

# EVENT PERMIT

Ordinance 14-15

## NEW YEARS FIREWORKS CELEBRATIO

**PERMIT NUMBER:** TMP2015-00349**Date(s) of Event:** Fireworks to go off at 12:00am midnight on December 31, 2015 until 12:30am January 1, 2016**Property Owner:** LEE COUNTY**Applicant:** TOWN OF FORT MYERS BEACH**Contact:** KYLE KARCZEWSKI**Description:** Fireworks to go off at 12:00am midnight on December 31st, bridge will be closed to oncoming traffic from 12:00am until 1:00am**Location of event:** 950 ESTERO BLVD/81 OLD SAN CARLO BLVD FORT MYERS BEACH 33931  
FORT MYERS BEACH PIER/\*\*\*239-765-4222

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

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 12-21-15  
County Manager Date



**Lee County**  
*Southwest Florida*

## Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

TMP2015-00349



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)**

<b>Title of Event / Name of Production</b>	Town of Fort Myers Beach New Years Fireworks Celebration
<b>Date(s) of Event / Production:</b>	December 31, 2015
<b>Location(s) of Event:</b>	Fort Myers Beach Pier <b>450 Estero Blvd</b>
<b>Name of Applicant:</b>	Kyle Karczewski, Town of Fort Myers Beach
<b>Applicant Address:</b>	2525 Estero Blvd Fort Myers Beach, FL 33931
<b>Applicant Phone Number:</b>	239-765-4222
<b>Contact Person:</b> (If different from applicant)	
<b>Contact Phone Number:</b> (If different from applicant)	
<b>Email Address:</b>	kyle@fortmyersbeachfl.gov
<b>Estimated Attendance:</b>	30,000
<b>Event Description:</b> Include each activity, when activities take place, etc.	End of pier after pelican pit stop closed the morning of December 30th, 2015. Entire pier closed morning of December 31st. Fireworks to go off at 12am midnight on December 31st. Bridge will be closed to oncoming traffic from 12am - 1am.
<b>Hours of Operation:</b>	All day set up. 12am-12:30am fireworks show.
<b>STRAP # of Parcel:</b>	<b>244623W3000230000</b>
<b>Owner of Premises*:</b>	Lee County

\*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?

EC

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: \_\_\_\_\_

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

Surety Company Bonding this Event (Name and Address): \_\_\_\_\_

<p>Will Vehicles be Used as Part of This Event?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, automobile coverage must be included on the certificate of insurance.</p>	<p>Will Food be Available at this Event?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, products liability coverage must be included on the certificate of insurance.</p>	<p>Will Alcoholic Beverages be served/consumed at this Event?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, liquor liability coverage must be included on the certificate of insurance.</p>
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Name & Address of Organization Providing Food: \_\_\_\_\_

Type of Food being Served: \_\_\_\_\_

### Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: \_\_\_\_\_

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?

☐ 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: \_\_\_\_\_

(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



# Lee County Event Permit Application



## Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply):

- ☐ TV Movie or Special   
 ☐ TV Series / Pilot   
 ☐ TV Commercial   
 ☐ Still Photos  
☐ Public Service Announcement   
 ☐ Industrial / Documentary   
 ☐ Other: \_\_\_\_\_

Will any of the following be needed or included\*?

Street Closure	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Traffic / Crowd Control	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fire or Burning	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Explosives or Pyrotechnics	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Animals, Large or Small	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Construction of Any Kind	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Large and/or Numerous Vehicles	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Helicopters, Boats, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Stunts	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other	<input type="checkbox"/> Yes	<input 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: \_\_\_\_\_ Number of shooting days: \_\_\_\_\_  
number of rooms x number of nights

## **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 premises 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**

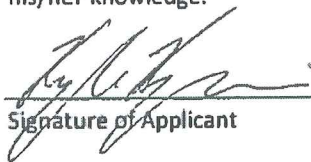


**SECTION V - AGREEMENT**

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

Kyle Karzewski - Town of Fort Myers Beach  
\_\_\_\_\_  
Print Name of Applicant and Title

11/18/15  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Witness

Radu N. N. N.  
\_\_\_\_\_  
Print Name of Witness

11/18/15  
\_\_\_\_\_  
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:

PRIVATE + PUBLIC AND PARKING

Deputies (How Many?):

2 SUPERVISORS

7PM - 3AM

15 DETAIL DEPUTIES

2 MARINE DEPUTIES

Fee for Services:

\$ 9,415

Special Arrangements:

CONTACT JEN HILLERY LCSO DETAILS (239) 477-1171  
TO SIGN PAPERWORK + ARRANGE PAYMENT PRIOR TO EVENT.

Print Name: SGT. TIM LAJOR

Signature: SGT. Tim L 99-164

Title: SERGEANT

Date: 12/10/15



**FORT MYERS BEACH FIRE DEPT**

17891 San Carlos Blvd., Fort Myers Beach, FL 33931

Tel (239)590-4206

Fax (239)463-6761

Fire Guards: (how many?) \_\_\_\_\_

Fee: \_\_\_\_\_

Flammable Vegetation: \_\_\_\_\_

First Aid Equipment: \_\_\_\_\_

Fire Extinguishing Equipment: \_\_\_\_\_

Special Arrangements: \_\_\_\_\_

Check list: Application \_\_\_\_\_ Site Plan \_\_\_\_\_ Description \_\_\_\_\_

Print Name

Approval Signature

Date

**LEE COUNTY SHERIFF'S DEPT**

15650 Pine Ridge Road, Fort Myers, FL 33908

Tel (239)477-1830 Fax (239)432-0268

Parking: PRIVATE PAID LOTS + PUBLIC LOTSDeputies (how many?) 2 SUPERVISORS, 15 DEPUTIES, 2 MARINE DEPUTIES PLUS BOAT + VEHICLES.Traffic Control: HOURS 7AM - 3AMBRIDGE CLOSURE, TRAFFIC CONTROL, MARINE UNIT + MAINTAIN SECURITY BY DETAIL UNITS.Fees: TOTAL = \$9,415.00 EXCLUDING ANY OVERTIME FOR LATE CALLS OR ARRESTS.Special Arrangements: CALL JEN HILLEY LC SO DETAIL UNITFOR PAYMENT + SIGNED PAPER WORK (239) 477-1171.

Check list: Application \_\_\_\_\_ Site Plan \_\_\_\_\_ Description \_\_\_\_\_

Sgt. Tim LAUER

Print Name

Sgt. J. L. 99-164

Approval Signature

12/10/15

Date

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

N/A

Special Arrangements:

applicant is responsible in writing with  
Fort Myers beach fire district for any necessary  
event coverage.

Print Name: SCOTT MITCHELL

Signature:

Title: Deputy Director

Date: 11/20/15



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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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 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. Coordinate with the Town of FMB and FDOT for permit approvals for roads under their jurisdictions and control. Any MOT Plan approved by FDOT for a bridge closure and for which impacts occur within Lee County maintained road portions shall be in accordance with FDOT Standard Index 600 Series and applicable portions of the MUCTD.

Print Name: Bryan Miller

Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller  
Date: 2015.11.23 12:16:59 -05'00'

Title: Senior Project Manager

Date: November 23, 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  
☒ 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.

Illumination:

No illumination permitted before 7 am.

Parking Areas:

We will be waiving the fee for 22 spots at Lynn Hall for Ft. Myers Beach (FMB) for set up and staff parking. FMB is responsible for closing off parking spots. Lee County Parks & Recreation (LCPR) will take down rope in grassy area for staging of Cert Vehicle. FMB will bring 10 porta-potties (8 regular & 2 handicap).

Special Arrangements:

Ft Myers Beach pier will be cleaned up immediately following the fireworks and Lynn Hall Beach property will be cleaned up by 9:00 am. on New Years Day by day workers hired by FMB. The pier will be pressure cleaned on January 2nd by FMB. FMB has provided LCPR a detailed action plan each agency responsibilities along with a time line.

Print Name: Alise Flanck

Signature:

*Alise Flanck*

Title:

LCPR Deputy Director

Date:

12/1/2015



Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT  
COUNTY ADMINISTRATION BUILDING - 4<sup>TH</sup> 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 applicants use of aforementioned event within Lee County.

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.

Subject to proof of insurance.

Print Name: Mike Figueroa


Signature:

Title:

Risk Program Manager

Date:

December 3, 2015

<b>CERTIFICATE OF COVERAGE</b>		
<b>Certificate Holder</b>  LEE COUNTY BOARD OF COUNTY COMMISSIONERS PO BOX 398 FORT MYERS FL 33902-0298	<b>Administrator</b>  Florida League of Cities, Inc. Department of Insurance and Financial Services P.O. Box 530065 Orlando, Florida 32853-0065  <b>Issue Date 12/3/15</b>	
<b>COVERAGES</b> THIS IS TO CERTIFY THAT THE AGREEMENT BELOW HAS BEEN ISSUED TO THE DESIGNATED MEMBER FOR THE COVERAGE 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 COVERAGE AFFORDED BY THE AGREEMENT DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH AGREEMENT.		
<b>COVERAGE PROVIDED BY: FLORIDA MUNICIPAL INSURANCE TRUST</b>		
<b>AGREEMENT NUMBER:</b> FMIT 0778	<b>COVERAGE PERIOD:</b> FROM 10/1/15	<b>COVERAGE PERIOD:</b> TO 10/1/16 12:01 Midnight Standard Time
<b>TYPE OF COVERAGE - LIABILITY</b>  <b>General Liability</b> <input checked="" type="checkbox"/> Comprehensive General Liability, Bodily Injury, Property Damage and Personal Injury <input checked="" type="checkbox"/> Errors and Omissions Liability <input checked="" type="checkbox"/> Supplemental Employment Practice <input checked="" type="checkbox"/> Employee Benefits Program Administration Liability <input checked="" type="checkbox"/> Medical Attendants/Medical Directors' Malpractice Liability <input checked="" type="checkbox"/> Broad Form Property Damage <input type="checkbox"/> Law Enforcement Liability <input checked="" type="checkbox"/> Underground, Explosion & Collapse Hazard  <b>Limits of Liability</b> * Combined Single Limit  Deductible \$2,500  <b>Automobile Liability</b> <input checked="" type="checkbox"/> All owned Autos (Private Passenger) <input checked="" type="checkbox"/> All owned Autos (Other than Private Passenger) <input checked="" type="checkbox"/> Hired Autos <input checked="" type="checkbox"/> Non-Owned Autos  <b>Limits of Liability</b> * Combined Single Limit  Deductible N/A	<b>TYPE OF COVERAGE - PROPERTY</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Buildings  <input type="checkbox"/> Basic Form  <input checked="" type="checkbox"/> Special Form  <input checked="" type="checkbox"/> Personal Property  <input type="checkbox"/> Basic Form  <input checked="" type="checkbox"/> Special Form  <input type="checkbox"/> Agreed Amount  <input checked="" type="checkbox"/> Deductible \$500  <input checked="" type="checkbox"/> Coinsurance 80%  <input type="checkbox"/> Blanket  <input checked="" type="checkbox"/> Specific  <input checked="" type="checkbox"/> Replacement Cost  <input type="checkbox"/> Actual Cash Value             </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> Miscellaneous  <input checked="" type="checkbox"/> Inland Marine  <input checked="" type="checkbox"/> Electronic Data Processing  <input checked="" type="checkbox"/> Bond  <input type="checkbox"/> </div> </div> <div style="text-align: center;">Limits of Liability on File with Administrator</div> <hr/> <b>TYPE OF COVERAGE - WORKERS' COMPENSATION</b> <input checked="" type="checkbox"/> Statutory Workers' Compensation <input checked="" type="checkbox"/> Employers Liability      \$1,000,000 Each Accident \$1,000,000 By Disease \$1,000,000 Aggregate By Disease  <input type="checkbox"/> Deductible N/A <input type="checkbox"/>	
<b>Automobile/Equipment - Deductible</b>  <input checked="" type="checkbox"/> Physical Damage    \$0 - Comprehensive - Auto    \$100 - Collision - Auto    Per Schedule - Miscellaneous Equipment		
<b>Other</b>  The limit of liability is \$200,000 Bodily Injury and/or Property Damage per person or \$300,000 Bodily Injury and/or Property Damage per occurrence. These specific limits of liability are increased to \$5,000,000 for General Liability and \$3,000,000 for Automobile Liability (combined single limit) per occurrence, solely for any liability resulting from entry of a claims bill pursuant to Section 768.28 (5) Florida Statutes or liability/settlement for which no claims bill has been filed or liability imposed pursuant to Federal Law or actions outside the State of Florida.		
<b>Description of Operations/Locations/Vehicles/Special Items</b>  RE: December 31, 2015 Fireworks Show. Events, activities, elections and functions authorized by the certificate holder involving the designated member while being held upon the premises of the certificate holder. The certificate holder is hereby added as an additional insured, except for Workers' Compensation and Employers Liability, as respects the member's liability for the above described event. <div style="text-align: right; margin-top: 20px;"> <i>OK MP</i>  <i>12/03/15</i> </div>		
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE AGREEMENT ABOVE.		
<b>DESIGNATED MEMBER</b>  TOWN OF FORT MYERS BEACH 2523 ESTERO BOULEVARD FORT MYERS BEACH FL 33931	<b>CANCELLATIONS</b> SHOULD ANY PART OF THE ABOVE DESCRIBED AGREEMENT BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED ABOVE, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE PROGRAM, ITS AGENTS OR REPRESENTATIVES.  <div style="text-align: center;">             _____  <b>AUTHORIZED REPRESENTATIVE</b> </div>	

18/09/2015 11:19

9886476258

GARDEN STATE

PAGE 01/02

AHN Randy 5 sheets

**DRAYTON INSURANCE BROKERS, INC.**

2590 CENTER POINT ROAD, SUITE 301  
BIRMINGHAM, ALABAMA 35215  
PHONE: (205) 854-5804  
FAX: (205) 854-5899

POST OFFICE BOX 94067  
BIRMINGHAM, ALABAMA 35220  
EMAIL: drb@draytonbrokers.com

**CERTIFICATE OF INSURANCE**

NO. 514013

We certify that insurance is afforded as stated below. This Certificate does not affirmatively or negatively amend, extend or alter the coverage afforded by the insurance policy and the insurance afforded is subject to all the terms, exclusions and conditions of the policy.

<b>INSURER</b>	Admiral Insurance Company	<b>POLICY NO.</b> CA000016477-04
<b>NAMED INSURED</b>	Garden State Fireworks, Inc. Fritz Pyrotechnics Group, LLC New Vernon Fireworks P.O. Box 403 Millington, NJ 07946	
<b>POLICY TERM</b>	March 1, 2015 to March 1, 2016; Both Days 12:01 A.M. Standard Time	
<b>COVERAGE</b>	Commercial General Liability: <input checked="" type="checkbox"/> Occurrence Basis <input type="checkbox"/> Claims Made Basis	
<b>LIMIT OF LIABILITY</b>	\$5,000,000 each occurrence, \$10,000,000 general aggregate, \$5,000,000 products/completed operations aggregate The limit of liability shall not be increased by the inclusion of more than one insured or additional insured.	
<b>INSURED OPERATIONS</b>	Public fireworks display and special effects contractor	

It is certified that, if named below, this policy includes as Additional Insureds 1) the sponsor(s), promoter(s), organizer(s) (including other entities having similar interests), of insured pyrotechnic events and/or 2) the owner(s) of real property (or barges) at which insured pyrotechnic events are held and/or 3) the owner(s), manager(s), tenant(s), mortgagee(s) (including other entities having similar interests), of buildings, stadiums, arenas and similar facilities at which insured pyrotechnic events are held and/or 4) the licensing or permitting authority, or other authority having jurisdiction, issuing licenses/permits for insured pyrotechnic events and/or 5) any other entity for which the insurance is required to be afforded under written contract. Coverage applies only as respects the legal liability of such Additional Insured(s) for bodily injury and property damage caused by the operations of the Named Insured. The insurance afforded any Additional Insured excludes liability for bodily injury or property damage arising from the Additional Insured's own negligent acts or omissions or from the failure of such Additional Insured to fulfill his obligations specified in its contract with the Named Insured.

The Insured has fully complied with the requirements of N.J.S.A. 21:3-5 by providing a surety bond in the amount of \$1,500 from Service Insurance Company, Inc., West Orange, NJ. This general liability insurance is not provided to comply with the terms of N.J.S.A. 21:3-5. It is not an alternative to, or a co-surety with, the required bond, nor does it afford an additional or supplemental bond, nor excess limits over the required bond. By accepting status as Additional Insured on this policy, on the back set out herein, the Additional Insured acknowledges and agrees that this policy is not a bond, or an alternative to a bond, issued under the terms of N.J.S.A. 21:3-5.

**NAME(S) OF  
ADDITIONAL INSURED(S)**

TOWN OF FT MYERS BEACH  
1731 OAK STREET  
FT. MYERS, FL 33931

LEE COUNTY, LEE COUNTY PARKS &amp; RECREATION, STATE OF FLORIDA, TOWN OF FT. MYERS BEACH, FL

**DISPLAY LOCATION**

FT. MYERS BEACH PIER

**DISPLAY DATE(S)**

JULY 4, 2015 DECEMBER 31, 2015

It is certified that this policy requires a 30 day minimal notice of cancellation between the Insurer and the Named Insured. In the event of such cancellation we will endeavor to mail 10 days written notice to the Additional Insured(s), whose name and address is shown herein, but failure to mail such notice shall impose no obligation or liability of any kind upon the Insurer and/or the undersigned.

DRAYTON INSURANCE BROKERS, INC.

MARCH 16, 2015 / OCTOBER 9, 2015

DATE OF ISSUE

A.J. STRINGER, PRESIDENT



Lee County Event Permit Application



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: \_\_\_\_\_

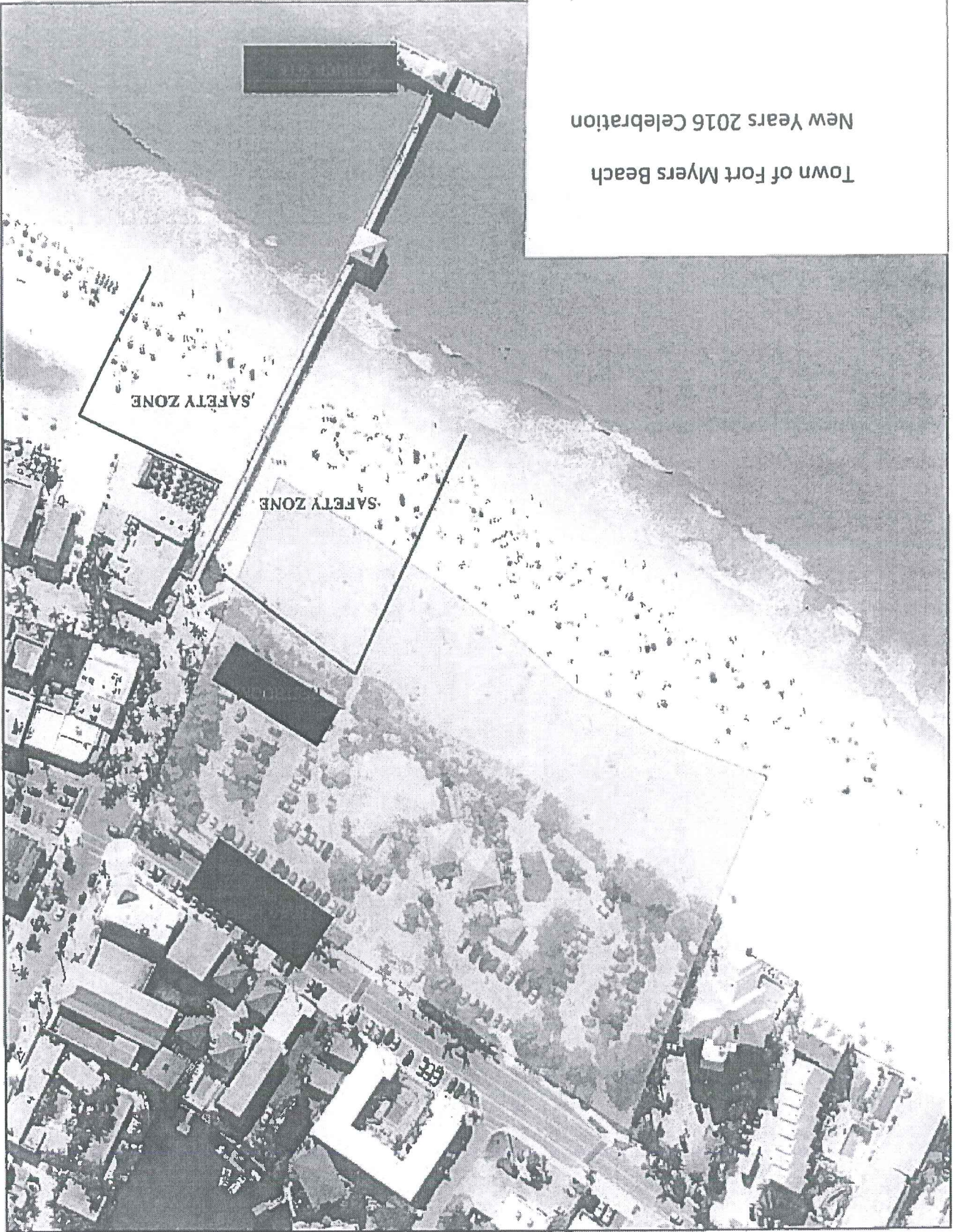
Title: \_\_\_\_\_

Date: \_\_\_\_\_





Town of Fort Myers Beach  
New Years 2016 Celebration







## TEMPORARY CLOSING OF STATE ROAD PERMIT

Date: 12/3/15Permit No. 2015-F-192-19

## Governmental Entity

REC. 12/3/15

Approving Local Government Town of Fort Myers Beach Contact Person Kyle Karczewski  
 Address 2525 Estero Blvd. Fort Myers Beach, FL 33931  
 Telephone 239-765-4222 Email Kyle@fortmyersbeachfl.gov

## Organization Requesting Special Event

Name of Organization Town of Fort Myers Beach Contact Person Kyle Karczewski  
 Address 2525 Estero Blvd. Fort Myers Beach, FL 33931  
 Telephone 239-765-4222 Email \_\_\_\_\_

## Description of Special Event

Event Title Town of Fort Myers Beach New Years Celebration Date of Event 12/31/15  
 Start Time 12:00 Am End Time 1:00 Am  
 Event Route (attach map) Close Manantzas Pass Bridge southbound (on coming traffic)  
at main street and allow two lanes of traffic to exit Fort Myers Beach for 40 mins.  
 Detour Route (attach map) \_\_\_\_\_

## Law Enforcement Agency Responsible for Traffic Control

Name of Agency Lee County Sheriff Department

## US Coast Guard Approval for Controlling Movable Bridge

Not Applicable ☒Copy of USCG Approval Letter Attached ☐

Bridge Location \_\_\_\_\_

The Permittee will assume all risk of and indemnify, defend and save harmless the State of Florida and the FDOT from and against any and all loss, damage, cost or expense arising in any manner on account of the exercise of this event.

The Permittee shall be responsible to maintain the portion of the state road it occupies for the duration of this event, free of litter and providing a safe environment to the public.

## Signatures of Authorization

Event Coordinator	<u>Kyle Karczewski</u>	Signature	<u>[Signature]</u>	Date	<u>12/1/15</u>
Law Enforcement	<u>Sgt. Tim Lopez 99-164</u>	Signature	<u>Sgt. A L 99-164</u>	Date	<u>12/3/15</u>
Government Official	<u>[Signature]</u>	Signature	<u>Town Mgr</u>	Date	<u>12-2-15</u>

## FDOT Special Conditions

Traffic Control shall comply  
 with the Federal Manual on Uniform  
 Traffic Control Devices (MUTCD)  
 and FDOT Design Standards 600 Series.

## FDOT Authorization

Name/Title David Smith Signature [Signature] Date DEC 09 2015

District Permit Coordinator

APPROVED





Temporary Closure of Matanzas Pass  
Bridge, FDOT Bridge # 120088.  
FDOT Section 12004, M.P. 0.138 to 0.539



Lee County  
Federal Manual on Uniform  
Traffic Control Devices (MUTCD)  
and FDOT Design Standards 600 Series

Traffic Control shall comply  
with the Federal Manual on Uniform  
Traffic Control Devices (MUTCD)  
and FDOT Design Standards 600 Series.

Lee Co  
Sheriff

Lee Co. Sheriff

THE JURISDICTION IS RESPONSIBLE FOR THE PLACEMENT  
AND MAINTENANCE OF SAFETY DEVICES IN THE PRESENT  
AREA OF ACCORDANCE WITH THE FEDERAL MANUAL ON  
UNIFORM TRAFFIC CONTROL DEVICES AND THE  
STATE'S LATEST TRAFFIC DEVICE PRACTICES.

Traffic Control shall comply  
with the Federal Manual on Uniform  
Traffic Control Devices (MUTCD)  
and FDOT Design Standards 600 Series.

Lee County  
Sheriff

Lee Co.  
Sheriff

Lee Co  
Sheriff

Estero Blvd North  
Lynn  
Hall  
Park

Time  
Square

Estero Blvd South

