

EVENT PERMIT



Ordinance 14-15

SUNRISE SERVICE

PERMIT NUMBER:

TMP2016-00094

Date(s) of Event:

March 27, 2016 from 5:30am until 7:30am

Property Owner:

LEE COUNTY

Applicant:

FMB INISTERIAL ASSOCIATION

Contact: RON DAVISON

239-433-0207

Description:

Eatser Sunrise worship service for the community and visitors of Fort Myers Beach

Location of event:

950 ESTERO BLVD FORT MYERS BEACH 33931 LYNN HALL MEMORIAL PARK/***239-433-0207

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

3-12-16



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



Event Application

Check the appropriate box(es) below:

X	SPECIAL EVENT PERMIT
	USE OF COUNTY PROPERTY PERMIT
Г	PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
Г	FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Sunrise Service to Celebrate the Resurrection of Christ
Date(s) of Event / Production:	March 27, 2016
Location(s) of Event:	Lynn Hall Pier and Connecting Beach 450 ESTCTO BIVA
Name of Applicant:	Beach Ministerial Association
Applicant Address:	1473 Palm Woode Dr. Ft. Myers, Fl 33919
Applicant Phone Number:	239-433-0207
Contact Person: (If different from applicant)	Ron Þavisらん
Contact Phone Number: (If different from applicant)	
Email Address:	Mail2rond@yahoo.com
Estimated Attendance:	800
Event Description: Include each activity, when activities take place, etc.	Easter Sunrise worship service for the community and visitors of Fort Myers Beach. The service is an annual event, free of charge, and sponsored by the Beach Ministerial Association which represent the Christian congregations located on Estero Island.
Hours of Operation:	5:30 - 7:30 a.m.
STRAP # of Parcel:	944623103000230000 244623W3000230000
Owner of Premises*:	Lee County

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





Fill out the following questions for allpermit types:

What is the Zoning C	assification of the	premises?		and the last two two transfers of the last t
Are any temporary st	ructures to be inst	alled for the event? ☐ Yes	Type:	
Do you have the app	opriate permits fo	r the temporary structures?	Yes	⊠ No
* For a 'Special Evenindentified, including		ty Property' permit, submit a site plar	with all proposed fa	acilities and activities
Insurance Company	nsuring the Event:	AON RISK SERVICE	S. INC OF I	FLORIDA'
Note: Certificate of Insur	ance must be submitte			
Surety Company Bon	ding this Event (Na	nme and Address):		
Will Vehicles be Use Even		Will Food be Available at this Event		olic Beverages be imed at this Event?
☐ Yes	▼ No	⊤ Yes No	┌─ Yes	▼ No
if yes, automobile coincluded on the certif		If yes, products liability coverage must be included on the certificate of insurance.		bility coverage must be certificate of insurance.
Name & Address of O Providing Food:	Organization			
Type of Food being S	erved:			
Section II - USE	OF COUNTY P	ROPERTY PERMIT		
Organization Sponso	oring the Event: Bea	ach Ministerial Association		
Fill out this portion	or applications for	Solicitation in the County Rights-of-	Nay:	
Name of Charity:				
Address of Charity:				
Phone Number:				
Non-profit certificat	e/registration num	ber:		
(Proof of registration with t	he Dept. of Agriculture &	Consumer Services §496.405 or proof the organiza	tion is exempt from this re	quirement. §316.2045)
Section III - SAL	E/CONSUMPT	ION OF ALCHOLIC BEVERAGE	S PERMIT	
Is alcohol being sold, If Yes, then a "Lee County Al		nty Property? Only non-profit organizations can sell alcohol on Co	┌── Yes ounty Property.	☐ No
Non-profit certificate (Required if alcohol is to be		ber:		
Please note: A permit fro	om the State of Florida	Division of Alcoholic Beverages and Tobacco r	nay also be required; ple	ase call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

oe of Production (choose a TV Movie or Special	ll that apply): TV Series / Pilot	TV Commercial
	nent Industrial / Documentary	Other:
II any of the following be r		
Street Closure		┌ Yes ┌ No
Traffic / Crowd	Control	┌─ Yes ┌─ No
Fire or Burning		☐ Yes ☐ No
Explosives or F		┌─ Yes ┌─ No
Animals, Large		Yes No
Construction of		┌─ Yes ┌─ No
	lumerous Vehicles	┌─ Yes ┌─ No
Helicopters, B	oats, etc.	☐ Yes ☐ No
Stunts		Yes No
Other		┌──Yes ┌──No
Special Parking Requireme	nnts:	
	equired: (Personnel, equipment, faci	cilities, etc.)
The following information the industry. If exact figu	is required for local and state record	rds on production in Florida to track the economic im te as closely as possible.
Number in Cast:	Number in Crew:	
Total budget:	-	spent in Lee County:
Hotel room nights:	Number of shootir	ing days:
	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 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.



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

Check the appropri	ate box(es) bel	low:
☐ SPECIAL EV	ENT PERMIT	
USE OF CO	UNTY PROPERTY	PERMIT
F PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IIT	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	In authorized pa	rking areas only.
	-	
Deputies (How Many?):	None required.	
Fee for Services:		
Special Arrangements:	None.	
	Print Name:	Capt. Scott Lucia
	Signature:	Capt. Scott K. Lucia
	Title:	Special Events, Permits and Details
	Date:	23 Feb 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 appropriate SPECIAL EVE VISE OF COU	NT PERMIT NTY PROPERTY					
AFTER REVIEWING THE A	PPLICATION, PL ANT TO COMPL	EASE INDICATE Y WITH FOR THE	BELOW IR EVEN	WHAT ARRANGEMI T.	ENTS YOUR ORGA	NIZATION
Fire Guards (How Many?)				or Pyrotechnic review needed	s, vehicles,	or
Fee for Services:						
Flammable Vegetation:						
First Aid Equipment:						
Fire Extinguishing:						
Special Arrangements:						
•	Print Name:	d/Chief M	artin			
	Signature:	Ronald L. Mai	rtin	Diggadly signed by Renald I, Martin DN: co-6mould I, Martin meter lalyers Reach Fire Central Detricts, number Provention and revestigation formum, email-martin@finition.org, cells Detec 2016.02.26 05.54.95-05007		
	Title:	Fire Marsh	hal			
	Date:	26-FEB-20	16			



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

Check the appropriate box(es) below:

SPECIAL EV	VENT PERMIT DUNTY PROPERTY F	PERMIT
FILM PERM		
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	No additional preca	
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. To arrange special event coverage, contact our office at
	Signature: Title:	Benjamin Abes Chief
	Date:	02/23/2016



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

Check the appropri	ate box(es) belo	ow:	
F SPECIAL EV	ENT PERMIT		
	UNTY PROPERTY		
PERMIT TO	SELL AND CONSU	IME ALCOHOLIC BEVERAGES	WITHIN LEE COUNTY FACILITIES
FILM PERM	IIT		
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELOW WH LY WITH FOR THEIR EVENT.	IAT ARRANGEMENTS YOUR ORGANIZATION
Parking:	Park in designated	areas.	:
-			
Ingress and Egress:	Use all established	means of ingress and egress.	
Special Arrangements:	Use Lee County Sh	eriff's Office for assistance with tra	ffic control as needed.
	,		
	Print Name:	Bryan Miller	
	Signature:		tally signed by Bryan D. Miller 2: 2016.03.10 14:05:33 -05'00'
	Title:	Senior Project Manager	
	Date:	March 10, 2016	



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

Check the appropri	ate box(es) be	elow:			
☐ SPECIAL EV	/ENT PERMIT OUNTY PROPERT	V PERMIT			
**			C BEVERAGES \	WITHIN LEE COUN	TY FACILITIES
FILM PERN					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
AFTER REVIEWING THE WILL REQUIRE THE APP	LICANT TO COM	PLY WITH FOR T	HEIR EVENT.		's your organization
Illumination:	Event org	junizer is if medea	respusible L	c to privide	tenporary
Parking Areas:	All vehicles remain	ning after the event	t will be required t	to pay the \$2.00 per h	our parking fee.
Special Arrangements:	Rental fee waived	but still required to	pay for staff.		
,					
	Processorin				,
			· · · · · · · · · · · · · · · · · · ·		
	Print Name:	Alise Flanjack			
	Signature:	Alse	Flanzack		
	Title:	Lee County Parks	& Recreation Dep	uty Director	
	Date:	February 15, 2016			



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:
Land State of the	NTY PROPERTY PERMIT ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	PPLICATION, 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 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: March 10, 2016

CORD

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 03/08/2016

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(ies) must have ADDITIONAL INSURED provisions or 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).

this certificate does not confer rights to the certificate holder in fied of such choose mention.				
PRODUCER	CONTACT NAME:			
Aon Risk Services, Inc of Florida	PHONE (A/C, No, Ext): (866) 283-7122 FAX (A/C, No,): 800-363-0105			
Suite 1000	E-MAIL ADDRESS:			
Tampa FL 33607 USA	INSURER(S) AFFORDING COVERAGE			
INSURED	NSURER A: The Princeton Excess & Surp Lines Ins Co	10786		
357203 Beach United Methodist Church	INSURER B:			
PO Box 5090 Fort Myers Beach FL 33932 USA	INSURER C:			
FORE Myer's Beach FE 33932 USA	INSURER D:			
	INSURER E:			
	INSURER F:			

THE RESIDENCE OF THE PARTY OF T	77.000.000.000.000.000.000.000.000.000.	REVISION NUMBER:
COVERAGES	CERTIFICATE NUMBER: 570061388919	REVISION NUMBER.
COVERAGES	OLIVIII IONILL INDINDENTI O. COC. COC.	

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.

Limits shown are as requeste

E)	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY FAIR OF UNITS.							
INSR LTR	SR TYPE OF INSURANCE INST		SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	HAOD	4440	N2-A3-RL-0000017-06	12/31/2015	12/31/2016	EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR			Excess GL	8	rions	DAMAGE TO RENTED PREMISES (Ea occurrence)	
				SIR applies per policy ter	ns & condi	10115	MED EXP (Any one person)	
	X SIR \$1,000,000						PERSONAL & ADV INJURY	
							GENERAL AGGREGATE	\$1,000,000
1	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	
1	JECI L							
	OTHER:							
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	
							BODILY INJURY (Per person)	
	ANY AUTO OWNED SCHEDULED						BODILY INJURY (Per accident)	
	AUTOS ONLY AUTOS HIRED AUTOS NON-OWNED						PROPERTY DAMAGE (Per accident)	
	ONLY AUTOS ONLY							
-	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	
1							AGGREGATE	
1								
	DED RETENTION	_					PER OTH-	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						The state of the s	
1	ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	
	(Mandatory in NH)	10.11					E.L. DISEASE-EA EMPLOYEE	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	FS /A	CORD	101 Additional Remarks Schedule, may be	attached if more	space is require	ed)	

RE: Community Easter Sunrise Service at the Pier at Lynn Hall Park, Fort Myers Beach, FL on March 27, 2016, Time: 5:30 am - 7:30 am. Lee County Board of County Commissions is included as Additional Insured in accordance with the policy provisions of the General Liability policy.

or MP 03/10/16

CERTIFICATE HOLDER	
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CANCELLATION

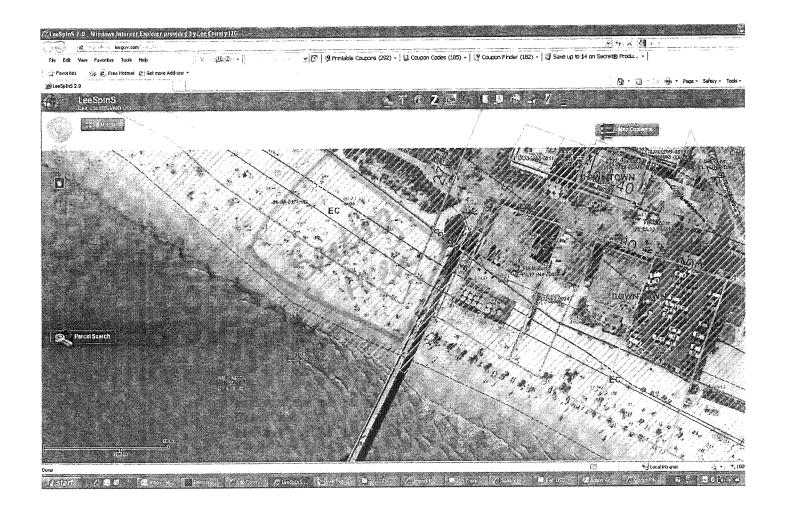
AUTHORIZED REPRESENTATIVE

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE

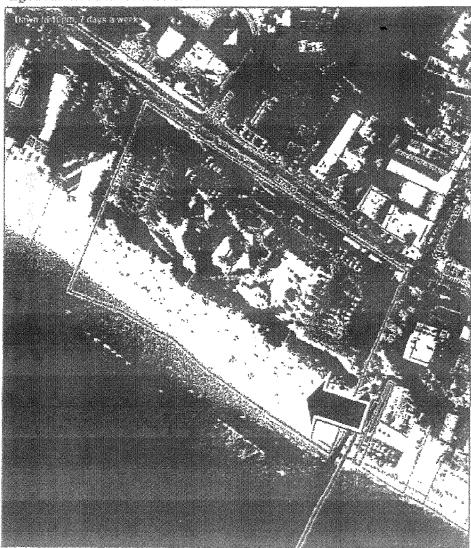
Lee County Board of County Commissioners Attn: Risk Program Manager PO Box 398

Fort Myers FL 33902 USA

Aon Pish Services Inc. of Florida









John E. Manning District One

Cecil Pendergrass

Larry Kiker District Three

Mike Hamman District Four

Frank Mann District Five

Roger Desjarlais County Manager

Richard Wm. Wesch County Attorney

Donna Marie Collins County Hearing Examiner

25-

February 15, 2016

To Whom It May Concern,

The Beach Ministerial Association of Fort Myers Beach is granted permission to use the Lynn Hall Memorial Park and Pier at 950 Estero Blvd., Fort Myers Beach, for their 2016 Easter Sunrise Service event on Sunday, March 27, 2016 as detailed in the Lee County Use of County Property Application.

All vehicles remaining after the event will be required to pay the \$2 per hour parking fee.

No banners or signage can be attached to the building or any county structure. All material and any litter accumulated from the event should be picked up and properly disposed.

Sincerely,

Zoran Viskovic

Lee County Parks & Recreation Senior Supervisor



REQUEST FOR FEE WAIVER

LEE COUNTY PARKS AND RECREATION 3410 Palm Beach Boulevard Fort Myers, FL 33916 Phone (239) 533-7275

This form must be completed and returned with a copy of the Agency's 501-C Non-Profit Status Certificate 10 days in advance of the date requested.

Certificate to days in advance of the date requested.
Date Form Completed:
Name of Agency or Organization: BEACH MINISTERIAL ASSOCIATION
Contact Person: Row DAVISON Phone #: [339] 433-0207
Address: 1473 PALM WOODE DE FORT MYERS, FL 33919
Requested Park/Facility: LYNN HALL PARK INCUDING BEARH PIER AND CONNECTIVE
Location within that Park/Facility:
Date of Activity: MARCH 27, 2016 Time of Activity: 5:30 - 1:30 AN
Type of Activity: EASTER SOURISE SERVEE E C. 'N mb. of Participants: 800
Fees you are Requesting to have Waived: RENTAL FEE OF \$500 FOL USE OF DARK
Reason applying for Fee Waiver (list benefits to Lee County if fee is waived): BASEN ON PREPENDENT -
THIS IS A NOW PROFIT EVENT - FEE WAIVER WILL ENABLE THIS EVENT,
WHICH HAS BEEN A COMMUNITY TRADITION SINCE ASS, TO TAKE DLACE'
5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
For Office of Man's
Manager/Supervisor: Approved Denied 501-C Attached: Yes No
Justification: COMMUNITY EVENT - PROVIDING THE EASTER SUNAISE SERVICE SINCE
Signature: Date: 2/15/16
Director of Parks and Recreation: Approved Denied
Justification: Commonty Event
Signature: Date: 2/15/16