

## **EVENT PERMIT**



Ordinance 14-15

#### FAIR AT FENWAY SOUTH

PERMIT NUMBER:

TMP2017-00269

Date(s) of Event:

November 10, 11, 12, 16, 17, 18, and 19 2017, 5pm-11pm weekdays,

1pm-11pm Sat and Sun

Property Owner:

NESV FLORIDA REAL ESTATE LLC

Applicant:

FAIR PRODUCTION II INC

Contact: JEFFREY BOLONSKI

Description:

Family fun fair including rides, games, food, attractions and entertainment

Location of event:

11501 FENWAY SOUTH DR FORT MYERS 33913

JETBLUE PARK/\*\*\*516-369-2195

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) below:

- ▼ 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	Fair at Fenway South				
Date(s) of Event / Production:	ov. 10,11,12,16,17,18,19 2017				
Location(s) of Event:	etBlue Park 11500 Fenway South Drive Ft. Myers FL 33913				
Name of Applicant:	Fair Production II Inc				
Applicant Address:	O Box 70 Old Bethpage, NY 11804				
Applicant Phone Number:	516-369-2195				
Contact Person: (If different from applicant)	Jeffrey Bolonski				
Contact Phone Number: (If different from applicant)	813-677-0121(O) 813-294-3939(C)				
Email Address:	xcircusmanx@yahoo.com				
Estimated Attendance:	500-1000/day				
Event Description: Include each activity, when activities take place, etc.	Family fun fair including rides, games, food, attractions and entertainment				
Hours of Operation:	5pm-11pm weekdays, 1pm-11pm Saturday and Sunday				
STRAP # of Parcel:	24-45-25-02-00001,00002,00003,00004,00005 <b>24462502000030000</b>				
Owner of Premises*:	NESV Real Estate				

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



#### Fill out the following questions for allpermit types: What is the Zoning Classification of the premises? MPD Are any temporary structures to be installed for the event? Yes IX No Type: Do you have the appropriate permits for the temporary structures? Yes X No \* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities indentified, including all parking areas. Insurance Company Insuring the Event: T.H.E. Insurance Company/Allied Specialty Insurance Note: Certificate of Insurance must be submitted at time of application Surety Company Bonding this Event (Name and Address): N/A Will Alcoholic Beverages be Will Vehicles be Used as Part of This Will Food be Available at this Event? served/consumed at this Event? Event? ┌ No T Yes ☑ No 又 Yes **⊠** No Yes If yes, automobile coverage must be If yes, products liability coverage must be If yes, liquor liability coverage must be included on the certificate of insurance. included on the certificate of insurance. included on the certificate of insurance. Name & Address of Organization Wade Shows Inc. PO Box 51730 Livonia, MI 48151 **Providing Food:** Type of Food being Served: Typical fair food popcorn, cotton candy, funnel cakes, hot dogs, cheesesteaks, pizza, soda Section II - USE OF COUNTY PROPERTY PERMIT Organization Sponsoring the Event: 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? IX No If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can self alcohol on County Property. Non-profit certificate/registration number: (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 IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

TV Movie or Sp			oly):							
, a mark or ob	ecial	Γ	TV Series / P	ilot	<b></b>	TV Comme	rcial	l'anne	Still Photos	
Public Service /	Announcement	1	Industrial / D	ocumentary		Other:				
ll any of the follo	owing be neede	ed or	included*?							
Stre	et Closure					┌ Yes	Γ	No		
Traf	fic / Crowd Con	trol				Yes	Γ	No		
Fire	or Burning					┌─ Yes	r	No		
Expl	osives or Pyrote	echni	cs			☐ Yes	1	No		
Anir	mals, Large or S	mall				Yes	F	No		
Con	struction of Any	Kind	1		~	Yes	Γ	No		
Larg	e and/or Nume	rous	Vehicles			☐ Yes	r	No		
Heli	copters, Boats,	etc.		-		[ Yes	ľ	No		
Stur	nts					T Yes	Γ	No		
Oth	er					Yes		No		
										1
		<b></b> .					· · · · · · · · · · · · · · · · · · ·			
Special Parking I	Requirements:							tok (1988) krossjenic		
Special Parking I	Requirements:									
Special Parking	Requirements:									
		ed: (F	Personnel, equ	lipment, facil	ities, e	etc.)				
Special Parking I		ed: (F	<sup>P</sup> ersonnel, equ	ipment, facil	ities, e	tc.)				was a
		ed: (F	Personnel, equ	iipment, facil	ities, e	tc.)				
		ed: (I	Personnel, equ	iipment, facil	ities, e	tc.)				
City or County S	Services Require	quire	d for local and	state record	s on p	roduction in	Florid	a to t	rack the economic im	pac
City or County S	Services Require	quire	d for local and	state record	s on p	roduction in	Florida ble.	a to t	rack the economic im	pac
City or County S	Services Require	quire	d for local and t available, ple	state record	s on p	roduction in sely as possi	ble.		rack the economic im	pac
City or County S  The following in the industry. If  Number in Cast:	Services Require	quire	d for local and t available, ple Num	state record ase estimate ber in Crew:	s on p as do	roduction in sely as possi	ble.			pac
City or County S  The following in the industry. If	Services Require	quire	d for local and t available, ple Num Estin	state record	s on p as do pent in	roduction in sely as possi Nu Lee County:	ble.			pac



#### 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.



#### **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

Witness

Jeffrey Bolonski / Promoter

Print Name of Applicant and Title

10/2/17

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 EVENT PERMIT

□ USE OF COUNTY PROPERTY PERMIT

•		ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY F.	ACILITIES
FILM PERN	11.1		
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PL LICANT TO COMPL	EASE INDICATE BELOW WHAT ARRANGEMENTS Y Y WITH FOR THEIR EVENT.	OUR ORGANIZATION
Parking:	Parking in authori	ized parking areas only.	
	No. open de minima proposation de management		
Deputies (How Many?):	2 deputies from 1	700-0000 hrs all days	And the second s
Fee for Services:	\$40/hr per deputy	У	
Special Arrangements:	Hours will be adju	usted as necessary.	
	· ·		
	Print Name:	Captain J. Loethen	
	Signature:	(apt 1 Lutter 92149	
	Title:	Special Events, Permits and Details	
	Date:	10/2/17	



#### 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

USE OF CO	UNTY PROPERTY PE	ERMIT		
FILM PERM	IT			
FTER REVIEWING THE . VILL REQUIRE THE APPLI	APPLICATION, PLEA CAN'T TO COMPLY	ASE INDICATE BELOV	N WHAT ARRANGEMENTS Y NT.	our organization
Fire Guards (How Mamy?),	2 Certified Crowd Mar	aspers		and the second s
Fee for Services:	\$55.00 inspection fee	for each tents over 900 s	oqft.	general en PC et de companya (un companya companya companya companya companya companya companya companya compa
Flammable Vegetation:	Must be cleared from	tents and other combus	stibles.	and a succession of superior more and abstraction of profession of the superior and an angular superior and and a superior and
First Aid Equipment:	Call 911 as needed.	gende upgesteller for in formatte and an extensive film of the ext	y en y promien najvojasti nastrokas elektrik kueltaiside kien, väli kralikinin († 17. on najvojasten († 27.	Company and the second
Fire Extinguishing:	All cooking tents, tra	atinguisher to be at each lilers, or food service truc compliant, 2A10BC extin		New Academic Company of the Control
Special Arrangements:	None required at th	is time.	ua prajagogicajo pirka kara pragrimska, su otrazinska superim vika i karavalekt i neverbeg i kilomini, su kara	o V.) w vivour (statusenstatement in erhome under fregis which inferior em
	Print Name:	C. Wolfe		
	Signature:	Chris Wolfe	Digitally signed by Chris Wolfe Date: 2017.89.27 97-52-13 - 04'00'	
	Title:	Division Chief	WWW.	
	Date:	Sep 27, 2017		•



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

#### Check the appropriate box(es) below:

X	SPECIAL EVENT PERMIT
X	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 precau	tions necessary.		
Fee for Services	Not applicable.			
Special Arrangements:	and the second		e during setup and tear down of	
	239 533-3911.	evere of all enlergeners.	<i>3</i>	,
	Print Name:	Benjamin Abes		
	Signature:	Benjamin Abes	Digitally signed by 8enjamin Abes Date: 2017.09.29 12:25:32 -04'00'	
	Title:	Chief		
	Date:	09/29/2017	. "	



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

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

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

Check	the	appropriate	box(es)	below:	
	×	SPECIAL EVENT	PERMIT	•	

FILM PERMIT

□ USE OF COUNTY PROPERTY PERMIT

WILL REQUIRE THE APP	LICANT TO COMP	LY WITH FOR THEIR EV	ENT.	
Parking:	No event parking o	n Lee COunty maintained	road rights-of-way.	
Ingress and Egress:	Use all established	means of ingress and egre	:SS.	
Special Arrangements:	Use Lee County Sh	eriff's Office for assistance	with traffic control as needed.	
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2017.09.29 11:34:32 -04'00'	
	Title:	Senior Project Manager		•
*	Date:	September 29, 2017		



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

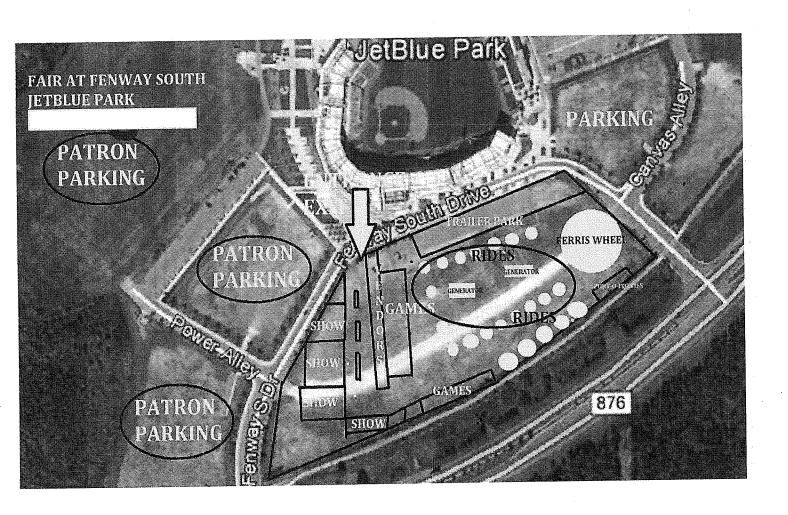
Check the approprie	ite pox(es) below:
h-a-a-i	UNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Illumination:	All Illumination must follow country ordinance
Parking Areas:	Event organizer must ensure parking is restricted to designated areas and provide open, accessible driveways and mays for emergency vehicles.
Special Arrangements:	All event programs and entertainment must be Stopped by 11 pm
	Print Name: Alist Planjack
	Signature: Ase Flack
	Title: <u>Deputy Director</u>
	Date: 9/26/17
Faire at Fe	nWay 2 16/17 18 19 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 a	appropriate	box(es)	below:
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	NT PERMIT	
⋉ USE OF COU	NTY PROPERTY	PERMIT
F PERMIT TO S	ELL AND CONS	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI	Γ	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
insurance Requirements:	occurrence to pro	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County.
	Market and the second s	
	AND THE PROPERTY OF THE PROPER	
Special Arrangements:	A Certificate of Ir Board of County additional insure	osurance shall be submitted as evidence of the required coverage listing Lee County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an
	Subject to proof	of insurance.
	Print Name:	Mike Figueroa
	Signature:	<u></u>
	Title:	Risk Program Manager
	Date:	September 25, 2017





#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/21/17

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(les) 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). CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER Allied Specialty Insurance, Inc FAX (A/C, No): 10451 Gulf Blvd Treasure Island, FL 33706 8002373355 NAIC # INSURER(S) AFFORDING COVERAGE T.H.E. Insurance Company 12866 INSURER A: Fair Productions II, Inc. INSURER B INSURED P.O. Box 70 INSURER C: Old Bethpage, NY 11747 INSURER D: INSURER E: INSURER F REVISION NUMBER: CERTIFICATE NUMBER: COVERAGES THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. POLICY EFF POLICY EXP ADDL SUBR INSD WVD POLICY NUMBER TYPE OF INSURANCE 1,000,000 EACH OCCURRENCE X COMMERCIAL GENERAL LIABILITY DAMAGE TO RENTED PREMISES (Sa occurrence) 100,000 CPP0103317-04 04/14/17 04/14/18 CLAIMS-MADE X OCCUR 5 A 5 MED EXP (Any one person) 1,000,000 5 PERSONAL & ADV INJURY GENERAL AGGREGATE S GEN'L AGGREGATE LIMIT APPLIES PER. 5,000,000 PRODUCTS - COMP/OP AGG 3 PRO-POLICY OTHER: COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY BODILY INJURY (Per person) 5 ANY AUTO SCHEDULED AUTOS NON-OWNED BODILY INJURY (Per accident) \$ OWNED AUTOS ONLY PROPERTY DAMAGE (Per accident) \$ AUTOS ONLY \$ EACH OCCURRENCE \$ UMBRELLA LIAB OCCUR AGGREGATE S EXCESS LIAB CLAIMS-MADE S RETENTION \$ STATUTE WODKEDS COMPENSATION AND EMPLOYERS' LIABILITY E.L. EACH ACCIDENT ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below ELL DISEASE - POLICY LIMIT | \$ DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

ADDITIONAL INSURED WITH RESPECTS TO THE OPERATIONS IF THE NAMED INSURED ONLY:

NEW ENGLAND SPORTS VENTURES, LLC; N.E.S.V. I, LLC; N.E.S.V. II, LLC; N.E.S.V.

IV LLC; LEE COUNTY BOARD OF COUNTY COMMISSIONERS AND NESV FLORIDA REAL ESTATE

LLC, BOSTON REDSOX BASEBALL CLUB. JET BLUE PARK, FT. MYERS, FL. FOR DATES:

11/06/17 THROUGH 11/23/17 CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE LEE COUNTY BOARD OF COUNTY THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN COMMISSIONERS ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE



2004 2007 1918

September 21, 2017

#### To Whom It May Concern:

The Boston Red Sox and NESV Florida Real Estate hereby grant Fair Production II with a place of business at P.O. Box 70, Old Bethpage, NY 11804 permission to access land owned by NESV Florida Real Estate and surrounding parking lots located at 11500 Fenway South Drive for the dates of November 6th to November 23rd 2017.

The times for each day are as followed:

November 6th - 10th 2017 - Set-Up. November 10th - 19th 2017 - Event/Fair 7:00 am to 12:00 am. November 19th - 23rd 2017 - Load out.

The parcels of land used for the fair have the following strap numbers:

- #24-45-25-02-00001.0000
- #24-45-25-02-00002.0000
- #24-45-25-02-00003.0000
- #24-45-25-02-00004.0000
- #24-45-25-02-00005.0000

Please let us know if there is any additional information needed.

Thank you.

Sincerely,

Jay Fandel

Manager of Florida Balipark Operations |

Boston Red Sox | JetBlue Park

11500 Fenway South Drive | Fort Myers, FL | 33913

Phone: 239 226-4734 | Cell:239 989-7477

Fax: 239-226-4767

Email: jfandel@redsox.com

DAVID PURSELL Notary Public - State of Florida Commission # FF 898956 My Comm. Expires Oct 4, 2019

11500 FERWAY SOUTH DRIVE

#### Blu Site Solutions of Southwest Florida, Inc. Phone 910-325-8836



1661 Benchmark Avenue Fort Myers FI 33905 Fax 910-324-6578 speebles@blusitesolutions.com

Per Unit/Each

\$675.00

\$55.00

\$260.00

#### TEMPORARY SANITATION AGREEMENT

Holding Tanks

Date:	9/18/17
Start Date:	11/6/17
O'Married Walnut	44730657

End Date: 11/20/17
Purchase/Job No: 11/20/17
Bill To / Customer.

Special Event Porta Potties 15 \$45.00

Hamilican Porta Pottie 1 \$55.00

4

\$65.00

City/State/Zip: Old Bethpage NY 11804 Contact Name: Jeff - 813-677-0121

Company Fair Production LLC
Address: P.O. Box 70

Name: Jeff - 813-677-0121

Email xcircusx@yahoo.com Service Units 11-10-2017 6 \$15.00 \$90.00

Deliver To:

11-12-2017, 11-16-2017, 11-17-2017, 11-18-2017, 11-19-96 \$15.00 \$1,440.00 2017 Contact Name: Jeff - 813-677-0121 1 Tax 6% \$151.20 \$151.20 Contact Phone: 813-677-0121 Total \$2,671.20 Job Name: Jet Blue Stadium - Fair Address: Daniels Parkway Special City/State/Zip: Fort Myers FL

Special Instructions / Notes \* 1/2 to be paid prior to event balance Net 30

Terms	and	Cor	nditi	ons

- 1) Responsibility. Customer agrees to assume responsibility for all damages to the rented equipment beyond normal wear while at customer site. This includes, but not limited to, theft and vandalism. Customer agrees to reimburse vendor for all repair and replacement costs. The Customer agrees to assume all risks associated with vendor equipment while at customer site. Not responsible for any damage to property resulting in placement of unit outside of accessible area within 25 foot.
- 2) Terms. 1/2 Paid Prior, Balance Net 30. Customer agrees to use vendor as their sole provider of all portable sanitation on this Customer site.
  Customer has received pictures and quote of trailer and accepts this contract. Units must be in a place accessable to service, delivery and pictup—within 25 foot max of a hard surface. Cancellation fee of 50% once contract is signed
- 3) Excused Performance. Neither party hereto shall be liable for its failure to perform or delay performance hereunder due to circumstances or the significant threat of circumstances beyond its reasonable control, whether foreseeable or not, including, but not limited to strikes, labor trouble, links, compliance with laws or government orders, acts of war or terrorism, inability to access equipment, lines and acts of god, such as heavy rain land such failure shall not constitute a default under this Agreement.
- 4) Alterney Fees. In the event of breach of Agreement by either party, the breaching party shall pay all reasonable alterney's less and costs of the other party incident to any action brought to enhance this Agreement. In the event Costomer fails to pay vendor all amounts which become amount due, any and all costs incurred by vendor as a result of such failure to pay, including to the extent permitted by law, reasonable altorney fees.

5) Pricing above is out the door

#### Thank you for your BUSINESS!

Company/Customer:\_\_\_\_\_\_\_ Blu Site Solutions of Southwest Florida, Inc.

Authorized Signature\_\_\_\_\_ Stacie Peebles\_\_\_\_\_\_\_

Print Name Print Name\_Stacie Peebles\_\_\_\_\_\_

Please send signed copy via fax or email to Blu Site Solutions of Southwest Florida, Inc. Attn: Sales Dept. @ 910.324.6578. Email - speebles@blusitesolutions.com. If you have any questions, please call me direct @ 910.325.8836

Registered Application Number F-12218



### Cartificate of Name Resistance

issued By: Herculite Products Inc. PO Box 435 Emigsville PA 17318 Date of Manufacture: 07/15

For _ City _	<u>Miami Missionan</u> Miami	∠≀en≀ State	OK	AT _Zip_	129 S, Treaty 74354	· Rd.		
Certificatio	n is hereby mad	de that:						
Marshal for suc Large Scale Te S109M87 Large Trade Name of	scribed on this certifich use. The fabric is lest. It also passes Care and Small Scale te flame-resistant fabriche Flame Retar	tested by a certalifornia State F st for Canada. c or material us dant Proces	tified inde Fire Marsh sed <u>Wic</u> ss Use	pende nal Sm leside d	nt testing lab and all Scale Test as HD Premium	passes all req well as meetin	uirements de	tailed by NFPA 70 nents of the ULC F-12218
	<del>eliitopaga ter jamustusta ete area</del>					By		