

EVENT PERMIT



Ordinance 17-08

THE SUPER RUN

PERMIT NUMBER:

TMP2017-00374

Date(s) of Event:

December 9, 2017 from 9am-11am

Property Owner:

LEE COUNTY

Applicant:

SUPERFLY CHILDRENS FOUNDATION

Contact: CANDACE ADAMS

Description:

Fundraising event

Location of event:

9200 CORKSCREW PALMS BLVD ESTERO 33928

ESTERO COMMUNITY PARK***856-777-8737

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?

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:

SPECIAL EVENT PERMIT

USE OF COUNTY PROPERTY PERMIT

F PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Date(s) of Event /	The Super Run 12/9/17
1	12/9/0
Production:	
Location(s) of Event:	Estero Community Park
Name of Applicant:	Superfly Children's Foundation
Applicant Address:	34029 Schoolcraft Rd.
Applicant Phone Number:	854 m 8737
Contact Person: (If different from applicant)	Candace Adams
Contact Phone Number: (If different from applicant)	
Email Address:	locations @ superflyrunning.com
Estimated Attendance:	150
Event Description: Include each activity, when activities take place, etc.	Please See Stacked.
Hours of Operation:	9am-11am
	NU
Owner of Premises*:	se County

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



Fill out the following questions for allpermit types:

further details

What is the Zoning Classification of the premises?
Are any temporary structures to be installed for the event? \(\forall \text{Yes} \text{No} \text{Type: 10 x 10 +Cnts} \)
Do you have the appropriate permits for the temporary structures?
* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activindentified, including all parking areas.
Insurance Company Insuring the Event: VTC Insurance Group
Note: Certificate of Insurance must be submitted at time of application
Surety Company Bonding this Event (Name and Address):
Will Vehicles be Used as Part of This Will Food be Available at this Event? Will Alcoholic Beverages be served/consumed at this Even
TYES TONO TYES TONO
If yes, automobile coverage must be If yes, products liability coverage must be Included on the certificate of insurance. 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 Providing Food: LIND baw and or Superfly Running!
Type of Food being Served: Pre packaged health bars
Section II - USE OF COUNTY PROPERTY PERMIT
Organization Sponsoring the Event: Superfly Running/Superfly Children's 7
Organization Sponsoring the Event: Superfly Running/Superfly Children's To Fill out this portion for applications for Solicitation in the County Rights-of-Way: Superfly Children's Township And State of Shariful Children's Township Children's Town
Name of Charity: American Assec. for Cancer Research CureSearch for Children's Cancer, 74
Address of Charity: 3429 Schoolcraftld, Livonia, HI (18150
Phone Number: 857 777 5737
Non-profit certificate/registration number: 81 - 34026610
(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? 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: (Required if alcohol is to be <u>SOLD</u> 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) 344-088



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

TV Movie or Special	TV Series / Pilot	· [_	TV Comme	rcial		Still Photos	
Public Service Announcement	Industrial / Document	ary [Other:		:		·
Vill any of the following be needed	or included*?						
Street Closure			Γ Yes	Г	No		•
Traffic / Crowd Contro	1		「 Yes	j	No		
Fire or Burning			┌ Yes	Г	No		
Explosives or Pyrotech	nics		┌ Yes	<u></u>	No		
Animals, Large or Sma	· · · · · · · · · · · · · · · · · · ·	•	┌ Yes	Г	No		
Construction of Any Ki	nd		┌ Yes	Г	No		
Large and/or Numerou	ıs Vehicles	-	Yes	Г	No		
Helicopters, Boats, etc			Yes	Г	No		
Stunts			┌ Yes	T.	No		
Other			┌ Yes	Γ	No		
Special Parking Requirements:	·				entare		
	Personnel, equipment, fa	acilities, et	c.)				
Special Parking Requirements: City or County Services Required:	Personnel, equipment, fa	acilities, et	c.)				
	Personnel, equipment, fa	acilities, et	c.)				
City or County Services Required: (ed for local and state reco	ords on pro	oduction in F		to tra	ick the econ	omic impa
	ed for local and state reco	ords on pro ite as close	oduction in F ly as possibl				omic impa
City or County Services Required: The following information is require the industry. If exact figures are no	ed for local and state reco t available, please estima	ords on pro ite as close	oduction in F Num	e.			omic impa

Applicant Agreement - Signature Required



SECTION 1 - 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.

County property in question or in the permit itself.	
The applicant does acknowledge and hereby affirms that his/her knowledge.	any and all information is accurate to the best of
Signature of Applicant	Witness Control of the Control of th
Candace Adams Venue Coordinator Print Name of Applicant and Title	Print Name of Witness
11 / 14 / 17 Date	11 14 17 Date

Village of Estero Event Permit

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

Check the appropri	ite box(es) belo	ow:		
┌ SPECIAL EV	ENT PERMIT			
₩ USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONSU	IME ALCOHOLIC BEVERAGES V	WITHIN LEE COUNTY FA	ACILITIES
FILM PERM	IT			
•			m apparentation V	THE ORGANIZATION
AFTER REVIEWING THE	APPLICATION, PL	EASE INDICATE BELOW WHA LY WITH FOR THEIR EVENT.	11 WKWWWGEMEN 12 10	JON ONGANIZATION
MILL REQUIRE THE APPL	TICANT TO COMP	LI WITH ON THEM ET ELT.		•
Parking:	Parking in author	ized areas only.		
•				
Deputies (How Many?):	none			
Fee for Services:	nove	,		
	The state of the s			
Special Arrangements:	none		AND THE PROPERTY OF THE PROPER	
·				
	1			
	Print Name:	Captain J. Loethen	1	
		04404	7 0-11/8	
	Signature:	Lage / factor	- 72/7/	
	Title:	Special Events, Permits and D)etails	
	Date:	12-5-17		
•		10		



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 appropri	ate box(es) below:	
X SPECIAL EV ☐ USE OF CO	VENT PERMIT UNTY PROPERTY PERMIT	•
FILM PERM		
AFTER REVIEWING THE A WILL REQUIRE THE APPLI	PPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENT CANT TO COMPLY WITH FOR THEIR EVENT.	S YOUR ORGANIZATION
Fire Guards (How Many?)	N/A	
Fee for Services:	N/A	
Flammable Vegetation:	N/A	-
First Aid Equipment:	Call 911 for Emergencies	
Fire Extinguishing:	Call 911 for Emergencies	
		-
Special Arrangements:		
	Print Name: Scott Danielson	
	Signature: Lt. Fire Prevention	
	Date: 12/7/2017	
		The same of the sa



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

ate box(es) belov	v:		
ENT PERMIT UNTY PROPERTY PE IT	ERMIT		
APPLICATION, PLE ICANT TO COMPLY	ASE INDICATE BELOW WITH FOR THEIR EVEN	WHAT ARRANGEMENTS ' T.	YOUR ORGANIZATION
None necessary.			
None necessary.			
None necessary.			
7	10m,		
Not applicable.			
Please call 911 in the 239 533-3911.		·	e, contact our office at
Print Name:	Benjamin Abes		· .
Signature:	Benjamin Abes	Digitally signed by Benjamin Abes Date: 2017.11.30 10:13:26 -05'00'	.
Title:	Chief		- -
Date:	11/30/2017		- ·
	ENT PERMIT JNTY PROPERTY PI IT APPLICATION, PLE ICANT TO COMPLY None necessary. None necessary. None necessary. No additional precau Not applicable. Please call 911 in the 239 533-3911. Print Name: Signature: Title:	JNTY PROPERTY PERMIT IT APPLICATION, PLEASE INDICATE BELOW CANT TO COMPLY WITH FOR THEIR EVEN None necessary. None necessary. No additional precautions necessary. Not applicable. Please call 911 in the event of an emergency. To 239 533-3911. Print Name: Benjamin Abes Signature: Benjamin Abes Title: Chief	ENT PERMIT JINTY PROPERTY PERMIT IT APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS Y CANT TO COMPLY WITH FOR THEIR EVENT. None necessary. None necessary. No additional precautions necessary. Not applicable. Please call 911 in the event of an emergency. To arrange special event coverage 239 533-3911. Print Name: Benjamin Abes Signature: Benjamin Abes Digitally signed by Benjamin Abes Date: 2017.11.30 10.13:26-45700



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

Check the appropri	ate box(es) bel	ow:		Tananan
☐ SPECIAL EV ☑ USE OF CO ☐ PERMIT TO ☐ FILM PERM	UNTY PROPERTY SELL AND CONS	PERMIT UME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNTY	FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELO LY WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Parking:	Park in designated maintained road rig	areas as directed by Parks ghts-of-way.	& Recreation staff. No event park	ing on Lee Count y
Ingress and Egress:	Use all established	means of ingress and egre		
Special Arrangements:	None.			
	Print Name: Signature:	Bryan Miller Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2017.11.29 11:59:33 -05'00'	
	Title: Date:	Senior Project Manager November 29, 2017		



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

Check the appropri	ate box(es) belo	pw:
SPECIAL EV		DEDMIT
⊠ OSE OF CO ☐ PERMIT TO	UNTY PROPERTY F SELL AND CONSU	IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERM	IIT	
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PL LICANT TO COMPL	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Illumination:	The event organizer	is to provide own lighting if needed.
Parking Areas:	Organizers may dro dropping supplies of Roal Estate Office M	e designated parking area in the parking lots. No vehicles on the central lawn area, up off supplies via the service road between the Rec Center and the Chiller area. After off, the vehicles must park in the parking lots. For overflow parking, contact Select lanager, Keith at Collier Association Management 239-793-1643. Must obtain their parking lot. Must ensure event participants do not block roadways.
Special Arrangements:	No staking of tents of a dumpster if food v	or any inflatable devices, must use water barrels or sand bags. Organizers must order vendors are on site and portable toilets if needed at organizers expense.
	Parks Gates open at	open at 7:00 am and close at 9:00 pm t 5:30 am ns open Sat and Sun at 9:00 am - 5:00 pm
	Contact Trever Snea	arley at 239-771-1079 or the Rec Center at 239-498-0415 for questions
	Print Name:	Alise Hanjack
	Signature:	Alse Floreck
	Title:	Deputy Director
	Date:	Nov. 30, 2017
The Super Ru		
Dec 9 201 Estero Pada	7	Page 10
Estero Parla	,	t ago Izo



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

Check the appropria	te box(es) bel	ow:	•			
SPECIAL EVE	NT PERMIT					
☑ USE OF COU	JNTY PROPERTY	PERMIT	•		,	
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BE	EVERAGES WITHI	N LEE COUNTY	FACILITIES	
FILM PERMI	IT					•
AFTER REVIEWING THE	A DRIVE A TIONS F	NEACE INDICATE R	FLOW WHAT AR	RANGEMENTS	YOUR ORGANIZ	ZATION
WILL REQUIRE THE APPLI	CANT TO COMF	PLY WITH FOR THEIF	R EVENT.			
nsurance Requirements:	Commercial gen	eral liability insurance	with minimum limit	s of One Million I	Dollars (\$1,000,000)	per
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	loccurrence to pr	otect against bodily injected of the country in the	Jury and/or property	/ damage relative	e to applicants use o)Į
	alorementioned		•		•	
						**
Special Arrangements:	A Certificate of li Board of County additional insure	nsurance shall be subm Commissioners, P.O. B	nitted as evidence of ox 398, Fort Myers, i	f the required co FL 33902 as the c	verage listing Lee Co ertificate holder and	d as an
	1					
	Subject to proof	Of Histisance.				
	,	•				
·	Contract Con					
	Print Name:	Mike Figueroa			•	
	Cimatura	7	×		•	
	Signature:	-			,	
	Title:	Risk Program Manag	er			
	Date:	November 30, 2017			•	
		-				



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/14/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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).

CE	certificate holder in lieu of such endorsement(s).										
PRODUCER						CONTACT Carolyn Belcher					
VTC Insurance Group					PHONE [A/C, No. 5xth; (248) 471-0970 [A/C, No. 5xth; (248) 471-0641						
Far	mington Hills Office				ADDRESS: Chelcheregswins. Com						
37000 Grand River Ste 150						INSURER(S) AFFORDING COVERAGE N					
Farmington Hills MI 48335					INSURE	RA:Wester	n World I	nsurance Co	13196		
INSU					INSURE	RB:Westfi	eld Insur	ance Co.	24112		
Sur	erfly Running Inc				INSURE	Rc:Commer	ce and In	dustry Insurance	19410		
	29 Schoolcraft				INSURE	RD:					
					INSURE	RE:					
Liv		150-			INSURE						
CO	VERAGES CER	TIFIC	ATE	NUMBER:17-18 Su	perfl	y running		REVISION NUMBER:	POLICY PERIOD		
IN	VERAGES VERAGES VERAGES VERAGE VER	QUIK	1.3Mご 1.414	THE INSTIDANCE AFFORDS	ED RY	THE POLICIES	DESCRIBED	DOCUMENT WITH RESPECT HEREIN IS SUBJECT TO A	TO WHICH THIS LL THE TERMS,		
INSR		ADDL	SUBR Y/VD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS			
LTR	X COMMERCIAL GENERAL LIABILITY	Jusu	1//1/	1 4-14 114-14-1				EACH OCCURRENCE \$			
2	CLAIMS-MADE X OCCUR	1					•	PREMISES (Ea occurrence) \$	100,000		
A	COMMO-MODE A GOODI	x		HPP8448093		8/19/2017	8/19/2018	MED EXP (Any one person) \$	5,000		
		-						PERSONAL & ADV INJURY \$			
	GENT AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$	2,000,000		
	X POLICY PRO LOC							PRODUCTS - COMPIOP AGG \$			
	OTHER:							COMBINED SINGLE LIMIT S			
	AUTOMOBILE LIABILITY						·	(Ea accident)			
	X ANY AUTO							BODILY INJURY (Per person) \$			
В	ALL OWNED SCHEDULED			CWP4537040 ,		8/19/2017	8/19/2018	BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$			
	X HIRED AUTOS X AUTOS AUTOS	-						(Per accident)			
	7.0.00							PIP-Basio \$			
	UMBRELLA LIAB X OCCUR							EACH OCCURRENCE \$			
c	X EXCESS LIAB CLAUMS-MADE							AGGREGATE \$			
٦	DED RETENTIONS	1		BBU034625803		8/19/2017	8/19/2018	T PER TOTH			
	WORKERS COMPENSATION		l					PER OTH- STATUTE ER			
AND EMPLOYERS LIABILITY ANY PROPRIETORPARTINER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N/A								E.L. EACH ACCIDENT \$			
	I (Mandatory in NH)	1						E.L. DISEASE - EA EMPLOYEE S			
	If yes, describe under DESCRIPTION OF OPERATIONS below		<u> </u>					E.L. DISEASE - POLICY UMIT S	,		
		1									
]									
			<u> </u>	<u> </u>				I and			
Ev Wh	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Event: Estero Community Park Where required by written contract the following are applicable; Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials are Additional Insured on the General Liability policy. ON MF 11 3017										
					CAN	CELLATION					
CE	RTIFICATE HOLDER				T	CELLATION					
	Lee County Board of P.O. Box 398		ıtу	Commissioners	1 THE	EXPIRATIO	N DATE TH	DESCRIBED POLICIES BE CA EREOF, NOTICE WILL BI CY PROVISIONS.	NCELLED BEFORE E DELIVERED IN		
	Fort Meyers, FL 339	U 4				DRIZED REPRESE		Bakeret 11-	C. Chames		
1	į p						Patrick Williams/CTB				