



# EVENT PERMIT

Ordinance 17-08



## SANIBEL EASTER SUNRISE SERVICE

**PERMIT NUMBER:** TMP2018-00052

**Date(s) of Event:** April 1, 2018 from 5:30am until 8:00am

Property Owner: LEE COUNTY

Applicant: SANIBEL COMMUNITY CHURCH  
239-472-2684

Contact: JUDY BOLING

Description: Easter Sunrise Service

Location of event: SANIBEL CSWY FORT MYERS  
SANIBEL CAUSEWAY ISLAND A\*\*\*239-472-2684

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

3-18-18

Date

Sanibel Easter Sunrise



**Lee County**  
*Southwest Florida*

## Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

TMF 2018-00052

## 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>	Easter Sunrise Service
<b>Date(s) of Event / Production:</b>	April 1, 2018
<b>Location(s) of Event:</b>	Sanibel Causeway
<b>Name of Applicant:</b>	Sanibel Community Church
<b>Applicant Address:</b>	1740 Periwinkle Way Sanibel, FL 33957
<b>Applicant Phone Number:</b>	(239) 472-2684
<b>Contact Person:</b> (If different from applicant)	Judy Boling
<b>Contact Phone Number:</b> (If different from applicant)	
<b>Email Address:</b>	judy@sanibelchurch.com
<b>Estimated Attendance:</b>	1000
<b>Event Description:</b> Include each activity, when activities take place, etc.	Easter Sunrise Service
<b>Hours of Operation:</b>	1:30 am set-up Event 5:30 am to 8:00 am
<b>STRAP # of Parcel:</b>	09462300000020090 Causeway Island A
<b>Owner of Premises*:</b>	Lee County

\*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? \_\_\_\_\_

Are any temporary structures to be installed for the event? ☐ Yes ☐ No Type: \_\_\_\_\_

Do you have the appropriate permits for the temporary structures? ☐ Yes ☐ No

\* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event: GuideOne Insurance Company

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

Surety Company Bonding this Event (Name and Address): \_\_\_\_\_

<p><b>Will Vehicles be Used as Part of This Event?</b></p> <p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="font-size: small;">If yes, automobile coverage must be included on the certificate of insurance.</p>	<p><b>Will Food be Available at this Event?</b></p> <p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="font-size: small;">If yes, products liability coverage must be included on the certificate of insurance.</p>	<p><b>Will Alcoholic Beverages be served/consumed at this Event?</b></p> <p style="text-align: center;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p style="font-size: small;">If yes, liquor liability coverage must be included on the certificate of insurance.</p>
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Name & Address of Organization Sanibel Community Church

Providing Food: \_\_\_\_\_

Type of Food being Served: Coffee & donuts

### Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Sanibel Community Church

**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: 85-8012668824sC-6

(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: \_\_\_\_\_

(Required if alcohol is to be **SOLD** at the event)

**Please note:** A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details



## Lee County Event Permit Application



## Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply):

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

Will any of the following be needed or included\*?

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

\* For any marked Yes, provide further details below:

Stage

Special Parking Requirements:

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

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

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

**Applicant Agreement - Signature Required****SECTION I - SAFETY**

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

**SECTION II - INSURANCE**

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

**SECTION III - INDEMNIFICATION**

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted premises or improvement thereto, or arising from the use of the premises.

**SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES**

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

**Applicant Agreement - Signature Required****SECTION V - AGREEMENT**

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

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

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

Signature of Applicant

SHELTON GWALTNEY  
ADMINISTRATIVE PASTOR

Print Name of Applicant and Title

Date

2/14/18

Witness

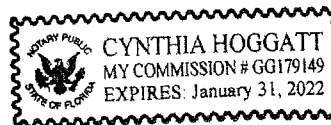
Cynthia Hoggatt

Print Name of Witness

CYNTHIA HOGGATT

Date

2/14/18



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?):

Two deputies for traffic control and presence from 0530-0930.

Fee for Services:

Holiday rate \$60/hr per deputy plus \$15 vehicle fee per deputy.

Special Arrangements:

none

Print Name: Captain J. Loethen

Signature:

*Capt J. Loethen* 92147

Title:

Special Events, Permit and Details

Date:

2-15-18



## Lee County Event Permit Application



## FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.  
Please see User's Guide for contact information and Fire District Map.

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
☒ 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 required

Fee for Services:

No fee for service

Flammable Vegetation:

N/A

First Aid Equipment:

Lee County EMS - Emergency call 911

Fire Extinguishing:

Tents per TMP permit requirements - no other extinguishment required

Special Arrangements:

N/A

Print Name: Edward Steffens

Signature:

Title:

IMFD DC PREVENTION

Date:

FEB 21 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: 2018.02.15 20:31:42 -05'00'

Title: Chief

Date: 02/15/2018

**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 as directed by Parks & Recreation. At a minimum, No event parking within fifteen (15) feet of the Sanibel Causeway edge of pavement.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

Use Lee County Sheriff's Office for assistance with traffic control as needed.

Print Name: Bryan Miller

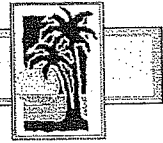
Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller  
Date: 2018.02.26 08:05:36 -05'00'

Title: Senior Project Manager

Date: February 26, 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:

Directional and event set up lighting is needed for pre-dawn hours.  
Lighting should not interfere or be directed at vehicles traveling on the Causeway Road.

Parking Areas:

Parking area is an open filed and will require coordination. Law enforcement agency is required at entrance and exit for safety purposes. Cost associated with Law Enforcement to be covered by Sanibel Community Church.

Special Arrangements:

Use of County Property Permit required. Rental fee of \$250.00 is required. Must work with parks on site staff to ensure safe and successful event.

Print Name: Alise Flanjack

Signature:

*Alise Flanjack*

Title:

Deputy Director

Date:

3/13/2018

*Easter Sunrise at  
Causeway Island A  
4/1/18*

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.

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:

February 28, 2018



SANICOM-01

AFANCHER

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/26/2018

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 have ADDITIONAL INSURED provisions or 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 Church Asset Management, Inc. 1500 Wall St. Saint Charles, MO 63303	CONTACT NAME:	FAX (A/C, No): (866) 608-0600
	PHONE (A/C, No, Ext): (800) 200-7257	
INSURED  Sanibel Community Church Incorporated, of Sanibel, Florida 1740 Periwinkle Way Sanibel, FL 33957	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: GuideOne Elite Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		
NAIC #		
42803		

## COVERAGES

## CERTIFICATE NUMBER:

## 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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			1303-098	05/20/2017	05/20/2018	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
							MED EXP (Any one person) \$ 15,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 5,000,000
							PRODUCTS - COMP/OP AGG \$ 5,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						
	OTHER:						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY						BODILY INJURY (Per person) \$
	<input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> NON-OWNED AUTOS ONLY						
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED						
	RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Please see attached (CG2026)-Additional insured in regards to the Easter Service.

OK MP 02/28/18

## CERTIFICATE HOLDER

## CANCELLATION

Lee County Board of County Commissioners  
2115 Second Street  
4th Floor  
Fort Myers, FL 33901

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



NAMED INSURED : Sanibel Community Church

POLICY NUMBER: 1303-098

COMMERCIAL GENERAL LIABILITY  
CG 20 26 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
Lee County Board of County Commissioners 2115 Second Street 4th Floor Fort Myers, FL 33901 In regards to the Easter sunrise service 2018.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

**Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.



## REQUEST FOR FEE WAIVER

LEE COUNTY PARKS AND RECREATION  
3410 Palm Beach Boulevard  
Fort Myers, FL 33916  
Phone (239) 533-7275

This form must be completed and returned with a copy of the Agency's 501-C Non-Profit Status Certificate 10 days in advance of the date requested.

Date Form Completed: 3/13/2018

Name of Agency or Organization: Sanibel Community Church

Contact Person: Judy Boling Phone #: 239-472-2684

Address: 1740 Periwinkle Way, Sanibel FL 33957

Requested Park/Facility: Causeway Island A

Location within that Park/Facility: \_\_\_\_\_

Date of Activity: April 1, 2018 Time of Activity: Easter Sunrise Service

Type of Activity: \_\_\_\_\_ Expected Number of Participants: 1000

Fees you are Requesting to have Waived: 1/2 price of Rental of Facility

Reason applying for Fee Waiver (list benefits to Lee County if fee is waived):

Offer a sunrise service to visitors and the community.

.....

### For Office Use Only

Manager/Supervisor: Approved ☒ Denied ☐ 501-C Attached: Yes ☐ No ☐

Justification: \_\_\_\_\_

Signature: Zaron Viskare Date: \_\_\_\_\_

Director of Parks and Recreation: Approved ☒ Denied ☐

Justification: Community Event

Signature: Alice Flayjak Date: 3/13/18

**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:*

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☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Insurance Requirements:

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Special Arrangements:

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Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Lee County Event Permit Application**



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

*Check the appropriate box(es) below:*

☐ FILM PERMIT ONLY

**AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.**

**Special Arrangements:**

**Other:**

**Print Name:**

\_\_\_\_\_

**Signature:**

\_\_\_\_\_

**Title:**

\_\_\_\_\_

**Date:**

\_\_\_\_\_



## Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14  
R. 10/15

85-8012668824C-6	11/30/2017	11/30/2022	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

SANIBEL COMMUNITY CHURCH INC  
OF SANIBEL FLORIDA  
1740 PERIWINKLE WAY  
SANIBEL FL 33957-4302

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



## Important Information for Exempt Organizations

DR-14  
R. 10/15

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration Information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

Police man directing traffic with  
patrol car.

