



EVENT PERMIT

Ordinance 14-15



BOCA GRANDE ART CENTER

PERMIT NUMBER: TMP2017-00326

Date(s) of Event: 11/7/17, 11/16-11/19/17, 12/15/17, 1/18-1/21/18, 1/25/18, 2/1/18,
2/2-2/4/18, 2/6/18, 2/22-2/25/18, 3/2-3/4/18, 3/15-3/18/18, 3/28/18,
4/5-4/7/18, 4/12/18, 4/18/18 from 4pm-7:30pm

Property Owner: LEE COUNTY
Applicant: BOCA GRANDE ART CENTER Contact: JOY STROTHER
Description: Art/Photography meetings/shows with a cocktail reception

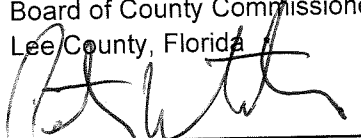
Location of event: 131 135 1ST ST W/236/240 BANYAN ST/170 PARK BOCA GRANDE 33921
DISHONG/BOWEN & COMMUNITY HOUSE/***941-964-1700

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 11-6-17



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

Boca Grande Art Center - Art and Photography Shows 2017 / 2018

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	Boca Grande Art Center - Art & Photography Shows
Date(s) of Event / Production:	11/7/2017, 11/16-11/19, 2017, 12/15, 2017; 1/18-1/21, 2018; 1/25/2018, 2/1/2018; 2/2-2/4, 2018; 2/6/18; 2/22-2/25, 2018; 3/2-3/4, 2018; 3/15-3/18, 2018; 3/28/18; 4/5-4/7, 2017; 4/12/18; 4/18/18
Location(s) of Event:	Dishong-Bowen & Community House
Name of Applicant:	Joy Strother
Applicant Address:	236 Banyan Street Boca Grande, FL 33921
Applicant Phone Number:	1-941-964-1700
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	joy@bocagrandeartcenter.org
Estimated Attendance:	200
Event Description: Include each activity, when activities take place, etc.	Art/Photography meetings/shows with a cocktail reception.
Hours of Operation:	4:00p.m. - 7:30p.m.
STRAP # of Parcel:	144320010000500100
Owner of Premises*:	Lee County Government

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



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Property Owner: LEE COUNTY

Applicant: BOCA GRANDE ART CENTER

Contact: JOY STROTHER

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DISHONG/BOWEN & COMMUNITY HOUSE/***941-964-1700

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Board of County Commissioners
Lee County, Florida

County Manager	Date
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Lee County Event Permit Application



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 installed for the event? ☐ Yes ☒ No Type: _____

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: Italiano Insurance Services, Inc.

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

Surety Company Bonding this Event (Name and Address): N/A

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: N/A

Type of Food being Served: Hors d'oeuvres

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Boca Grande Art Center

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: 85-8012708897C-9

(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

Lee County Event Permit Application



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

N/A

Type of Production (choose all that apply):

- ☐ TV Movie or Special ☐ TV Series / Pilot ☐ TV Commercial ☐ Still Photos
☐ Public Service Announcement ☐ Industrial / Documentary ☐ Other: _____

Will any of the following be needed or included*?

- | | | |
|--------------------------------|------------------------------|-----------------------------|
| Street Closure | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Traffic / Crowd Control | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Fire or Burning | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Explosives or Pyrotechnics | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Animals, Large or Small | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Construction of Any Kind | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Large and/or Numerous Vehicles | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Helicopters, Boats, etc. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Stunts | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

* For any marked Yes, provide further details below:

Special Parking Requirements:

City or County Services Required: (Personnel, equipment, facilities, etc.)

The following information is required for local and state records on production in Florida to track the economic impact of the industry. If exact figures are not available, please estimate as closely as possible.

Number in Cast: _____ Number in Crew: _____ Number of locals hired: _____
Total budget: _____ Estimate amount spent in Lee County: _____
Hotel room nights: _____ Number of shooting days: _____
number of rooms x number of nights

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 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

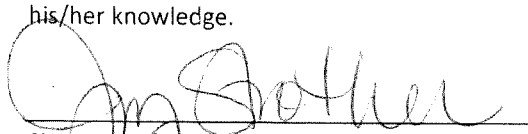


SECTION V - AGREEMENT

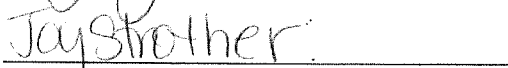
The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee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

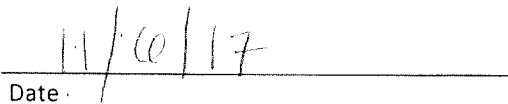
The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.



Signature of Applicant

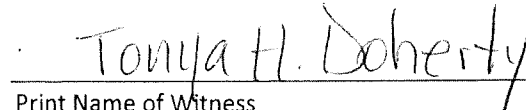


Print Name of Applicant and Title

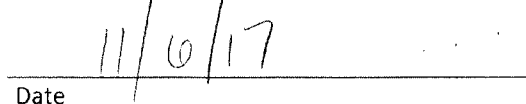

Date



Witness



Print Name of Witness


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?):	None
Fee for Services:	None
Special Arrangements:	None

Print Name: Captain J. Loethen

Signature:

Capt J. Loethen 92149

Title:

Special Events, Permits and Details

Date:

11-1-17

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
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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.

Fire Guards (How Many?)

None

Fee for Services:

None

Flammable Vegetation:

None

First Aid Equipment:

None

Fire Extinguishing:

None

Special Arrangements:

In case of emergency - Dial 911

Print Name: C.W. Blosser

Signature: 

Title: Fire Chief

Date: 11/01/2017

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: 2017.11.01 21:34:10 -04'00'

Title: Chief

Date: 11/01/2017

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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☒ 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:

Park in designated areas. No event parking on Lee County maintained roads where parking is prohibited.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

None.

Print Name: Bryan Miller

Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller
Date: 2017.11.01 11:40:12 -04'00'

Title: Senior Project Manager

Date: November 1, 2017

Boca Grande Art Center - Art Shows - 2017/18 Season

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:

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Illumination:

Additional lighting must be provided by permit holder and removed after the event. Open flames are prohibited.

Parking Areas:

Parking is permitted in existing parking areas located at the Boca Grande Community Park.

Special Arrangements:

Permit Holder must follow all guidelines under ordinance #95-09 (selling and consumption). All alcohol consumption must stay within the designated area discussed with the P&R supervisor at the Boca Grande Community Park.

Lee County Parks & Recreation Director or Deputy Director approves this alcohol permit (2 - permits already granted at the Boca Grande Community Park) by signing below.

Print Name: Jesse Lavender

Joe Wier

Signature: Jesse Lavender

Digitally signed by Joseph R Wier
Date: 2017.11.01 09:20:47 -04'00'

Title: Director

Supervisor

Date: 11/1/17

10/31/17

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:

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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 afforded under the Commercial General Liability policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.

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

Subject to proof of insurance.

Print Name: Mike Figueroa

Signature:

Title: Risk Program Manager

Date: November 6, 2017

Only valid for the 11/07/2017 event.

CERTIFICATE OF INSURANCE				ISSUE DATE 11/3/2017																
<p>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.</p> <p>IMPORTANT: IF THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED, THE POLICY(IES) MUST BE ENDORSED. IF SUBROGATION IS WAIVED, SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY, CERTAIN POLICIES MAY REQUIRE AN ENDORSEMENT. A STATEMENT ON THIS CERTIFICATE DOES NOT CONFER RIGHTS TO THE CERTIFICATE HOLDER IN LIEU OF SUCH ENDORSEMENT(S).</p>																				
PRODUCER Italiano Insurance Services, Inc. PO Box 18425 Tampa, FL 33679			INSURER(S) AFFORDING COVERAGE: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">INSURER</td> <td style="width: 10%;">A:</td> <td>Scottsdale Insurance Company</td> </tr> <tr> <td>INSURER</td> <td>B:</td> <td>N/A</td> </tr> <tr> <td>INSURER</td> <td>C:</td> <td></td> </tr> <tr> <td>INSURER</td> <td>D:</td> <td></td> </tr> <tr> <td>INSURER</td> <td>E:</td> <td>N/A</td> </tr> </table>			INSURER	A:	Scottsdale Insurance Company	INSURER	B:	N/A	INSURER	C:		INSURER	D:		INSURER	E:	N/A
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INSURED Boca Grande Art Center, Inc. PO Box 979 Boca Grande, FL 33921																				
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.																				
INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS															
A	GENERAL LIABILITY	CPS2570667	11/20/2016	11/20/2017	GENERAL AGGREGATE	2,000,000														
					PRODUCTS-COM/OP AGG.	1,000,000														
					PERSONAL & ADV. INJURY	1,000,000														
					EACH OCCURRENCE	1,000,000														
					DAMAGE PREM RENTED TO YOU	100,000														
					MED EXPENSE (Any one person)	5,000														
B	PERSONAL LIABILITY				COMBINED SINGLE LIMIT															
					MEDICAL PAYMENTS TO OTHERS															
C	EXCESS LIABILITY				EACH OCCURRENCE															
					AGGREGATE															
D																				
E	PROPERTY				BUILDING															
					CONTENTS															
					BUSINESS INCOME															
<p>THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.</p> <p>SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.</p>																				
<p>DESCRIPTION OF OPERATIONS / SPECIALTY ITEMS Clubs civic, service or social buildings or premises owned or leased Not-For-Profit only. Generic - GL, Schools trade or vocational - Lee County, a Political Subdivision & Charter County of the State of Florida, its agents, employees, and public officials/Lee County Board of County Commissioners are named as additional insureds with respect to general liability. Includes Host Liquor. Event Date: 11/7/2017.</p> <p style="text-align: center;">← <i>OK MF 11/06/17 only for event lists</i></p>																				
<p>SURPLUS LINES AGENT VIRGINIA CLANCY LICENSE# A206695 13577 FEATHERSOUND DRIVE PO BOX 17069 CLEARWATER, FLORIDA 33762</p>																				
CERTIFICATE HOLDER Lee County Board of County Commissioners PO BOX 398 Fort Myers, FL 33902			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED SIGNATURE																	

CERTIFICATE OF INSURANCE				ISSUE DATE 12/20/2016										
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INSURER	D:													
INSURER	E:	N/A												
COVERAGES <p>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.</p>														
INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS									
A	GENERAL LIABILITY	CPS2570667	11/20/2016	11/20/2017	GENERAL AGGREGATE	2,000,000								
					PRODUCTS-COM/OP AGG.	1,000,000								
					PERSONAL & ADV. INJURY	1,000,000								
					EACH OCCURRENCE	1,000,000								
					DAMAGE PREM RENTED TO YOU	100,000								
					MED EXPENSE (Any one person)	5,000								
B	PERSONAL LIABILITY				COMBINED SINGLE LIMIT									
					MEDICAL PAYMENTS TO OTHERS									
C	EXCESS LIABILITY				EACH OCCURRENCE									
					AGGREGATE									
D														
E	PROPERTY				BUILDING									
					CONTENTS									
					BUSINESS INCOME									
<p>THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.</p> <p>SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.</p>														
DESCRIPTION OF OPERATIONS / SPECIALTY ITEMS Clubs civic, service or social buildings or premises owned or leased Not- For- Profit only, Schools trade or vocational - Lee County, a Political Subdivision & Charter County of the State of Florida, its agents, employees, and public officials/Lee County Board of County Commissioners are named as additional insureds with respect to general liability. Includes Host Liquor. Event Dates: 11/17-20/2016, 1/22/17, 2/9-12/17, 2/23-26/17, 3/10/17, 3/10-12/17, 3/16-19/17, 4/6-9/17, 4/26-28/17														
SURPLUS LINES AGENT VIRGINIA CLANCY LICENSE# A206695 13577 FEATHERSOUND DRIVE PO BOX 17069 CLEARWATER, FLORIDA 33762														
CERTIFICATE HOLDER Lee County Board of County Commissioners PO BOX 398 Fort Myers, FL 33902			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED SIGNATURE 