



EVENT PERMIT

Ordinance 14-15



COUNTY ADMINISTRATION

CINCO WITH A TWIST CONCERT ~~APR 27~~ APR 27 PM 12:12

PERMIT NUMBER: TMP2017-00115

Date(s) of Event: May 5, 2017 from 6:00pm until 10:00pm

Property Owner: FISCHER FL PROPERTIES I LLC

Applicant: SIX BENDS HARLEY-DAVIDSON

Contact: TAYLOR LOETHEN

Description: Concert with food trucks

Location of event: 9510 THUNDER RD FORT MYERS 33913
TOP ROCKER FIELD/**239-284-0301

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

4-27-17



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

Lee County Event Permit Application



Event Application

Check the appropriate box(es) below:

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

Section I - GENERAL INFORMATION (All Permit Types)	
Title of Event / Name of Production	CINCO WITH A TWIST CONCERT AT TOP ROCKER FIELD
Date(s) of Event / Production:	MAY 5, 2017
Location(s) of Event:	9510 THUNDER ROAD, FORT MYERS, FL 33913
Name of Applicant:	TAYLOR LOETHEN
Applicant Address:	9510 THUNDER ROAD, FORT MYERS, FL 33913
Applicant Phone Number:	239-284-0301
Contact Person: (If different from applicant)	N/A
Contact Phone Number: (If different from applicant)	N/A
Email Address:	TAYLORL@SFE-US.COM
Estimated Attendance:	2,500
Event Description: Include each activity, when activities take place, etc.	CONCERT IN TOP ROCKER FIELD, FOOD TRUCKS SEE ENCLOSED FOR ADDITIONAL DETAILS
Hours of Operation:	6:00 - 10:00 PM
STRAP # of Parcel:	224525L3240000030 / 224525L3240000010
Owner of Premises*:	FISCHER FLORIDA PROERTIES I, LLC

*Notarized statement from the property owner specifically consenting to the proposed use required.

Lee County Event Permit Application



Fill out the following questions for all permit types:

What is the Zoning Classification of the premises? _____

Are any temporary structures to be installed for the event? ☒ Yes ☐ No Type: TENTS, NO LARGER THAN 20 X 40

Do you have the appropriate permits for the temporary structures? ☐ Yes ☐ No

* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event: []

Note: Certificate of Insurance must be submitted at time of application

Surety Company Bonding this Event (Name and Address): _____

Will Vehicles be Used as Part of This Event?

☒ Yes ☐ No

If yes, automobile coverage must be included on the certificate of insurance.

Will Food be Available at this Event?

☒ Yes ☐ No

If yes, products liability coverage must be included on the certificate of insurance.

Will Alcoholic Beverages be served/consumed at this Event?

☒ Yes ☐ No

If yes, liquor liability coverage must be included on the certificate of insurance.

Name & Address of Organization Providing Food:

VARIOUS FOOD TRUCKS

Type of Food being Served: VARIOUS

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: FISCHER ENTERTAINMENT, DBA: TOP ROCKER EVENTS

Fill out this portion for applications for Solicitation in the County Rights-of-Way:

Name of Charity: _____

Address of Charity: _____

Phone Number: _____

Non-profit certificate/registration number: _____

(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/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property?

☒ Yes ☐ No

If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number: LATIN AMERICAN MOTORCYCLE ASSOCIATION - FORT MYERS - 90522624

(Required if alcohol is to be **SOLD** at the event)

Please note: 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



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.

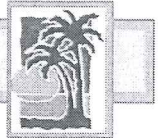
For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and 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 premises 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.

Taylor Loethen

Signature of Applicant

Taylor Loethen

Print Name of Applicant and Title

3/24/17

Date

Ally Hall

Witness

Ally Hall

Print Name of Witness

3/24/17

Date

Lee County Event Permit Application



LEE COUNTY SHERIFF'S DEPARTMENT
14750 SIX MILE CYPRESS PARKWAY
FORT MYERS, FLORIDA 33912
(239) 477-1199

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
☐ USE OF COUNTY PROPERTY PERMIT
☐ PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:

Parking in authorized parking areas only.

Deputies (How Many?):

Four for traffic control. Two for Jeport Commerce Parkway at Intercom Dr.
Two at Treeline and Intercom Lane.

Fee for Services:

Special Arrangements:

Security at the event is being handled by a private security company and no deputies have been requested for security purposes.

Print Name: Capt. Scott Lucia

Signature: Capt. Scott K. Lucia

Title: Special events, Permits and Details

Date: 20 April 2017

Lee County Event Permit Application



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
☐ USE OF COUNTY PROPERTY PERMIT
☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Fire Guards (How Many?)	2 certified crowd managers
Fee for Services:	55.00 inspection for tents over 900 sq ft.
Flammable Vegetation:	cleared from around tents and stage
First Aid Equipment:	STFD will require 1 paramedic and 1 EMT on site for the event
Fire Extinguishing:	minimum 2A 10 BC extiguisher at all tens and the stage and control booth. Food trucks must be NFPA 96 compliant
Special Arrangements:	Crews to arrive on site by 1700 till close . Gates open at 1800

Print Name: James Tanner

Signature: James Tanner

Digitally signed by James Tanner
DN: cn=James Tanner, o=South Trail Fire District, ou=Fire Marshal,
email=jtanner@southtrailfire.org, c=US
Date: 2017.04.13 14:13:18 -0400

Title: Fire Marshal, South Trail Fire District

Date: Apr 13, 2017

Lee County Event Permit Application



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

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
☐ USE OF COUNTY PROPERTY PERMIT
☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Treatment Facilities:

None necessary.

Medical Personnel:

None necessary.

Medical Supplies /
Equipment:

None necessary.

Safety Requirements:

No additional precautions necessary.

Fee for Services

Not applicable.

Special Arrangements:

Please call 911 in the event of an emergency. To arrange special event coverage, contact our office at 239 533-3911.

Print Name: Benjamin Abes

Signature: Benjamin Abes

Digitally signed by Benjamin Abes
Date: 2017.03.29 10:28:15 -04'00'

Title: Chief

Date: 03/29/17

Lee County Event Permit Application



DEPARTMENT OF TRANSPORTATION
1500 MONROE STREET
FORT MYERS, FL 33901
(239) 533-8580

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
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☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:

No event parking on Lee County maintained road rights-of-way.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

Use Lee County Sheriff's Office for assistance with traffic control as needed.

Print Name: Bryan Miller

Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller
Date: 2017.04.07 09:15:04 -04'00'

Title: Senior Project Manager

Date: April 7, 2017

Lee County Event Permit Application



LEE COUNTY PARKS AND RECREATION
3410 PALM BEACH BOULEVARD
FORT MYERS, FLORIDA 33916
(239) 533-7275

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
☐ USE OF COUNTY PROPERTY PERMIT
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☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Illumination:

N/A

Parking Areas:

N/A

Special Arrangements:

Not on Lee County Parks & Recreation property
and will not affect our programs.

Print Name:

JESSE LAVENDER

Signature:

Jesse Lavender

Title:

Director

Date:

3/29/17

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT
COUNTY ADMINISTRATION BUILDING - 4TH FLOOR
2115 SECOND STREET
FORT MYERS, FLORIDA 33901
(239) 533-2221

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
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☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Insurance Requirements: Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.

Special Arrangements: A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured.

Subject to proof of insurance.

Print Name: Mike Figueroa

Signature:

Title:

Risk Program Manager

Date:

March 29, 2017



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/27/2017

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 have ADDITIONAL INSURED provisions or 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 Arthur J. Gallagher Risk Management Services, Inc. 235 Highlandia Drive, Suite 200 Baton Rouge LA 70810		CONTACT NAME: PHONE (A/C No. Ext): 225-292-3515 FAX (A/C No.): 225-292-3893 E-MAIL ADDRESS:	
INSURED Fischer Entertainment LLC 12271 Towne Lake Drive Fort Myers FL 33913		INSURER(S) AFFORDING COVERAGE INSURER A: Starr Indemnity & Liability Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
SCOTFIS-02		NAIC # 38318	

COVERAGES

CERTIFICATE NUMBER: 832860160

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	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		1000108775	12/31/2018	12/31/2017	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$ PER STATUTE OTH-ER \$ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Lee County Board of Commissioners is Additional Insured per form SICG-0515 (0912) on the General Liability policy regarding Cinco de Mayo event on 5/5/2017.

OL MR 03/29/17

CERTIFICATE HOLDER**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 <i>James M. Valente</i>
--	--

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Lee County Event Permit Application



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

Check the appropriate box(es) below:

☐ FILM PERMIT ONLY

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Special Arrangements:

--

Other:

--

Print Name: _____

Signature: _____

Title: _____

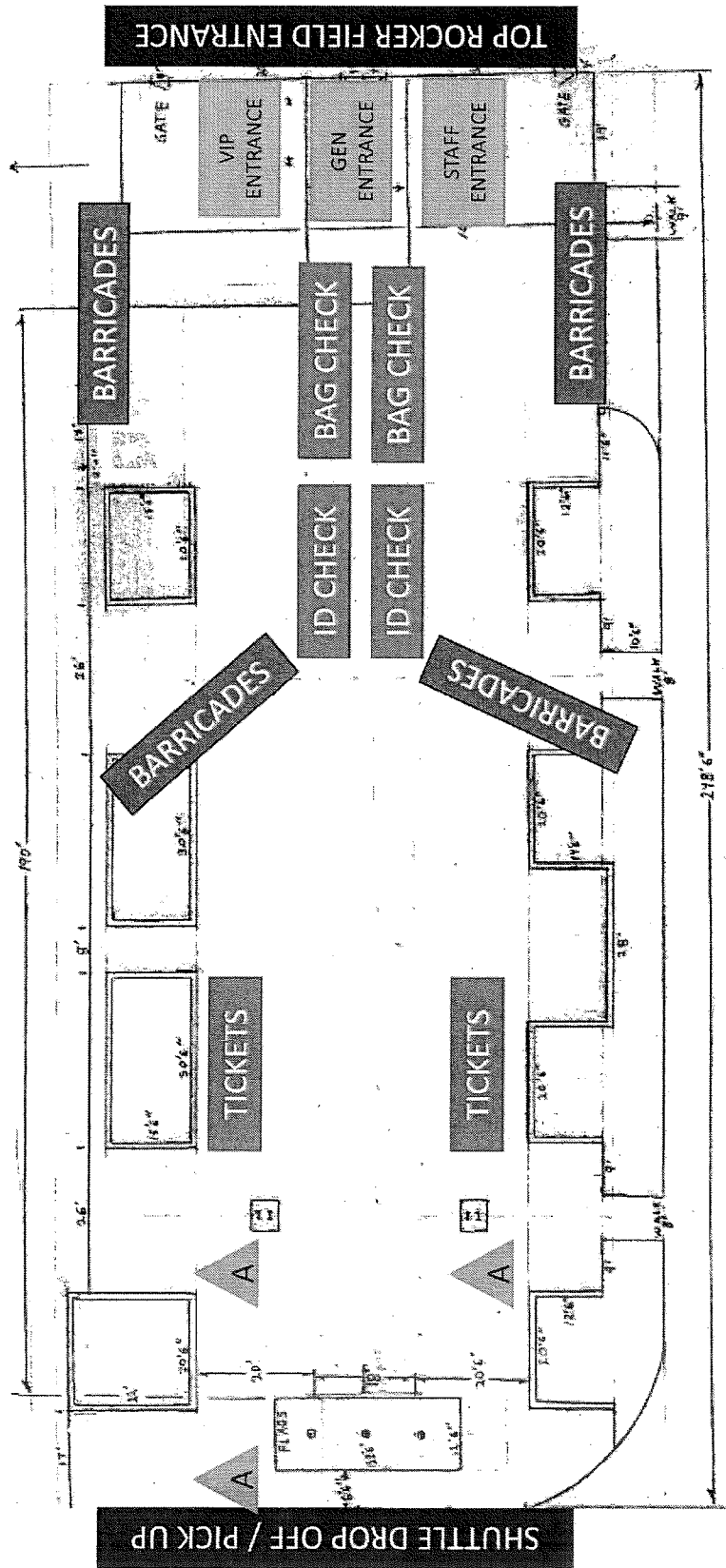
Date: _____

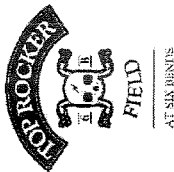


THE PLAZA AT TOP ROCKER FIELD

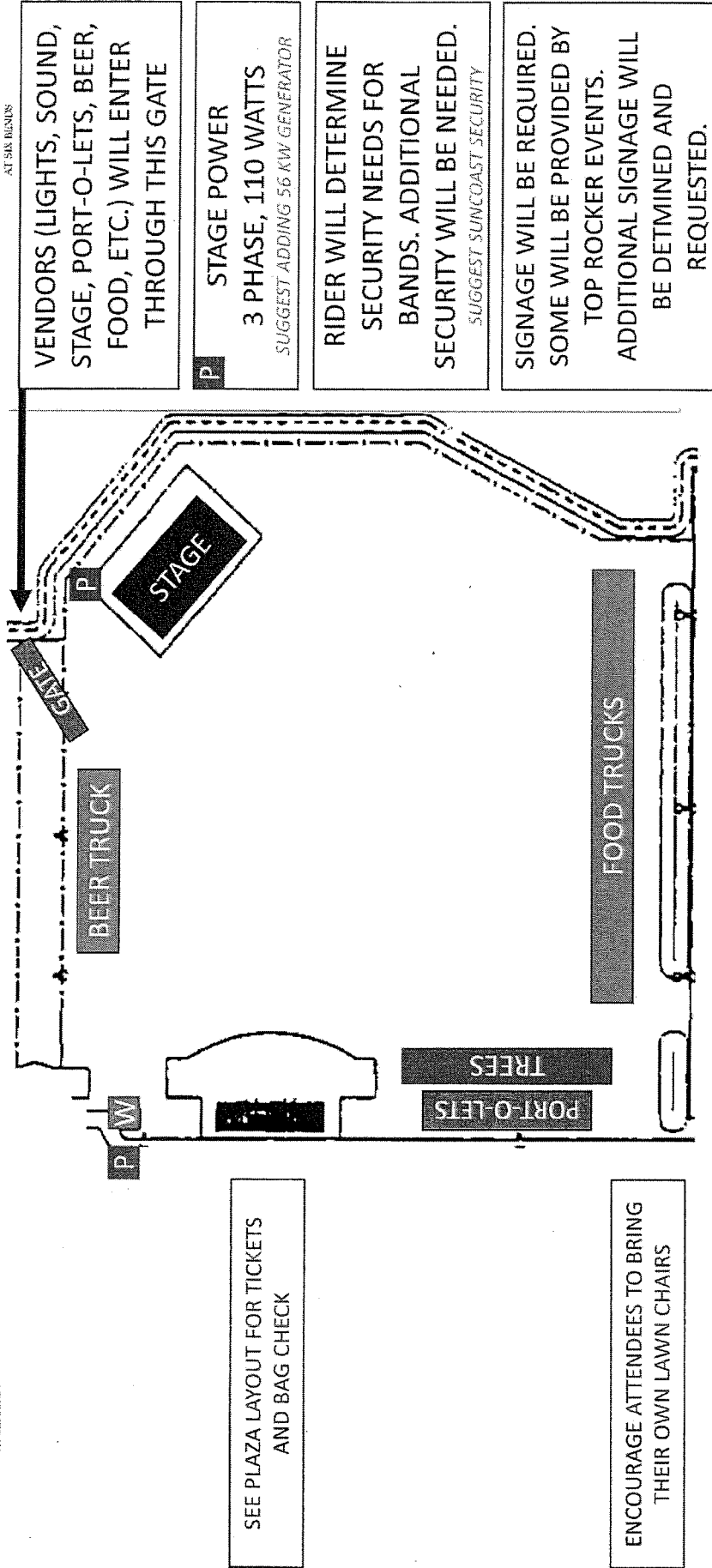
CINCO WITH A TWIST

TICKETS AND BAG CHECK LAYOUT

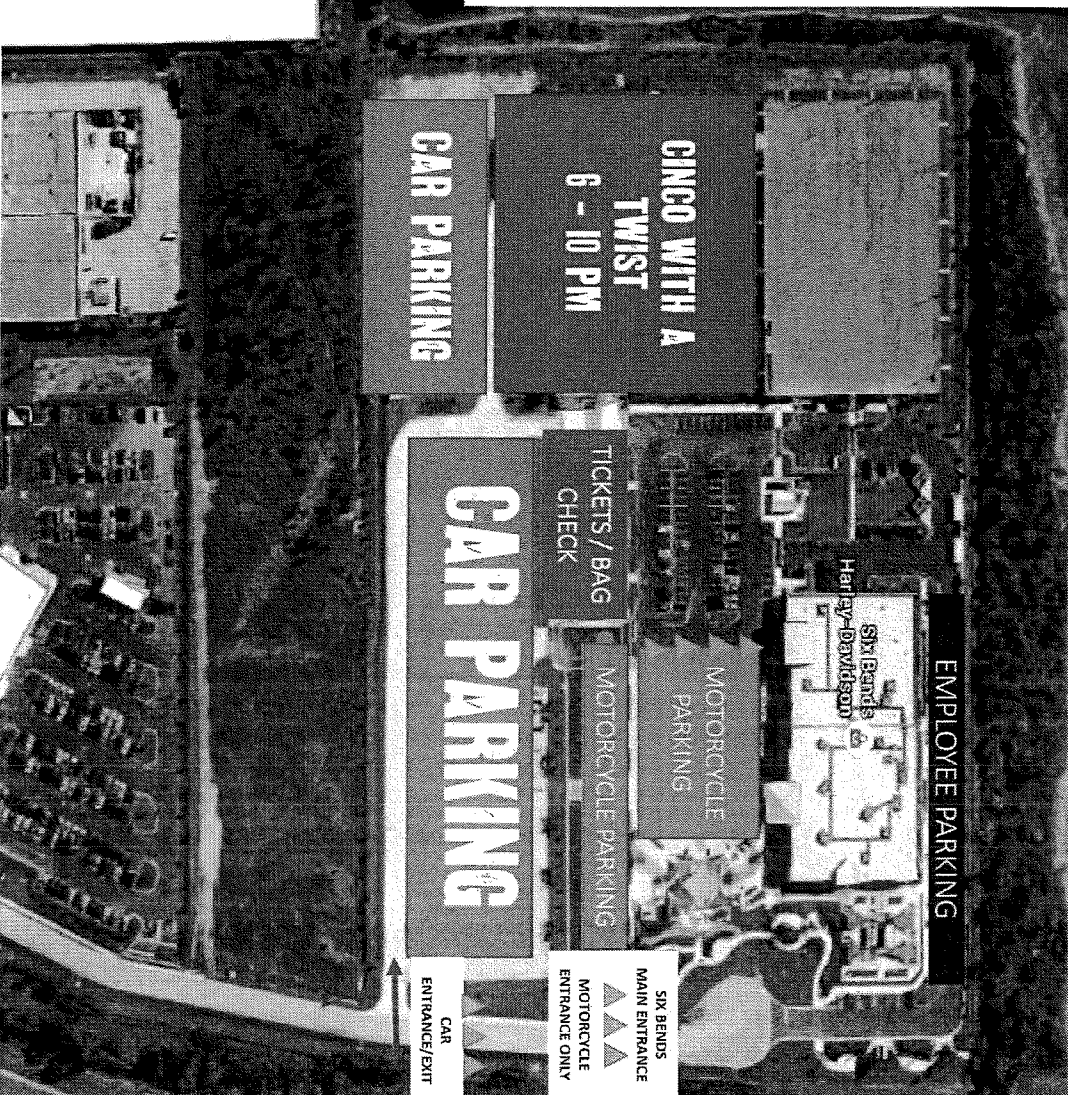
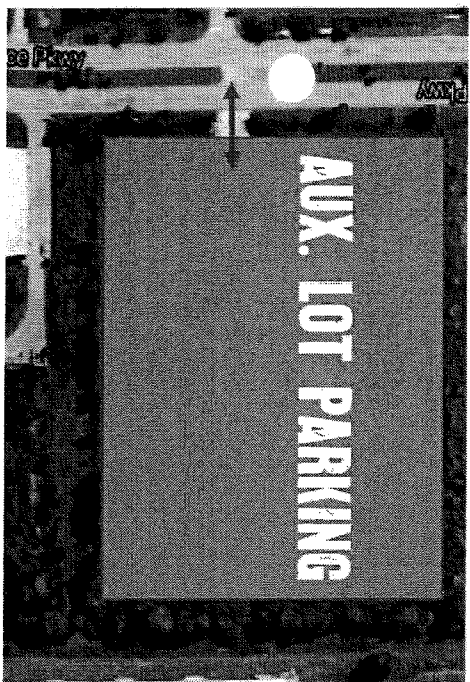




CINCO WITH A TWIST TOP ROCKER FIELD LAYOUT



SATURDAY, MAY 5, 2017
CINCO WITH A TWIST
EVENT LAYOUT





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/27/2017

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		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Starr Indemnity & Liability Company	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

INSURED
Fischer Entertainment LLC
12271 Towne Lake Drive
Fort Myers FL 33913

SCOTFIS-02

NAIC #
38318**COVERAGES**

CERTIFICATE NUMBER: 832860160

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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
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	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Lee County Board of Commissioners is Additional Insured per form SICG-0515 (0912) on the General Liability policy regarding Cinco de Mayo event on 5/5/2017.

CERTIFICATE HOLDER**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

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FISCHER FLORIDA PROPERTIES, LLC

12271 Towne Lake Drive

Fort Myers, FL 33913

239.690.4647

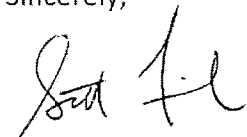
March 24, 2017

Re: Lee County Event Application

I am the property owner for Top Rocker Field located at 9510 Thunder Road, Fort Myers, FL 33913. Top Rocker Events will be holding the Cinco With A Twist Concert on Friday, May 5, 2017.

This event will be held at Top Rocker Field. Restroom facilities will be provided. I have given my permission for this event.

Sincerely,



Jeffery Scott Fischer

Property Owner

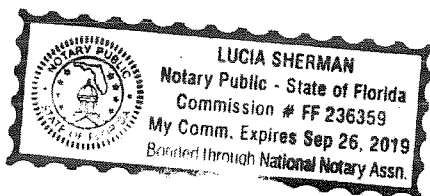
Sworn and subscribed before me this 24th day of March, 2017, by Jeffery Scott Fischer, who is personally known to me.



Lucia Sherman

Notary Public

State of Florida



ATTESTATION

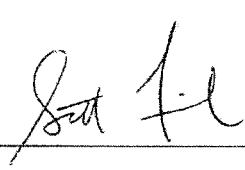
This form is to be completed by the alcoholic beverage license holder **ONLY** when the event of the non profit organization is being held at a location that is licensed by the Division of Alcoholic Beverages & Tobacco for the sale of alcoholic beverages.

Note: This attestation must have the original signature of the alcoholic beverage license holder (only persons on file with the division may sign) and must be submitted by the non-profit group along with the application for the One/Two/Three Day Permit.

Licensee: MOTORSPORTS OF FORT MYERS, LLC		
Business Name (DBA): SIX BENDS HARLEY-DAVIDSON		
License #: BEV4607453	Series of Permanent License: Type: 2COP	
Contact Person KIMBERLY HASKINS	Telephone Number 239-690-4656 ext.	
E-Mail Address (Optional) KIMH@SFE-US.COM		
Name of Non-Profit Group: LATIN AMERICAN MOTORCYCLE ASSOCIATION - FORT MYERS - 90522624		
Date(s) of Event	MAY 5, 2017	

IMPORTANT

A One/Two/Three Day permit is being requested for an event to be held on your licensed premises. During the event, no sales or service of alcoholic beverages may be made under your alcoholic beverage license in the area identified for use by the non-profit organization. Failure to comply will result in administrative charges being filed against your license.

Signature of Licensee:  _____

Date: 3/27/17



CINCO WITH A TWIST DAY OF RUN OF SHOW



Event: Cinco with a Twist Concert
Date: Friday, May 5, 2017
Location: Top Rocker Field at Six Bends – 9510 Thunder Road, Fort Myers, FL 33913
Hotel: Holiday Inn, Fort Myers Airport – 9931 Interstate Commerce Drive, Fort Myers, FL 33913

Run of Show Schedule

Thursday, May 4	3:00 PM	Jon Secada and Team check into Holiday Inn
Thursday, May 4	TBD	Stage Load In
Friday, May 5	TBD	Production Load In
Friday, May 5	9:45 AM	Jon Secada – Dolphin Transportation from Holiday Inn to Six Bends
Friday, May 5	10:00 AM	Headliner: Jon Secada Load In
Friday, May 5	12:00 PM	Headliner: Jon Secada Sound Check
Friday, May 5	2:00 PM	Opening Act: Sheena Brook Load In
Friday, May 5	2:30 PM	Lunch – Jon Secada and Team
Friday, May 5	2:30 PM	Opening Act: Sheena Brook Sound Check
Friday, May 5	3:30 PM	Opening Act: Ben Allen Band Load In
Friday, May 5	3:30 PM	Jon Secada – Dolphin Transportation from Six Bends to Holiday Inn
Friday, May 5	4:00 PM	Opening Act: Ben Allen Band Sound Check
Friday, May 5	6:00 PM	Gates Open
Friday, May 5	6:30 PM	Opening Act: Ben Allen Band (45 Min. Performance)
Friday, May 5	6:30 PM	Jon Secada – Dolphin Transportation from Holiday Inn to Six Bends
Friday, May 5	7:00 PM	Dinner – Jon Secada and Team
Friday, May 5	7:15 PM	Change Over
Friday, May 5	7:45 PM	Opening Act: Sheena Brook (45 Min. Performance)
Friday, May 5	8:30 PM	Change Over
Friday, May 5	8:45 PM	Headliner: Jon Secada (60 Min. Performance + Encore)
Friday, May 5	10:15 PM	Meet & Greet: Jon Secada – 50 Guests
Friday, May 5	11:00 PM	After Show Snack – Green Room – Top Rocker Lounge
Friday, May 5	11:30 PM	Jon Secada Load Out – Dolphin Transportation from Six Bends to Holiday Inn
Friday, May 5	11:30 PM	Production Load Out
Saturday, May 6	2:30 AM	Stage Load Out



CINCO WITH A TWIST DAY OF RUN OF SHOW



Contacts

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Barry Cerra	General Manager, Dolphin Transportation	239-825-3177	bcerra@dolphintransporation.com
Joe Nugent	Director of Sales & MKTG, Holiday Inn	239-322-1361	jnugent@hiftnyersairport.com