

EVENT PERMIT



Ordinance 14-15

OCTIFEST2017

PERMIT NUMBER:

TMP2016-00343

Date(s) of Event:

April 8, 2017 from 6:00pm until 10:00pm

Property Owner:

LEE COUNTY

Applicant:

SANIBEL SEA SCHOOL

Contact: KRISTIN HIDEG

Description:

Annual fundraiser and ocean celebration including cocktail hour, seated dinner,

silent/live auction, and music

Location of event:

SANIBEL CSWY FORT MYERS

CAUSEWAY ISLAND A / WEST SIDE OF CAUSEWAY ISLAND A***239-472-8585

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?

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

1 # 1 1

County Manager

Date

11-2216



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



Event Application

Check the appropriate box(es) below:

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

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Octifest 2017
Date(s) of Event / Production:	Saturday, April 8th, 2017 (set up will begin the day before on Friday, April 7th, 2017)
Location(s) of Event:	The west side of Causeway Island A, closest to Fort Myers.
Name of Applicant:	Sanibel Sea School
Applicant Address:	P.O. Box 1229 Sanibel, FL 33957
Applicant Phone Number:	(239) 472-8585
Contact Person: (If different from applicant)	Kristin Hideg
Contact Phone Number: (If different from applicant)	(same as applicant phone number)
Email Address:	kristin@sanibelseaschool.org
Estimated Attendance:	175-250
Event Description: Include each activity, when activities take place, etc.	Octifest is the annual fundraiser and ocean celebration put on by and benefiting Sanibel Sea School. It is not open to the general public, attendees are required to pre-purchase tickets to the event. There will be a cocktail hour, a seated dinner, silent and live auctions, and music throughout the night. Please see attached narrative for further detail.
Hours of Operation:	April 7th, 2017 setup. April 8th Event 6:00pm-10:00pm. April 9 Clean-up by 9:00am
STRAP # of Parcel:	N/A
Owner of Premises*:	Lee County Government

^{*}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? Park		
Are any temporary structures to be inst	alled for the event? X Yes No	Type: Tent	
Do you have the appropriate permits fo	r the temporary structures?	▼ Yes	∏ No
* For a 'Special Event' and 'Use of Coun indentified, including all parking areas.	ty Property' permit, submit a site plan wit	th all proposed	facilities and activities
Insurance Company Insuring the Event:	First Non-Profit Insurance Company		
Note: Certificate of Insurance must be submitte	d at time of application		
Surety Company Bonding this Event (Na	ame and Address):		
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?		holic Beverages be sumed at this Event?
⊤Yes ∏ No	⊠ Yes	⊠ Ye	s 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.		liability coverage must be he certificate of insurance.
	/ebster's Catering 7565 Rockefeller Cir., Fort Myers, FL 3396	37	
Type of Food being Served: Hors D'oet	uvres, salad, vegeterian dish, fish/ meat di	sh, dessert	
Type of Food being Served.			
Section II - USE OF COUNTY P	ROPERTY PERMIT		
Organization Sponsoring the Event: Sa	anibel Sea School		
	Solicitation in the County Rights-of-Way	/:	
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	is exempt from this	s requirement. §316.2045)
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES P	ERMIT	
Is alcohol being sold/consumed on Cou If Yes, then a "Lee County Alcohol Permit" is required.	nty Property? Only non-profit organizations can sell alcohol on County	Yes Yes	☐ No
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber: Alcohol is being consumed, not sold.		
Please note: 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 Series / Pil	ot	TV Comme	rcial	┌ Still	Photos	
Public Service Announce	ement Industrial / Do	cumentary Γ	Other:		,		
ll any of the following be	needed or included*?						
Street Closur	r e		┌ Yes	I	No ol		
Traffic / Crov	vd Control		┌ Yes	i	Vo		
Fire or Burnir	ng		┌ Yes	<u> </u>	No		
Explosives or	Pyrotechnics		┌ Yes		No	-	
Animals, Larg	ge or Small		┌ Yes	Г	No		
Construction	of Any Kind		┌ Yes	Гι	Vo		
Large and/or	Numerous Vehicles		┌ Yes	<u> </u>	No		
Helicopters, I	Boats, etc.		☐ Yes		No		
Stunts			☐ Yes	Г	No		
Other			☐ Yes	Г	No		
For any marked Yes, pro	ovide further details below:	•					
For any marked Yes, pro							
Special Parking Requirem			etc.)				
Special Parking Requirem City or County Services R	ents:	oment, facilities, tate records on p	production in	Florida 1	to track t	he econo	mic imp
Special Parking Requirem City or County Services R	nents: dequired: (Personnel, equip n is required for local and s ares are not available, pleas	oment, facilities, tate records on p	production in esely as possib	ole.	to track t		mic imp
Special Parking Requirem City or County Services R The following information the industry. If exact figures	nents: dequired: (Personnel, equiponel) n is required for local and some sare not available, please	oment, facilities, tate records on p se estimate as clo	production in psely as possib	ole.			mic imp

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

Christy Busturk Development

Print Name of Applicant and Title

Date

Natural Hidea

Witness

Witness

Witness

Witness

No. 19/16

Date



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

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

Check the appropriate box(es) below: [X SPECIAL EVENT PERMIT

FILM PERMIT

 Γ_{X} USE OF COUNTY PROPERTY PERMIT

	ICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized parking areas only.
Deputies (How Many?):	Two deputies from 1700-2300 for traffic control and to assist with parking. Deputies will also assist with getting attendees safely to the event.
Fee for Services:	\$50/hr per deputy plus \$15 vehicle fee
Special Arrangements:	None
	Print Name: Capt. Scott Lucia Signature: Capt. Scott K. Lucia Title: Special Events, Permits and Details Date: 1 November 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
Escort Boat	\$40/hr \$40/hr	Traffic Supervisor Civil Stand-by	\$60/1 \$60/1

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)	Total Hours 6/each	Rate per Hour	Vehicle Rate
Total Cost for Detail \$630			
Vender Signature		12/16	
Vender Signature	Date	e	



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

Page 1 of 2

LCSO Form 389 (revised 5/1/2015 B.Martin 07-252)

LCSO Details Ma	in Phone Number:	239-477-1199
Ve	endor Information	
Business Name: Sanibel Sea School	ol	
Street: P.O. Box 1229		
	State: FL	Zip Code: 33957
Business Contact: Kristen Potter	Kristin Hidea	Phone: 239-472-8585
Email Address: -kristen@sanibelse		tin Osgnibelseaschool-org
Email Address:	Erio	THE POSSING THE SEA TOWNS INC.
E	vent Information	
Detail Location: Causeway Island S	Span A	
Street:		
City:	State:	Zip Code:
Contact During Event:		Phone:
Event Date: 4/8/17	Event Time: 1700)-2300
Anticipated Crowd Size : 175-250	Type of Event: Fu	ndraiser
Additional Security Working Detail:	1 / 1	w many?
Permits Attached: Yes No	Alcohol Served:	
	etail Information	
Security Traffic	Y	Prisoner Transport
Escort Holiday		Funeral Escort
Last Minute Stand-	by Ш	
Marked Vehicle Yes No	Unmarked V	/ehicle Yes No
Uniformed Deputy Yes No	Plain Clothe	s Deputy Yes Y No
Detail Description:		
2 Deputies for security and traffic control duri	ng event.	





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:

F SPECIAL EVE	NT PERMIT
🔀 USE OF COL	INTY PROPERTY PERMIT
FILM PERMI	Т
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	NO FIRE GUMBOS / WATCH REQUIRED
Fee for Services:	No fee for Services
Flammable Vegetation:	N/A
First Aid Equipment:	SEE. LEE POINTY EMS
Fire Extinguishing:	NO ADDITIONAL EXTINGUISHING EQUIPMEN REQUIRES
Special Arrangements:	None
	Print Name: R D WALL Ships from Signature:
	Date: OCTOBER 07, 2016
	Page 7



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		
₩ USE OF CO	OUNTY PROPERTY P	ERMIT	
Francisco P			OUR CROANIZATION
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOU WITH FOR THEIR EVENT.	JUR ORGANIZATION
Treatment Facilities:	None necessary.		
Medical Personnel:	None necessary.		
Medical Supplies / Equipment:	None necessary.		
Safety Requirements:	No additional precau	ntions necessary.	
Fee for Services	Not applicable.		
Special Arrangements:	Please call 911 in the 239 533-3911.	event of an emergency. To arrange special event coverage,	contact our office at
	Print Name:	Benjamin Abes	
	Signature:	Benjamin Abes Digitally signed by Benjamin Abes Date: 2016.10.21 08:26:04 -04'00'	
	Title:	Chief	
	Date:	10/21/2016	



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

Check the appropri	ate box(es) be	low:		
Constant Con	OUNTY PROPERTY SELL AND CONS		RAGES WITHIN LEE COUNT	Y FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPI			OW WHAT ARRANGEMENTS /ENT.	YOUR ORGANIZATION
Parking:		areas as directed by Parks the Sanibel Causeway edgo	& Recreation. At a minimum, No e of pavement.	event parking within
Ingress and Egress:	Use all established	means of ingress and egre	2SS.	
Special Arrangements:	Use Lee County Sh	eriff's Office for assistance	with traffic control as needed.	
	Print Name: Signature: Title:	Bryan D. Miller Senior Project Manager	Digitally signed by Bryan D. Miller Date: 2016.10.20 12:10:13 -04'00'	
	Date:	October 20, 2016		



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

Check the approp	riate box(es) be	elow:			
☑ USE OF C			OLIC BEVERAGES W	ITHIN LEE COUNTY	/ FACILITIES
AFTER REVIEWING TH WILL REQUIRE THE API				ARRANGEMENTS	YOUR ORGANIZATION
illumination:	Directional, event or affect traffic on	, pathway and p the Causeway.	arking area lighting is r	equired and should n	ot be directed at roadway
		* *** * *			
Parking Areas: Special Arrangements:	See attached lette Follow guldelines Office.	 r for additional r and requiremen	equirements. ts for controlled area to	o consume alcohol as	per Lee County Sheriff's
	Print Name: Signature: Title: Date:	JESSE June Acting D 10/26/2016	LAVENDER Youdh DEputy Directo	N	,
Special Arrangements:	Print Name: Signature: Title:	JESSE Active D	LANEAUDER Janeh		per Lee County Sheriff's

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

Check the appropriat	te box(es) below:
SPECIAL EVE	
en ar	NTY PROPERTY PERMIT ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES T
	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.
	In addition, Host Liquor Liability Insurance will be required with minimum limits of One Million Dollars (\$1,000,000) per occurrence. Should Host Liquor Liability coverage be afford under the Commercial General Liability policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.
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: October 28, 2016



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/25/2016

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	noider in hea of such e	luursen	enita)·	T	211						
PRODUCER						CONTACT Chris Heidrick						
Heidrick & Company Insurance and Risk Management						PHONE (A/C, No, Ext); (239) 579-0660 FAX (A/C, No); (888) 767-1665 E-MAIL: Chris@SanibelInsurance.com						
Services LLC						E-MAIL ADDRESS: Chris@SanibelInsurance.com						
1648 Periwinkle Way STE A						INSURER(S) AFFORDING COVERAGE						
Sanibel	FL	33957			INSURER A: First Nonprofit Insurance Company					010859		
INSURED					INSURER B:							
Sanibel S	ea School, Inc				INSURER C:							
414 Lagoo	n Dr.				INSURE	RD:		The state of the s				
					INSURER E :							
Sanibel	FL	33957			INSURER F:							
COVERAGE	S	CERTIF	CATI	NUMBER:16-17 COI	I GL/AUTO/UMB REVISION NUMBER:							
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.												
INSR LTR	TYPE OF INSURANCE	ADD	SUBR				POLICY EXP (MM/DD/YYYY)	LIMIT	s			
	MERCIAL GENERAL LIABILITY	IIVSL	YYYU	I OLIC NUMBER		(MINICULTITY)		EACH OCCURRENCE	s	1,000,000		
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000		
		x		NPP100403702		4/16/2016	4/16/2017	MED EXP (Any one person)	\$	5,000		
								PERSONAL & ADV INJURY	\$	1,000,000		
GEN'L AGO	REGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	s	3,000,000		
X POLIC					- 1			PRODUCTS - COMP/OP AGG	\$	Excluded		
OTHE									\$			
	LE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000		
ANY	UTO					•		BODILY INJURY (Per person)	\$			
A ALLO	WNFD SCHEDULED			NCA100403802	ĺ	4/16/2016	4/16/2017	BODILY INJURY (Per accident)	\$			
X HIRE	- NON-OWNER)			J			PROPERTY DAMAGE (Per accident)	\$			
Tince	AUTOS AUTOS	.						(Fer accident)	\$			
A X UMBR	ELLA LIAB X OCCUR		†	NMB100642702		4/16/2016	4/16/2017	EACH OCCURRENCE	\$	1,000,000		
EXCE	SS LIAB CLAIMS-I	MADE						AGGREGATE	s	1,000,000		
DED	••	000							\$			
WORKERS COMPENSATION					***************************************		PER OTH- STATUTE ER					
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE								E.L. EACH ACCIDENT	\$			
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)								E.L. DISEASE - EA EMPLOYEE				
f yes, describe under DESCRIPTION OF OPERATIONS below								***************************************	<u></u>			
DEGGRA III	JI OF OF ENAMOND SCION		 					LL DIOLITOL TOLIOT CHITT	<u> </u>			
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) The Lee County Board of County Commissioners is added as Additional Insured as respects General Liabiltiy for the Octifest 2017 event to be held on the West Side of Sanibel Causeway Island A On 4/8/2017, with set up on 4/7/2017.												
CERTIFICATE HOLDER					CANCELLATION							
						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						
					Chris Heidrick/MR							
						@ 40	00 2011 AC	TOD CODDODATION .	A II wind	to recented		



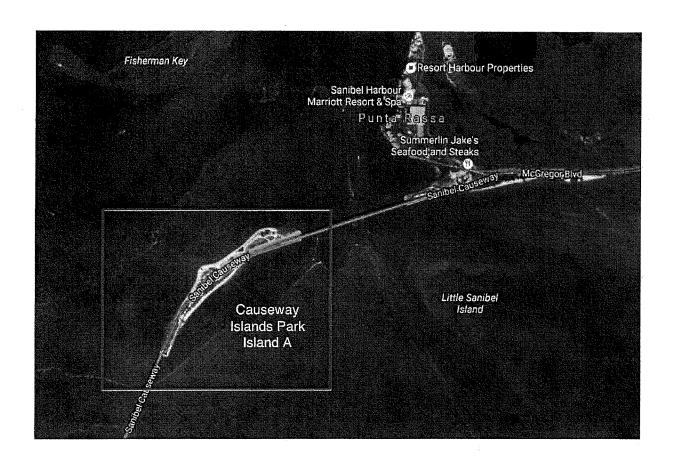
CERTIFICATE OF LIABILITY INSURANCE

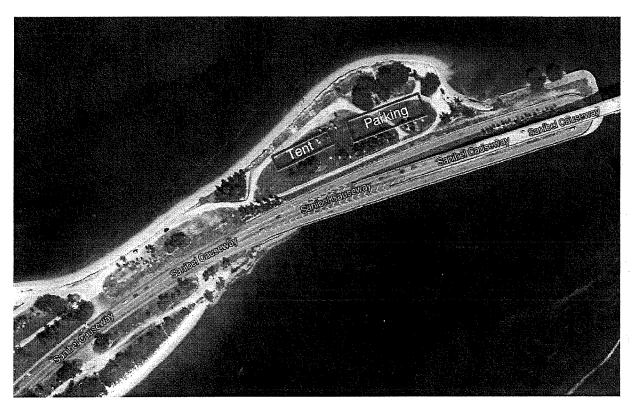
DATE (MM/DD/YYYY) 10/28/2016

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).													
PRODUCER							CONTACT Katrina Willard						
Lott & Gaylor Inc						PHONE (239) 337-2221 FAX (A/C, No): (239) 337-4934							
2120 W. First St.						E-MAIL ADDRESS: kwillard@lott-gaylor.com							
						INSURER(S) AFFORDING COVERAGE					NAIC#		
For	t Myers	FL 339	01			INSURER A :FCCI Insurance Company					10178		
INSURED						INSURER B:							
	Spike Foods LLC,	DBA: Jor	dan	Wel	bster Catering	INSURER C:							
	65 Rockefeller Ci				_	INSURER D:							
1/505 ROCKETETIEL CIL						INSURER E :							
Fort Myers FL 33967						INSURER F:							
2 T T T T T T T T T T T T T T T T T T T													
THIS IS TO CERTIEV THAT THE POLICIES OF INSURANCE LISTED BELOW HA						AVE 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.													
INSR LTR	TYPE OF INSURAN	CE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s			
	X COMMERCIAL GENERAL								EACH OCCURRENCE	\$	1,000,000		
A	CLAIMS-MADE X	OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000		
^ h	CD SINC III CD	, 55551.	х	СРР0011790 7		10/25/2016	10/25/2017	MED EXP (Any one person)	\$	5,000			
r									PERSONAL & ADV INJURY	\$	1,000,000		
r	GEN'L AGGREGATE LIMIT APP	IES DEB-							GENERAL AGGREGATE	\$	2,000,000		
-	X POLICY PRO-	LOC								\$	2,000,000		
H									Employment Practices Liability	\$	100,000		
-	OTHER: AUTOMOBILE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)	\$			
-									BODILY INJURY (Per person)	\$			
ŀ	ANY AUTO ALL OWNED SO	CHEDULED							BODILY INJURY (Per accident)	\$			
H	AUTOS AL	JTOS ON-OWNED							PROPERTY DAMAGE	\$			
-	HIRED AUTOS AL	JTOS							(Per accident)	\$			
		ī							EACH OCCUPRENCE	\$			
-	UMBRELLA LIAB	OCCUR							EACH OCCURRENCE	s			
	EXCESS LIAB	CLAIMS-MADE							AGGREGATE				
	DED RETENTIONS	i							PER OTH- STATUTE ER	\$			
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N								1, 5, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,					
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?			N/A						E.L. EACH ACCIDENT	\$			
- 1	(Mandatory in NH) If yes, describe under								E.L. DISEASE - EA EMPLOYEE				
DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POLICY LIMIT \$					
A	LIQUOR LIABILITY				CPP0011790 7		10/25/2016	10/25/2017	EACH OCCURRENCE	\$	1,000,000		
									AGGREGATE LIMIT	\$	2,000,000		
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) REF: OCTIFEST @ SANIBEL SEA SCHOOL - EVENT DATE: 4/8/2017. Lee County Board of County Commissioners and Sanibel Seach School, 455 Feriwinkle Way, Sanibel FL 33957, are named Additional Insured as respects General Liability coverage.													
CERTIFICATE HOLDER						CANCELLATION							
mfigueroa@leegov.com							-						
Lee County Board of County Commissioners P.O. Box 398 Fort Myers, FL 33902					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
TOTA MYCEO, III COOTA					AUTHO	RIZED REPRESE	ENTATIVE						
						Phil Gaylor/KBW Alley M Saylor							
							@ 10	88-2014 AC	ORD CORPORATION.	All ric	thts reserved.		







John E. Manning District One

Cecil Pendergrass District Two

October 25, 2016

Larry Kiker District Three

Mike Hamman District Four

To Whom It May Concern;

Frank Mann District Five

Roger Desjarlais County Manager

Richard Wm. Wesch County Attorney

Donna Marie Collins County Hearing Examiner The Sanibel Sea School is granted permission to use the Lee County Park known as Causeway Islands Park, for their annual event "Octifest" on Saturday, April 8, 2017 as detailed and approved in the Event Application.

They will be required to pay a park rental fee of \$750.00 and for county staff to be on site from 5pm to 11pm at overtime rate of time and half. Exact amount will be determined and payment will be required prior to the event. They are required to keep all parking and event setup at the northern end of the Island A on the bayside. Event staff will need to monitor and control parking and traffic flow.

Portable restrooms, lightning, all event supplies, setup, breakdown, clean up, security and parking attendance will be provided by the Sanibel Sea School. Event setup (tent, portable restrooms, tables, chairs, generated lighted, trailers, etc.) can be set up prior to the event day on Friday, April 7, 2017 and all equipment and supplies should be removed by the end of the event or by 9 am Sunday, April 9, 2017.

County staff will close off designed event area to the general public by 4 pm on Saturday, April 8th. County staff will provide an additional 6 trash receptacles for the event and will monitor and remove trash.

A completed copy of permits must be provided to the park supervisor along with the staff fee payment prior to the event.

Sincerely,

Kathy Loomis West District Manager Lee County Parks & Recreation