

# **EVENT PERMIT**



Ordinance 14-15

# GREEK FEST 2016 JAN 28 PM 12: 03

**PERMIT NUMBER:** 

TMP2016-00002

Date(s) of Event:

February 26-27,2016 11:00am-11:00pm and February 28, 2016

12:00pm-5:00pm

239-481-2099

Property Owner:

ANNUNCIATION OF THE VIRGIN

Applicant:

Description:

Contact: JEN-HOPE BELIS

**3** 

Festival with food, dance performances, live music, church tours and carnival rides

benefiting the Annunciation Greek Orthodox Church

Location of event:

8210 CYPRESS LAKE DR FORT MYERS 33919

ANNUNCIATION GREEK ORTHODOX CHURCH/239-699-1489

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

Will the event be held on County Owned Property?

Will there be alcohol consumed or sold at the event?

Yes

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

1-28-16

# Event Application Checklist

- Fire Department
- Department of Transportation
- Parks and Recreation
- Risk Management
- **EMS**

CASE #: TMP 2016 - 0000 2

Date of Event: 2/26 - 2/28



# **Event Application**

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

TMP2016-00002



# ANNUNCIATION GREEK ORTHODOX CHURCH

January 13, 2016

To Whom It May Concern:

DAY

The Annunciation Greek Orthodox Church will use the premises for the annual Greek Festival during February 26, 27 & 28, 2016. The following is the list of dates and times.

**TIME** 

DATE

Friday	February 26, 2016	11:00 am to 11:00 pm	
Saturday	February 27, 2016	11:00 am to 11:00 pm	
Sunday	February 28, 2016	12:00 pm to 5:00 pm	
Rw. Fr. Deoug Proistamenos Signature	Yastot	1/13/16 Date	
Witness In	will look	1/13/14 Date	
W. const. o			
State of FL			
C . C 3 C			
County of LEE			
		OR ( acknowledged before	
Day of January, 2016	i, by KELSIE L GREGWA	who is (v) personal	ly known to me OR ( )
Produced		dentification.	
1.10dnrcn	n contractions and the contraction of the contracti	dentification.	
42/		Commission Evniros AC	1.4/5.10
Notary Public		Commission Expires 02	709/ AN 19
	KELSIF L &	TEGWARE 17197050 08.2019	

REV. FR. DEAN NASTOS, PROISTAMENOS

8210 Cypress Lake Drive, Fort Myers, Florida 33919-5116 elephone: (239) 481,2099 Fax: (239) 481,0504

Telephone: (239) 481,2099
Parish E-mail: officeagoc@gmailc.com

Website: www.annunciation.fl.goarch.org



#### **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) Title of Event / Name of **Greek Fest** Production Date(s) of Event / February 26 -28, 2016 Production: Annunciation Greek Orthodox Church Location(s) of Event: Name of Applicant: Jen-Hope Belis Applicant Address: 8210 Cypress Lake Drive Ft Myers, FL 33919 239-481-2099 Applicant Phone Number: Jen-Hope Belis Contact Person: (If different from applicant) **Contact Phone Number:** 239-699-1489 (If different from applicant) **Email Address:** greekfestfortmyers@gmail.com Estimated Attendance: 10,000-15,000 over 3 days **Event Description:** Greek Fest is a 3-day festival filled with delicious food, folk dance performances, live music, church tours and carnival rides. This is a fundraiser for the church and all events take place Include each activity, when activities take place, etc. on the grounds at Annunciation Greek Orthodox Church **Hours of Operation:** Friday & Saturday 11am-11pm and Sunday 12pm-5pm STRAP # of Parcel: 22-45-24-00 0001.018A Owner of Premises\*: Annunciation Greek Orthodox Church

<sup>\*</sup>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? 4 commercial	
Are any temporary structures to be insta	alled for the event? 🔀 Yes 📗 No	Type: Tents
Do you have the appropriate permits for	r the temporary structures?	X Yes No
* For a 'Special Event' and 'Use of Counindentified, including all parking areas.	ty Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event:	Stewart & Sons	
Note: Certificate of Insurance must be submitted	d at time of application	* · · · · · ·
Surety Company Bonding this Event (Na	me 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	▼ 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 Ar Providing Food:	nnunciation Greek Orthodox Church	
Type of Food being Served: Greek Cuis	sine gyros, souvlaki, pastichio, moussal	ka, baklava, lamb, etc.
#3 HIRADA oz nakelovál auzevá alakeztá enakladatásak Malinetovy Stalovej a tenakvejstájássza a	ZEPSEN BYRKYKEEN MEET NA EEN NA SKAND KANDERSKERKEEN KERSEEN EN HEN SKERKEEN NA HEN NEED NA HEN NEED NA HEN NE	a gasafan kanalada fannasi kenalad 2 kerenakas enata na ser me no haak, 19 hil hasali kanasa plagasa.
Section II - USE OF COUNTY PI		
Organization Sponsoring the Event:		
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	<i>y</i> :
Name of Charity:		
Address of Charity:	<i>3</i> 2	
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 exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPTI	ON OF ALCHOLIC BEVERAGES P	
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 numbers (Required if alcohol is to be <u>SOLD</u> at the event)	ber:	
<b>Please note:</b> A permit from the State of Florida further details	Division of Alcoholic Beverages and Tobacco may a	also be required; please call (239) 344-0885 for



# Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

	or Special	TV Series				Comme	rcial		Still Ph	OLUS		
Public Ser	rvice Announcement	☐ Industrial,	/ Documentary		Oth	er:						
any of th	ne following be need	ed or included*?									·	
	Street Closure				П	Yes		No				
	Traffic / Crowd Con	trol				Yes	E	No				
	Fire or Burning					Yes	Γ	No				
	Explosives or Pyrot	echnics				Yes		No	e, mer en år t			
	Animals, Large or S	mall				Yes	Г	No				
	Construction of Any	/ Kind	- 1448 MV - MTT, 15 1211 - 21552 1MW - 21 - 1581		П	Yes		No				
	Large and/or Nume	rous Vehicles				Yes	C	No				
	Helicopters, Boats,	etc.				Yes	<u> </u>	No				
	Stunts					Yes	E	No				
	Other					Yes	Г	No				
	·	urther details be	low:					<u> </u>	-			
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		urtner details be	low:						-			***
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ne followi	king Requirements: Inty Services Require ing information is rec y. If exact figures ar	d: (Personnel, e quired for local a e not available, p	quipment, facili	s on pro	oduc	s possib	le.		ack the	econor	nic imp	The second secon
oecial Parl ity or Cou	king Requirements:  unty Services Require  ing information is rec y. If exact figures ar	d: (Personnel, e quired for local a e not available, p	quipment, facili nd state record llease estimate	s on pro as close	oductely as	s possib Num	le.			econor	nic imp	The community of the control of the

#### **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	Print Name of Witness	
Date	Date	



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

Check the	appropriat	e box(es)	below:
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SPECIAL EV	ENT PERMIT		
☐ USE OF CO	UNTY PROPERTY	PERMIT	
PERMIT TO	SELL AND CONSU	IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY F.	ACILITIES
FILM PERM	IT		
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS Y LY WITH FOR THEIR EVENT.	OUR ORGANIZATION
Parking:	th authorized p	arking areas only.	
,			
Deputies (How Many?):	someone from We Day 2: 1 Deputy 1	1a-3p, 2 Deputies 3p-7p, 3 Deputies 7p-12a, 1 Superviso	
	has been someon Day 3: 1 Deputy		_
		•	
Fee for Services:			
Special Arrangements:			
			t y
	<b>.</b>		
	Print Name:	Capt. Scott Lucia	
	Signature:	<u> </u>	
	Title:	Special Events, Permits and Details	
	Date:	4 January 2016	



#### 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	iate havles) hel	OW.
• • •	. ,	
SPECIAL EV		REDNAIT
•	OUNTY PROPERTY	PERIVIT
FILM PERN	/11 I	
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Fire Guards (How Many?)	N/A	
Fee for Services:	0	,
Flammable Vegetation:	NOT WITHIN 10' (	OF ANY STRUCTURE (NFPA 101; 11.11.4.1)
First Aid Equipment:	1	
Fire Extinguishing:		HERS NOT PLACED LESS THAN 75' FROM ONE ANOTHER (NFPA 101; KING WITHIN TENTS (NFPA 101; 11.11.4.2)
Special Arrangements:	ALL ELECTRICAL TEMPORARY INS	INSTALLATIONS SHALL COMPLY WITH NEC 70 ARTICLE 590 TALLATIONS
	Print Name: Signature: Title: Date:	JACKIELQU KIPP  Ackielou Cop  FIRE INSPECTOR  01/20/20/6



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

Check the appropria	rte box(es) below:
SPECIAL EVI	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:	NIA
Safety Requirements:	WIR
Fee for Services	pt billed at the of since.
Special Arrangements:	to direct surgary vehicles to stand
	Print Name: Scott Trite  Signature: And  Title: Peruty Dire to  Date: 1/4/16
	11114



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

Check the	appropriate	box(es)	below:
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SPECIAL EV	/ENT PERMIT			
	UNTY PROPERTY		•	
PERMIT TO	SELL AND CONSU	JME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNTY	FACILITIES
FILM PERN	ЛІТ			
•				
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELO LY WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Parking:	No event parking o	n or within 10 feet of Lee C	County maintained road rights-of	-way.
Ingress and Egress:	Use all established	means of ingress and egre	SS.	
	en e			
Special Arrangements:	Use Lee County Sh	eriff's Office for assistance	with traffic control, as needed.	
	Approximately and the second s			
				-
	Print Name:	Bryan Miller	- Commence of the Commence of	
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2016.01.05 14:50:23 -05'00'	
	Title:	Senior Project Manager		
	Date:	January 5, 2016		



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

Check the appropri	ate box(es) belo	DW:
SPECIAL E	ENT PERMIT	
	UNTY PROPERTY	
PERMIT TO	SELL AND CONSU	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERN	AIT	·
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PILICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Illumination:	N/A	
Parking Areas:	N/A	
Special Arrangements:	Event is not on Co	ounty Park property and will not affect county park operations or programs
:	Print Name: Signature:	Alise Flanjack  Alise Flanjack
	Title: Date:	Deputy Director  January 4, 2016
Greek Figt 201		



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

Check the appropria	te box(es) bel	low:	
区 SPECIAL EVE	NT PERMIT		
USE OF COU	NTY PROPERTY	PERMIT	
PERMIT TO S	ELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	FACILITIES
FILM PERMIT	Γ		
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS PLY WITH FOR THEIR EVENT.	YOUR ORGANIZATION
Insurance Requirements:	occurrence to pr	eral liability insurance with minimum limits of One Million Do otect against bodily injury and/or property damage relative event within Lee County.	ollars (\$1,000,000) per to applicants use of
Special Arrangements:	A Certificate of Ir	nsurance shall be submitted as evidence of the required cove	erage listing Lee County
		Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the ce	
·	Print Name:	Mike Figueroa	
	Signature:	· · · · · · · · · · · · · · · · · · ·	
	Title:	Risk Program Manager	•
	Date:	January 6, 2016	



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

Check the appropria	ate box(es) bel	ow:	•
FILM PERM	IT ONLY		
AFTER REVIEWING THE AVELOWING THE APPLI	APPLICATION, P CANT TO COMP	LEASE INDICATE BELOW WHAT ARRA LY WITH FOR THEIR EVENT.	ANGEMENTS YOUR ORGANIZATION
Special Arrangements:			
	Continued to the control of the cont		
Other:			
	Print Name:		. ·
-	Signature:		<del></del>
	Title:		·
	Date:		3.
			M <sub>e</sub>



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/04/2016

1	Summer.		Command to	2.2	2 ~~ 2		Marrie B State				U 1/U4/2U	10
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.												
1	IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to											
ŧ	he te	rms and conditions	s of the policy, c	ertain	polic	ies may require an endo	rseme	nt. A stateme	nt on this cer	lificate does not confer rig	hts to the	on the second
		icate holder in lieu	of such endorse	ment(	s).		CONTA	CT	·			
PRODUCER CONTACT NAME: Stewart & Sons Insurance, Inc. PHONE						200 200	2 2011	IFAX	): 239-275-4	446		
Oles	eart or	Conto modrance, mo.							); 200-210-4			
n o	r r	ranen					E-MAIL ADDRESS: info@stewartandsonsinsurance.com			1 1		
P.O.Box 60029						INSURER(S) AFFORDING COVERAGE INSURER A; The Cincinnati Insurance Company				10677	-	
	Myer	S	FL 33906						Jiman moutern	20 Company	110011	
INSU	KEU	Annunication o	f the Virgin Mary 0	Sreek			INSURER 8:					——
		Orthodox Chur		,,,,,,,,,,			INSURI					
	-						INSURER D;					
		8210 Cypress I	Lake Drive	r	E1 00040		INSUR					
Salaran dalam	WOODS AND ADDRESS	Fort Myers		-		· · · · · · · · · · · · · · · · · · ·	INSUR	ER F:				
		GES	CERTIF				111201		NUDED HALLED	REVISION NUMBER:	DIOD	
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.												
INSR		TYPE OF INSURAN	CE	ADDL INSR	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(WWIDDIALAA)	LIMITS	) 	
	GEN	ERAL LIABILITY				·					\$	1000000
		COMMERCIAL GENERA	LLIABILITY			CAP5228293				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	500000
		CLAIMS-MADE	OCCUR					08/17/15	08/17/16	MED EXP (Any one person)	\$	5000
Α				Υ						PERSONAL & ADV INJURY	\$	1000000
	1	Hired & NonOwned Auto			1					GENERAL AGGREGATE	\$	2000000
	GEN	LAGGREGATE LIMIT AP	PLIES PER:							PRODUCTS - COMPIOP AGG	\$	2000000
		POLICY PROJ-	LOC								\$	
	AUT	OMOBILE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)	\$	
		ANY AUTO					i i	:		BODILY INJURY (Per person)	\$	
		ALL OWNED AUTOS	SCHEDULED AUTOS				-	-		BODILY INJURY (Per accident)	\$	
		HIRED AUTOS	NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$	•
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	4	EXCESS LIAB	CLAIMS-MADE			CAP5228293		08/17/15	08/17/16	AGGREGATE	\$	3000000
A.		DED RETENTIO									\$	
<del> </del>	WO	RKERS COMPENSATION PLOYERS' LIABILITY	·	<del> </del>	<b></b>					WC STATU- OTH-		
		PLOYERS' LIABILITY Y PROPRIETOR/PARTNE								E.L. EACH ACCIDENT	\$	······································
OF		FICER/MEMBER EXCLUDED?		N/A						EL DISEASE - EA EMPLOYEE	\$	
	If ye	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POLICY LIMIT	S	
-	ue	SCRIPTION OF OPERAL	IOMS BEIOW	├					<del> </del>			
					İ					The state of the s		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)												
RE: Greek Festival												
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									15%	104.		

