

EVENT PERMIT



Ordinance 17-08

FOURTH ANNUAL HCE 5K

PERMIT NUMBER:

TMP2018-00013

Date(s) of Event:

January 27, 2018 from 6:30am-10:00am

Property Owner:

LEE COUNTY DIST SCHOOL BOARD

Applicant:

HANCOCK CREEK ELEMENTARY PTSO

Contact: TARA STROUP

No

Description:

5K race within Lee County right-of-way per approved route

Location of event:

1601 SKYLINE DR NORTH FORT MYERS 33903

HANCOCK CREEK ELEMENTARY SCHOOL ***995-3600

Will the event be attended by 1000 or more people?

Will the event be held on County Owned Property? Yes

Will there be alcohol consumed or sold at the event?

Will a bond be posted for this event?

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

спеск тпе арргоргіат	e box(es) below.
☐ SPECIAL EVE	NT PERMIT
⋉ USE OF COU!	NTY PROPERTY PERMIT
PERMIT TO S	ELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	
Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Fourth Annual HCE 5K
Date(s) of Event / Production:	January 27, 2018
Location(s) of Event:	Hancock Creek Elementary School property and surrounding neighborhoods
Name of Applicant:	Hancock Creek Elementary PTSO, President Tara Stroup
Applicant Address:	1601 Skyline Drive North Fort Myers, FL 33903
Applicant Phone Number:	995-3600
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	taras@leeschools.net
Estimated Attendance:	500
Event Description: Include each activity, when activities take place, etc.	5K race
Hours of Operation:	6:30-10:30
STRAP # of Parcel:	15 44 24 000000 10036
Owner of Premises*:	

^{*}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?	
Are any temporary structures to be inst	alled for the event? Yes 🔀 No	Туре:
Do you have the appropriate permits fo	r the temporary structures?	Yes No
* For a 'Special Event' and 'Use of Coun indentified, including all parking areas.	ty Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event:		*
Note: Certificate of Insurance must be submitte	d at time of application	
Surety Company Bonding this Event (Na	ame and Address):	* X
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
☐ Yes	☐ Yes	Yes No
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food:	H	
Type of Food being Served:		er 18
Section II - USE OF COUNTY P	ROPERTY PERMIT	
Organization Sponsoring the Event: Ha	ncock Creek Elementary PTSO	
·	r Solicitation in the County Rights-of-Way	y:
Name of Charity: Hancock Creek Elemen		
Address of Charity: 1601 Skyline Drive, N		,
Phone Number: 995-3600		*
Non-profit certificate/registration num	ber:	
(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/CONSUMPT	ION OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being sold/consumed on Cou If Yes, then a "Lee County Alcohol Permit" is required.	nty Property? Only non-profit organizations can sell alcohol on Count	☐ Yes No y Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber:	8 · · ·
	Division of Alcoholic Beverages and Tobacco may	also be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

	duction (choose all that apply):				
TV Mov	ie or Special TV Series / Pilot	П	TV Commerc	ial [Still Photos
Public S	ervice Announcement	П	Other:		
Will any of	the following be needed or included*?		. •		
	Street Closure		☐ Yes	_ No)
	Traffic / Crowd Control		Yes	☐ No	
	Fire or Burning		Yes	☐ No)
	Explosives or Pyrotechnics	☐ Yes	☐ No	D	
	Animals, Large or Small		☐ Yes	□ No	D
	Construction of Any Kind		☐ Yes		D
	Large and/or Numerous Vehicles		☐ Yes	No	D ,
	Helicopters, Boats, etc.		☐ Yes	П)
	Stunts		T Yes	□ N	0
	Other		T Yes	□ N	0
Special P	Parking Requirements:		.5)		
City or C	County Services Required: (Personnel, equipment, facil	ities, e	etc.)		
T	1 1				
The follo	owing information is required for local and state record stry. If exact figures are not available, please estimate	s on p	roduction in F	lorida to	o track the economic impact o
The follo the indu Number	owing information is required for local and state record stry. If exact figures are not available, please estimate	s on p	roduction in F sely as possibl	e.	o track the economic impact o
the indu	owing information is required for local and state record stry. If exact figures are not available, please estimate in Cast:	s on p	roduction in F sely as possibl Num	e.	

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

Date

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

Print Name of Applicant and Title

Print Name of Witness

Date



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

Check the approprio	ite box(es) below:	
┌─ SPECIAL EV	ENT PERMIT	
□ USE OF COL	UNTY PROPERTY PERMIT	
PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES	
FILM PERM	ιπ · · · · · · · · · · · · · · · · · · ·	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIO LICANT TO COMPLY WITH FOR THEIR EVENT.	Ν
Parking:	Parking in authorized areas only.	
rainis.		
Deputies (How Many?):	1 deputy for traffic control and to cross participants safely at intersection of Moody Rd and Skyline Dr. Deputy is also to ensure that volunteers are properly places at any intersections where participants will cross potential vehicle traffic including entrances to subdivisions. Locations are specified below.	
Fee for Services:	\$50/hr traffic rate +\$15 vehicle fee	
	The first of the following leastions:	*****
Special Arrangements:	Volunteers must be at the following locations:	
	Moody River Blvd/Hancock Bridge Pkwy Moody River Blvd/ Moody River Rd	
	Silver Thorn Loop/ Hancock Bridge Pkwy	
,	Moody River Pkwy/ Skyline Dr Moody Rd/ Aqua Ln	
	Overriver Dr/ Aqua Ln Skyline Dr/ Overriver Dr	
	Print Name: Captain J. Loethen	
	Signature: Capt North 12149	
	Title: Special Events, Permits and Details	
	Date: /-15-18	



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.

Please see User's Guide for contact information and Fire District Map.

Check the appropriate box(es) below: SPECIAL EVENT PERMIT USE OF COUNTY PROPERTY PERMIT FILM PERMIT AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Fire Guards (How Many?) Fee for Services: not required Flammable Vegetation: none	
USE OF COUNTY PROPERTY PERMIT FILM PERMIT AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Fire Guards (How Many?) Fee for Services: not required	
FILM PERMIT AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Fire Guards (How Many?) Fee for Services: not required	
AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Fire Guards (How Many?) Fee for Services: not required	
WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Fire Guards (How not required Many?) Fee for Services: not required	
Many?) Fee for Services: not required	JR ORGANIZATION
Flammable Vegetation: none	
First Aid Equipment: Located on property at: 1601 Skyline Drive North Fort Myers, FL 33903 Nearest responding EMS station located at: 2307 Hancock Bridge Pkwy, Cape Coral, FL 33909	
Fire Extinguishing: Fire extinguishers located on property at: 1601 Skyline Drive North Fort Myers, FL 33903 Nearest responding fire station located at: 1280 Barrett Road, North Fort Myers	
Special Arrangements: not required	
Print Name: Christi Kulwicki	
Signature: Christi Kulwicki Digitally signed by Christi Kulwicki Date: 2018.01.10 07:45:39 -05'00'	
Title: Fire Inspector	
Date: 1/10/2017	



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

Check the approprio	ate box(es) belov	v:
SPECIAL EV	ENT PERMIT	
☑ USE OF COU	UNTY PROPERTY PE	ERMIT
☐ FILM PERM	IT	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE ICANT TO COMPLY	ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	No additional precau	itions necessary.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in the 239 533-3911.	event of an emergency. To arrange special event coverage, contact our office at
	Print Name:	Benjamin Abes
	Signature:	Benjamin Abes Digitally signed by Benjamin Abes Date: 2018.01.09 20:27:21 - 05'00'
	Title:	Chief
•	Date:	01/09/2018



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

Check the appropri	ate box(es) belo	ow:	**		
, famous	ENT PERMIT UNTY PROPERTY	PERMIT			
PERMIT TO	SELL AND CONSU	JME ALCOHOLIC BEVE	RAGES WITHIN LEE CO	OUNTY FACILITIES	
FILM PERM	UT				
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P	LEASE INDICATE BELO LY WITH FOR THEIR EV	W WHAT ARRANGEN ENT.	1ENTS YOUR ORG	SANIZATION
	N.			2	
Parking:	No event parking o	n Lee County maintained r	oad rights-of-way.	×	
Ingress and Egress:	Use all established	means of ingress and egre	SS.	,	-
				-	
Special Arrangements:	Lane or road closur access to propertie guidance on use of All other race runn	ty Sheriff's Office (Deputies e will be limited to Skyline s maintained. Lane closure cones, barricades, and oth ers shall use roadside path s are maintained by Lee Co	Road between Moody Ross and road closures shall ner traffic control devices s or sidewalks as indicate	oad and Moody Rive use FDOT Standard , or alternates as dire d on route map prov	r Blvd, with Index 600 for ected by LCSO. vided
	plans shall be at th	e discretion of and/or directions on ma	ction of the LCSO. Volunt	eers and/or deputies	s should be
	-				
	Print Name:	Bryan Miller	a		
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Date: 2018.01.16 13:27:17 -0		
* * * * * * * * * * * * * * * * * * *	Title:	Senior Project Manager			
	Date:	January 16, 2017			38 °



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

Check the appro	priate box(es) be	low:	
Name of the last o	L EVENT PERMIT COUNTY PROPERTY	PERMIT	
T-m-m		UME ALCOHOLIC BEVERAGES WITHIN LEE C	COUNTY FACILITIES
☐ FILM P	ERMIT	•	
		PLEASE INDICATE BELOW WHAT ARRANGE PLY WITH FOR THEIR EVENT.	MENTS YOUR ORGANIZATION
Illumination:	N/A		
			. !
		A CONTRACTOR OF THE PROPERTY O	
Parking Areas:	N/A		;
,			and the second s
Special Arrangemer	nts: Event is not on Pa	rks and Recreation property and will not affect any	parks operations or programs.
			•
	Print Name:	Alise Flanjack	
	Signature:	Abse Flexuk	
	Title:	Deputy Director	_
	Date:	11118	
Jan 27,2	v18		
Hancorde (reek	Page 10	



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

Check the appropriat	e box(es) belo	ow:				
SPECIAL EVEI	NTY PROPERTY		BEVERAGES WIT	THIN LEE COUNT	Y FACILITIES	
FILM PERMIT		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
I TIEM I ERWIN			,			
AFTER REVIEWING THE AWILL REQUIRE THE APPLIC	APPLICATION, P CANT TO COMP	LEASE INDICATE LY WITH FOR TH	BELOW WHAT EIR EVENT.	ARRANGEMENT	S YOUR ORGANIZ	ZATION
Insurance Requirements:	occurrence to pro	eral liability insuran otect against bodily event within Lee Co	/ injury and/or prop	mits of One Million erty damage relation	Dollars (\$1,000,000) ve to applicants use o	per of
	-					
,						
Special Arrangements:	A Certificate of Ir Board of County additional insure	Commissioners, P.C	ubmitted as evidenc O. Box 398, Fort Mye	e of the required coers, FL 33902 as the	overage listing Lee C certificate holder an	ounty id as an
	Subject to proof	of insurance.				
	<u> </u>		and the second s	THE RESERVE OF THE PROPERTY OF	A CALLED TO THE PARTY OF THE PA	CHECK METERS THE STATE OF STATE
	Print Name:	Mike Figueroa				
	Signature:	7			ş	
	Title:	Risk Program Mar	nager			
	Date:	January 12, 2018				ž.
	e ·					



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/11/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION UNLT AND CONFERS NO RIGHTS OFON 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.

IM the	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										
ce	rtificate holder in lieu of such endors	emen	t(s).								
	DUCER				CONTACT Brittany O'Brien						
Pub	lic Risk Insurance Agency				NAME: Brittany U Brieff PHONE (A/C, No, Ext): (386) 252-6176 [FAX (A/C, No): (386) 239-4049 E-MAIL ADDRESS:						
₽,	O. Box 2416				ADDITION.						
								DING COVERAGE	NAIC#		
Day	aytona Beach FL 32115					RA:Qualifi					
INSU	RED							nce Company	19801		
Sch	ool District of Lee County	, DE	A:					Insurance Company	12831		
The	School Board of Lee Count	y, E	'lor	ida;	INSURE	RD:Travele	ers Casua	lty & Surety Co. of	31194		
	5 Colonial Blvd				INSURE	RE:					
For	Fort Myers FL 33966-1012					RF:		-			
CO	VERAGES CER	TIFIC	ATE	NUMBER:CL1762801	615			REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOL 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	ADDL S	WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	200 000		
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR							EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$	200,000		
				In accordance with		7/1/2017	7/1/2018	MED EXP (Any one person) \$			
				FS 768.25				PERSONAL & ADV INJURY \$			
	GEN'L AGGREGATE LIMIT APPLIES PER:		- 1					GENERAL AGGREGATE \$	300,000		
	POLICY PRO-							PRODUCTS - COMP/OP AGG \$			
	OTHER: AUTOMOBILE LIABILITY			<u> </u>			:	COMBINED SINGLE LIMIT \$ (Ea accident)			
				In accordance with		7/1/2017	7/1/2018	BODILY INJURY (Per person) \$	200,000		
A	X ANY AUTO ALL OWNED SCHEDULED			FS 768.25				BODILY INJURY (Per accident) \$	300,000		
	AUTOS AUTOS NON-OWNED			FS 168.25				PROPERTY DAMAGE \$ (Per accident)			
	HIRED AUTOS AUTOS							\$			
	- International Property of the Inte							EACH OCCURRENCE \$	2,000,000		
	UMBRELLA LIAB X OCCUR			2902078-00		7/1/2017	7/1/2018	AGGREGATE \$			
В	X EXCESS LIAB CLAIMS-MADE	1		2902078-00		,, =,		\$			
	DED RETENTIONS WORKERS COMPENSATION							X PER STATUTE ER OTH-			
	AND EMPLOYERS' LIABILITY Y/N							E.L. EACH ACCIDENT \$	1,000,000		
_	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A		NDE-0927500-17		7/1/2017	7/1/2018	E.L. DISEASE - EA EMPLOYEE \$	1,000,000		
C	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			MDE-032/300-1/		,,-,		E.L. DISEASE - POLICY LIMIT \$	1,000,000		
	DÉSCRIPTION OF OPERATIONS below	-					- 10 10 0 1 D		\$1,000,000		
D	Crime			105801487		7/1/2017	7/1/2018	Employee Theft	Ş1,000,000		
						-					
I	SCRIPTION OF OPERATIONS/LOCATIONS/VEHICLESS Liability Retention \$	200	ഹവ	/S300.000 for cla	aims 1	calling u	nder ro/o	0.20, 9200,000 IOL W	ll other		
1 _ 7	aims \$500 000 STD for Wor	kers		ompensation. Ceri	titica	rte norde:	r is list	ed as addreronar ans	4104 40		
	weighten contract	0.7	a CYY	eement when such	WILT	cen contr	act or ag	Leemenr To execuced	DITOT 00 4111		
00	currence, offense or loss	to w	nıc	n this endorseme	nt app	ires, bu	t Only Id	less Certificate of	Insurance		
CC	entract or the Limits of Li	abli	.ıty	provided by this	s por.	in Run Ja	nuary 30.	2018.			
is	sued with respect to the H	anco	CK	Creek Frementary	JK E	ii Run va	nuary ou,	2007			
CE	ERTIFICATE HOLDER	-			CAN	CELLATION	1				
Γ					1		THE ADOLE	DESCRIBED POLICIES BE CANC	FILED BEFORE		
	Lee County BoCC	enn.			1 TH	E EXPIRATION	N DATE TH	DESCRIBED POLICIES BE CANC HEREOF, NOTICE WILL BE ICY PROVISIONS.	DELIVERED IN		
1	2201 Second St. Ste 6 Ft. Myers, FL 33901										
	· · · · · · · · · · · · · · · · · · ·			.1	AUTH	ORIZED REPRES	SENTATIVE		•		
		r	11	MF orliver	Mia	nelle Mar	tin/BRITT	Mir nes	ceste -		
L			/ 4-	0.11	PILCI			CORD CORPORATION, All I	ights reserved		



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

Check the appropriat	e box(es) belo	w:					
FILM PERMIT	ONLY						
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	PPLICATION, PL ANT TO COMPL	EASE INDICA Y WITH FOR T	TE BELOW V THEIR EVENT	VHAT ARRAI	NGEMENTS `	YOUR ORGAN	IZATION
Special Arrangements:							
							2227
Other:		-					
	Print Name:			,			
	Signature:						
	Title:						
	Date:						

