

# **EVENT PERMIT**



Ordinance 14-15

# FALL CLEAN SWEEP RV SHOW

PERMIT NUMBER:

TMP2016-00329

Date(s) of Event:

Move in November 30-December 1, 2016, Show December 2-4, 2016, Move

Out Decmeber 5, 2016

Property Owner:

LEE COUNTY

Applicant:

FLORIDA RV TRADE ASSOCIATION

Contact: JACK CARVER

Description:

Annual Fall RV Show, December 2, 2016 through 4, 2016 from 10am to 5pm, with

Move-in on November 30, 2016 and Decmber 1, 2016 and Move-out on December

5, 2016

Location of event:

14100 BEN C PRATT SIX MILE CYPRESS PKWY FORT MYERS 33912

LEE COUNTY SPORTS COMPLEX\*\*\*239-482-6006

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

11-22-16

& Dists By Appleant 11-11-16



# **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



# **Event Application**

Check the appropriat	e 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	Fall Clean Sweep RV Show
Date(s) of Event / Production:	Move-in Wed. & Thurs., Nov. 30, Dec 1/Show Fri., Sat., Sun., Dec. 2-4/Move-out Mon., Dec. 5
Location(s) of Event:	CenturyLink-Lee County Sports Complex
Name of Applicant:	Florida RV Trade Association, Region 1/Jack Carver, Show Manager
Applicant Address:	630 Astarias Circle, Fort Myers, FL 33919
Applicant Phone Number:	239-482-6006
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	jcarverj@embarqmail.com
Estimated Attendance:	
Event Description: Include each activity, when activities take place, etc.	Annual Fall RV Show
Hours of Operation:	10 am to 5 pm daily
STRAP # of Parcel:	
Owner of Premises*:	Lee County Board of County Commissioners

<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 I	premises? events	
Are any temporary structures to be insta	alled for the event? Yes X No	Туре:
Do you have the appropriate permits for	the temporary structures?	Yes No
* For a 'Special Event' and 'Use of Counindentified, including all parking areas.	ty Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event:	Carron Insuarance Agency	
Note: Certificate of Insurance must be submitted	d at time of application	
Surety Company Bonding this Event (Na	me and Address):	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
▼ Yes	🔀 Yes 🦳 No	☐ Yes          No
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:  Ha	nchy Food Service	
Type of Food being Served: hot dogs, so	oda, etc.	
Section II - USE OF COUNTY PI	ROPERTY PERMIT	化可能性的 计多数分配 电电阻 医多性 加加 中国联系统代码 经基础存储 化合物 医克特伯氏试验 化自由性多数 使自由性 22 维克斯拉拉斯拉克
Organization Sponsoring the Event: Flo	rida RV Trade Association, Region 1	श्चारित प्रज्ञेन स्राप्त्रणात्रीयां संज्ञातामात्राम् २००० विश्वास्य स्थापात्रात्रीय । तस्य स्थापात्रीय स्थापाय स्थापित स्थापात्रीयां स्थापायां संज्ञातामात्राम् २००० विश्वास्य स्थापात्रीय १०० स्थापात्रीयां स्थापात्रीयां स्
	Solicitation in the County Rights-of-Wa	у:
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	
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES F	
Is alcohol being sold/consumed on Cou If Yes, then a "Lee County Alcohol Permit" is required.		Yes
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber:	·
	Division of Alcoholic Beverages and Tobacco may	also be required; please call (239) 344-0885 for



# Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

TV Movi	e or Special	TV Sei	ries / Pilot	L	TV Comme	rcial		Still Photos	
Public Se	ervice Announcemer	nt 🔲 Industi	rial / Documentary	, L	Other:				
ll any of t	the following be need	ded or include	d*?						
	Street Closure				☐ Yes		No	¢**	
	Traffic / Crowd Co	ntrol			Г Yes	Е	No		
	Fire or Burning				Yes	广	No		
	Explosives or Pyro	technics			Yes		No		
	Animals, Large or	Small	and the second s	·····	Yes		No		
	Construction of A	ny Kind	50 AS 180 COST ATTENDED 1 TO 1 T		☐ Yes		No	and the second	
	Large and/or Num	nerous Vehicle	S		┌ Yes		No		
	Helicopters, Boats	s, etc.			☐ Yes		No		
	Stunts				☐ Yes		No		
	Other		-		☐ Yes	П	No		
in a sint D									
Special Pa	arking Requirements	:							
	arking Requirements ounty Services Requi		el, equipment, faci	ilities, e	tc.)				
City or Co		red: (Personne	cal and state record	ds on pı	oduction in			rack the econo	omic impact
City or Co	ounty Services Required and services and services required and services and services and services are services and services are services and services are services and services are services are services and services are services are services.	red: (Personne	cal and state record	ds on pı	oduction in sely as possik	ole.		rack the econo	omic impact
City or Co The follow	ounty Services Required wing information is retry. If exact figures and Cast:	red: (Personne	cal and state record le, please estimate	ds on pi e as clos	oduction in ely as possik	ole.			omic impact

#### **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.

Agent	Carry
Signature of Applicant	Witness
Thomas M Messe	Dack Carry
Print Name of Applicant and Title	Print Name of Witness
1/-/7-/6	Date



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

Check the appropria	te box(es) belo	w:
SPECIAL EVENTED TO SPECIAL EVENTED TO SPERMIT TO FILM PERM	JNTY PROPERTY P SELL AND CONSUI	ERMIT ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL ICANT TO COMPL	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Parking:	Parking in authorized	d parking areas only.
Deputies (How Many?):	None	
Fee for Services:	None	
Special Arrangements:	None	
		Capt. Scott Lucia  Digitally signed by Capt. Scott Lucia Date: 2016.11.14 14:24:08 -05'00'
	Title:	Special Events, Permits and Details
	Date:	14 November 2016



## FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.

Please see User's Guide for contact information and Fire District Map.

Check the appropr	iate box(es) bel	ow:		
SPECIAL E	VENT PERMIT			
USE OF CO	OUNTY PROPERTY	PERMIT		
☐ FILM PERM	ИIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL			OW WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Fire Guards (How Many?)	1 certified crowd m	anager		
Fee for Services:	55.00 per tent over	900 sq ft.		
Flammable Vegetation:	Cleared from aroun	d tents		
First Aid Equipment:	call 911 if needed			
Fire Extinguishing:	Minimum 2A 10 BC propane kept 10 fee	at all tents , any cooking t et away from tents and sec	ents, food trucks, or trailers must cured as to not tip over	be NFPA 96 compliant.
Special Arrangements:	None.			
			•	
	Print Name:	James Tanner		-
	Signature:	James Tanner	Digitally signed by James Tanner Date: 2016.11.14 08:24:47 -05'00'	-
	Title:	Fire Marshal		-
	Date:	Nov 14, 2016		



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

Check the appropria	te box(es) below	: :		
SPECIAL EVE	NT PERMIT			
1 4 4 7 4 8 7 1	INTY PROPERTY PE	RMIT		
FILM PERMI	and the state of t			
AFTER REVIEWING THE A	APPLICATION, PLEA CANT TO COMPLY	ASE INDICATE BELOW WITH FOR THEIR EVENT	WHAT ARRANGEMENTS YC r.	OUR ORGANIZATION
Treatment Facilities:	None necessary.			
Medical Personnel:	None necessary.			
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	No additional precau	tions 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	, contact our office at
	Print Name:	Benjamin Abes		
			Digitally signed by Benjamin Abes	
	Signature:	Benjamin Abes	Date: 2016.11.11 15:00:23 -05'00'	
	Title:	Chief		

11/11/2016

Date:



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

Check the appropri	ate box(es) belo	ow:		
SPECIAL EV      USE OF CO      PERMIT TO      FILM PERM	UNTY PROPERTY F SELL AND CONSU	PERMIT IME ALCOHOLIC BEVER	AGES WITHIN LEE COUNTY	FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL ICANT TO COMPL	EASE INDICATE BELOV Y WITH FOR THEIR EVE	V WHAT ARRANGEMENTS NT.	YOUR ORGANIZATION
Parking:	No event parking or	n or within 10 feet of Lee Co	ounty maintained road rights-of	-way.
Ingress and Egress:	Use all established i	means of ingress and egres	S.	
Special Arrangements:	1	Bryan Miller Bryan D. Miller Senior Project Manager November 16, 2016	vith traffic control as needed.  Digitally signed by Bryan D. Miller Date: 2016.11.16 08:03:11 -05'00'	
	Date:	November 16, 2016	,	-

5 42 D. W.



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

Check the appropri	ate box(es) bel	ow:		
☐ USE OF CO			RAGES WITHIN LEE COUNT	Y FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APP			N WHAT ARRANGEMENTS ENT.	S YOUR ORGANIZATION
Illumination:	high traffic event. I	that will be set up in our ma t is has been a steady flow t d December 1st and the sh	ain parking lots in front of the s hroughout the days of the sho ow is December 2,3 and 4.	tadium. This has not been a w which will be set up
Parking Areas:	meet the needs of	show will park in the same a the CenturyLink Sports Cor ommodate the softball ever	area. Work with on site staff to on site staff to on plex which also have to meet not that weekend.	ensure event is set up to the needs of the Twins and
Special Arrangements:	ensure the facility i	s clean and free of debris. A d any other equip need to e	on site staff to ensure proper s Ilso the event promoter is to pr ensure a safe event and meet th eral with us and is familiar with	ovide staff and and traffic se rules of the Complex. This
		Lance Lance and an		
	Print Name:	Jesse Lavender	Divisible size of by loss lawards	_
	Signature:	Jesse Lavender	Digitally signed by Jesse Lavender Date: 2016.11.15 10:55:45 -05'00'	
	Title:	Acting Deputy Director		_
	Date:	Nov 15, 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	e box(es) below:
PERMIT TO S	NTY PROPERTY PERMIT ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
nsurance Requirements: ,	Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.
Special Arrangements:	A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as ar additional insured.  Subject to proof of insurance.
	Print Name: Mike Figueroa  Signature:  Title: Risk Program Manager
	Date: November 15, 2016

DATE (MM/DD/YYYY) 10/06/2016

# CERTIFICATE OF LIABILITY INSURANCE

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). **Janet Sturm** PHONE (A/C, No, Ext); 813-926-0512 E-MAIL ADDRESS: FAX (A/C, No): 813-774-5159 Carron Insurance Agency PO Box 340344 Tampa, FI 33694 1010 W. Cass St Tampa, FL 33606 Louis J Carron Jr NAIC # INSURER(S) AFFORDING COVERAGE INSURER A: WESTERN WORLD Florida RV Trade Assoc., Inc. INSURER B: INSURED Mr. Lance Wilson INSURER C: 10510 Gibsonton Drive INSURER D Riverview, FL 33578 INSURER E: INSURER F: **REVISION NUMBER:** CERTIFICATE NUMBER: COVERAGES THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) ADDL SUBR LIMITS POLICY NUMBER TYPE OF INSURANCE 1,000,000 EACH OCCURRENCE \$ COMMERCIAL GENERAL LIABILITY Α DAMAGE TO RENTED PREMISES (Ea occurrence) 100,000 10/01/2016 10/01/2017 \$ X NPP8321974 CLAIMS-MADE X OCCUR Х 5,000 MED EXP (Any one person) 10,000,000 \$ PERSONAL & ADV INJURY 2,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: INCLUDED PRODUCTS - COMPIOP AGG PRO-JECT POLICY \$ OTHER: COMBINED SINGLE LIMIT (Ea accident) **AUTOMOBILE LIABILITY** BODILY INJURY (Per person) \$ ANY AUTO **BODILY INJURY (Per accident)** \$ SCHEDULED ALL OWNED AUTOS PROPERTY DAMAGE (Per accident) AUTOS NON-OWNED HIRED AUTOS AUTOS s \$ EACH OCCURRENCE UMBRELLA LIAB OCCUR \$ AGGREGATE **EXCESS LIAB** CLAIMS-MADE RETENTION \$ DED STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT NIA E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT | \$ If yes, describe under DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) CERTIFICATE HOLDER IS NAMED AS ADDITIONAL INSURED ALONG WITH WAIVER OF SUBROGATION AS REQUIRED BY WRITTEN CONTRACT IN REGARDS TO THE GENERAL LIABILITY. SHOW NAME: FALL CLEAN SWEEP RV SHOW. SET UP: 11/30-12/01/2016, SHOW DATE: 12/02-04/2016, TEAR DOWN: 12/04-05/2016. SPECIFIC LOC: CENTURY LINK-LEE COUNTY SPORTS COMPLEX, 14230 BEN PRATT 6 M CYPRESS PKWY, FT MYERS ou MP 11/15/2016 CANCELLATION CERTIFICATE HOLDER **LEECOUB** SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lee County Board of County Commissioners **AUTHORIZED REPRESENTATIVE** 14230 Ben Pratt Six Mile Cypress Parkway Fort Myers, FL 33912



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

Check the appropria	ite box(es) below	<b>/:</b>				
☐ FILM PERM	IT ONLY					
AFTER REVIEWING THE AVELOR OF THE APPLICATION OF TH	APPLICATION, PLEA CANT TO COMPLY \	SE INDICATE WITH FOR THI	BELOW WH. EIR EVENT.	AT ARRANGEN	MENTS YOUR (	ORGANIZATION
Special Arrangements:						
Other:						
			,			
- 2	Print Name: Signature:					
	Title:					
	Date:					