

EVENT PERMIT



Ordinance 14-15

JOG FOR JUSTICE 5K

STRATION

PERMIT NUMBER:

TMP2015-00266

Date(s) of Event:

November 7, 2015 from 8:00am until 5:00pm

Property Owner:

LEE COUNTY

Applicant:

LEE COUNTY LEGAL AID SOCIETY

Contact: ALINA GONZALEZ-DOCKI

Description:

Inaugural Jog for Justice 5K Run/Walk to benefit the general operating fund of

LCLA

Location of event:

7330 GLADIOLUS DR FORT MYERS 33908

LAKES REGIONAL PARK/US41 south, right on Gladiolus ***239-334-6118

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



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

TMP2015-00266



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

Title of Event / Name of Production	Jog for Justice 5k
Date(s) of Event / Production:	November 7, 2015
Location(s) of Event:	Lakes Regional Park, 7330 Gladiolus Drive, Fort Myers, Florida 33908
Name of Applicant:	Lee County Legal Aid Society, inc.
Applicant Address:	Post Office Box 9205 Fort Myers, Florida 33902
Applicant Phone Number:	239-334-6118
Contact Person: (If different from applicant)	Alina Gonzalez-Dockery
Contact Phone Number: (If different from applicant)	239-332-3277
Email Address:	A.Gonzalez-Dockery@Earthlink.net
Estimated Attendance:	150
Event Description: Include each activity, when activities take place, etc.	Lee County Legal Aid Society (LCLA) will hold its inaugural Jog for Justice 5k Run/Walk on November 7, 2015. This event will benefit the general operating fund of LCLA. Check In/Arrival: 8:00 a.m. Run starts: 8:30 a.m. Walk starts: 8:35 a.m.
Hours of Operation:	8:00 a.m. to 5:00 p.m.
STRAP # of Parcel:	26-45-24-o 00-00008.0000 . ±
Owner of Premises*:	Lee County Government

^{*}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? Park CF	
Are any temporary structures to be insta	alled for the event? Tyes X No	Туре:
Do you have the appropriate permits for	r the temporary structures?	Yes No
* For a 'Special Event' and 'Use of Coun indentified, including all parking areas.	ty Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event:	Essex Insurance Comany	
Note: Certificate of Insurance must be submitted	d at time of application	
Surety Company Bonding this Event (Na	ime 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		☐ 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 Lea	e County Legal Aid Society, Inc.	
Type of Food being Served: Water, orange	ge juice, fruit, muffins, donuts, bagels	
Section II - USE OF COUNTY PI	ROPERTY PERMIT	
Organization Sponsoring the Event: Lee	County Legal Aid Society, Inc.	
	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 & C	Consumer Services §496.405 or proof the organization is	s exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPTI	ON OF ALCHOLIC BEVERAGES PI	ERMIT
Is alcohol being sold/consumed on Cour If 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 numb (Required if alcohol is to be <u>SOLD</u> at the event)	per:	
Please note: A permit from the State of Florida I further details	Division of Alcoholic Beverages and Tobacco may a	lso be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

TV Movie or Special	TV Series / Pilot		TV Comme	rcial	П	Still Photos		
Public Service Announcement	☐ Industrial / Documentary		Other:			¥		
II any of the following be need	ed or included*?							
Street Closure			Yes	Г	No			
Traffic / Crowd Con	trol	***************************************	Yes		No			
Fire or Burning			T Yes		No			
Explosives or Pyrot	echnics		┌ Yes		No			
Animals, Large or S	mall		☐ Yes		No	***************************************		
Construction of Any	/ Kind		☐ Yes		No			
Large and/or Nume	rous Vehicles		☐ Yes	Г	No			
Helicopters, Boats,	etc.		T Yes		No			
Stunts			T Yes		No			
Other			T Yes	Г	No			
Special Parking Requirements:								
	d: (Personnel, equipment, facilit	iies, e	tc.)					
City or County Services Require The following information is rec	d: (Personnel, equipment, facilit quired for local and state records e not available, please estimate a	on pr	roduction in F		ı to tr	ack the economic impac		
City or County Services Require The following information is rec	juired for local and state records	on pr	roduction in F sely as possib	le.		ack the economic impac		
City or County Services Require The following information is reconstitution in the conduction of the conduction is reconstitution.	juired for local and state records e not available, please estimate a	on pr	roduction in F sely as possib Num	le.				

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.

Signature of Applicant

Witness

Print Name of Applicant and Title Executive Print Name of Witness

9 21 2015 Date Date Jog For Justice

Lee County Event Permit Application



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

Check the appropri	ate box(es) be	low:
F SPECIAL EV	ENT PERMIT	
∪SE OF CO	UNTY PROPERTY	PERMIT
		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM		
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, F LICANT TO COMI	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	In authorized	parking areas only.
Deputies (How Many?):	None require	d.
Fee for Services:		
pecial Arrangements:	None.	
	Print Name:	Capt. Scott Lucia
	Signature:	Copt. Sott. H. Suca
	Title:	Special Events, Permits and Details

5 October 2015

Date:



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) belo	ow:				
SPECIAL EV						
	UNTY PROPERTY	PERMIT				
FILM PERM	11T					
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLICANT TO COMPL	EASE INDICATE BELOV Y WITH FOR THEIR EVE	V WHAT ARRANGEMENTS NT.	YOUR ORGANIZATION		
Fire Guards (How Many?)	1 Certified Crowd M www.crowdmanage					
Fee for Services:	55.00 per tent over	900 sq ft.				
Flammable Vegetation:	Cleared from aroun	d tents				
First Aid Equipment:	call 911					
Fire Extinguishing:	propane kept 10 fee	t away from tent and secur	cooking tents must be NFPA96 or red as to not tip over	compliant, and all		
	\$1 \frac{1}{2}	¥-13				
Special Arrangements:	None					
	Print Name:	James Tanner				
	Signature:	James Tanner	Ogstally signed by James Tames ON con-James Tames, on-South Trail Fire District, our-Fire Marshat, enul-planes reconstruction on crufs Data 2014025 1154149 (1909)			
	Title:	Fire Marshal, South Trail F	ire District			
	Date:	October 5, 2015				



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

Check the appropria	te box(es) below:
☐ FILM PERM	JNTY PROPERTY PERMIT
AFTER REVIEWING THE WILL REQUIRE THE APPLI	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Treatment Facilities:	MA
Medical Personnel:	MA
Medical Supplies / Equipment:	MA
Safety Requirements:	
Fee for Services	NA Pl. Willed at the of source
Special Arrangements:	call 9. H as meded for something
	Print Name: $Scoll DW$ Signature: $Scoll DW$ Title: $Scoll DW$ Date: $Scoll DW$

Page | 8



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

Check the appropri	ate box(es) be	low:		
☐ SPECIAL EV	ENT PERMIT			
⋉ USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES		
FILM PERM	1IT			
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.		
Parking:	No event parking o	on or within 10 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 Sh	eriff's Office for assistance with traffic control as needed.		
	Drint Names	Decree Miller		
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller Digitally signed by Bryan D. Miller Date: 2015.10.08 13:27:30 -04'00'		
	Title:	Senior Project Manager		
	Date: October 8, 2015			



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

Check the appropri	ate box(es) be	low:				
SPECIAL E\	/ENT PERMIT					
⋉ USE OF CC	UNTY PROPERTY PERMIT					
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEV	ERAGES WITHIN LEE COUNTY	FACILITIES		
FILM PERN	/IT					
Remark.						
AFTER REVIEWING THE WILL REQUIRE THE APP			OW WHAT ARRANGEMENTS VENT.	YOUR ORGANIZATION		
Illumination:	There is no illumin	ation needed as event is r	unning in daylight hours.			
Parking Areas:	Please have all par volunteering for th	ticipants, staff and volunt ne event must pay for parl	eers park in designated parking sp king. Participants are covered in ev	ots. Anyone working or ent fee.		
Special Arrangements:	Your organization No painting or tem Event Banners may No golf carts or ve Please provide vol	is responsible for set up a nporary markings on the w y be hung at your reserved hicles are allowed on path unteers to direct traffic to	d pavilions.	er stations and first aid. ones.		
	Print Name:	Mary Beth Krause	Alise Flanjack			
	Signature:	Alise Flanjack	Digitally signed by Alixe Flanjack DN con-Alixe Flanjack cover County Parks and Recreation, ou, small aslock-elegoption, or US Date: 2015 10.07 18:35:30 -0400'			
	Title:	Lakes Supervisor	Deputy Director			
	Date:	10-7-15	10/7/15			



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

Check the appropriat	re box(es) below:
2:	NTY PROPERTY PERMIT ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
nsurance 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: October 15, 2015

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20	1000
1	CH W W. B.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/15/2015

(CER	IIIIOAILOIL					9/15/2015
PRODUCER East Main Street Insurance Services, Inc. Will Maddux PO Box 1298 THIS CERTIFICATION IS ISSUED AS A MATTER OF IN ONLY AND CONFERS NO RIGHTS UPON THE ONLY AND CONFERS NO RIGHTS UPON THE ONLY AND CONFERS NOT AMEND, ALTER THE COVERAGE AFFORDED BY THE POLICIE							HE (ND,	EXTEND OR	
Grass Valley, CA 95945 Phone: (530) 477-6521 Email: info@theeventhelper.com					INSURERS A	FFORDING COV	ERAGE	N	IAIC#
_	RED	550) 477-0521 Email. II	110@116646	maiorpor.com		sex Insurance Cor		3	9020
		Lee County Lega			INSURER B;				
		2211 Widman W		0	INSURER C:				
		Fort Myers, FL 3	3901		INSURER D:				
					INSURER E:				
		AGES							
A M P	NY RE AY PI OLICI	EQUIREMENT, TERM OR ERTAIN, THE INSURANCI ES, AGGREGATE LIMITS	CONDITION E AFFORDE	LOW HAVE BEEN ISSUED TO THE N OF ANY CONTRACT OR OTHER I ED BY THE POLICIES DESCRIBED I AY HAVE BEEN REDUCED BY PAID	DOCUMENT WITH R HEREIN IS SUBJEC' DCLAIMS.	T TO ALL THE TERM	ATHIS CERTIFICATE MAY MS, EXCLUSIONS AND COM	DE 19	SUED OR
INSR LTR	ADD'L INSRD	TYPE OF INSURAN	NCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	Carr		
		GENERAL LIABILITY					EACH OCCURRENCE INCLUDES BODILY INJURY & PROPERTY DAMAGE	\$	1,000,000
Α	Y	X COMMERCIAL GENER		3DS5440-M836036	11/07/2015	11/08/2015	MED EXP (Any one person)	\$	5,000
		CLAIMS MADE	X OCCUR	*			PERSONAL & ADV INJURY	\$	1,000,000 2,000,000
		Host Liquor Liabil		11/2			GENERAL AGGREGATE	\$	1,000,000
		GEN'L AGGREGATE LIMIT A		1			PRODUCTS - COMP/OP AGG DEDUCTIBLE	\$	1,000
			LOC				DEDUCTIBLE	\$	1,000
		Retail Liquor Liab	ility				COMBINED SINGLE LIMIT	\$	
		ANY AUTO		,			(Ea accident)	Φ	
		ALL OWNED AUTOS SCHEDULED AUTOS					BODILY INJURY (Per person)	\$	
		HIRED AUTOS					BODILY INJURY (Per accident)	\$	
		NON-OWNED AUTOS					PROPERTY DAMAGE		
							(Per accident)	\$	
		GARAGE LIABILITY		Alter Wells			AUTO ONLY - EA ACCIDENT	\$	
		ANY AUTO					OTHER THAN EA ACC AGG	\$	
		EXCESS/UMBRELLA LIABIL	ITY				EACH OCCURRENCE	\$	
			LAIMS MADE				AGGREGATE	\$	
								\$	
		DEDUCTIBLE						\$	
		RETENTION \$					1000	5	
		RKERS COMPENSATION AND					WC STATU- OTH- TORY LIMITS ER		
		LOYERS' LIABILITY PROPRIETOR/PARTNER/EXEC	CUTIVE				E.L. EACH ACCIDENT	\$	
	OFF	ICER/MEMBER EXCLUDED?	001142				E.L. DISEASE - EA EMPLOYEE	\$	
42 SALINING	SPE	CIAL PROVISIONS below				The second contract of contract of the second	E.L. DISEASE - POLICY LIMIT	\$	
	OTH	ER							
				1581.0					
DES	CRIPT	ION OF OPERATIONS / LOCA	TIONS / VEHIC	CLES / EXCLUSIONS ADDED BY ENDORSE	MENT / SPECIAL PROV	ISIONS			
Cei	tificate	e holder listed below is nam	ned as addition	onal insured per attached CG 20 26 07	04.				
							. il		
						18/8-	MITTE		
						000	MF 10/5		
					CANCELLA		*		
CE	RTIF	ICATE HOLDER	-		CANCELLA		BED POLICIES BE CANCELLED	BEFOR	RE THE EXPIRATION
		Lee County B.O.C			DATE THEREOF	THE ABOVE DESCRI	R WILL ENDEAVOR TO MAIL	30	DAYS WRITTEN
		1500 Monroe Stre Fort Myers, FL 33					R NAMED TO THE LEFT, BUT FA		
						IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, IT'S ACENTS OR REPRESENTATIVES:			
						DDESENTATIVE /	11 M 11		
						1.1/2	11 Maddwg		

Policy Number: 3DS5440-M836036

COMMERCIAL GENERAL LIABILITY CG 20 26 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insure	d Person(s) O	r Organization(s)		
Lee County B.O.C.C 1500 Monroe Street Fort Myers, FL 33901					
	2/27	yaa			
Information required to com	plete this Sched	dule, if not show	n above, will be show	n in the Declarations.	

© ISO Properties, Inc., 2004

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.



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

Check the appropria	te box(es) be	low:			
FILM PERMI	T ONLY				
AFTER REVIEWING THE AWILL REQUIRE THE APPLIC			HAT ARRANGEM	1ENTS YOUR (ORGANIZATION
Special Arrangements:					
Other:					
	Print Name:				
	Signature:				
	Title:				
	Date:				

