

## **EVENT PERMIT**



Ordinance 14-15

## **COFFEY WEDDING CEREMONY**

PERMIT NUMBER:

TMP2016-00263

Date(s) of Event:

October 19, 2016 from 4:30pm until 7:30pm

Property Owner:

LEE COUNTY

Applicant:

**MEGAN MCCOY** 

Contact: MEGAN MCCOY

Description:

Wedding Ceremony to be held October 19, 2016

Location of event:

BANYAN ST ROW BOCA GRANDE 33921

BANYAN STREET RIGHT-OF-WAY/\*\*\*303-775-1219

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

9-20-16



## **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



## **Event Application**

Check the appropriat	te box(es) below:
SPECIAL EVE	NT PERMIT
▼ USE OF COU	NTY PROPERTY PERMIT
PERMIT TO S	ELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	· [
Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Coffey Wedding Ceremony
Date(s) of Event / Production:	October 19th 2016
Location(s) of Event:	Banyan Street
Name of Applicant:	Megan McCoy
Applicant Address:	580 Viridian Street Englewood FL 34223
Applicant Phone Number:	303-775-1219
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	megan.mccoy26@gmail.com
Estimated Attendance:	80
Event Description: Include each activity, when activities take place, etc.	Wedding Ceremony  The state of
Hours of Operation:	4:30-7:30pm
STRAP # of Parcel:	144320010000500010
O of Duraniana*.	Landau Covernment

 $<sup>{\</sup>bf *Notarized\ statement\ from\ the\ property\ owner\ specifically\ consenting\ to\ the\ proposed\ use\ required.}$ 



## Fill out the following questions for allpermit types:

What is the Zoning Classification of the	premises? Lee County DOT Right of Way	
Are any temporary structures to be insta	alled for the event?  Yes  No	Туре:
Do you have the appropriate permits for	r the temporary structures?	⊤ Yes
* For a 'Special Event' and 'Use of Coun indentified, including all parking areas.	ty Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event:		
Note: Certificate of Insurance must be submitte	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 Providing Food:		
Type of Food being Served:		
Section II - USE OF COUNTY P		mantensia antaria anta 1998 des arrante la seral funta maliar sera es casa es está asta se está arrante la cas
Section II - OSL OF COOKITY F		
Organization Sponsoring the Event:		
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	<i>!</i> :
Name of Charity:		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration num	ber:	
(Proof of registration with the Dept. of Agriculture &	Consumer Services §496.405 or proof the organization	
Till and the second of the sec	ION OF ALCHOLIC BEVERAGES P	
Is alcohol being sold/consumed on Cou		☐ Yes ☐ No
Non-profit certificate/registration num (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	also be required; please call (239) 344-0885 for



## Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

TV Movie or Special	TV S	eries / Pilot	П	TV Commer	cial	П	Still Photo	S	
Public Service Announcen	nent 🗌 Indus	trial / Documentary		Other:					
any of the following be n	eeded or includ	ed*?		•					
Street Closure				☐ Yes	Г	No			
Traffic / Crowd	Control			T Yes	Г	No			
Fire or Burning				Yes	Г	No			
Explosives or P	yrotechnics	2.h		☐ Yes	П	No			
Animals, Large	or Small			Yes	Е	No			
Construction of	f Any Kind	The state of the s		┌ Yes		No			
Large and/or N	umerous Vehicl	es		☐ Yes		No			
Helicopters, Bo	ats, etc.			☐ Yes	Г	No			
Stunts				Yes	Γ	No			
Other				☐ Yes		No			
For any marked Yes, provi pecial Parking Requirement City or County Services Rec	nts:		ities, e	.c.)					
pecial Parking Requiremen	nts:		ities, e	cc.)					
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#### **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.

Magan McCou	James Coffey	
Megan McCoy Signature of Applicant	Witness	
Megan McCoy	James Coffey	
Print Name of Applicant and Title	Print Name of Witness	
04/22/2016	04/22/2016	
Date	Date	



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

Check the approprio	ite box(es) belo	DW:
USE OF COU		PERMIT IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Parking:	Parking in autl	horized parking areas only
Deputies (How Many?):		s for road closure, traffic control and security on Banyan Street Ave and Gilchrist while wedding ceremony takes place.
Fee for Services:	Traffic detail is	\$\$50/hr per deputy with a four (4) hour minimum.
Special Arrangements:	security to the	Banyan Street must be blocked in order to provide safety and e participants. All chairs, tables and other items used for the event oved from the roadway as soon as possible in order to reopen et.
	Print Name:	Capt. Scott Lucia
	Signature:	Capt. Scott K. Quein
	Title:	Special Events, Permits and Details
	Date:	2 May 2016





## State of Florida County of Lee

### Extra Duty Detail Request Form

Please fill out the Extra Duty Request form attached to this document completely. All details are a minimum of four (4) hours with the exception of boat details which are a minimum of six (6) hours and a half hour drive time to and from the detail location. When five (5) or more deputies are assigned to an event, a supervisor with the rank of Sergeant or above will be assigned at an upgraded hourly charge. Depending on the type of event or crowd size, it will be at the discretion of the Sheriff's Office to determine the number of deputies needed.

The current detail ra	tes are:		
Security	\$40/hr	Traffic	\$50/hr
Funeral Escort	\$40/hr	Security Supervisor	\$50/hr
Escort	\$40/hr	Traffic Supervisor	\$60/hr
Boat	\$40/hr	Civil Stand-by	\$60/hr
Holiday/Last Minute	\$60/hr	Prisoner Transport	\$60/hr

Details are charged a \$15 <u>per deputy</u> vehicle rate. All boat details are charged a \$20 per hour boat rate.

Extra Duty Details will not be provided to any person, firm or organization whose members, business or operations are of questionable nature; or for any event that will discredit the assigned Deputy, Sheriff's Office or County. The Sheriff's Office reserves the right to cancel the detail without notice and to recall the deputy(s) when necessary for community safety.

The Lee County Sheriff's Office will be the only armed personnel at any event where the detail is taking place. Any private security company that is hired to work alongside the Sheriff's Office will be a reputable, licensed and insured company whose employees are State D licensed <u>unarmed</u> security guards. Proof of the signed contract with private security company will be required.

In order to cancel a detail, notice must be given to the Detail Coordinator twenty-four (24) hours prior to the start of the detail either by phone or email. If the cancellation is less than twenty-four (24) hours, a four (4) hour charge per deputy will be billed. In the case of weather, notice of cancellation must be received within two (2) hours of the starting time otherwise a two (2) hour charge per deputy will be billed. In the event of a cancellation after business hours, please call 239-477-1000 and ask to have the on-call Detail Coordinator call you.

Unless otherwise specified, full payment of all details must be received one (1) week prior to the start of the event in the form of a cashier's check, money order, business check or cash. The Lee County Sheriff's Office does not accept credit cards or personal checks. Payments can be sent to: The Lee County Sheriff's Office 14750 Six Mile Cypress Pkwy., Fort Myers, FL 33912 ATTN: Details Unit.

	LEE COUNTY SHE	RIFF'S OFFICE USE ONLY	
Total Deputy(s) 2	_ Total Hours 8	Rate per Hour	Vehicle Rate
Total Cost for Detail \$400			
Magan McCoy Vender Signature		8/30/16	
Vender Signature		Date	



14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

LCSO Details Main Phone Number: 239-477-1199
Vendor Information
Business Name: Megan McCoy - McCoy/Coffey Wedding
Street: 580 Viridian Street
City: Englewood State: FL Zip Code: 34223
Business Contact: Megan McCoy Phone: 303-775-1219
Email Address:megan.mccoy26@gmail.com
Email Address:
Event Information
Detail Location: Banyan Street between Park and Gilchrist
Street:
City: Boca Grande State: FL Zip Code:
Contact During Event: Phone:
Event Date: 10/19/16 Event Time: 1600-2000
Anticipated Crowd Size : 80 Type of Event: Wedding Ceremony
Additional Security Working Detail: Yes No If Yes, how many?
Permits Attached: Yes No Alcohol Served: Yes No
Detail Information
Security Traffic Prisoner Transport
Escort Holiday Funeral Escort
Last Minute Stand-by
Marked Vehicle Yes No Unmarked Vehicle Yes No
Uniformed Deputy Yes No Plain Clothes Deputy Yes No
Detail Description:
2 uniformed deputies on Banyan Street between Park & Gilchrist to block off area while set-up, ceremony and break down takes place. Vendor must contact the Lee County Sheriff's Office Details Unit at 239-477-1098 or bmartin@sheriffleefl.org during the month of September 2016 to send payment for this detail. Additional instructions for payment will be given at that time. Deputies will not be secured for event unless contact is made.





## 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

 $f\overline{\chi}$  USE OF COUNTY PROPERTY PERMIT

FILM PERM	IIT	
AFTER REVIEWING THE APPLI	APPLICATION, PL CANT TO COMPLY	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WITH FOR THEIR EVENT.
Fire Guards (How Many?)		None
Fee for Services:		None
Flammable Vegetation:	<u>, , , , , , , , , , , , , , , , , , , </u>	None
First Aid Equipment:		
		None
Fire Extinguishing:		
		None
Special Arrangements:	and all objects f	EMERGENCY access on Banyan St. is required. Be prepared to move any rom the street to allow emergency vehicle access. Any damage to BGFD taking access to emergency will be the responsibility of the permit holder.
		In case of emergency - DIAL 911
	Print Name:	C.W. Blosser
	Signature:	CAL
	Title:	Fire Chief
	Date:	09/12/2016



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

Check the appropri	ate box(es) belo	w:		
SPECIAL EV				
□ USE OF CO     □ FILM PERM	UNTY PROPERTY P IIT	ERMIT		
AFTER REVIEWING THE WILL REQUIRE THE APPL			WHAT ARRANGEMENTS \ IT.	YOUR ORGANIZATION
Treatment Facilities:	None necessary.			
Medical Personnel:	None necessary.			
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	No additional precau	utions necessary.		
Fee for Services	Not applicable.			
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. To	o arrange special event coverage	e, contact our office at
	Print Name:	Benjamin Abes	Olgitally signed by Banjamin Abes	-
	Signature: Title:	Benjamin Abes	Oke.cn-Benjamin Abe, or Lee County Fublic Safety, our Division of Emergency	
	Date:	O4/27/2016	3	



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

Check the appropri	ate box(es) bel	ow:		
☐ SPECIAL EV	ENT PERMIT			
☑ USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONS	JME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNTY	Y FACILITIES
FILM PERM	1IT			
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELO LY WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	S YOUR ORGANIZATION
Parking:	Park in designated prohibited.	areas. No event parking on	Banyan Street right-of-way or e	elsewhere where parking is
Ingress and Egress:	Use all established	means of ingress and egre	SS.	
Special Arrangements:	Use Lee County Sho	eriff's Office for assistance v	with traffic control as needed.	
	Print Name:  Signature:	Bryan Miller Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2016.05.03 14:33:09 -04'00'	-
	Title:	Senior Project Manager		
	Date:	May 3, 2016		- -

## Cofey / Mccoy Banyan Street Wedding - October 19th, 2016

## **Lee County Event Permit Application**



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

Check the appropri	ate box(es) belo	ow:	
SPECIAL EV	ENT PERMIT		
☑ USE OF CO	UNTY PROPERTY I	PERMIT	
☐ PERMIT TC	SELL AND CONSU	IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY F	ACILITIES
FILM PERM	1IT		
		EASE INDICATE BELOW WHAT ARRANGEMENTS Y LY WITH FOR THEIR EVENT.	OUR ORGANIZATION
llumination:	Generators prohibite draped on trees or v	ed to supply electric for lighting on Banyan Street. Lights ar regetation.	e not to be hung or
Parking Areas:	Parking is permitted	d in existing parking areas at the Boca Grande Community Pa	ark and Center
			· · · · · · · · · · · · · · · · · · ·
Special Arrangements:		ince with Lee County BOCC being additionally insured. Perrose of County Lands for Weddings on Banyan Street.	mit noider must adnere
	Print Name:	Joe Wier	
	Signature:		
	Title:	Supervisor	
	Date:	4/27/16	
	-		



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

Check the appropriat	te box(es) below:
face of	NT PERMIT  NTY PROPERTY PERMIT  ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERMIT	Γ
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT 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: September 14, 2016

	_	IFICATE OF			ANCE	08/19/2016 FINFORMATION	
onucci Ast Mai Med Deax	un Street Insurance Services, Inc.		DNLY AND	CONFERS N	D RIGHTS UPON TH THE DOES NOT AME! FORDED BY THE POLL	E CERTIFICATE	
Grass Valley, CA 95845 Phone: (530) 477-6521 Email: info@theeventhelper.com			INSURERS A	Insurers affording coverage			
			INSURER A: EV	Notation A: Evanston Insurance Company			
	Megan McCoy		INSURER E:	INSURER B:			
	580 Viridian Street Englewood, FL 34223		INSUMER C:				
	English et al. and the state		NEURER D:			·	
			MISURER E:				
THE PO	VAGES OUCLES OF INSURANCE LISTED BEL EQUIREMENT, TERM OR CONDITION PERTAIN, THE INSURANCE AFFORDER LIES, ASGREGATE LIMTS SHOWN MA	OF ANY CONTRACT OR DIRECTOR	D HEREIN IS BUBLECT NO CLAIMS.	TO ALL THE TERM	OLICY PERIOD INDICATED. IN THIS CERTIFICATE MAY I MIS. EXCLUSIONS AND CON	NOTWITHSTANDING DE 198UED OR IDITIONS OF SUCH	
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Y	X COMPRESCUL GENERAL LIMITATY	4044450:M1719599	10/19/2016	10/20/2016	PRED EDG. (VAN oue belacu)	<b>\$</b> 5,000	
1	CLAMBINATE X OCCUR	STATE WILLIAM	, 4, . 42,	, , , , , , , , , , , , , , , , , , , ,	PERSONAL & ADV BUURTY	\$ 1,000,000	
1	Host Liquor Liability				GENERAL ADGREGATE	\$ 2,000,00	
	GENL AGGREGATE LIMIT APPLIES PERC				PRODUCTS - COMPACE AGG	¥ 1,000,00	
	X POLICY PRO-				DEDUCTINE	3,00	
1	Retail Liquer Liability					*	
+	AUTOMOBILE LIMBLITY		•.	_	COMBRED SNGLE LIMIT (Ed SCHOOL)	\$	
	ALL OWNED AUTOS				BODEY MARKY (Per passon)	3	
	SCHEDULED AUTOS HIRED AUTOS				BOOLY MANY (Per sections)	5	
	NON-ONINED AUTOS			,	PROPERTY DAMAGE (Por sockers)	\$	
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	MARAGE LAMBERTY				COTHER THAN EA ACC	3	
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В	M-TOAES, TYPETUA				EL EACH ACCIDENT		
l o	NY PROPRETORPARTHEREXECUTIVE YFFICERMEMBER EXCLUDED?				EL DISEASE - POLICY LIMIT		
8	Yea, County under SPECIAL PROVINCING below				ET DISEASE - POLICE LANGE	L.V.	
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			WENT (QUETTE SO	Merche			
Cartil	RETION OF OPERATIONS / LOCATIONS / VEH cade holder listed below is named as acket bance: 80, Event Type: Workling.	cles / Exclusions Abbetier End lens! Insured per altached CG 20 :	20 07 4%				
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	WATER US SES		CABCELL	ATKON			
CER	TIFKATE HOLDER	Commissioners		OF THE ABOVE DESI	HIGH POLYTY BE CARCELL	D THE PUPERATI	
Lee County Beard of County Consmissionਵਾਤ P.O. Box 39 ਦ Fort Myers, FL 33902			#011CETOT	CATE THEREOF, YIE ROUNE WICHPER WILL ENGINEETH MAKE. 30 DAYS WHITE MYDICE TO THE CENTERCATE MOLDER MAMED TO THE LEFT, BUTTANAME TO SO GO SHALL MYDICE TO THE CENTERCATE MOLDER MAMED TO THE CEPT, BUTTANAME TO SO GO SHALL MY			
			AUTHORIZED		It Maddays		

Policy Number: 3DS5450-M1712532

COMMERCIAL GENERAL LIABILITY CG 20 28 07 04

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Sand Band of Carrie Commissioner	
a County Board of County Commissioners D. Box 398	
7. BOX 350 t Myers, PL 33902	
t mynta, t E court	
-	
•	
	above, will be shown in the Declarations.

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

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

CG 20 25 07 84

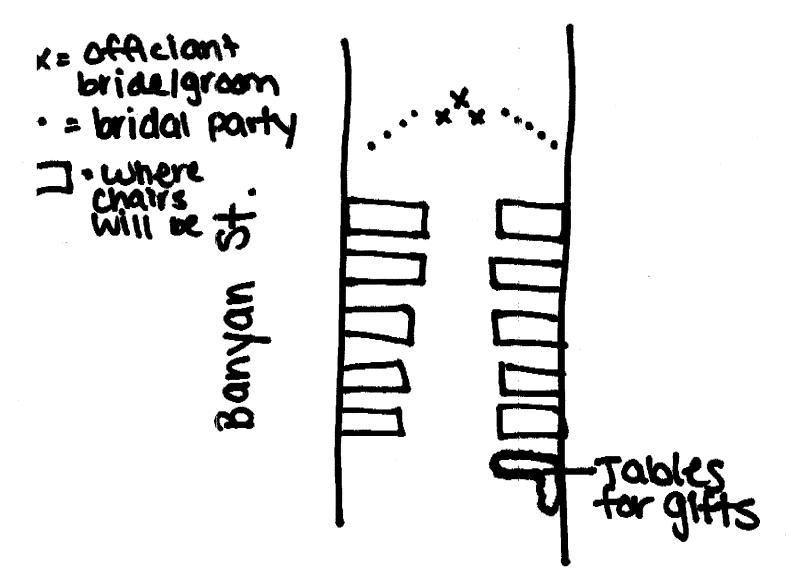
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Page 1 of 1



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

Check the approprio	te box(es) below:	
FILM PERM	T ONLY	
AFTER REVIEWING THE APPLI	APPLICATION, PLEASE INDICATE BELOW WHAT CANT TO COMPLY WITH FOR THEIR EVENT.	ARRANGEMENTS YOUR ORGANIZATION
Special Arrangements:		
Other:		
	Print Name: Signature: Title: Date:	



center