

## **EVENT PERMIT**



Ordinance 14-15

## FORT MYERS COMIC FEST

**PERMIT NUMBER:** 

TMP2017-00257

Date(s) of Event:

October 21, 2017 12-4PM

Property Owner:

CITY OF FORT MYERS

Applicant:

FORT MYERS REGIONAL LIBRARY

Contact: TRACY CARVER

Description:

Fort Myers Comic Fest. Cornog Plaza Fort Myers Regional Library

Location of event:

2450 FIRST ST FORT MYERS 33901

Fort Myers Regional Library

Will the event be attended by 1000 or more people?

Yes

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



# **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



#### **Event Application**

| Check the appropriate box | (es | ) bei | ow: |
|---------------------------|-----|-------|-----|
|---------------------------|-----|-------|-----|

- F SPECIAL EVENT PERMIT
- IX USE OF COUNTY PROPERTY PERMIT
- 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  | Fort Myers Comic Fest   |
| Date(s) of Event /<br>Production:  | October 21, 2017  |
| Location(s) of Event:  | Cornog Plaza, Fort Myers Regional Library   |
| Name of Applicant:   | Tori Hersh  |
| Applicant Address:   | Fort Myers Regional Library 2450 First Street Fort Myers, FL 33901  |
| Applicant Phone Number:  | 239-533-4625  |
| Contact Person:<br>(If different from applicant)                                 | Tracy Carver  |
| Contact Phone Number:<br>(If different from applicant)                           | 239-533-4622  |
| Email Address:   | tcarver@leegov.com  |
| Estimated Attendance:  | 1,000   |
| Event Description:<br>Include each activity, when<br>activities take place, etc. | 12:00 - 3:15 pm Karaoke; acoustic live performance; selfie station; Life-size dice, kerplunk, and angry birds games; painting and chalk art; information desk 3:30 - 4:00 pm Costume parade 12:00 - 4:00 pm Vendors: Friends of the Fort Myers Library - canned drinks, prepackaged food, and books |
| Hours of Operation:  | 12 -4 pm  |
| STRAP # of Parcel:   | 00409-0020 & 00409-0010   |
| Owner of Premises*:  | Lee County  |

<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? PUD   |   |
|--|---|---|
| Are any temporary structures to be insta   | alled for the event?   Yes   No   | Гуре:   |
| Do you have the appropriate permits for  | the temporary structures?   | Γ Yes   |
| * For a 'Special Event' and 'Use of Count indentified, including all parking areas.              | ry Property' permit, submit a site plan wit   | h all proposed facilities and activities  |
| Insurance Company Insuring the Event:  | Lee County - self insured   |   |
| Note: Certificate of Insurance must be submitted   | at time of application  |   |
| Surety Company Bonding this Event (Na  | me and Address): NA   |   |
| Will Vehicles be Used as Part of This<br>Event?  | Will Food be Available at this Event?   | Will Alcoholic Beverages be served/consumed at this Event?                          |
| ┌ Yes  | ⊠ Yes   | ☐ 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 Frie  | ends of the Fort Myers Library  |   |
| Type of Food being Served: canned soda   | as, bottled water, and prepackaged food   |   |
| Section II - USE OF COUNTY PR  |   |   |
| Organization Sponsoring the Event: Lee   | County Library System - Fort Myers Regiona  | Library   |
| 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   | er:   |   |
| (Proof of registration with the Dept. of Agriculture & C   | onsumer Services §496.405 or proof the organization is                                | exempt from this requirement. §316.2045)  |
| Section III - SALE/CONSUMPTION   | ON OF ALCHOLIC BEVERAGES PE   | RMIT  |
| Is alcohol being sold/consumed on Coun If Yes, then a "Lee County Alcohol Permit" is required.   | ty Property?<br>Only non-profit organizations can sell alcohol on County I            | Yes No  |
| Non-profit certificate/registration numb (Required if alcohol is to be <u>SOLD</u> at the event) | er:   |   |
| <b>Please note:</b> A permit from the State of Florida D further details                         | ivision of Alcoholic Beverages and Tobacco may al                                     | so be required; please call (239) 344-0885 for                                      |



### Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

| ype of Prod                | luction (choose all th  | at app | oly):    |  |                            |                               |                            |  |      | -        |        |            |
|----------------------------|---|--------|----------|--|----------------------------|-------------------------------|----------------------------|--|------|----------|--------|------------|
| TV Movie                   | e or Special  | Γ      | TV Se    | eries / Pilot                                  |                            | Γ                             | TV Comme                   | ercial   | Г    | Still Ph | iotos  |            |
| Public Se                  | ervice Announcement   | : [    | Indus    | trial / Docum                                  | nentary                    | <b></b>                       | Other:                     |  |      |          |        |            |
| Will any of t              | he following be need  | ed or  | includ   | ed*?   |                            |                               |                            |  |      |          |        |            |
|                            | Street Closure  |        |          |  |                            |                               | T Yes                      | Г  | No   |          |        |            |
|                            | Traffic / Crowd Con   | trol   |          |  |                            |                               | Yes                        | <b></b>  | No   |          |        |            |
|                            | Fire or Burning   |        |          |  |                            |                               | ┌─ Yes                     |  | No   |          |        |            |
|                            | Explosives or Pyrot   | echni  | cs       |  |                            |                               | 「 Yes                      | Γ.   | No   |          |        |            |
|                            | Animals, Large or S   | mall   |          |  |                            |                               | 厂 Yes                      | Γ  | No   |          |        |            |
|                            | Construction of Any   | y Kinc | ł        |  |                            |                               | T Yes                      | 厂  | No   |          |        |            |
|                            | Large and/or Nume   | rous   | Vehicle  | es   |                            |                               | Yes                        |  | No   |          |        |            |
|                            | Helicopters, Boats,   | etc.   |          |  |                            |                               | Yes                        | $\Gamma$   | No   |          |        |            |
|                            | Stunts  |        |          |  |                            |                               | Yes                        | Γ.   | No   |          |        |            |
|                            | Other   |        |          |  |                            |                               | ┌ Yes                      | -  | No   |          |        |            |
| * For any n                |   |        |          |  |                            |                               |                            |  |      |          |        |            |
|                            | rking Requirements:   |        |          |  |                            |                               |                            | Managharan gasanan                               |      |          |        |            |
| Special Par                | rking Requirements:<br>unty Services Require                                | d: (P  | ersonn   | el, equipmer                                   | nt, faciliti               | ies, etc                      | .)                         | MAN D. G. C. |      |          |        |            |
| Special Par                |   | d: (P  | ersonn   | el, equipmer                                   | nt, faciliti               | ies, etc                      | .)                         |  |      |          |        |            |
| Special Par<br>City or Cou |   | Juirec | l for lo | cal and state                                  | records                    | on pro                        | duction in                 |  | totr | ack the  | econoi | nic impact |
| Special Par<br>City or Cou | unty Services Require ing information is rec ry. If exact figures are       | Juirec | l for lo | cal and state                                  | records (                  | on pro                        | duction in<br>ly as possil |  |      |          | econoi | nic impact |
| Special Par<br>City or Cou | unty Services Require ing information is rec ry. If exact figures are       | Juirec | l for lo | cal and state<br>ble, please es                | records (<br>timate as     | on pro<br>s close             | duction in<br>ly as possil | ole.   |      |          | econoi | nic impact |
| City or Cou                | unty Services Require ing information is rec ry. If exact figures are Cast: | Juirec | l for lo | cal and state<br>ble, please es<br>Number in C | records of timate as Crew: | on pro<br>s close<br>nt in Le | duction in<br>ly as possil | ole.   |      |          | econoi | mic 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.

| Lorial Hersch                     | Ful li                             |
|-----------------------------------|------------------------------------|
| Signature of Applicant            | Witness                            |
| Print Name of Applicant and Title | Tracy Caruct Print Name of Witness |
| 8/21/17                           | 8/21/17                            |
| Date                              | Date                               |



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

Check the appropriate box(es) below:

| ☐ SPECIAL EV          | /ENT PERMIT  |  |
|-----------------------|--|--|
| ⋉ USE OF CO           | UNTY PROPERTY  | Y PERMIT   |
| PERMIT TO             | SELL AND CONS  | SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES                                    |
| FILM PERM             | 1IT  | •  |
| ,                     |  |  |
|                       |  | PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.      |
|                       |  |  |
| Parking:              | Parking in author  | orized areas only.   |
|                       |  |  |
|                       |  |  |
| Deputies (How Many?): | None. Applicant for security and   | t advised there will be security guards and an FMPD detail officer on site for presence. |
|                       | 1444.44.44   |  |
| · .                   | Octobro de la companio del companio de la companio del companio de la companio della companio de la companio della companio de |  |
| Fee for Services:     | None   |  |
|                       |  |  |
|                       |  |  |
| Special Arrangements: | Road closure wi  | ill be handled by FMPD per paperwork attached.   |
|                       |  |  |
|                       |  |  |
|                       |  |  |
| •                     |  |  |
|                       | Į  |  |
| •                     | Print Name:  | Captain J. Loethen   |
|                       | Signature:   | Capt 1 Forther   |
|                       | Title:   | Special Events, Permits and Details  |
| •                     | Date:  | 8-29-7.7   |
|                       |  |  |



#### 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 PERN                                    | ит   |
|--|--|
| AFTER REVIEWING THE<br>WILL REQUIRE THE APPL | APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT. |
| Fire Guards (How<br>Many?)                   | none required  |
| Fee for Services:                            | Mone required (no cooking a tents  |
| Flammable Vegetation:                        | Ma   |
| First Aid Equipment:                         | 71/4   |
| Fire Extinguishing:                          | n/a  |
| Special Arrangements:                        | Mone required  |
|  |  |
|  | Signature: Cystal Nagel Dosco  |
|  | Date: Senier Fire Inspector  |



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

| Check the appropr                | iate box(es) belo                    | ow:  |                             |
|----------------------------------|--------------------------------------|--|-----------------------------|
| SPECIAL E                        | VENT PERMIT                          |  |                             |
| ⊠ USE OF CO                      | OUNTY PROPERTY                       | PERMIT   |                             |
| FILM PERM                        | MIT                                  |  |                             |
|                                  |                                      | EASE INDICATE BELOW WHAT ARRANGEMEN<br>Y WITH FOR THEIR EVENT.                     | TS YOUR ORGANIZATION        |
| Treatment Facilities:            | None necessary.                      |  |                             |
| Medical Personnel:               | None necessary.                      |  |                             |
| Medical Supplies /<br>Equipment: | None necessary.                      |  |                             |
| Safety Requirements:             | No additional preca                  | utions necessary.  |                             |
| Fee for Services                 | Not applicable.                      |  |                             |
| Special Arrangements:            | Please call 911 in the 239 533-3911. | e event of an emergency. To arrange special event cove                             | rage, contact our office at |
|                                  | Print Name:                          | Benjamin Abes  |                             |
|                                  | Signature:                           | Benjamin Abes  Digitally signed by Benjamin Abes Date: 2017.08.22 07:54:04 -04'00' | ;                           |
|                                  | Title:                               | Chief  |                             |
|                                  | Date:                                | 08/22/2017   | -                           |
|                                  |                                      |  |                             |



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

| Check the appropr     | iate box(es) be     | elow:  |  |                      |
|-----------------------|---------------------|--|--|----------------------|
| I                     | DUNTY PROPERT       |  | RAGES WITHIN LEE COUN  | TV FACII ITIFS       |
| FILM PERM             |                     | SOME ALCOHOLIC BEVE                            | Ades willing the cook  | Tribolantes          |
|                       |                     | PLEASE INDICATE BELO'<br>PLY WITH FOR THEIR EV | W WHAT ARRANGEMENT<br>ENT.   | TS YOUR ORGANIZATION |
| Parking:              | Park in designated  | d areas or authorized areas.                   | navara an mahar na har malamanah malamet daga timar (MAMA) daga atau atau atau atau atau atau atau a |                      |
| Ingress and Egress:   | Use all established | d means of ingress and egres                   | S. ·   |                      |
| Special Arrangements: | None.               |  |  |                      |
|                       | Print Name:         | Bryan Miller                                   |  |                      |
|                       | Signature:          | Bryan D. Miller Senior Project Manager         | Digitally signed by Bryan D. Miller<br>Date: 2017.08.22 13:23:48 -04'00'                             | -<br>-               |
|                       | Date:               | August 22, 2017                                |  | -<br>-               |



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

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

| , m, m,                                       | OUNTY PROPERTY PERMIT  SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES  MIT                 |
|---|---|
|   | APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT. |
| Illumination;                                 | N/A   |
| Parking Areas:                                | N/A   |
| Special Arrangements:                         | Event will not affect any profes and Recreation operations or programs.                                       |
|   | Print Name: Alise Flanjack  Signature: Alse Flanjack  Title: Deprty Director  Date: Ag. 31, 2017              |
| FM Comic Fe.<br>Oct - 21, 2017,<br>FM Library | 7 Page  10  |



# 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) be    | low:  |
|------------------------|------------------|---|
| SPECIAL EVE            | NT PERMIT        |   |
| □ USE OF COL           | INTY PROPERT     | Y PERMIT  |
| PERMIT TO S            | SELL AND CONS    | SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES   |
| FILM PERMI             |                  | ·   |
| 1 1 mint Cmixina       | ,                |   |
|                        |                  | PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.   |
| nsurance Requirements: | occurrence to p  | neral-liability insurance with minimum limits of One Million Dollars (\$1,000,000) per-<br>retect against bodily injury and/or-property damage relative to applicants use of-<br>event within Lee County. |
|                        |                  | political subdivision of the State of Florida is a self-insured government entity which as per Chapter 768.28, Florida Statutes.  |
|                        |                  |   |
| Special Arrangements:  |                  | nsurance shall be-submitted as evidence of the required coverage listing Lee County<br>Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an-<br>ed-                      |
| <u>~</u>               | Subject to proof | of insurance.   |
|                        |                  | nsurance is required for all departments and/or divisions falling under the direction of Board of County Commissioners.   |
|                        |                  |   |
|                        | Print Name:      | Mike Figueroa   |
|                        | Signature:       |   |
|                        | Title:           | Risk Program Manager  |
|                        | Date:            | August 28, 2017   |
|                        |                  |   |



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

FILM PERMIT ONLY

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION

Check the appropriate box(es) below:

| WILL REQUIRE THE APPL | ICANT TO COMI | PLY WITH | I FOR TI | HEIR EVEI | VT.  |      |    |  |  |
|-----------------------|---------------|----------|----------|-----------|--|------|----|--|--|
| Special Arrangements: |               | ,        |          |           | TO THE REAL PROPERTY OF THE PERSON NAMED IN TH |      |    | MIDS (81782311111114141414141414141414141414141414 |  |
|                       |               |          |          |           |  |      |    |  |  |
|                       |               |          |          |           |  |      |    |  |  |
|                       |               |          |          |           |  |      |    |  |  |
| Othory                |               |          |          |           |  | <br> | -  |  |  |
| Other:                |               |          |          |           |  |      | •  |  |  |
|                       |               |          |          |           |  |      |    |  |  |
|                       |               |          |          |           |  |      |    |  |  |
|                       |               | -        |          |           |  |      | 4. |  |  |
|                       | Print Name:   |          |          |           |  |      |    |  |  |
|                       | Signature:    |          |          | ,,        |  | <br> |    |  |  |
|                       | Title:        |          |          |           |  |      |    |  |  |
|                       | Date:         |          |          |           |  | <br> |    |  |  |
|                       |               |          |          |           |  |      |    |  |  |