

## **EVENT PERMIT**



Ordinance 14-15

## CHRISTMAS WALK

**PERMIT NUMBER:** 

TMP2017-00338

Date(s) of Event:

November 25, 2017 from 12:00pm thru 10:00pm

**Property Owner:** 

Applicant:

**BOCA GRANDE CHAMBER OF COMMER** 

Contact: WESLEY LOCKE

Description:

BOCA GRANDE CHAMBER OF COMMERCE CHRISTMAS WALK

walk along varies ROW on Boca Grande as approved on map

Location of event:

ROW PARK AVE/4TH ST W/GILCHRIST AVE BOCA GRANDE 33921

VARIES ROW ON BOCA GRANDE\*\*\*941-268-1331

Will the event be attended by 1000 or more people?

No

Will the event be held on County Owned Property?

Yes

Will there be alcohol consumed or sold at the event?

Yes

Will a bond be posted for this event?

No

#### Permit Conditions:

- \* Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- \* The premises is to be left in the same condition as it was prior to the event.
- \* The permit is to be readily available for inspection during the entire event.
- \* If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners

Lee County, Florida

County Manager Date



## **Event Application**

Special Event

Use of County
Property

Alcohol within Lee County Facilities

Film, Video & Photography

Boca Chamber of Commerce Christmas Walk - November 25th, 2017



#### **Event Application**

Check the	appropriate box(es) below:	
	SPECIAL EVENT PERMIT	
×	JSE OF COUNTY PROPERTY PERMIT	
×	PERMIT TO STALL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FAC	JLITIES
	II M DERMIT	

Section 1 - GENERAL INFO	ORMATION (Ail Permit Types)
Title of Event / Name of Production	The Boca Grande area chamber of Commerce Christmas walk
Date(s) of Event / Production:	November 25th, 2017
Location(s) of Event:	Park Avenue, Boca Grande, Fl 33921 (from 5th Street to 3rd Street) & 4th Street, Boca Grande, Fl 33921 (from Gilchrist Ave. to East Railroad Ave.) MAP ATTACHED
Name of Applicant:	BOCA GRANDE CHAMBER OF COMMERCE
Applicant Address:	P.O. BOX 704 BOCA GRANDE, FL 33921
Applicant Phone Number:	941-964-0568
Contact Person: (If different from applicant)	Wesley Locke
Contact Phone Number: (If different from applicant)	941-268-1331
Email Address:	info@bocagrandechamber.net
Estimated Attendance:	500 - 700
Event Description: Include each activity, when activities take place, etc.	12:-4pm Set-up  5pm Event Starts 5:15pm - 6pm Orchestra Plays 1st Set 6-7p Santa Appears 6:45-7:30pm Orchestra Plays 2nd Set 8-10pm Clean-up
Hours of Operation:	12pm - 10pm
STRAP # of Parcel:	14-43-20
Owner of Premises*:	LEE COUNTY GOVERNMENT / DOT

<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? DOT RIGH	T OF WAY			
Are any temporary s	structures to be insta	alled for the event?	Yes No	Type: Small Por	table Stage	
Do you have the ap	propriate permits for	the temporary stru	ctures?	Yes	∏ No	
* For a 'Special Eve indentified, includin		ty Property' permit,	submit a site plan v	with all proposed	facilities and activ	rities .
Insurance Company	Insuring the Event:	ITALIANO INSURANCI	E CO.			····
Note: Certificate of insu	ırance must be submitte	d at time of application				
Surety Company Bo	onding this Event (Na	me and Address): N	'A			-
	sed as Part of This ent?	Will Food be Avail	able at this Event?	served/cons	olic Beverages be umed at this Eve	
Yes	⊠ No	Yes	No	Yes	∏_No	:
If yes, automobile included on the cert		If yes, products liabil included on the cert			ability coverage must e certificate of insura	,
Name & Address or Providing Food:	f Organization VA	RIOUS ISLAND BUSIN	ESSES			
Type of Food being	Served: COOKIES / F	PUNCH & SWEETS	•			
grand in the state of the account of the	was a respectively and the second	ROPERTY PERM	•	1 A 3 - 44 SEEDEL HILL (1 ) A 44 1 4 129 6	estelle i i transcriber valentet.	August 1
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		CA GRANDE AREA CH				
•		Solicitation in the C		ruy.		
•	······································	CHAMBER OF COMME				
Address of Charity	: 480 EAST RAILROAD	AVE, BOCA GRANDE,	FL 33921			
Phone Number: 94	1-964-0568					
Non-profit certific	ate/registration num	ber: 59-2402749				
(Proof of registration wit	h the Dept. of Agriculture &	Consumer Services \$496.40	05 or proof the organizati	on is exempt from this	requirement, §316.204	5)
		ION OF ALCHOL			_	8-17- <b>499-69</b> B
		4、10.0000 位 次次 <b>联</b> 交换5.00 (20.000000)			<b>e</b> ************************************	granijam iza
Is alcohol being so If Yes, then a "Lee County	Id/consumed on Cou Alcohol Permit" is required	inty Property? . Only non-profit organizati	ons can sell alcohol on Co	Yes unty Property.	∏ No	
(Required if alcohol is to l						
Please note: A permit further details	from the State of Florida	Division of Alcoholic Be	verages and Tobacco m	ay also be required; p	llease call (239) 344-0	)885 for



r n '	/.h	h manali An					
	tion (choose all that r Special	t apply):  TV Series / Pilot		TV Comme	rcial [	Still Photos	S
TV Movie of	The second secon		1	Other:			,
		Industrial / Documentary	ile, i	Other.	** *		
ll any of the	following be neede	d or included*?			er ng e	* * *	
S	treet Closure	en e	ora e e	Yes	☐ No		
Ţ	raffic / Crowd Cont	rol		Yes	☐ No		
F	ire or Burning			Yes	□ No	44.5	
E	xplosives or Pyrote	chnics		Yes	□ No		
P	Animals, Large or Sr	nall		Yes	☐ No		
(	Construction of Any	Kind		Yes	∏ No	) 	
Ĺ	arge and/or Nume	rous Vehicles		☐ Yes	∏ No		
ŀ	Helicopters, Boats, 6	etc.	, .	☐ Yes	∏ No	1	
S	Stunts			☐ Yes	☐ No		
(	Other			Yes	□ No		
Special Parki	ing Requirements:						
Special Parki	ing Requirements:		ajadopida estan servicio de				TOTAL MANAGEMENT AND
		d: (Personnel, equipment, fac	ilities, e	etc.)			
		d: (Personnel, equipment, fac	ilities, e	etc.)			
City or Coun	ity Services Require						
City or Coun	nty Services Require		ds on p	production i	n Florida to	o track the ec	onomic impa
City or Coun	nty Services Require	quired for local and state recor	ds on p	production in	n Florida to ible. umber of lo		onomic impa
City or Coun The followin	ity Services Require ig information is rec if exact figures ar	quired for local and state recor e not available, please estimat	ds on p e as clo	production in esely as poss No	ible. umber of lo		onomic impa
City or Coun The followin the industry Number in C	nty Services Require ng information is rec r. If exact figures ar ast:	quired for local and state recor e not available, please estimat Number in Crew:	ds on pe as clo	oroduction in osely as poss No n Lee County:	ible. umber of lo		onomic impa

#### **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.

S.O. (S. A.)

Print Name of Applicant and Title Director

10/24/17

Date

V = ~ P1 > 1

Print Name of Witness

Date



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

Check the appropriate box(es) below:

F SPECIAL EVE	NT PERMIT
i⊠ USE OF COL	NTY PROPERTY PERMIT
<b>⋉</b> PERMIT TO	EN AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI	
) FILIVIT LINVI	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only.
Deputies (How Many?):	1 deputy to monitor traffic concerns
Fee for Services:	\$215.00
, , , , , , , , , , , , , , , , , , , ,	
Special Arrangements:	Vendor will hire 1 deputy to monitor traffic concerns and golf carts. Vendor will be providing barricades and signage through the fire department for road closures.
	Print Name: Captain J. Loethen
·	Signature: and I w Henry 92149
	The property of the second sec
	Title: Special Events, Permits and Details
	Date: 1/-1-17
	- All Control of the



#### 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

FILM PERMIT

Special Arrangements:

IX USE OF COUNTY PROPERTY PERMIT

	PLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZ ANT TO COMPLY WITH FOR THEIR EVENT.	ATION
Fire Guards (How Many?)	None	
Fee for Services:	None	
Flammable Vegetation:	None	
First Aid Equipment:		*************
	None	
Fire Extinguishing:		
	None	

Print Name: C.W. Blosser

Signature: J.L.

Title: Fire Chief

Date: 11/01/2017

In case of emergency - Dial 911

Page. 7



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

Check the appropria	te box(es) below	:		
SPECIAL EVI	ENT PERMIT			
USE OF COU	JNTY PROPERTY PE	RMIT		
FILM PERM	IT			
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEA	ASE INDICATE BELOW WITH FOR THEIR EVEN	WHAT ARRANGEMENTS YOU F.	R ORGANIZATION
Treatment Facilities:	None necessary.			
Medical Personnel:	None necessary.			
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	No additional precaut	tions necessary.		
Fee for Services	Not applicable.			
Special Arrangements:	Please call 911 in the 239 533-3911.	event of an emergency. To	o arrange special event coverage, c	ontact our office at
	Print Name:	Benjamin Abes		
	Signature:	Benjamin Abes	Digitally signed by Berlania Abes Date: 2017,11:01 21:34:10 -04'09'	
	Title:	Chief		
	Date:	11/01/2017		



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

Check the appropri	iate box(es) bel	ow:		
SPECIAL E	VENT PERMIT		,	
	OUNTY PROPERTY			
FERMIT TO	) SXL AND CONSU	JME ALCOHOLIC BEVER	RAGES WITHIN LEE COUNTY FA	ACILITIES
FILM PERM	<b>MIT</b>			
AFTER REVIEWING THE WILL REQUIRE THE APP	E APPLICATION, P LICANT TO COMP	LEASE INDICATE BELO' LY WITH FOR THEIR EV	W WHAT ARRANGEMENTS YO	OUR ORGANIZATION
Parking:	No event parking o	n Boca Grande public stree	ts where parking is prohibited.	
				•
Ingress and Egress:	Use all established	means of ingress and egre	SS.	
•				
				113.
Special Arrangements:	All road closures shaccess shall be mai	nall be done under the sup ntained at all times. The ro	ervision of Law Enforcement, and e ad closures shall be re-opened to to	emergency venicie raffic as soon as
	practicable.			,
•	,			
H.				
	Print Name:	Brvan Miller		
	Signature:	Bryan D. Miller	Osighta by signed by Bryan D. Miller Oate: 2017,11:01 11:11:40 -04:00	
	Title:	Senior Project Manager		
				-
	Date:	November 1,2017		
				- 1

**⊜**e

Lee County Event Permit Application

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

Check the appropri	ate box(es) belo	ow:								
SPECIAL EVENT PERMIT										
🔀 USE OF CO	USE OF COUNTY PROPERTY PERMIT									
permit to	SECT BY CONST	IME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNTY	FACILITIES						
FILM PERM	HT									
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PL LICANT TO COMP	EASE INDICATE BELO LY WITH FOR THEIR EV	W WHAT ARRANGEMENTS /ENT.	YOUR ORGANIZATION						
Illumination:	Any additional light	ing must be provided by	permit holder.							
Parking Areas:										
Turking / it cast	Use all designated   Community Park ar	parking areas in the down nd Center	town area and overflow parking	at the Boca Grande						
Special Arrangements:	- Must provide insurance with Lee County BOCC being additionally insured Follow all guidelines set forth by Lee County DOT. If cones or barricades are needed for event, get w Joe Wier from Parks & Recreation at 1-239-229-0569 - All Road closures must begin at an intersection, so vehicle turn around is minimal									
	Print Name:	Jesse Lavender	Joe Wier							
	Signature:	Jesse Lavender	e Cigitally signed by Jedoseph Oate: 2017,11,01 0923 20 2400	R Wier						
	Title:	Director	Supervisor	•						
	Date:	11/1/17	10/30/17	-						
•				:						



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

Check the appropriat	e box(es) be	low:			
SPECIAL EVE	NT PERMIT				
USE OF COU					
PERMIT TO S	AT TAND CONS	SUME ALCOHOLIC BE	EVERAGES WITHIN	N LEE COUNTY FA	ACILITIES
FILM PERMIT	٢.			y.	
AFTER REVIEWING THE A	APPLICATION, I	PLEASE INDICATE BE PLY WITH FOR THEIR	ELOW WHAT ARF	RANGEMENTS Y	OUR ORGANIZATION
Insurance Requirements:	occurrence to p	neral liability insurance v protect against bodily inj d event within Lee Coun	jury and/or property	of One Million Doll damage relative to	lars (\$1,000,000) per applicants use of
Special Arrangements:	A Certificate of Board of County additional Insur	insurance shall be subm y Commissioners, P.O. B red.	nitted as evidence of ox 398, Fort Myers, F	the required cover L 33902 as the cert	age listing Lee County Ificate holder and as an
	Subject to proo	of of insurance.		i	•
		and the state of t	er en	e de la companya del companya de la companya del companya de la co	
_	Print Name:	: Mike Figueroa			
	Signature:	7			
	Title:	Risk Program Manag	er		
	Date:	October 31, 2017		P	

ACORD

## CERTIFICATE OF LIABILITY INSURANCE

BOCAG-3 OP ID: KT

DATE (MM/DD/YYYY) 10/25/2017

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(les) 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

cert	ificate holder in lieu of such endors	ement(	(s).		CONTAC	<del></del>				
PRODUCER ITALIANO INSURANCE-BOCA P. O. Box 1406				CONTACT NAME: PHONE (A/G, No):						
					(A/C, No): (A/C, No): E.MAIL ADDRESS:					
Boca Grande, FL 33921 ADDRESS:										
Italiano Insurance Services in								DING COVERAGE		NAIC #
				<u> </u>	INSURE	R.A.; Mt. Vernon	Fire Ins. Co			
INSURE		merce			INSURE	₹8:				
	P O Box 704				INSURE	ic:				
	Boca Grande, FL 33921				INSURE	RD:				
					INSURE	RE;				
					INSURE	RF:				
COV	ERAGES CER	TIFICA	TE	NUMBER:				REVISION NUMBER:		
THI	ERAGES  ER IS TO CERTIFY THAT THE POLICIES ICATED, NOTWITHSTANDING ANY REXTIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	OF INS	SURA MEN	ANCE LISTED BELOW HA T, TERM OR CONDITION	ED BY	THE POLICIES	S DESCRIBED PAID CLAIMS.	HEREIN IS SUBJECT TO	T TO W	/HICH THIS HE TERMS,
NSR LTR	TYPE OF INSURANCE	ADDL SU	UBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)		LIMIT	5	
	SENERAL LIABILITY	LIVER V	****					EACH OCCURRENCE	S	1,000,000
⊢	X COMMERCIAL GENERAL LIABILITY		N	NBP2550369F		10/13/2017	10/13/2018	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	included
<b>A</b>	<del></del>							MED EXP (Any one person)	\$	included
H	CLAIMS-MADE X OCCUR	1						PERSONAL & ADV INJURY	\$	Included
ŀ								GENERAL AGGREGATE	\$	2,000,000
-								PRODUCTS - COMP/OP AGG	S	included
-	GEN'L AGGREGATE LIMIT APPLIES PER:							host liq	\$	Included
	POLICY PRO- JECT LOC	+-+	-					COMBINED SINGLE LIMIT (Ea accident)	s	·
	AUTOMOBILE LIABILITY		1	•				BODILY INJURY (Per parson)	\$	
Ļ	ANY AUTO ALL OWNED SCHEDULED		ļ			A STATE OF THE STA		BODILY INJURY (Per accident)	\$	
-	AUTOS AUTOS NON-OWNED	1 1	1					PROPERTY DAMAGE (PER ACCIDENT)	\$	
	HIRED AUTOS AUTOS	1						(PER ACCIDENT)	\$	
		+-+				<del> </del>		EACH OCCURRENCE	s	***************************************
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	EXCESS LIAB CLAIMS-MADI	Į	- 1					AGGREGATE	s	
	DED RETENTION\$							WC STATU- OTH- TORY LIMITS ER		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  Y/N	1 1	1						s	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT		
	(Mandatory in NH)	'						E.L. DISEASE - EA EMPLOYE		
	If yes, describe under DESCRIPTION OF OPERATIONS below						<u> </u>	E.L. DISEASE - POLICY LIMIT	\$	
		1 1				1				
1										
DESCRIPTION OF OFERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  Lee County Board of County Commissioners has been named as additional insured w/respects to the above General Liabilty policy for the Christmas Walk on 11/25/17 on Park Ave, Boca Grande, FL 33921.  Obs. MF 10 31 (7)										
1								1, 1, ,		<u> </u>
CF	RTIFICATE HOLDER				CAN	CELLATIO	<u> </u>			
	Lee County Board of Co Commissioners	ounty			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
1	P O Box 398				AUTHORIZED REPRESENTATIVE					

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Boca Grande, FL 33902

XX	] = parking = Barricade Christm	Icones.	ould voa UK BG		MAP	
	5th St W  Boca Grande / Chamber of Commo	rea & Park	Sister		palm Me	Tarpon
Gilchrist Ave Gil		Loose	Caboose Caboose 4th St	4th St E		
3ilchrist Ave	4th St W  The second se	Pak Ave	<b>②</b> US Postlo	lice	The Palmetto	energy.
	The second secon		Temptation		Boca Grande Department S rd Street Cafe	tation 231
Gilchrist Ave	3rd St W	pactific design		Toad Ne	200 (200)	

# Mike Scott Office of the Sheriff



## State of Florida County of Lee

## Exhibit A Detail Request Form

Please fill out the Extra Duty Request form attached to this document completely. All details are a minimum of four (4) hours with the exception of boat details which are a minimum of six (6) hours and a half hour drive time to and from the detail location. When five (5) or more deputies are assigned to an event, a supervisor with the rank of Sergeant or above will be assigned at an upgraded hourly charge. Depending on the type of event or crowd size, it will be at the discretion of the Sheriff's Office to determine the number of deputies needed.

The current detail rat	es are:	•	_
Security	\$40/hr	Traffic	\$50/hr
Funeral Escort	\$40/hr	Security Supervisor	\$50/hr
Escort	\$40/hr	<b>Traffic Supervisor</b>	\$60/hr
Boat	\$40/hr	Civil Stand-by	\$60/hr
Holiday/Last Minute	\$60/hr	Prisoner Transport	\$60/hr

Details are charged a \$15 <u>per deputy</u> vehicle rate (when applicable). All boat details are charged a \$20 per hour boat rate (when applicable).

Extra Duty Details will not be provided to any person, firm or organization whose members, business or operations are of questionable nature; or for any event that will discredit the assigned Deputy, Sheriff's Office or County. The Sheriff's Office reserves the right to cancel the detail without notice and to recall the deputy(s) when necessary for community safety without penalty.

The Lee County Sheriff's Office will be the only armed personnel at any event where the detail is taking place. Any private security company that is hired to work alongside the Sheriff's Office will be a reputable, licensed and insured company whose employees are State D licensed <u>unarmed</u> security guards. Proof of the signed contract with private security company will be required.

In order to cancel a detail, notice must be given to the Detail Coordinator twenty-four (24) hours prior to the start of the detail either by phone or email. If the cancellation is less than twenty-four (24) hours, a four (4) hour charge per deputy will be billed. In the case of weather, notice of cancellation must be received within two (2) hours of the starting time otherwise a two (2) hour charge per deputy will be billed. In the event of a cancellation after business hours, please call 239-477-1000 and ask to have the on-call Detail Coordinator call you.

Unless otherwise specified, full payment of all details must be received one (1) week prior to the start of the event in the form of a cashier's check, money order, business check or cash. The Lee County Sheriff's Office does not accept credit cards or personal checks. Payments can be sent to: The Lee County Sheriff's Office 14750 Six Mile Cypress Pkwy., Fort Myers, FL 33912 ATTN: Details Unit.

LEE COUNTY SHERIFF'S OFFICE USE ONLY				
Total Deputy(ies) 1	Total Hours 4	Rate per Hour \$50	Vehicle Rate \$15	
Supervisory Deputy(ies)	Total Hours	Rate per Hour	Vehicle Rate	
Entity				



14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

LCSO Form 389 (revised 5/23/2017 A.Smith #05-192)

	none Number: 239-477-1199			
3333573.25333.2544.55.25333.3533.3543.3543.354	nformation			
Business Name: Boca Grande Chamber of Commerc	Ce · :			
Street: PO Box 704				
City: Boca Grande	State: FL Zip Code: 33921			
Business Contact: Wesley Locke	Phone: 941-268-1331			
Email Address: info@bocagrandechamber.net				
Event li				
Detail Location: Park Ave from 5th to 3rd/4th St fro	m Gilchrist to East Railroad			
Street:				
City: Boca Grande	State: FL Zip Code:			
Contact During Event: Wesley Locke	Phone: 941-268-1331			
Event Date: 11/25/17				
Anticipated Crowd Size : 500-700				
	No If Yes, how many?			
	Alcohol Served: Yes No			
Eastwell MANNET				
Detail II	offermation 3			
Security Traffic	Prisoner Transport			
Escort Holiday	Funeral Escort			
Last Minute Stand-by				
Marked Vehicle Yes No	Unmarked Vehicle Yes No			
Uniformed Deputy Yes No	Plain Clothes Deputy Yes V No			
Detail Description:				
One deputy to monitor traffic concerns Total for detail \$215.				
Wefley 111	7/17			

