

# **EVENT PERMIT**



Ordinance 14-15

# 16TH ANNUAL BIKERS FOR BABIES

**PERMIT NUMBER:** 

TMP2016-00293

Date(s) of Event:

November 4th, 2016 from 6pm-8pm, November 5, 2016 from 3pm-9pm,

November 6, 2016 from 9am-3pm

Property Owner:

FISCHER FL PROPERTIES

Applicant:

SIX BENDS HARLEY-DAVIDSON

Contact: TAYLOR LOETHEN

Description:

Friday: VIP Party with food, music, vendors Saturday: Car, Bike, and Truck Show

with music, vendors and food Sunday: Ride, concert and vendors

Location of event:

9501 THUNDER RD FORT MYERS 33913

SIX BENDS HARLEY-DAVIDSON/\*\*\*407-719-1624

Will the event be attended by 1000 or more people?

Yes

Will the event be held on County Owned Property?

No

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



# **Event Application**

Special Event

Use of County Property

Alcohol within Lee County Facilities

Film, Video & Photography



# **Event Application**

Check the	appropriate	box(es)	below:
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Γ	SPECIAL EVENT PERMIT
Г	USE OF COUNTY PROPERTY PERMIT
Г	PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
Г	FILM PERMIT

Section I - GENERAL INI	FORMATION (All Permit Types)
Title of Event / Name of Production	16th Annual Bikers for Babies
Date(s) of Event / Production:	November 4-6
Location(s) of Event:	Six Bends Harley-Davidson
Name of Applicant:	Taylor Loethen
Applicant Address:	9501 Thunder Rd. Fort Myers, FL 33913
Applicant Phone Number:	239-284-0301
Contact Person: (If different from applicant)	Kaley Tyree
Contact Phone Number: (If different from applicant)	407-719-1624
Email Address:	taylorl@sfe-us.com
Estimated Attendance:	5000 per day
Event Description: Include each activity, when activities take place, etc.	Friday: VIP Party 6-8pm, food, music, vendors Saturday: Concert, vendors Sunday: Ride, concert, vendors
Hours of Operation:	
STRAP # of Parcel:	22-45-25-23-00000.0010 <b>224525L3240000010</b>
Owner of Premises*:	FISCHER FLORIDA PROPERTIES I, LLC / SCOTT FISCHER ENTERPRISES

<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?	
Are any temporary structures to be inst	alled for the event?   ▼ Yes   No	Туре:
Do you have the appropriate permits fo	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:	OD TRUCKS	
Type of Food being Served: BBQ, HAMB	JRGERS, HOTDOGS, ETC	AMBOUT.
Section II - USE OF COUNTY PI	ROPERTY PERMIT	
Organization Sponsoring the Event: SIX	BENDS	
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	
Name of Charity: N/A		
Address of Charity: N/A		
Phone Number: N/A		
Non-profit certificate/registration num	per: N/A	
(Proof of registration with the Dept. of Agriculture & C	Consumer Services §496.405 or proof the organization is	s exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPTI	ON OF ALCHOLIC BEVERAGES PI	ERMIT
Is alcohol being sold/consumed on Cour If Yes, then a "Lee County Alcohol Permit" Is required.	ity Property? Only non-profit organizations can sell alcohol on County	
Non-profit certificate/registration numb (Required if alcohol is to be <u>SOLD</u> at the event)	per: LAMA	
<b>Please note:</b> A permit from the State of Florida E further details	Division of Alcoholic Beverages and Tobacco may a	Iso be required; please call (239) 344-0885 for

# **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

Date

Date



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

Check the appropri	ate box(es) bel	ow:
USE OF COL		PERMIT UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE	APPLICATION, P	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	In authorized p	parking areas only.
Deputies (How Many?):		ned to the traffic portion of this event are not to be used for security issues. ties must be hired at detail rate to provide security at the venue.
Fee for Services:		
Special Arrangements:	Deputies assigr Deputies assigr	ned to traffic posts from 1400-2200 hours on Saturday. ned to traffic posts from 1100-1400 hours on Sunday.
·		
	Print Name: Signature:	Capt. Scott Lucia Capt. Scott X. Luia
	Title: Date:	Special Events, Permits and Details  13 October 2016

# Mike Scott Office of the Sheriff



# 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 rat	es 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 SHERIFF'S	OFFICE USE ONLY	
Total Deputy(s) 5	Total Hours	Rate per Hour	Vehicle Rate \$15
Total Cost for Detail \$3,15	50	*	
Vender Signature	 Date	<u> </u>	



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

LCSO Details Main Phone Number: 239-477-1199				
	or Information			
Business Name: Six Bends Harley Day	vidson			
Street: 9501 Thunder Road				
	State: FL Zip Code: 33913			
	Phone: 678-997-9655			
Email Address: taylorl@sfe-us.com				
	nt Information			
Detail Location: Six Bends Harley Da	vidson			
Street: 9501 Thunder Road				
City: Fort Myers	State: FL Zip Code: 33913			
	Phone:			
Event Date: 11-5-16 & 11-6-16				
Anticipated Crowd Size: 5000 each day	Bikers for Babies Traffic			
Additional Security Working Detail: Yes	No If Yes, how many?			
Permits Attached: Yes No	Alcohol Served: Yes No			
Detai	ll 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 Yo			
Detail Description:  Deputies assigned to traffic control during Nov 5th security is needed, additional deputies will need to Saturday, Nov 5th 1400-2200hrs - 5 deputies at \$ Sunday, Nov 6th 1100-1500 - 5 deputies at \$50/h	550/hr + \$15 veh fee each.			





# 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 appropr	iate box(es) bei	low:		
SPECIAL EV	VENT PERMIT			
USE OF CO	OUNTY PROPERTY	PERMIT		
☐ FILM PERM	ΛIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL			W WHAT ARRANGEMENTS NT.	S YOUR ORGANIZATION
Fire Guards (How Many?)	4 crowd managers	needed on Saturday and Su	nday only.	
Fee for Services:	55.00 inspection fe	e per tent over 900 sq ft		
Flammable Vegetation:	cleared from aroun	d tents and stages		
First Aid Equipment:				
Fire Extinguishing:	compliant and all p	ropane tanks must be 10 fee	cooking tents and food trucks of the cooking tents and food trucks of the cooking tents and secured or on site (hose and tank, or water the cooking tents are cooking to the cooking tents and tank, or water the cooking tents are cooking to the cooking tents and tank, or water the cooking tents are cooking tents and food trucks and food trucks are cooking tents ar	as to not tip over. Wood or
Special Arrangements:		D access must be maintaine s not open to the general pu	ed around the buildings, mova ublic during the event.	ble bike rail may be used to
	Print Name:	James Tanner		_
	Signature:	James Tanner	Digitally signed by James Tanner Date: 2016.10.20 16:53:50 -04'00'	
	Title:	Fire Marshal, South Trail Fi	re District	_
	Date:	Oct 20, 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	ENT PERMIT			e gask
⊸ USE OF CO	UNTY PROPERTY P	ERMIT		
FILM PERM	1IT			
AFTER REVIEWING THE WILL REQUIRE THE APPL			WHAT ARRANGEMENTS NT.	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.	event of an emergency. To	o arrange special event coverage	e, contact our office at
	Print Name:	Benjamin Abes		
	Signature:	Benjamin Abes	Digitally signed by Benjamin Abes Date: 2016.07.12 11:04:56 -04'00'	
	Title:	Chief		
	Date:	10/24/16		



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

Check the appropri	ate box(es) be	low:		
SPECIAL EV	/ENT PERMIT			
£	OUNTY PROPERTY			/ FACULTUES
FILM PERM		OIME ALCOHOLIC BEVE	ERAGES WITHIN LEE COUNTY	r FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPI			OW WHAT ARRANGEMENTS /ENT.	YOUR ORGANIZATION
Parking:	Park in designated	areas. No event parking or	n Lee County maintained road rig	Jhts-of-way.
ngress and Egress:	Use all established	means of ingress and egre	ess.	
			anning and the state of the sta	
Special Arrangements:	Use Lee County Sh	eriff's Office for assistance	with traffic control as needed.	
	***************************************			
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2016.10.07 08:36:36 -04'00'	
	Title:	Senior Project Manager		
	Date:	October 7, 2016		



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

Check the appropri	iate box(es) be	low:		
SPECIAL EV	VENT PERMIT			
USE OF CO	UNTY PROPERTY	/ PERMIT		
PERMIT TO	SELL AND CONS	SUME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNT	Y FACILITIES
FILM PERM	/IIT			
		PLEASE INDICATE BELO PLY WITH FOR THEIR EV	W WHAT ARRANGEMENTS 'ENT.	YOUR ORGANIZATION
llumination:	N/A			
	-			-
Parking Areas:	N/A			
Special Arrangements:	Not on Lee County	Parks & Recreation proper	ry and will not affect our program	ms or operations
special Arrangements.	Not on Ecc county	Tuno a necreation proper	y and will not affect our program	ns or operations.
	Print Name:	Jesse Lavender		
	Signature:	Jesse Lavender	Digitally signed by Jesse Lavender Date: 2016.10.20 14:24:40 -04'00'	
	Title:	Acting Deputy Director	and the state of t	
•	Date:	Oct 20, 2016		



# 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:
August.	NTY PROPERTY PERMIT
FILM PERMIT	ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES  [
	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: Risk Program Manager
	Date: November 4, 2016



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/03/2016

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 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).

certificate holder in lieu of such endor	sement(s).		4			·····	
PRODUCER	•		CONTACT Frazier	Insurarice	Agency, Inc.		
Frazier Insurance Agency, Inc. P.O Box 1250 Midlothian, VA 23113-1250			PHONE (A/C, No, Ext) (804) 754-7610 FAX (A/C, No) (804) 754-7613				
			E-MAIL ADDRESS ifrazier@frazierinsurance.com				
Widiotilian, VA 20110-12	.50				RDING COVERAGE		NAIC #
					S Insurance Comp	any	
INSURED				merican co	- madrance comp		37532
Outdoor & Recreation Insurance Program	ı	+ 3	INSURERB.				
Fischer Entertainment, LLC; Motorsports of Fort Myers LLC			INSURERC				
DBA Six Bends Harley-Da	vidson	•	INSURERD				
12271 Towne Lake Drive Fort Myers, FL 33913			INSURERE				
, or my or o, 1 E 000 10			INSURERF				
······································	<del></del>	E NUMBER:		<del></del>	VISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICI INDICATED NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MA EXCLUSIONS AND CONDITIONS OF SUCH	EQUIREMEN Y PERTAIN, I POLICIES,	NT, TERM OR CONDITION OF THE INSURANCE AFFORDED	ANY CONTRACT OF BY THE POLICIES N REDUCED BY PAID	R OTHER DO DESCRIBED CLAIMS	CUMENT WITH RES	PECT TO	WHICH THIS
ISR IN: TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/OD/YYYY)		LIMITS	<del></del>
GENERAL LIABILITY					GENERAL AGGREGATE		2,000,000.00
X COMMERCIAL GENERAL LIABILITY					PRODUCTS - COMPIOP		2,000,000.00
A CLAIMS-MADE X OCCUR		<b>A</b>		4410710040	PERSONAL & ADV INJUI		1,000.000.00
		PL 3717681 Cert #0027	11/04/2016	11/07/2016 12:01 AM	EACH OCCURRENCE	\$	1,000.000,00
		OOIL #0021			FIRE DAMAGE (Any one	-+-	100,000,00
X POLICY PRO LOC					MED EXP (Any one perso	n) \$:	5,000.00
V bories 16ct 10c	<del>                                     </del>	·			COMBINED SINGLE LIMIT	* *	
AUTOMOBILE LIABILITY ANY AUTO					(Ea moddon) BODILY INJURY (Per per		
ALL OWNED SCHEDULED		•			BODILY INJURY (Per acc		
HIREDAUTO AUTOS					PROPERTY DAMAGE (Per accident)	\$	
					, , , , , , , , , , , , , , , , , , ,	S	***************************************
UMBRELLALIAB OCCUR	1 1 1				EACH OCCURRENCE	\$	
EXCESS LIAB CLAIMS-MADE	]				AGGREGATE	\$	
DED: RETENTION 5						\$	
						\$-	
A Liquor Legal		PL 3717681	11/04/2016	11/07/2016 12:01 AM	OCCURRENCE	<u>ş</u>	1,000,000,00
		Cert #0027			AGGREGATE	\$ \$	1.000.000.00
					LIMIT	5	
					AD&D	8	
				<u> </u>	DEDUCTIBLE	5	
DESCRIPTION OF OPERATIONS/LOCATIONS/VE POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY IN Event: Bikers for Bables – November 4 -	JURY OR PRO		nedule, if more space is requi	red) ON	NR 11/04/16	<b>,</b>	
Certificate Holder is An Additional In	sured, But	Only As Respects The Ope	erations Of The Na	med Insure	d.		
CERTIFICATEHOLDER			CANCELLATION				
Lee County Board of Commissioners 2115 Second St. Fort Myers, FL 33901		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
			AUTHORIZED REPRESENTATIVE				
***					John W. Frazier		
ACORD 25 (2010/05)	The	ACORD name and long are r			ORD CORPORATIO	in IIA . MC	ghts reserved.

# FISCHER FLORIDA PROPERTIES, LLC 12271 Towne Lake Drive Fort Myers, FL 33913 239.690.4647

August 30, 2016

# Re:Lee County Event Application

lam the property owner for Six Bends located at 9501Thunder Road, Fort Myers, FL 33913. March of Dimes / Six Bends Harley-Davidson will be holding the 16<sup>th</sup> Annual Bikers for Babies Event on Friday, November 4 – Sunday, November 6, 2016.

This event will be held at Six Bends. Restroom facilities will be provided. I have given my permission for this event.

Sincerely,

Jeffely Scott Fischer

**Property Owner** 

Sworn and subscribed before me this 30th day of Jugust 2016, by Jeffery Scott Fischer, who is personally known to me.

Lucia Sherman

**Notary Public** 

State of Florida

LUCIA SHERMAN

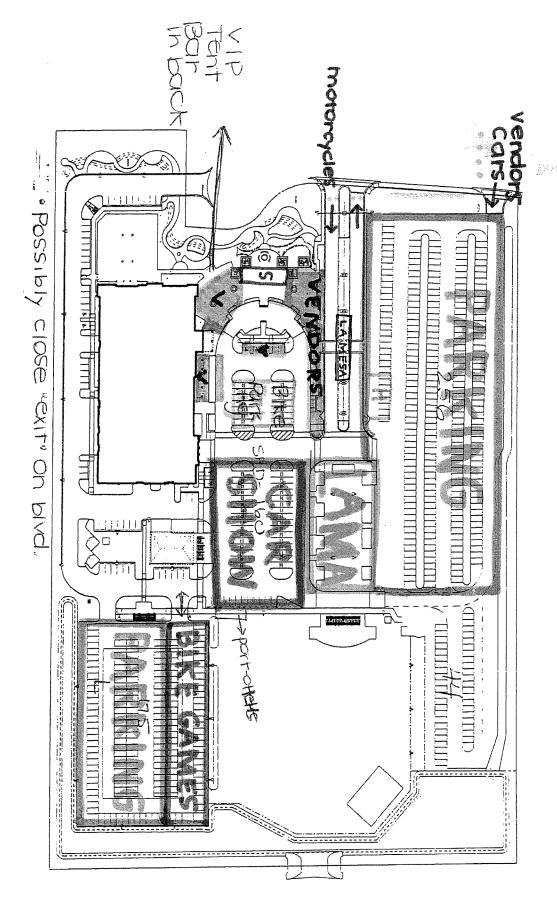
Notary Public - State of Florida

Commission # FF 236359

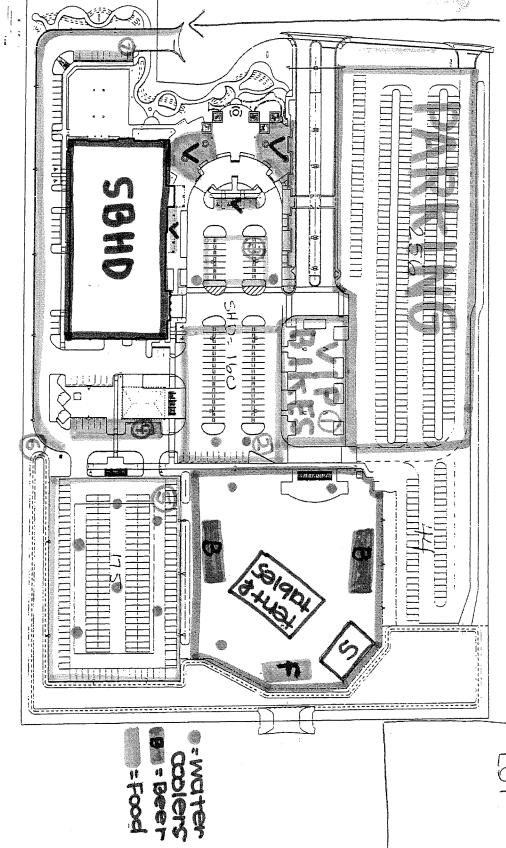
My Comm, Expires Sep 26, 2019

Conded through National Natary Asse.

# Birkers for Babies Saturday 11/5

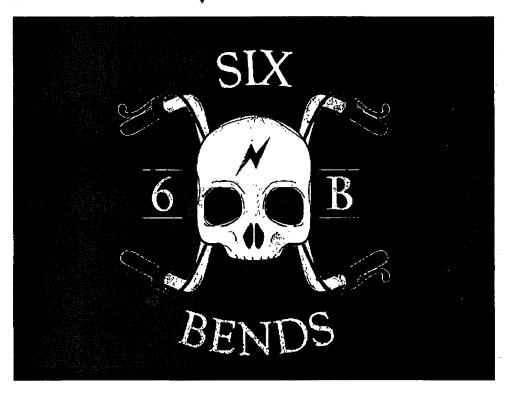


# Bilkers for Babies Sunday 11/6



AUX O+

# SIX BENDS EVENT QUESTIONNAIRE



**REVISED MAY 2016** 

# SECTION 1 - GENERAL INFORMATION

Where would you like to hold your event? Check the appropriate box(es) below:

Space X Small Conference Room X Top Rocker Lounge Triple Tree Room X The Pit X The Plaza X Top Rocker Field Other:	Capacity up to 12 People up to 25 People up to 150 Banquet Style, 300 Theater Style up to 250 People up to 1,000 People up to 5,000 People	Value \$250 / Day \$1,000 / Event \$900 / Day \$1,000 / Event \$2,000 / Event \$5,000 / Event		
Title of Event:	BIKERS FOR BABIES			
Date(s) of Event:	NOVEMBER 4 - 6, 2016			
Name of Organization:	MARCH OF DIMES			
Organization Address:	6314 CORPORTE COURT, #140 FG	ORT MYERS, FL 33919		
Organization Phone Number:	239-271-2562			
Contact Person:	TRENT HOWE			
Contact Phone Number: 239-271-2562 OR 239-707-0888				
Email Address:	THOWE@MARCHOFDIMES.ORG			
Secondary Contact Person:	ELIZABETH ESPOSITO			
Secondary Contact Phone Number:	239-271-2563	Part of the second seco		
Secondary Email Address:	EESPOSITO@MARCHOFDIMES.ORG			
Estimated Attendance (by day): FRI. 150, SAT 2-5K, SUN 3-6K				
Benefiting Charity? If yes, who?	MARCH OF DIMES			
Non-Profit Registration Number 13-1846366				
Event description:	vent description: Fri. VIP party upstairs from 6-8pm, Sat.			
List each activity, schedule, location, etc. Use on additional sheet if necessary.  Car, Bike & Truck show 3-6 live music, vendo				
from 3-9pm. Vendor set up	p 8 - 11 am, Sunday vendors,	live music and		
ride from NCRP to Six Ber	nds			
Parking Needs:	Use of the whole property Fr	i & Sat.		
Need additional overflow	parking on Sunday			
Hours of Event (by day);				

# SECTION 2 - USE OF SIX BENDS PROPERTY Vehicles Will vehicles be used as part of this event? Yes No If yes, automobile coverage must be included on the certificate of insurance. Please check all that apply: Quantity Description Food Truck(s) Trailer(s) Motorcycle(s) Car(s) / Truck(s) RV(s) Other: Please complete the following for each entity providing vehicles. Use an additional sheet of paper if needed. Organization providing vehicles Contact Name Contact Number Number of vehicles: Type(s): Food Will food be available at this event? Yes X No If yes, products liability coverage must be included on the certificate of insurance. Please check all that apply: Х Food Truck(s) Trailer(s) X Catered Delivery Please complete the following for each entity providing food. Use an additional sheet of paper if needed. Organization providing food Still working on Contact Name Contact Number Menu Alcohol Will alcohol be available at this event? Yes No If yes, liquor liability coverage must be included on the certificate of insurance. Organization providing alcohol LAMA FORT MYERS Contact Name Contact Number Harry Perez hollywoodharry2@yahoo.com Type Will a non-profit pull the alcohol permit? Yes No LAMA FORT MYERS If yes, name of non-profit

Non-profit certificate /	registration number
--------------------------	---------------------

need to get from Harry

### Insurance

Insurance Company Insuring the Event:

Insurance Company Insuring the Event: Will provide 95 Soon 95 We have the Cert.

\*Certificate of Insurance is required and must be submitted. See enclosed for details.

### Permitting

A permit may be required for your event. Lee County will make the determination for events with 1 - 999 expected attendance. Any event expecting 1,000 or more in attendance will be required to submit a Special Event Permit.

STRAP # of Parcel:

22-45-25-23-00000.0010

Owner of Premises\*:

Fischer Florida Properties, LLC

# SECTION 3 - VOLUNTEERS / EVENT STAFF

Total Number of Volunteers / Event Staff

Number of Volunteers / Event Staff Under 18

Are volunteers / event staff acquiring community service hours?

If yes, whom will be signing off on service hours paper?

Approximately 100 / ? Х No

Trent Howe or Elizabeth Esposito

# SECTION 4 - EVENT LEVELS

### Level 1

Attendance

1 - 250

Crowd Control

If outside, 1 Person

Traffic Control

N/A

Parking Location

Six Bends Property

Permitting

To be determined by Lee County

Volunteers Event Staff

Approx. 5-10

# Level 2

Attendance

251 - 500

Crowd Control

2 People

Traffic Control

Parking Location

Six Bends Property

Permitting

To be determined by Lee County

Volunteers Event Staff

Approx. 10 - 20

<sup>\*</sup>Please provide a copy of the non-profit's certificate.

<sup>\*</sup>Wine and beer only. No hord liquor on premises

<sup>\*</sup>Proof of registration with the Dept. of Agriculture & Consumer Services S496.405 or proof the arganization is exempt from this requirement S316.2045

<sup>\*</sup>A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239)-344-0885 for further details.

<sup>\*</sup> Notarized statement from the property owner specifically consenting to the proposed use required and will be provided upon event agreement.

<sup>\*</sup>All volunteers and event staff must sign a waiver prior to working the event

# Level 3

Attendance

500 - 1,000

Crowd Control

3 - 4 People

Traffic Control

Number Determined by Lee County Sheriff's Office - Bridget Martin 239-477-1000

Parking Location

Six Bends Property and Six Bends Auxiliary Lot

Permitting

To be determined by Lee County

Volunteers Event Staff

Approx. 20 - 30

# Level 4

Attendance

1,001 - 2,500

**Crowd Control** 

5 - 10 People

Traffic Control

Number Determined by Lee County Sheriff's Office - Bridget Martin 239-477-1000

Parking Location

Six Bends Property and Six Bends Auxiliary Lot

Permitting

Special Events Permit

Volunteers Event Staff

Approx. 30 - 50

# Level 5

Attendance

2,501 - 5,000

**Crowd Control** 

11 - 20 People

Traffic Control

Number Determined by Lee County Sheriff's Office - Bridget Martin 239-477-1000

Parking Location

Six Bends Property, Six Bends Auxiliary Lot and offsite parking

Permitting

Special Events Permit

\*Beverages, bar and bartender are extra. See our al la carte menu for details

**Volunteers Event Staff** 

Approx. 50+

# SECTION 5 - SPACE RESERVATION

The following are included in your space reservation.

# Small Conference Room

X	Space
X	Up to (6) 5 foot tables
X	Up to (12) black chairs
	Use of dry erase boards and dry erase markers
	Use of TV Projection
	Basic event review/layout assistance

# Top Rocker Lounge

X	VIP Space
	(4) Over-sized chairs
	(6) Bar stools
	Mobile table
	Choice of music and music videos
	Basic event review/layout assistance

<sup>\*</sup>Additional permits, licenses, certifications, etc. may be required based upon event or event needs.

Triple Tree Room			
X Space			
Balcony Access			
Catering Kitchen Access (events	with food only)		
Up to (5) 6 foot tables			
Up to (5) black linens for 6 foot	tables		
Up to (8) 8 foot tables			
Up to (8) black linens for 8 foot	tables		
Up to (100) black chairs			
Use of projector, drop down scr	eens, podium and microp	hone	
Basic event review/layout assist	ance		
The Pit			
X Space			
Fire Pit			
Basic event review/layout assist	ance		
The Plaza	•		
X Space			
Basic event review/layout assist	ance		
Top Rocker Field			
X Space			
Pest control prior to event			
Grass maintenance prior to ever	nt		
Basic event review/layout assist			
SECTION 6 - DEPOSITS			
	ne event. The deposit will i	be returne	d upon satisfactory return of premises within
30 days post event			
Space	Value	Deposit	•
Small Conference Room	\$250 / Day	\$250	
Triple Tree Room	\$900 / Day	\$500	
Top Rocker Lounge	\$1,000 / Event	\$500	
The Pit	\$1,000 / Event	\$500	
The Plaza	\$2,000 / Event	\$1,000	
Top Rocker Field	\$5,000 / Event	\$2,500	
	<u></u>		
SECTION 7 - A LA CARTE M	ENU		
EVENT NEEDS			
Type	<u>Price</u>		Description
Event Staff	\$15.00 per hour per p	erson	Event staff can be supplied to assist
	, , ,		with event needs
Crowd Control Staff	\$15.00 per hour per p	erson	TBD

\$250.00	Set up tables, chairs, linens, intermediate AV needs (Top Rocker
\$500.00	Lounge and Triple Tree Room only), etc. Including, but not limited to, extensive set up of tables, chairs, linens, signs, other marketing materials, rentals, etc.
\$250.00	Tear down tables, chairs, linens, space reset, etc.
\$500.00	includes, but not limited to, extensive tear down of tables, chairs, other rented items, scheduling of pick ups, etc.
\$250.00	Empty trash cans, pick up event signs within the space reserved
\$500.00	including, but not limited to, extensive trash clean up, space reset, sign pick up, etc.
\$250 per four hours	Includes Six Bends' ServSafe Certified Staff Member
\$2 per bottle	Budweiser Products
\$4 per glass	Variety of red and white wines
\$2 per bottle	Pepsi Products
\$2 per bottle	Pepsi Products
	\$500.00 \$250.00 \$500.00 \$250.00 \$500.00 \$250 per four hours \$2 per bottle \$4 per glass \$2 per bottle

# RENTALS

If additional rentals are needed in addition to what is provided by Six Bends, we will gladly arrange rentals for you with our partners. We will pass each vendor's invoice through with 10% convenience fee per invoice. This does not include set up.

# FOOD

If catering is needed, we will gladly arrange rentals for you with our partners. We will pass each vendor's invoice through with 10% convenience fee per invoice. This does not include set up.

# LIVE ENTERTAIMENT

If live entertainment is needed, we will gladly arrange rentals for you with our partners. We will pass each vendor's invoice through with 10% convenience fee per invoice. This does not include set up.

\* Event planners are subject to post event billing should \$ix Bends incur additional invoices, costs or unexpected job duties not outlined in the agreement

# SECTION 8 - SAFETY AND COMPLIANCE

# SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items at the Applicant expense required by Lee County to protect the health, safety and welfare of the public. Six Bends shall have the power to review the application and require, as necessary, detailed plans, diagrams and explanations to clearly outline to Six Bends exactly what the Applicant is proposing.

# **INSURANCE**

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application and event, liability insurance of at least \$1 Million to protect against damages or other claims arising from use of Six Bends' property by the applicant or its guests. Other limits may also be established by Six Bends for events which will be serving or consuming alcoholic beverages. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. Fischer Florida Properties I, LLC, Motorsports of Fort Myers, LLC and Florida Hogs Commercial Owners Association must be named as "additional insured" on the Certificate of Insurance, which must be provided prior to Six Bends' property use. The Insurance may not be canceled during the term of the event. If this occurs, Six Bends has the right to revoke approvals related to use of the property of rate event, without recourse by the applicant.

# INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Six Bends against any and all claims, costs, demands, damages, judgements or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about sald Six Bends property or any building or structure appurtenant thereto or equipment thereof during the term of event or arising from any accident, injury or damage whatsoever, however caused, to any person or persons or to any property of any persons, corporation or corporations, occurring during the term of this agreement, on, in, or about said Six Bends Property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action on proceeding brought thereon.

# **DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES**

The Applicant agrees to accept Six Bends' Property on possession as being in satisfactory state of repair and in sanitary condition. The Applicant must surrender the premises to Six Bends 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 Six Bends 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, landscaping or any fixed objects is strictly prohibited. Applicant agrees to clear the Six Bends Property of litter at the close of the event.

# SECTION 9 - AGREEMENT

Please be sure to include the following at the time of a	ipplication.
Completed Questionnaire Signed Application Agreement	
Proof of Certificate of Insurance Coming.  Copy of Non-Proft Certificate (if benefiting	
Desired Layout Taylor has copies	or organizing)
Event Outline	
Bends' property at any time without prejudice. Applica	cretion, terminate and cancel its event application process to use Si ant further agrees to waive, release, save and hold harmless Six tions based upon Six Bends' cancellation or termination of said
The Applicant agrees that Six Bends' event application confirms use of Six Bends' property. An event approva	does not provide Applicant with any property rights to Six Bends or letter for use will be provided upon approval.
The Applicant does acknowledge and hereby affirms the knowledge.	nat any and all information is accurate to the best of his/her
Applicant Name	Applicant Signature
Witness Name 9/12/2016	Witness Signature
Date	Date



DIVISION OF CONSUMER SERVICES 2005 APALACHEE PXWY TALLAHASSEE FL 32399-6500

# FLORIDA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES COMMISSIONER ADAM H. PUTNAM

July 25, 2016

Refer To: CH569

MARCH OF DIMES FOUNDATION 1275 MAMARONECK AVE WHITE PLAINS, NY 10605-5201

RE: MARCH OF DIMES FOUNDATION

REGISTRATION#: CH569

EXPIRATION DATE: June 29, 2017

Dear Sir or Madam:

The above-named organization/sponsor has complied with the registration requirements of Chapter 496, Florida Statutes, the Solicitation of Contributions Act. A COPY OF THIS LETTER SHOULD BE RETAINED FOR YOUR RECORDS.

Every charitable organization or sponsor which is required to register under s. 496.405 must conspicuously display the registration number issued by the Department and in capital letters the following statement on every printed solicitation, written confirmation, receipt, or reminder of a contribution:

"A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE."

The Solicitation of Contributions Act requires an annual renewal statement to be filed on or before the date of expiration of the previous registration. The Department will send a renewal package approximately 30 days prior to the date of expiration as shown above.

Thank you for your cooperation. If we may be of further assistance, please contact the Solicitation of Contributions section.

Sincerely,

Cassie Miller
Cassie Miller
Regulatory Consultant
850-410-3719

Fax: 850-410-3804

E-mail: cassie.miller@freshfromflorida.com



# Consumer's Certificate of Exemption

DR-14 R. 04/11

# Issued Pursuant to Chapter 212, Florida Statutes

Certificate Number	Effective Date	Expiration Date	Exemption Category
85-8012566499C-5	09/30/2014	09/30/2019	501(C)(3) ORGANIZATION

This certifies that

MARCH OF DIMES FOUNDATION SOUTHWEST COAST FLORIDA DIVISION 6314 CORPORATE CT STE C3 FORT MYERS FL 33919-3516

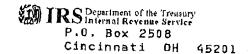
Is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



# Important Information for Exempt Organizations

DR-14 R: 04/11

- 1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
- Your Consumer's Certificate of Exemption is to be used solely by your organization for your organization's customary nonprofit activities.
- Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
- 4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
- 5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
- 6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration Information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.



In reply refer to: 0248219411 May 29, 2015 LTR 4168C 0 13-1846366 000000 00

00017224 BODC: TE

MARCH OF DIMES FOUNDATION % DAVID HORNE 1275 MAMARONECK AVE WHITE PLAINS NY 10605

008239

Employer Identification Number: 13-1846366
Person to Contact: Laura A. Botkin
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your May 19, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in September 1950.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0248219411 May 29, 2015 LTR 4168C 0 13-1846366 000000 00 00017225

MARCH OF DIMES FOUNDATION % DAVID HORNE 1275 MAMARONECK AVE WHITE PLAINS NY 10605

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Doris Kenwright, Operation Mgr. Accounts Management Operations 1

# JOIN US FOR THE MICHAL BIKERS TOR BABIES RIDE

Please visit www.BikersforBabies.org/SouthwestFlorida to register yourself and your team. Upon completing registration, you will receive a link for fundraising. Don't forget to share!

We have some great prizes for the highest-achieving fundraisers this year, and remember, the top fundraiser will lead the ride in 2017!

# RALLY FOR A CAUSE · NOV. 4-6, 2016

FRIDAY, NOV. 4TH

at Six Bends Harley-Davidson

**VIP Party** 

6:00PM - 8:00PM

SATURDAY, NOV. 5<sup>TH</sup>

at Six Bends Harley-Davidson

Car, Bike, & Truck Show by Florida Hot Rods &

Hogs

Music, vendors, & food

3:00PM - 6:00PM

3:00PM - 9:00PM

SUNDAY, NOV. 6TH

at North Collier Regional Park, ride to Six Bends Harley-Davidson



PRESENTED BY

Pre-Registration Kickstands Up Celebration & concert with James Otto 9:00<sup>AM</sup> - 10:45<sup>AM</sup> 11:00<sup>AM</sup>

12:00<sup>PM</sup> - 3:00<sup>PM</sup>

Must have a valid driver's license and sign waiver to participate in the ride.