

EVENT PERMIT



Ordinance 14-15

COUNTY ADMINISTRATION

2016 JUN 21 PM 1: 05 OURTH OF JULY FIREWORKS

PERMIT NUMBER: TMP2016-00178

Date(s) of Event: July 4, 2016 from 5:00pm until 11:30pm, end of pier after Pelican Pit Stop

closed the evening of July 3, 2016, entire pier closed after 5pm on July 4,

Property Owner:

LEE COUNTY

Applicant:

TOWN OF FORT MYERS BEACH

Contact: MAUREEN RISCHITELLI

Description:

Fourth of July Fireworks Display, end of pier after Pelican Pit Stop closed the evening of July 3, 2016, entire pier closed after 5pm on July 4, 2016, Fireworks go

off at 10pm, bridge closed from 10pm-11:30pm, pier closed entire night for cleanup

Location of event:

950 ESTERO BLVD/81 OLD SAN CARLO BLVD FORT MYERS BEACH 33931

FORT MYERS BEACH PIER/***239-765-0202

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?

N.

Will a bond be posted for this event?

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners

Lee County, Florida

County Manager

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

TMP2016-00178



Event Application

Check the appropriate box(es) below:

- ▼ SPECIAL EVENT PERMIT
- ▼ USE OF COUNTY PROPERTY PERMIT
- F PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)		
Title of Event / Name of Production	Fourth of July Fireworks		
Date(s) of Event / Production:	July 4, 2016 between 5:00 pm and 11:30 pm		
Location(s) of Event:	950 Estero Blvd/81 Old San Carlos Blvd Fort Myers Beach FL 33931 Fort Myers Beach Pier/end of pier after Pelican Pit Stop 239-765-0202 ext 188		
Name of Applicant:	Town of Fort Myers Beach		
Applicant Address:	2525 Estero Blvd Fort Myers Beach, FL 33931		
Applicant Phone Number:	239-765-0202		
Contact Person: (If different from applicant)	Maureen Rischitelli, Director Administrative Services		
Contact Phone Number: (If different from applicant)	239-765-0202		
Email Address:	Maureen@fortmyersbeachfl.gov		
Estimated Attendance:	30,000		
Event Description: Include each activity, when activities take place, etc.	Fourth of July Fireworks End of Pier after Pelican Pit Stop closed the evening of July 3 Entire pier closed after 5 pm on July 4 Fireworks go off at 10 pm Bridge closed from 10pm to 11:30 pm Pier closed the entire night while the fireworks are cleaned up		
Hours of Operation:	All day set up 10 pm to 10:30 pm is the allotment for the fireworks show		
STRAP # of Parcel:	Right of Way 244 663 663 6000 230 000		
Owner of Premises*:	Lee County		

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



Fill out the following questions for all permit types:

What is the Zoning (Classification of the	premises? Fort Myer	s Beach	***************************************	
Are any temporary s	tructures to be insta	alled for the event?	r Yes ⊼ No	Түре:	
Do you have the app	ropriate permits fo	r the temporary struc	tures?	T Yes	L_ No
* For a 'Special Ever Indentified, including		ty Property' permit, :	submit a site plan wi	th all proposed f	acilities and activities
Insurance Company	Insuring the Event:	Florida League of Citie	25		
Note: Certificate of Insu	rance must be submitte	d at time of application			
Surety Company Bo	nding this Event (Na	me and Address):			*CATALOG CATALOG CATAL
Will Vehicles be Us Ever		Will Food be Availa	ible at this Event?		olic Beverages be imed at this Event?
☐ Yes	▼ No	☐ Yes	⊠ No	┌─ Yes	▼ No
If yes, automobile of included on the certi	•	If yes, products llabili included on the cert			cility coverage must be certificate of insurance.
Name & Address of Providing Food:	Organization				NAMES OF THE STATE
Type of Food being	Served:				
Section II - USE	OF COUNTY PI	ROPERTY PERMI	T		
Organization Spons	oring the Event:				
Fill out this portion	for applications for	Solicitation in the Co	ounty Rights-of-Way	7:	
Name of Charity:				···	
Address of Charity:	Adaptic Control of the Control of th		namental and the second se		
Phone Number:					
Non-profit certifical	te/registration num	ber:			
(Proof of registration with	the Dept, of Agriculture & (Consumer Services §496.405	or proof the organization I	s exempt from this rec	quirement, §316.2045)
Section III - SAI	E/CONSUMPTI	ON OF ALCHOLI	C BEVERAGES P	ERMIT	
Is alcohol being sold If Yes, then a "Lee County A		nty Property? Only non-profit organization	is can sell alcohol on County		№ No
Non-profit certificat (Required If alcohol is to be		oer:	anna agagagagagaga alkan atmanyayan ayan ayan ayan ayan ayan a	3000000	
Please note: A permit fr- further details	om the State of Florida I	Division of Alcoholic Beve	rages and Tobacco may a	ilso be required; plei	ase call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

TV Movie or Special TO Se	eries / Pilot
Public Service Announcement Indust	strial / Documentary C Other:
Will any of the following be needed or include	led*?
Street Closure	☐ Yes ☐ No
Traffic / Crowd Control	☐ Yes ☐ No
Fire or Burning	. Yes ☐ No
Explosives or Pyrotechnics	☐ Yes ☐ No
Animals, Large or Small	☐ Yes ☐ No
Construction of Any Kind	T Yes T No
Large and/or Numerous Vehicle	es T Yes T No
Helicopters, Boats, etc.	☐ Yes ☐ No
Stunts	☐ Yes ☐ No
Other	┌─ Yes ┌─ No
Special Parking Requirements:	
City or County Services Required: (Personn	and navigurant facilities at a
city of codinty services necloned. The isom	nei, equipment, racintres, etc.)
City of County Services Acquired. (Person	nei, equipment, facilities, etc.)
City of County Services Acquired. (Person	nei, equipment, racinties, etc.)
	ocal and state records on production in Florida to track the economic Impac
The following information is required for lo	ocal and state records on production in Florida to track the economic Impac
The following information is required for lot the industry. If exact figures are not available.	ocal and state records on production in Florida to track the economic impac ble, please estimate as closely as possible.

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

Don Stilwell Town Manager

Print Name of Applicant and Title

Print Name of Witness

4-26-16

Date

Date



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

Check the appropri	ate box(es) below:
F SPECIAL EV	PENT PERMIT
r USE OF CO	UNTY PROPERTY PERMIT
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	AIT É
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	PRIVATE + PAID LOTS
Deputies (How Many?):	2 SUPERVISORS @ 16 HOURS 4 DERTIES @ 8 HOURS 6 DERTIES @ 16 HOURS MARINE VESSEL + 2 CREW - 5 HOURS 4 DERTIES @ 6 HOURS JAIL TRANSANT VAN - 10 HAS 5 DERTIES @ 10 HOURS
Fee for Services:	\$ 15,660.00
Special Arrangements:	DETAIL DEPUTIES WILL MAINTAIN PUBLIC SAFETY + SECRITY THROUGHOUT THE DAY, AS WELL AS DIRECT TRAFFIC + FACILITATE BRIDGE CLOSINES FOR PARADE + FIREWARKS
	Print Name: Scr. Tim Lawn Signature: Scr. Jan 1 98/64 Title: SERGEANT Date: 5/27//6

FORT MYERS BEACH FIRI	E DEPT	Tel (239)590-4206
17891 San Carlos Blvd., Fort Myer	s Beach, FL 33931	Fax (239)463-6761
Fire Guards: (how many?)		
Fee:	Language and the same of the s	
Flammable Vegetation:		
First Aid Equipment:		
Fire Extinguishing Equipment:		
Special Arrangements:	AM	and the state of t
		and the state of t
		A.
Check list: Application		Description
Print Name App	proval Signature	Date
LEE COUNTY SHERIFF'S I 15650 Pine Ridge Road, Fort Myer	<u>DEPT</u> Tel (239)477 rs, FL 33908	7-1830 Fax (239)432-0268
Parking MidAF PAID LOTS	PUBLIC PARKIN	NO AREAS
Denuties (how many?) 2 SOFER U	ISOAS /408ATIES	e 6 Hars
Traffic Control: 6 DEATIES C.	16 HAS /6@ 1014	5/40 8HMS
I JAIL TAAWSPATT VAW	1 BOAT, 2 CR	EW COHAS.
Fees: \$15,660.00	,	
Special Arrangements: DistarL D	PATTE WILL MAKE	TAIN PUBLIC SAFETY +
SECURITY THROUGHOUT THE DAY: AND FACILITATE BAIDLE CLOSUR	PIVISH DEFINES	Brance & Kill of Face water
AND FACILITATE BAIDLE CLOSUL	ES FUR MORNING	PAPARE + LUENING GAL WALKS
Check list: Application		Description
SET. Tim LATUR S	or In 1 99-160 approval Signature	5/20//6 Date
Print Name A	rhhtovar orgustrace	Duca



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 box(es) below:

| SPECIAL EVENT PERMIT

FILM PERMIT

☐ USE OF COUNTY PROPERTY PERMIT

		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WITH FOR THEIR EVENT.
Fire Guards (How Many?)	Various Res Required	sources committed for event: Inspection Service
Fee for Services:	See Attach	ed Invoice
Flammable Vegetation:		
First Aid Equipment:	On-Site Re	sources
Fire Extinguishing:	On-Site Re	sources
Special Arrangements:		
	Print Name:	D/Chief Ronald L. Martin
	Signature:	Ronald L. Martin Solution process by the reals it harder only a Processing of the Control Opening only a Processing of the Control Opening only a Processing of the Control Opening of
	Title:	Fire Marshal
	Date:	16-May-2016

17891 San Carlos Blvd., Fort Myers Beach, FL 33931 FORT MYERS BEACH FIRE DEPT Tel (239)590-4206 Fax (239)463-6761 Fire Guards: (how many?) On-Site Inspection and Resources Fee: See Invoice for Fireworks: Parade no impact Flammable Vegetation: None First Aid Equipment: None Fire Extinguishing Equipment: Please ensure all Parade Floats have access to at least one Fire Extinguisher Special Arrangements: FAA notification is required for the Fireworks Display, please ensure this is completed. Please have Pyrotechnic Agent contact FD (14) days prior to show. Check list: Application X Site Plan X Description X Ronald L. Martin Superby signed by Montales, Asserted Ronald L. Martin State Conference Sta 16-May-2016 D/Chief Martin **Approval Signature** Date **Print Name** LEE COUNTY SHERIFF'S DEPT Tel (239)477-1830 Fax (239)432-0268 15650 Pine Ridge Road, Fort Myers, FL 33908 Parking: Deputies (how many?) Traffic Control: Special Arrangements: Check list: Application _____ Site Plan ____ Description ____

Approval Signature

Print Name

Date



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

Check the approprie	ate box(es) belov	w:		
SPECIAL EV	ENT PERMIT			
□ USE OF CO	UNTY PROPERTY PI	ERMIT		
☐ FILM PERM	IIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE	EASE INDICATE BELOW WITH FOR THEIR EVEN	WHAT ARRANGEMENTS Y	OUR ORGANIZATION
Treatment Facilities:	None necessary.			
	~			
Medical Personnel:	See Special Arranger	ments below.		
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	No additional precau	itions necessary.		
Fee for Services	Not applicable.			
Special Arrangements:	Medical coverage is area, please contact 533-3911.	required for this event. Bed them first to arrange cover	ause this is in Fort Myers Beach age. If they are not available, co	ntact our office at 239
	Print Name:	Benjamin Abes		
	Signature:	Benjamin Abes	Digitally signed by Benjamin Abes Otherm-Benjamin Abes, on-Lee County Public Safety, our-Division of Emergency Medical Senders of County Public Safety, our-Division of Emergency Deter 3716.0528 (335388 4490)	-
	Title:	Chief		
	Date:	05/26/2016		



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

Check the appropri	ate box(es) bel	ow:
T	UNTY PROPERTY SELL AND CONS	PERMIT JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Parking:	No event parking o	n Lee County maintained road rights-of-way.
Ingress and Egress:	Use all established	means of ingress and egress.
Special Arrangements:	Boards (10 days). Co	eriff's Office for assistance with traffic control. Provide advance notice via Message coordinate activities per FDOT permit requirements and Town of Fort Myers Beach. All rmance with MUTCD (current edition) and FDOT Index 600 Series, as applicable. MOT by a certified Traffic Control Specialist in accordance with the above referenced
	Print Name:	Bryan Miller
	Signature:	Bryan D. Miller Digitally signed by Bryan D. Miller Date: 2016.06.03 13:38:59 -04'00'
	Title:	Senior Project Manager
	Date:	June 3, 2016



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

Charletha annronrie	ata haylas) hal	OW.
Check the approprie		ow.
□ USE OF CO	UNTY PROPERTY	PERMIT
PERMIT TO	SELL AND CONSU	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM		
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
UI CARLO	No illumination ne	mitted before 7:00 a.m.
Illumination:	No murmation per	milited before 7,00 dam.
Parking Areas:	EMD boach staff no	ng the fee for 19 parking spots for Monday, July 4, 2016 at Lynn Hall. This will be for rking. FMB staff is responsible for closing off parking spots. LCPR will take down rope
	in grassy area for st	taging of Cert vehicle. FMB will bring in 10 port-a-potties (8 regular & 2 flandicap).
	FMB will bring in a	20 yd. dumpster for cleanup.
Special Arrangements:	FMB will clean up i	mmediately following the fireworks. FMB will provide a cleaning crew on July 5th to
3	clean the beach, pi	er and parking lot area. The pier will be shut down on July 4th at 3:00 pm. FMB will on the pier, John Scanlon. FMB is responsible to pressure clean the pier.
,	(See attached docu	ument for details)
	Construence of the Construence o	
,		
	Print Name:	Alise Flanjack
	Signature:	Alise Flanjack Objectly Alise Panjack of the County Parks and Recreation, Out. Indicated Parks and Recreation, Out.
	Title:	Lee County Parks & Recreation Deputy Director
	Date:	6/3/2016



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

Check the appropriat	e box(es) bel	ow:
SPECIAL EVEN	NT PERMIT	
⊠ USE OF COU!	NTY PROPERTY	PERMIT
PERMIT TO SI	ELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT		
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	PPLICATION, P CANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
nsurance Requirements:	occurrence to pr	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County.
Special Arrangements:	A Certificate of Ir Board of County additional insure Subject to proof	
	Print Name: Signature: Title: Date:	Mike Figueroa Risk Program Manager May 26, 2016

CERTIFICATE OF COV	ÆRAGE			
Certificate Holder		Administrator	Issue Date 4/27/16	
LEE COUNTY BOARD OF COUNTY COMMISSIONERS PO BOX 398 FORT MYERS FL 33902-0298		Florida League of Cities, Inc. Department of Insurance and Financial Services P.O. Box 530065 Orlando, Florida 32853-0065		
Coverades This is to certay that the adressent seldy Term or condtion of My Contract or other Agreement described Herein is Bublect to A	N HAR BEEN ISRUED TO THE DESIGNATED MEA OR DOCUMENT WITH RESPECT TO WHICH THIS THE TERMS, EXCLUSIONS ARE CONTINUED.	DER FOR THE COVERAGE PERIOD IND CERTIFICATE WAY BE 133UED OR WAY TO FEUCH AGREEMENT	KATED NOTWITHSTANDING MY REQUIREMENT PERTAIN, THE COVERAGE IFFORDED BY THE	
COVERAGE PROVIDED BY:	FLORIDA MUNICIPAL			
AGREEMENT NUMBER: FMIT 0778	COVERAGE PERIOD: FROM 10/1/1	5 COVERAGE PERIOD: TO	0 10/1/16 12:01 Midnight Standard Time	
TYPE OF COVERAGE - LIABILITY		TYPE OF COVERAGE - PROI	PERTY	
General Liability		🛭 Bulldings	Miscellaneous	
Comprehensive General Liability, Bod	illy Injury, Property Damage and	☐ Busic Form	⊠ Inland Modne	
Personal Injury		Special Form Personal Property	S Electronic Data Processing S Bond	
Errors and Omissions Liebility		Books Form		
 Supplementel Employment Practico Employae Benefits Program Administ 	tratice t inhills	⊠ Special Form	Specials	
 Employee Benefits Program Administ Medical Atlendonts Medical Directors 		Agreed Amount		
Broad Form Property Damage	: (rings: ao noa amonty	Doductible \$500		
☐ Law Enforcement Liability		☑ Colnaurance 80%	ļ	
🗵 Underground, Explosion & Collapso f	fazard	Blanket		
Name and State William		S Specific		
Limits of Liability * Combined Single Limit		Replacement Cost Actual Cash Value		
Deductible \$2,500		T verion cost amon		
Automobile Liability		Limits of Liabi	Illiy on File with Administrator	
All owned Autos (Privato Passenger)		TYPE OF COVERAGE - WOF	RKERS' COMPENSATION	
All owned Autos (Other than Private Passunger)				
☑ Hired Autos		Statutory Workers' Compe	snsavon 31,000,000 Each Accident	
M Non-Owned Autos		(S) Employers Liability	\$1,000,000 By Disease \$1,000,000 Aggregate By Disease	
Limits of Liability Combined Single Limit		☐ Deductible N/A		
Deducible N/A				
Automobile/Equipment - Deductible				
Physical Damage \$0 - Comprehens	sivo - Auto \$100 - Collision - Auto	Por Schodulo - Miscollaneous E	quipment	
Other				
The limit of leability is \$200,000 Bodily Injury and/or Preparty Damage per person or \$300,000 Bodily Injury and/or Preparty 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 leability resulting from entry of a deline bill pursuant to Section 768 28 (5) Florida Statutes or Bability/Settlement for which no claims bill has been filed or liability imposed pursuant to Federal Law or actions outside the State of Florida.				
Description of Operations/Locations/Vi	ohklos/Special items		* ××;.	
RE: July 4°, 2016 Event The certificate holder is hereby added as an additional insured, except for Workers' Companisation and Employers Liability, as respects the member's Bability for the above described event.				
This centificate is usued as a matter of in the coverage afforded by the agreement	iformation dily and confere no rights I above	UPON THE CERTIFICATE HOLDER, THI	9 centricate does not amuno, extend or alter	
OBSIGNATED MENDER		EXPIRATION DATE THEREOF, THE ISS UNITTED HOUSE TO THE CENTIFICAL	ESCRIBED AGREEMENT BE CANCELLED BEFORE THE SUMM COMPANY WAS ENDEAVOR TO MAIL AS DAYB TE HOLDER NAMED ABOVE BUT FAILURE TO MAIL BUCH ON OR LABILITY OF MAY RIND UPON THE PROGRAM, ITS	
TOWN OF FORT MYER	S BEACH			
2523 ESTERO BOULEVARD FORT MYERS BEACH FL 33931		Chi hophor		
oh N	18 05/20/16	AUTHORIZED REPRESENTATIVE		

DRAYTON INSURANCE BROKERS, INC.

250 Chiver Point Road, suite 50 Berdorcham, Alabama 16714 Phoner (20) 254 4895 Pari (20) 254 4897 POST OFFICE BOX MAN HIBMONGHAM, ALADAMA 18120 FMANL MINGMAN 18120 FMANL MINGMAN 18120

CERTIFICATE OF INSURANCE

NO. 614024

We certify that incurence is efforded as about below. This Cartificate does not affirmatively or magnitude; amond, extend or about the converge affinised by the incurance policy and the incurance afforded is subject to all the terms, archaelons and conditions of the policy.

ensurer

Admirál Instrunça Company

POLICY NO. CA000016477-05

NAMED INDURED

Garden State Phroveder, Inc. Pyritz Pyrobelski i Group, LLC New Venou Firmests

P.O. Best 483 McHingdon, NJ 07946

POLICY THUM

Merch 1, 2016 to Merch 1, 2017; Both Days 12:01 A.M. Standard Time

COVERAGE

Commercial General Lightlity:

MOccumence Basis

Chins Blade Banis

LIMIT OF LIABILITY

\$1,000,000 each occurrence, \$10,600,000 general aggregate, \$6,000,600 products/complaind operations aggregate The limit of Hability shall not be increased by the inclusion of more than one insured or additional insured.

INDURED OF LEADING

Public fireworks display and special effects contractor

It is critified that, if apased below, this policy includes as Additional Bararedal) the openess(s), proceeding), organizated (facining other cultities having abuller interests), of insured pyrotechnic events and/or I) the owner(s) of real property (or baryes) at which insured pyrotechnic events are held and/or 3) the coving similar increases, of buildings, stadiums, arease and almilar facilities at which insured pyrotechnic events are held and/or 4) the licensing or permitting anthority, or other anthority having jurisdiction, issuing licenstitylengias for insured pyrotechnic events and/or 5) any other culty for which is insurent is required to be affected under written context. Coverage applies only as respects the legal liability of such Additional Insured(s) for bodily injury and property damage caused by the openious of the Diamed Insured. The insurence affected any Additional Insured excludes liability for bodily injury or property damage exceeds the oblimitions recified in its context with the Named Insured.

The learned has fully complied with the requirements of PLJA.A. Not-5 by providing a surety band in the account of RL560 free Garrier learness. Company, Inc., West Orange, NJ. This general hability insurence to not provided to comply with the tirms of NJJA. RL58. It is not an alternative to,or a co-curety with, the required bond, nor case it afford us additional or supplemental hand, nor extens limits over the required bond. By accepting states as Additional Learned on this policy, on the basis sates having the Additional Learned actual space that this policy is not a bond, or an alternative to a bond, touch under the terms of NJ.B.A. No. 1.

NAME(6) OF ADDITIONAL INSURED(5)

Town of VI. Myers Beach 2731 Oak Street PT. Myers, Fl. 33931

LIE COUNTY, LIE COUNTY PARKE & RECREATION, STATE OF FLORIDA. TOWN OF FT. MYERS, FL

DISPLAY LOCATION

DIBPLAY DATE(S)

FT. MYERS BEACH PIER

JULY 4, 2016 DECEMBER 31, 2016

It is scriffed that this policy deplays a 30 day mutual notice of exacellation between the Inquest and the Named Inquest. In the errent of such exacellation we will endeavor to mail 10 days written notice to the Additional Insured(s), whose name and address is shown hereon, but fallows to mail such notice shall impose no obligation or liability of any kind upon the insurer and/or the undersigned.

DRAYTON INSURANCE PROKURS, INC.

MARCH 10, 2016

DATE OF ESUE

AL STRINGER, PRESURENT

ou Mt 16



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:



