

# **EVENT PERMIT**



Ordinance 14-15

# WEDDING RECEPTION

**PERMIT NUMBER:** 

TMP2017-00074

Date(s) of Event:

September 23, 2017 from 6:00pm until 11:00pm

Property Owner:

LEE COUNTY

Applicant:

HARRY PITCHOK

Contact: HARRY PITCHOK

Description:

Private Wedding Reception

Location of event:

131 135 1ST ST W/236/240 BANYAN ST/170 PARK BOCA GRANDE 33921

LOUISE DUPONT CROWNINSHIELD HOUSE/\*\*\*516-203-6111

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

County Manager

Date



# **Event Application**

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

1MP2017-00014



# **Event Application**

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

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	WEDDING RECEPTION
Date(s) of Event / Production:	SATURDAY, SEPTEMBER 23, 2017
Location(s) of Event:	LOISE DUPONT CROWNINSHIELD HOUSE IN BOCA GRANDE
Name of Applicant:	HARRY PITCHOK
Applicant Address:	620 CADIA RD. VENICE, FL 34285
Applicant Phone Number:	1-516-203-6111
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	hpitchok@gmail.com
Estimated Attendance:	100 GUESTS
Event Description: Include each activity, when activities take place, etc.	PRIVATE WEDDING RECEPTION, DINNER, DANCING, MUSIC
Hours of Operation:	SET-UP ALL DAY, RECEPTION FROM 6:00PM - 11:00PM
STRAP # of Parcel:	14432001000050010
Owner of Premises*:	LEE COUNTY GOVERNMENT

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



# Fill out the following questions for all permit types:

What is the Zoning Classification of the $$	premises? PUBLIC FACILITY	
Are any temporary structures to be insta	alled for the event? Yes 🔀 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:	TBD	
Note: Certificate of Insurance must be submitted	d at time of application	
Surety Company Bonding this Event (Na	me and Address): N/A	
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	X 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 N/.	A	
Type of Food being Served: RECEPTION	FOOD	
Type of rood being served.		OPECES AND PROPERTY OF THE PRO
Section II - USE OF COUNTY P	ROPERTY PERMIT	
Organization Sponsoring the Event: PRI	VATE EVENT	Auditation (N. C. C. C. S. Thairstainna Man (Th. C.
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	<i>y</i> :
Name of Charity:		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration num	ber:	
(Proof of registration with the Dept. of Agriculture &	Consumer Services §496.405 or proof the organization	is exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPT	ON OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being xdx/consumed on Court If Yes, then a "Lee County Alcohol Permit" is required.	nty Property? CONSUMED ONLY Only non-profit organizations can sell alcohol on County	✓ 🔀 Yes 🔲 No y Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber:	
<b>Please note:</b> A permit from the State of Florida further details	Division of Alcoholic Beverages and Tobacco may	also be required; please call (239) 344-0885 for



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pe of Production (choose  TV Movie or Special	TV Series /	Pilot		TV Comme	rcial [	Still Photo	
Public Service Announce	Manual Community and the Community of th	eservices es resulve a recesiones		Other:	I CIGI	Juli 1 110to.	
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ill any of the following be							
Street Closur				☐ Yes	☐ No	or o	
Traffic / Crow				Yes	☐ No	) ************************************	
Fire or Burnir		a manakanananan pe adakan mana men		☐ Yes	∏ No		
Explosives or	Pyrotechnics	·/···		☐ Yes	☐ No	) ,,,,,,,	
Animals, Larg	y managa a wan ang managa a sa managa a way sa a na ana a na a sa			☐ Yes	┌ No	), in	
Construction		,,,,,,		┌ Yes	☐ No		
<u> </u>	Numerous Vehicles			Yes	∏ No		
Helicopters, I	Boats, etc.		ananaya a w	☐ Yes	∏ No		
Stunts	·			☐ Yes	☐ No	)	
Other				Yes	☐ No	)	
* For any marked Yes, pro	vide further details belo	vw:					
		ow:					
* For any marked Yes, pro Special Parking Requirem		vw:					
		vw:					
		w:					
Special Parking Requirem	ents:		ties, et	c.)			
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#### **Applicant Agreement - Signature Required**



#### **SECTION I - SAFETY**

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

#### **SECTION II - INSURANCE**

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

#### **SECTION III - INDEMNIFICATION**

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

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted permises or improvement thereto, or arising from the use of the premises.

#### SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

#### **Applicant Agreement - Signature Required**



#### **SECTION V - AGREEMENT**

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of this her knowledge.

Signature of Applicant

Print Name of Applicant and Title

Print Name of Witness

1/30/17

Date



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

Check the approprio	te box(es) below:
	ENT PERMIT
Province and the second	JNTY PROPERTY PERMIT
	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	T .
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only.
Deputies (How Many?):	
Fee for Services:	
Special Arrangements:	Alcoholic beverages must stay within the confines of the event area.
1	
	Print Name: Captain J Loethen
	Signature: Capt of for for 92149
	Title: Special Events, Permits and Details
	Date: 6-27-17



#### FIRE DEPARTMENT

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

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

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

TX USE OF C	OUNTY PROPER MIT	TY PERMIT
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, LICANT TO COM	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)		None
Fee for Services:		None
Flammable Vegetation:		None
First Aid Equipment:		
		None
Fire Extinguishing:		None
Special Arrangements:		În case of emergency - Dial 911
	Print Name:	C.W. Blosser
	Signature: Title:	Fire Chief
	Date:	08/07/2017



# 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	UNTY PROPERTY P	ERMIT		
FILM PERM	41 <u>T</u>			
AFTER REVIEWING THE WILL REQUIRE THE APPI			V WHAT ARRANGEMENTS Y NT.	OUR ORGANIZATION
Treatment Facilities:	None necessary.	-		
Medical Personnel:	None necessary.			
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	No additional precau	utions necessary.		
Fee for Services	Not applicable.			
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. T	o arrange special event coverage	e, contact our office at
	Print Name:	Benjamin Abes		
	Signature:	Benjamin Abes	Digitally signed by Benjamin Abes Date: 2017.02.21 07:54:47 -05'00'	
	Title:	Chief		
	Date:	02/21/17		



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

Check the appropri	ate box(es) be	low:	
SPECIAL E	/ENT PERMIT		
☑ USE OF CC	UNTY PROPERTY	PERMIT	
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	/ FACILITIES
☐ FILM PERN	/IIT		
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS PLY WITH FOR THEIR EVENT.	YOUR ORGANIZATION
WILL REQUIRE THE AFF	LICANT TO COMP	ET WITH ON THEIR EVENT.	
Parking:	Park in designated prohibited.	areas. No event parking on County maintained road rights	-of-way where parking is
Ingress and Egress:	Use all established	means of ingress and egress.	
*			
Special Arrangements:	None.		
Special / transcriteries.	TAOTIC.	÷	
	*		
	***************************************		
	Print Name:	Bryan Miller	
	Signature:	Bryan D. Miller  Digitally signed by Bryan D. Miller  Date: 2017.06.26 14:49:58 -04'00'	
	Title:	Senior Project Manager	
	Date:	June 26, 2017	

Harry Pritchok Wedding Reception on 9/23/17 at the Louise DuPont Crowninshield House

# **Lee County Event Permit Application**

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

•				
Check the appropri	ate box(es) be	low:		
SPECIAL EV	ENT PERMIT			
Samini	UNTY PROPERTY			
A		UME ALCOHOLIC BEV	ERAGES WITHIN LEE COUNT	Y FACILITIES
FILM PERM	11-1			
AFTER REVIEWING THE WILL REQUIRE THE APP			OW WHAT ARRANGEMENTS VENT.	s your organization
Illumination:	No open flames ald	oud on premises. Any ado	litional lighting must be provide	d by permit holder.
Parking Areas:				
	Use Community H	ouse parking lot and exist	ing parking at the Boca Grande (	Community Park and Center
Special Arrangements:	dumpster must be	rented by permit holder.	e containers provided by the Cor	
	guidelines set forth -Alcohol must be c Lee County Parks	h by the Loise DuPont Cro contained inside of the Lou s & Recreation Director or	wninshield House representative uise DuPont Crowninshield Hous Deputy Director approves this al nity Park) by signing below.	e. se.
	Print Name:	Jesse Lavender	Joe Wier	
	Signature:	Jesse Lavender	Digitally signed by Jes <b>内岛突回</b> Date: 2017.02.21 08:37:19 -05'00	R Wier
	Title:	Acting Deputy Director	Supervisor	
	Date:	2/21/17	1/30/17	<del>-</del>



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

Check the appropria	te box(es) below:
SPECIAL EVE	NT PERMIT
□ USE OF COU	NTY PROPERTY PERMIT
PERMIT TO 5	BELICATION CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI	r
	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: Bisk Program Manager
	Date: August 8, 2017

771315-L1447467 Certificate of Insurance.pdf - document.pdf							Page	
A	cc	ORD CER	TIFICATE OF L				DAYE (MH//DD/YYYY) 05/17/2017	
PRODUCES  East Main Street Insurance Services, Inc.  Will Maddux PO Box 1298  THIS CERTIFICATION IS ISSUED AS A MATTE ONLY AND CONFERS NO RIGHTS UPON HOLDER, THIS CERTIFICATE DOES NOT A ALTER THE COVERAGE AFFORDED BY THE F						IO RIGHTS UPON T ATE DOES NOT AME	HE CERTIFICATE	
GP	rass V	alley, CA 95945 (530) 477-6521 Email: Info@theeve	enthelear.com	INSURERS A	FFORDING CO	/ERAGE	NAIC#	
	SURED	مسيوم مراعة ها معهد والمناهد في المناهد في المناهد الم	popular and the months and the second and the secon	INBURER A: LI	yds Syndicate 26	23	AA-1128623 82%	
		Coletta Boyle 620 Cadiz Rd		MOUNER B. LIC	oyds Syndicate 62	3	AA-1126623 18%	
I		Venice, FL 34285		INSURER C:	مروا و دوم المراد المرا	order manufactures of the trade of the state	\$6, Per ( vyelyty person) person (FK y - 164 person) bird	
				INSURER D:	سايمناه يددك در المن محاليد بالديار ومطاورة حيودا إيرينيد	والمراول والمراول والمراول والمراوات والمراوات والمراوات والمراوات والمراوات		
C	OVER	AGES		1 Basoneri E	**************************************	be-up-up-up-up-up-up-up-up-up-up-up-up-up-		
	ANY R MAY P POLICI	DLICIES OF INSURANCE LISTED BEI EQUIREMENT, TERM OR CONDITION ERTAIN, THE INSURANCE AFFORDE ES. AGGREGATE LIMITS SHOWN M.	V OF ANY CONTRACT OR OTHER D D BY THE POLICIES DESCRIBED H	DOCUMENT WITH R IEREIN 18 SUBJECT CLAIMS.	ESPECT TO WHICH TO ALL THE TERM	H THIS CERTIFICATE MAY MB, EXCLUSIONS AND CO	NOTWITHSTANDING BE 199UED OR NDITIONS OF SUCH	
INS	RADD	TYPE OF INBURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	18	
		GENERAL LIABILITY				EACH OCCURRENCE worms	\$ 1,000,000	
A	Y	X COMMERCIAL GENERAL LIABILITY	EH-771315-L1447467	09/23/2017	09/24/2017	MED EXP (Any one person)	8 6,000	
		X CLAIMS MADE OCCUR	m11 ~~~47447 1 4 4 4 7 4 7 7 7 7	00,000,00047	50 m 4 m n 4 %	PERSONAL & ADVINURY GENERAL AGGREGATE	1,000,000 2,000,000	
		GEN'L AGGREGATE LIMIT APPLIES PER:	EH-771315-L1447467	09/23/2017	09/24/2017	PRODUCTS - COMP/OP AGO	9 INCLUDED	
		X POLICY PRO LOC				DEDUCTIBLE	3 1,000	
L.,	ļ	Retail Liquor Liability			***************************************		\$	
		ANY AUTO			×	(EP SSQ(BU))	1	
		ALL OWNED AUTOS SCHEDULED AUTOS				BODRY INJURY (Per person)	3	
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		18 Emildia - Brod polazotura landomeniaren fal-kustarka, fantar est 11 p. m. edd www.p.m. esta was				PROPERTY DAMAGE (Per accident)	\$	
Γ		DARAGE LIABILITY				AUTO ONLY - BA ACCIDENT	*	
		OTUA YNA				OTHER THAN EA ACC	\$	
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		and the same of th					3	
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-	-	RETENTION \$	4-7-1-6-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4	*************		WC STATU- OTH- TORY LIMITS ER		
	EMP	Lovers' Liability	a			LL EACH ACCIDENT	\$	
	OFF	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?			٠	EL DISEASE - EA EMPLOYEE	\$	
	SPE	describe under BAL PROVISIONS below			*****************	E.L. DISEASE - POLICY LIMIT	3	
ОТИЕЯ								
Ce	DESCRIPTION OF OPERATIONS / LOCATIONS / VEKICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  Certificate holder listed below to named as additional insured per attached CG 20 26 07 04.  Attendance: 80, Event Type: Weddings and Wedding Receptions.							
	De MG 03/03/17							

CERTIFICATE HOLDER CANCELLATION Dupont Community House Lee County BoCC P.O. Box 3098 Ft. Myers, FL 33802 Skould any of the above described policies be carcelled before the empiration DATE THEREOF, THE ISBURIES INCURER WILL ENGAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO SO SO SHALL INCOME NO CONTRACTOR CONTROLLING OF VINA, KIND TAKEN THE PROBLEM LAS VOCALA COS REPRESENTATIVES. AUTHORIZED REPRESENTATIVI ACORD 25 (2001/08) GACORD CORPORATION 1888

