITY	INSR	WVD	POLICY NUMBER		(MM/UU/YYYY)	(MIN/UU/YYYY)	EACH OCCURRENCE	s	1,000,000	
	X COMMERCIAL GENERAL LIABILITY						}	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
A	CLAIMS-MADE X OCCUR	x		GL38464715		2/27/2015	2/27/2016	MED EXP (Any one person)	\$	5,000	
	OCCUR DE LA OCCUR	Α.						PERSONAL & ADV INJURY	s	1,000,000	
								GENERAL AGGREGATE	\$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:	1						PRODUCTS - COMP/OP AGG	\$	EXCLUDED	
	X POLICY PRO LOC		1					TROBOOTO COMPTOT TICE	\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Es accident)	e		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	ALL OWNED SCHEDULED							BODILY (NJURY (Per accident)	\$		
	AUTOS AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$		
	HIRED AUTOS AUTOS							(Per accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	s		
	EXCESS LIAB CLAIMS-MADE		1	5.				AGGREGATE	s		
	DED RETENTION\$	1						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	S		
	WORKERS COMPENSATION		†			,		WC STATU- OTH-			
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE (Y / N	11						E.L. EACH ACCIDENT	s		
	OFFICER/MEMBER EXCLUDEO? (Mandatory in NH)	N/A	1					E.L. DISEASE - EA EMPLOYER	1		
	If yes, describe under DESCRIPTION OF OPERATIONS below		1					E.L. DISEASE - POLICY LIMIT			
	DESCRIPTION OF OF ENGINEERING	1						AM - 10-110- 1 0-101 - 1001			
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEH	CLES	(Attac	h ACORD 101, Additional Remark	ş Schedi	ale, if more space	e is required)				
08/10/15											
CE	RTIFICATE HOLDER	CAN	CANCELLATION								
Lee County Board of County Commissioners 2115 Second St Fort Myers, FL 33901						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					
						Chris Heidrick/MR					

Exhibit A LAKES PARKING-LOT



we will use this area as set forth in the RFP