

EVENT PERMIT



Ordinance 14-15

CHRISTMAS EVE SERVICE

PERMIT NUMBER:

TMP2015-00263

Date(s) of Event:

December 24, 2015 from 5:00pm until 5:45pm

Property Owner:

LEE COUNTY

Applicant:

JIM LEE

Contact: JIM LEE

Description:

Traditional Christmas Eve service

Location of event:

50 ESTERO BLVD FORT MYERS BEACH 33931

BOWDITCH BEACH PARK/Estero Blvd south to Fort Myers Beach ***239-481-2125

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?

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

TMP2015-00263



Event Application

Check th	e appro	priate	box(es,	below:
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- F SPECIAL EVENT PERMIT
- □ USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Christmas Eve Service at Bowditch Beach
Date(s) of Event / Production:	12/24/15
Location(s) of Event:	Bowditch Beach Park 50 Estero Blua
Name of Applicant:	Jim Lee
Applicant Address:	9065 Ligon Court Ft. Myers, FL 33908
Applicant Phone Number:	239-481-2125
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	jim@casepearlman.com
Estimated Attendance:	350
Event Description: Include each activity, when activities take place, etc.	Traditional Christmas Eve service from 5:00 p.m. until 5:45 p.m. on 12/24/15. We will vacate the park no later than 6:00 p.m.
Hours of Operation:	5:00-5:45 p.m.
STRAP # of Parcel:	24463W10080D0400
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:

What is the Zoning Classification of the	premises? N/A	
Are any temporary structures to be inst	alled for the event? ☐ Yes ☐ No	Туре:
Do you have the appropriate permits fo	r the temporary structures?	☐ Yes ☐ No
* For a 'Special Event' and 'Use of Counindentified, including all parking areas.	ity Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event:	Church Mutual Insurance Company	
Note: Certificate of Insurance must be submitte	d at time of application	
Surety Company Bonding this Event (Na	ame and Address):	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
┌─ Yes	Γ Yes No	├ Yes
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food:		
Type of Food being Served:		
Section II - USE OF COUNTY P		
Organization Sponsoring the Event: We	estminster Presbyterian Church	The state of the s
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 num	ber:	
(Proof of registration with the Dept. of Agriculture &	Consumer Services §496.405 or proof the organization i	s exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being sold/consumed on Coulf Yes, then a "Lee County Alcohol Permit" is required.	nty Property? Only non-profit organizations can sell alcohol on County	├ Yes No Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber:	

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

e of Production (cho	ose all that ap	bit).							
TV Movie or Special	Posteror III	TV Series / Pilot		TV Comme	rcial		Still Phot	:05	
Public Service Annou	incement [Industrial / Documentary	Г	Other:		w		***************************************	
ll any of the following	be needed or	r included*?							
Street Clo	sure			/ Yes	×	No			
Traffic / C	rowd Control			┌─ Yes	×	No			
Fire or Bu	rning			┌─ Yes	×	No			
Explosive	or Pyrotechn	lcs		┌ Yes	×	No			
Animals,	arge or Small			┌─ Yes	X	No			
Construct	ion of Any Kin	d		┌ Yes	X	No			
Large and	or Numerous	Vehicles		┌─ Yes	ĪX	No			
Helicopte	rs, Boats, etc.			┌─ Yes	×	No			
Stunts				Yes	X	No			
Other				[Yes	X	No			
For any marked Yes,									
	ements:								
	rements:								
	rements:	MA:							
Special Parking Requi			ilities, e	tc.)					
Special Parking Requi		Personnel, equipment, faci	lities, e	tc.)					
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Special Parking Requi			ilities, e	tc.)					
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Special Parking Requi City or County Service The following informathe industry, If exact	es Required: (Personnel, equipment, faci ed for local and state record t available, please estimate Number in Crew:	ds on pe as clos	roduction in sely as possil Nur	ble.			economí	c impa

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 call 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.

Signature of Applicant

Witness

Print Name of Applicant and Title

Print Name of Witness

Date

Date



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

Check the appropria	te box(es) bei	ow:
4	JNTY PROPERTY SELL AND CONS	PERMIT UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILIVI PERIVI		
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	In authorize	d parking areas only.
Deputies (How Many?):	None required.	
Deputies (NOW Marry :).	None required.	
Fee for Services:	. Y. si	Q 8 y a
Special Arrangements:	None.	
	Print Name:	Capt. Scott Lucia
	Signature:	Capt. Scott Lucia Coping agreeding Cap them have the Complete Start & College According to the Complete Start & College According to the Control of Start
	Title:	Special Events, Permits and Details
	Date:	24 August 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 appropri	ate box(es) bel	ow:		
* -	UNTY PROPERTY	PERMIT		
FILM PERM	ЛІТ			
		LEASE INDICATE BELOW Y WITH FOR THEIR EVEN	WHAT ARRANGEMENTS Y IT.	YOUR ORGANIZATION
Fire Guards (How Many?)	N/A	The state of the s		
ee for Services:	N/A			
Flammable Vegetation:	N/A			
First Aid Equipment:	N/A			
Fire Extinguishing:	N/A			
Special Arrangements:	CALL 911 AS NEEDE	ED .		
	Print Name:	RONALD L. MARTIN		
	Signature:	Ronald L. Martin	Organis signed by Rondolf I. Matte. Dir creditionald I. Matte, and artificians for a forced basic Countries. Expension and investigation bureau ematermatering historie one centricles (contries.) Expension and investigation bureau ematermatering historie one centricles (contries 17-12-MI).	
	Title:	FIRE MARSHAL		
	Date:	08/12/2015		



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

Check the appropri	ate box(es) belo	w:
┌─ SPECIAL EV	ENT PERMIT	
□ USE OF CO	UNTY PROPERTY P	PERMIT
FILM PERM	1IT	
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y 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 Coordinate any requ	for emergencies. Ft. Myers Beah Fire Department is the primary EMA provider. lests for additional services through them.
	Print Name:	Scott M Tuttle
	Signature:	Scott M Tuttle Print agents ben 1740 to the first of the state of the
	Title:	Deputy Director
·	Date:	8/10/2015



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

Check the appropriate box(es) bel	low:
SPECIAL EVENT PERMIT	
□ USE OF COUNTY PROPERTY	PERMIT
PERMIT TO SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	
AFTER REVIEWING THE APPLICATION, P WILL REQUIRE THE APPLICANT TO COMP	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking: Park in designated	areas. No event parking on Lee County maintained road rights-of-way.
, driving.	
Ingress and Egress: Use all established	means of ingress and egress.
	100 OTC 1
Special Arrangements: Use Lee County Sh	eriff's Office for assistance with traffic control, as needed.
**************************************	Description Addition
Print Name:	
Signature:	Bryan Miller Bristing the relate bury 50% suddit from some production of the control of the con
Title:	Senior Project Manager
Date:	August 11, 2015



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

Check the appropri	ate box(es) bel	low:		
☐ SPECIAL EV	'ENT PERMIT UNTY PROPERTY	PERMIT		
F PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVER	AGES WITHIN LEE COUNTY FAC	CILITIES
FILM PERM	1IT			
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P LICANT TO COMF	PLEASE INDICATE BELOV PLY WITH FOR THEIR EV	N WHAT ARRANGEMENTS YOU ENT.	JR ORGANIZATION
Illumination:	No illumination be Park is open from 7	fore 7 am. Lighting will not 7 am to dusk.	be required or permitted.	
Parking Areas:	Use designated pa	rking area.		
Special Arrangements:	Rental fee of \$250.	00 is required.		
	Print Name:	Alise Flanjack		
	Signature:	Alise Flanjack	Eligibility agreed by Assa Flanquist. 2N Introduce Flanquist and ear County Pens and Recoveries? Inc. and February Sept. 2017; 47: 64: 60. Date: 2015 68-67-79-13-12-64: 60.	
	Title:	Parks & Recreation Deputy	Director	
	Date:	8/7/2015		



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

Check the appropriat	e box(es) below:
•	NTY PROPERTY PERMIT ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE A	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Insurance Requirements:	Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to the applicants use of aforementioned event on Lee County property.
Special Ärrangements:	A certificate of insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FI 33902 as the certificate holder and as an additional insured. ***Please note a new certificate will need to be filed with this office prior to the event.
	Print Name: Mike Figueroa Signature: Title: Risk Program Manager Date: August 12, 2015



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/21/2015

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). Christy A Cordova FAX (A/C, No): 855-264-2329 PHONE (A/C. No. Ext): 1-800-554-2642 Option 1 Church Mutual Insurance Company AODRESS: cs7@churchmutual.com 3000 Schusler Lane INSURER(8) AFFORDING COVERAGE Merrill WI 54452 INSURER A: Church Mutual Insurance Company INSURED INSURER B: WESTMINSTER PRESBYTERIAN CHURCH OF FORT MYERS INC SUMMIT INSURER C: CHRISTIAN SCHOOL INSURER D : 9065 LIGON CT INSURER E : 33908-3602 FORT MYERS INSURER F: FL REVISION NUMBER: CERTIFICATE NUMBER: COVERAGES 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. ADOL SUBR POLICY EFF POLICY EXP LTR TYPE OF INSURANCE POLICY NUMBER COMMERCIAL GENERAL LIABILITY **EACH OCCURRENCE** \$ 1,000,000 PREMISES (En occurrence) CLABMS-MADE X OCCUR \$ 300,000 Y MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY 12/15/2014 12/15/2017 \$ 1,000,000 0080127-02-750026 GENERAL AGGREGATE \$ 3,000,000 GEN'L AGGREGATE LIMIT APPLIES PER. PRO-LOC PRODUCTS - COMPIOP AGG | \$ 1,000,000 X POLICY OTHER: COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY BODILY INJURY (Per person) OTUA YAA SCHEDULED AUTOS NON-OWNED AUTOS BODILY INJURY (Per accident) \$ ALL OWNED PROPERTY DAMAGE (Per accidant) HIRED AUTOS EACH OCCURRENCE UMBRELLA LIAB DCCUR AGGREGATE EXCESS LIAB CLAIMS-MADE DED RETENTION S WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY
ANY PROPRIETOR/PARTNER/EXECUTIVE
OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT NIA E.L. DISEASE - EA EMPLOYEE (Mandatory in NH)
If yes, essemble under
DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Ramarks Schedulo, may be attached if more space is required) Evidence of Liability Insurance for Church Service December 24, 2015 located at Bowdltch Point Park from 4:00 - 6:00 PM. Commercial General Liability Additional Insured: Lee County board of County Commissioners, subject to the coverage provided by the reference policy. RUAP 207 A220 CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lee County Board of County Commissioners 50 Estero Blvd For Myers Beach, FL 33931-2055 AUTHORIZED REPRESENTATIVE

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TOWN OF FORT MYERS BEACH 2523 Estero-Blvd Fort Myers Beach, Florida 33931 (239) 765-0202 ext. 103 Fax (239) 765-0909



PUBLIC WORKS DEPARTMENT	
Name of Event: <u>Christmas Eve Service at Bow</u>	
Date(s) of Event/Time: <u>/d-d-4-/5</u> 5pm-	545pm
Company managing trash removal:	
Type of trash receptacle:	
Number of receptacles:	
Party Responsible for clean-up and payment:	
Town Right-of-Way Parking Use (Please circle):	YES NO
Number of Spaces:	
Request to hang banner (Please circle):	YES NO
Road closure (Please circle):	YES NO
Bridge closure (Please circle)	YES NO
Public Works remarks: NO PAYGUL IN	Town
RIGHT OF WAY	
Public Works Approval:	Date: <u>08/27/2</u> 0/5



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:	
Other:	
	Print Name:
	Signature:
	Title:
	Date:

To see all the details that are visible on the screen, use the "Print" link next to the map.



