

# EVENT PERMIT

Ordinance 17-08

## THE VOYAGE THAT MADE A NATION

**PERMIT NUMBER:** TMP2018-00041**Date(s) of Event:** February 8, 2018 Reception meet and greet February 18, 2018 Fundraiser with live bands**Property Owner:** LEE COUNTY**Applicant:** BOCA GRANDE HISTORICAL SOCIETY **Contact:** KIM KYLE**Description:** Fundraising event**Location of event:** 131 135 1ST ST W BOCA GRANDE 33921  
BOCA GRANDE COMMUNITY PARK\*\*\*941-830-0454

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 2-9-18  
County Manager Date



**Lee County**  
*Southwest Florida*

## Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

Feb. 8th, 2018 - Reception meet & greet after lecture, serving, not selling wine

Feb. 18th, 2018 - Fundraiser with live band in tent - Selling & Serving Alcohol

## 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)

<b>Title of Event / Name of Production</b>	Reception, Mayflower: The Voyage That Made A Nation. Fundraiser, Pine Leaf Boys
<b>Date(s) of Event / Production:</b>	Reception February 8, 2018. Fundraiser February 18, 2018.
<b>Location(s) of Event:</b>	Boca Grande Community Park 131 First Street W. Boca Grande, FL 33921
<b>Name of Applicant:</b>	Boca Grande Historical Society, Inc.
<b>Applicant Address:</b>	170 Park Ave. Boca Grande, FL 33921 PO Box 553
<b>Applicant Phone Number:</b>	941-964-1600
<b>Contact Person:</b> (If different from applicant)	Kim Kyle, Executive Director
<b>Contact Phone Number:</b> (If different from applicant)	cell 941-830-0454
<b>Email Address:</b>	kyleks@leegov.com
<b>Estimated Attendance:</b>	1. Feb. 8, 2018, 60 people. 2. Feb. 18, 2018, 250 people
<b>Event Description:</b> Include each activity, when activities take place, etc.	1. Feb. 8th Reception meet & greet after lecture, serving, not selling wine 2. Feb. 18th Fundraiser with live band in tent, selling & serving alcohol
<b>Hours of Operation:</b>	1. Feb 8th 3:30 pm - 5:00 pm 2. Feb. 18th 5:30 - 11:00 pm
<b>STRAP # of Parcel:</b>	144320010000500100
<b>Owner of Premises*:</b>	Lee County Government

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

## 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: Tent on Feb. 18, 2018

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: United Sates Fire Ins. Co. for liquor liability, and Bankers Insurance, general liability

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 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:

1. Feb. 8th - snacks by BGHS. 2. Feb. 18th Nat Italiano provider

Type of Food being Served: 1.Snacks Feb. 8. 2. Spaghetti Feb. 18

### Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Boca Grande Historical Society, Inc.

### 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: CH6860

(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: CH6860 (For Feb. 18, 2018 fund raiser event)

(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

**Applicant Agreement - Signature Required**

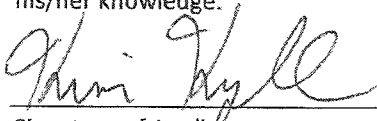


**SECTION V - AGREEMENT**

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.

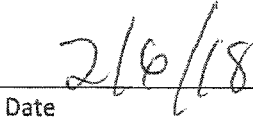
The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.



Signature of Applicant



Print Name of Applicant and Title



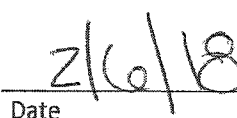
Date



Witness



Print Name of Witness



Date

**See  
Attached**

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 areas only.

Deputies (How Many?):

One deputy for security and presence.

Fee for Services:

Security deputy \$40/hr

Special Arrangements:

One deputy for security and presence during event. All amplified music must be in compliance with Lee County FL noise ordinance 24 1/4 to include but not limited to monitoring all noise levels during event especially at night. Event coordinator will need to pay special attention to the time and the noise levels at that time as to not exceed what is allowed by law. Any complaints will be evaluated and handled accordingly by the Lee County Sheriff's Office.

Print Name: Captain J. Loethen

Signature:

*Capt J Loethen 22149*

Title:

Special Events, Permits and Details

Date:

2-1-18



**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 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:

*C.W. Blosser*

Title:

Fire Chief

Date: 01/31/2018

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: 2018.01.31 08:30:26 -05'00'

Title: Chief

Date: 01/31/2018



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  
☒ 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:

Park in designated areas. No event parking on Lee County maintained road rights-of-way where parking 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: 2018.02.06 10:29:00 -05'00'

Title: Senior Project Manager

Date: February 6, 2018

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:

- ☐ 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.

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.
- Fire Department must inspect tent and permit holder must remove all trash from Community Center grounds or rent a dumpster for trash
- 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 Jesse Lavender Date: 2018.02.01 16:11:31 -05'00'
Title:	Director	Supervisor
Date:	2/1/18	1/29/18

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT  
COUNTY ADMINISTRATION BUILDING - 4<sup>TH</sup> FLOOR  
2115 SECOND STREET  
FORT MYERS, FLORIDA 33901  
(239) 533-2221

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.

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: January 31, 2018



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/17/2017

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).

PRODUCER  
ITALIANO INSURANCE SVCS INC  
441 PALM AVE  
BOCA GRANDE, FL 33921  
8419840400

## CONTACT NAME:

PHONE

9419840400

FAX

(409) 722-2905

E-MAIL

ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A:

United States Fire Insurance

21113

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

INSURED  
SPORTS AND RECREATION PROVIDERS ASSOCIATION (PURCHASING GROUP) AND  
ITS PARTICIPATING MEMBERS:

Boca Grande Historical Society, Inc  
PO Box 553/170 Park Ave.  
Boca Grande, FL 33921-0553

## COVERAGES

CERTIFICATE NUMBER: USS365160

REVISION NUMBER:

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.

TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.								
INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY	X		SRPGAPML-101-0717	02/08/2018 12:01 AM	02/19/2018 12:01 AM	GENERAL AGGREGATE	\$2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	\$2,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$1,000,000.00
							EACH OCCURRENCE	\$1,000,000.00
							FIRE DAMAGE (Any one fire)	\$300,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person)	\$0.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOG							
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (See accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> HIRED AUTO	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR					EACH OCCURRENCE	\$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE	\$
	DED	RETENTION \$						
							EACH OCCURRENCE	\$
							GENERAL AGGREGATE	\$
A	Liquor Liability	X		SRPGAPML-101-0717/ USL305602	02/08/2018 12:01 AM	02/19/2018 12:01 AM	EACH OCCURRENCE	\$1,000,000.00
							GENERAL AGGREGATE	\$2,000,000.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Lee County BOCC, a political subdivision & Charter County of the state of FL are added as additional insured but only with respect to liability arising out of operations of the named insured during the policy period.  
Covered Activity: Fundraiser

Scheduled Activities Exclusion Applies-Please Refer to Named Insured Member Certificate of Coverage

OK MF 01/31/17

## CERTIFICATE HOLDER

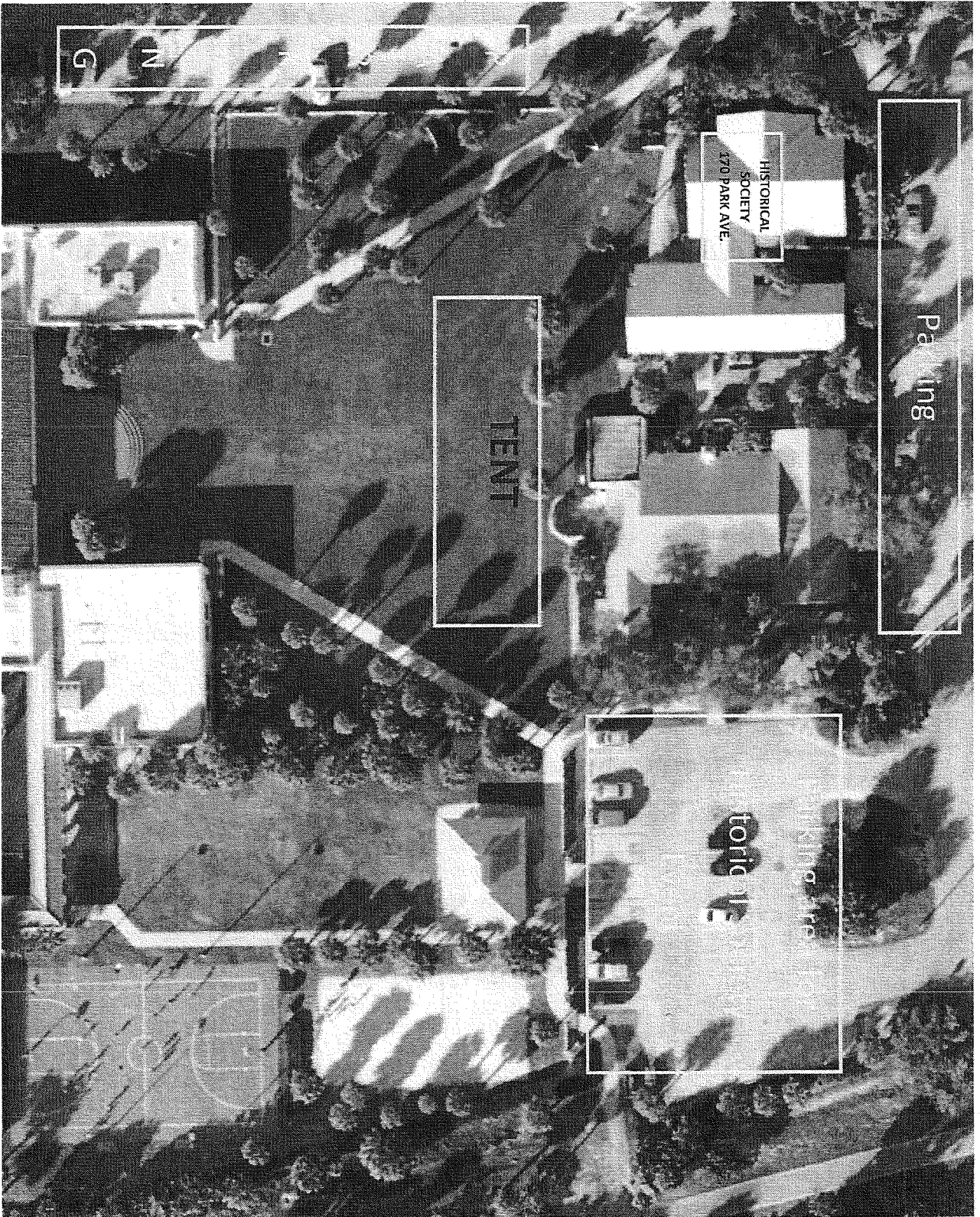
Lee County Board of County Commissioners  
POB 398  
Fort Myers, FL 33902

## CANCELLATION

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 REPRESENTATIVE

Italiano Insurance Svcs Inc



DBPR ABT-6003 – Division of Alcoholic Beverages and Tobacco  
Application for One/Two/Three Day Permit or Special Sales License

STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

DBPR Form  
ABT- 6003  
Revised 08/2013

If you have any questions or need assistance in completing this application, please contact the Division of Alcoholic Beverages & Tobacco's (AB&T) local district office. Please submit your completed application to your local district office at least (7) days prior to the first date of the event to insure the permit is issued by the event date. This application may be submitted by mail, or it can be dropped off. A District Office Address and Contact Information Sheet can be found on AB&T's page of the DBPR web site at the link provided below.

<http://www.state.fl.us/dbpr/abt/contact/index.shtml>

SECTION 1 – CHECK TRANSACTION REQUESTED

Transaction Type:

☒ One/Two/Three Day Permit

☐ Special Sales License

SECTION 2 – PERMIT or LICENSE INFORMATION

If the applicant is a corporation or other legal entity, enter the name and the document number as registered with the Florida Department of State Division of Corporations on the line below.

FEIN Number 65-0585091	Business Telephone Number 941-964-1600	E-Mail Address (Optional) kyleks@leegov.com
Full Name of Applicant(s): (This is the name the permit or license will be issued in) Boca Grande Historical Society, Inc		Department of State Document # CH 6860

Business Name (D/B/A) or Name of Event  
Pine Leaf Boys Party

Location of Event (Street and Number)  
131 First Street W. Boca Grande Community Park

City Boca Grande	County Lee	State FL	Zip Code 33921
---------------------	---------------	-------------	-------------------

Mailing Address (Street or P.O. Box)  
P.O. Box 553

City Boca Grande	State FL	Zip Code 33921-0553
---------------------	-------------	------------------------

Contact Person - This section is optional, see application instructions for details

Contact Person Kim Kyle	Telephone Number 941-964-1600 ext.
----------------------------	---------------------------------------

Email Address (Optional)  
kyleks@leegov.com

Mailing Address (Street or P.O. Box)  
P.O. Box 553

City Boca Grande	State FL	Zip Code 33921-0553
---------------------	-------------	------------------------

Date(s) Permit Desired  
02/18/2018

ABT District Office Received Date Stamp

SECTION 3 - SALES TAX TO BE COMPLETED BY THE DEPARTMENT OF REVENUE	
Full Name of Applicant Organization <u>Soca Grande Historical Society</u>	
The named applicant for a license/permit has complied with the Florida Statutes concerning registration for Sales and Use Tax and has agreed to pay any applicable taxes due.	
Signed <u>Shelley Carr</u>	Date <u>01-29-2018</u>
Title <u>Tax Specialist I</u>	
Department of Revenue Stamp:	
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> RECEIVED PT. OF REVENUE FORT MYERS </div> <div> JAN 29 PM 3:00 </div> <div> Valid for 30 days </div> </div>	

SECTION 4 - ZONING TO BE COMPLETED BY THE ZONING AUTHORITY GOVERNING THE EVENT LOCATION	
Location of Event (Street and Number)	
City	County
The location complies with zoning requirements for the temporary sale of alcoholic beverages pursuant to this application for a One/Two/Three Day Permit.	
Signed	Date
Title	

**Note:** College fraternities and sororities must meet certain additional conditions which can be found in the application instructions and requirements.



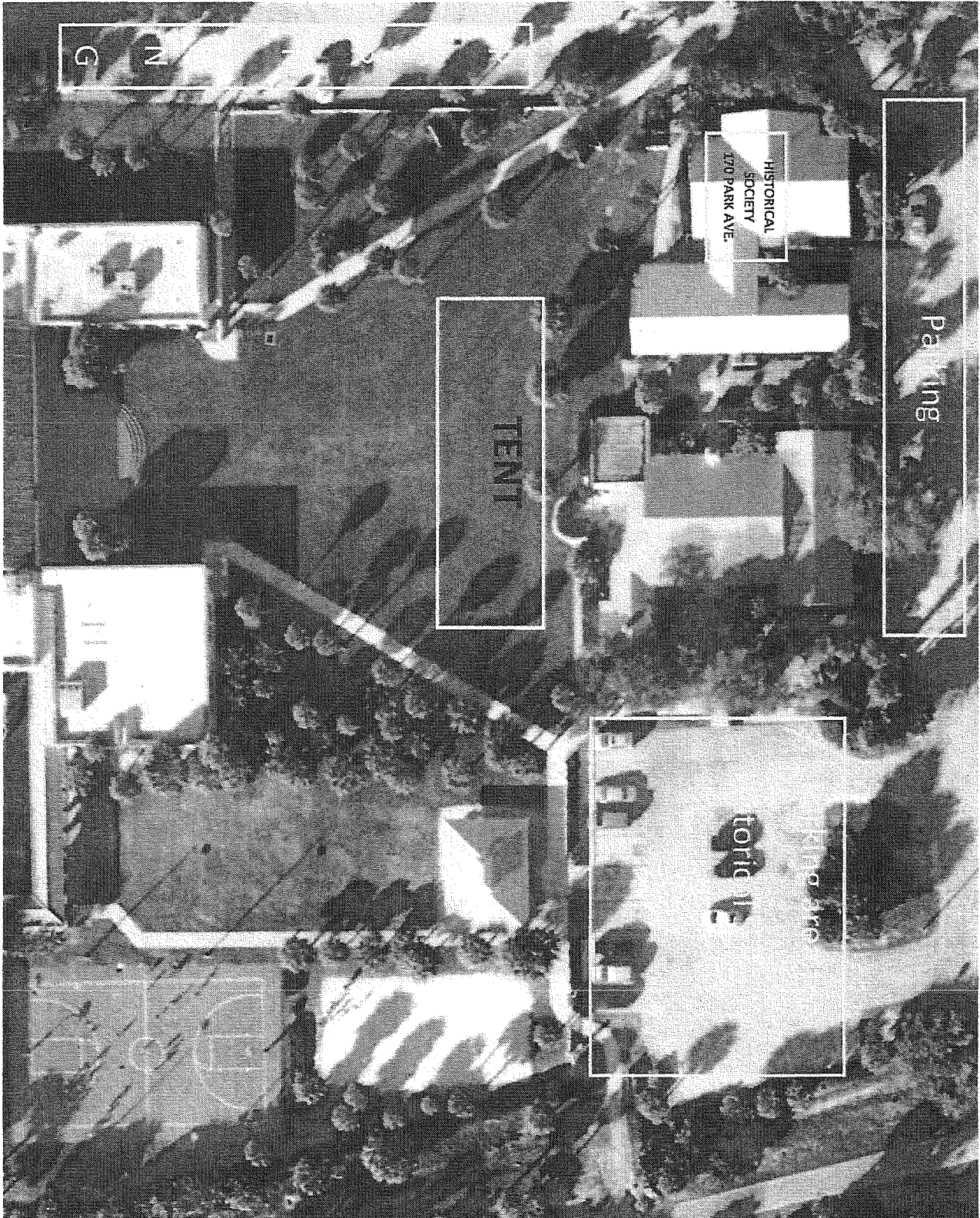
SECTION 5 – DESCRIPTION OF PREMISES TO BE LICENSED  
AB&T AUTHORIZED SIGNATURE REQUIRED

Business Name (D/B/A) or Name of Event

*Pine Leaf Boys Party*

Neatly draw a floor plan of the premises in ink, including sidewalks and other outside areas which are contiguous to the premises, walls, doors, counters, sales areas, storage areas, restrooms, bar locations and any other specific areas which are part of the premises where the event will be held. A multi-story building where the entire building is to be licensed must show the details of each floor.





SECTION 6 - AFFIDAVIT OF APPLICANT  
FOR NON-PROFIT CIVIC ORGANIZATION ALCOHOLIC BEVERAGE PERMIT

NOTARIZATION REQUIRED

Full Name of Applicant Organization

Boca Grande Historical Society Inc.

"This is to certify that the applicant requesting the permit in the above and foregoing application is a non-profit civic organization and that the permit, if used, will be used only by the organization making application, on the date(s) requested and at the location stated. By acceptance of this permit, we agree that the applicant organization, as the permit holder, is the ONLY entity that will receive any of the profits from the sale of alcoholic beverages on this permit. This is to further certify that the applicant organization has not received more than three (3) permits within the calendar year, unless otherwise authorized by law, and acknowledge that the location may be inspected and searched during the time that the permit is issued and business is being conducted without a search warrant by authorized agents or employees of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his Deputies, and Police Officers for purposes of determining compliance with the alcoholic beverage laws.

I, the undersigned individual, hereby swear or affirm that I am an officer or authorized representative and am duly authorized to make the above and foregoing statements on behalf of the applicant organization. Furthermore, I swear under oath or affirmation under penalty of perjury as provided for in Sections 559.791, 562.45, and 837.06, Florida Statutes, that the foregoing information is true to the best of my knowledge."

STATE OF

Florida

COUNTY OF

Sarasota

KAREN S GRACE

APPLICANT/AUTHORIZED REPRESENTATIVE NAME

Karen S Grace

APPLICANT/AUTHORIZED REPRESENTATIVE SIGNATURE

The foregoing was ( ) Sworn to and Subscribed before me this 22 Day

of January, 20 18, By Karen S Grace who is ( 4 ) personally known to me  
(print name(s) of person making statement)

OR ( ) who produced \_\_\_\_\_ as identification.

Patricia A Lowe

Commission Expires: 7-30-2018

Notary Public

