

EVENT PERMIT



Ordinance 17-08

SWFL SPRING FLING

PERMIT NUMBER:

TMP2018-00111

Date(s) of Event:

April 12-15, 2018 from 7:30am until 7:00pm

Property Owner:

LEE COUNTY

Applicant:

ROY HOBBS BASEBALL

Contact: TOM GIFFEN

Description:

SWFL SPRING FLINT/WOODEN BAT CLASSIC/Consumption on premise in

Conjunction with amateur baseball tournament

Location of event:

4301 EDISON AVE FORT MYERS 33916

PLAYER DEVELOPMENT COMPLEX/***330-352-2171

Will the event be attended by 1000 or more people?

No

Will the event be held on County Owned Property?

Yes

Will there be alcohol consumed or sold at the event?

Yes

Will a bond be posted for this event?

No

Permit Conditions:

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

Board of County Commissioners Lee County, Florida

County Manager

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



Event Application

Check the appropriate	e box(es) below:
SPECIAL EVEN	
PERMIT TO SE	NTY PROPERTY PERMIT 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	Southwest Florida Spring Fling / Wooden Bat Classic
Date(s) of Event / Production:	April 12-15
Location(s) of Event:	PLAYER DEVELOPMENT COMPLEX, 4301 EDISON AVE, FORT MYERS 33916
Name of Applicant:	ROY HOBBS BASEBALL / ROY HOBBS CONCESSIONS
Applicant Address:	4301-100 EDISON AVENUE FORT MYERS FL 33916
Applicant Phone Number:	330.352.2171
Contact Person: (if different from applicant)	TOM GIFFEN
Contact Phone Number: (If different from applicant)	SAME
Email Address:	TG@ROYHOBBS.COM
Estimated Attendance:	36 ADULT AMATEUR BASEBALL PLAYERS
Event Description: Include each activity, when activities take place, etc.	This is the 5th Spring Fling event in Lee County, operated by the Wagner Wooden Bat Classic. Spring Fling has hired Roy Hobbs to operate its locker room program and field access. Permit application applies specifically to Beer only consumption - no sales - as part of the Locker Room program. No alcohol may leave the locker room; consumption is supervised by Hobbs staff; no BYOB allowed. Beer available from 4 pm to 7 pm; game times are 9:30 am & 1:30 pm. Locker room services end 90
Hours of Operation:	Tournament play is 9 am to end of play, usually about 5 pm at PDC. Basic locker room hours are 7:30
STRAP # of Parcel:	DNK 204425P2000020000

Owner of Premises*:

Lee Co Board of Commissioners, administered by Lee County Parks and Recreation Department

^{*}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 p	premises? DNK	
Are any temporary structures to be insta	lled 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 Count indentified, including all parking areas.	y Property' permit, submit a si te plan w	ith all proposed facilities and activities
Insurance Company Insuring the Event:	Great American E&S Insaurance covers RH;	Covington Specialty covers RH facility
Note: Certificate of Insurance must be submitted	at time of application	
Surety Company Bonding this Event (Na	me and Address): NONE	
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 🔀 No	∑ 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 Ho Providing Food: Ro	me Run Concessions, owned and operated y Hobbs Baseball has no role in the food se	by Laura Heron, a Lee County Vendor. rvice.
	namburgers, salads	
Type of Food being Served:		
Section II - USE OF COUNTY P	ROPERTY PERMIT	
Organization Sponsoring the Event:		EN HINNES BERTHE DE BIBLIO EN DE BERTHE AND EN DE BIBLIO E
	Solicitation in the County Rights-of-Wa	ıy:
Name of Charity:	•	•
		_
Address of Charity:		
Phone Number:		
Non-profit certificate/registration num		
(Proof of registration with the Dept. of Agriculture &	Consumer Services §496.405 or proof the organizatio	n is exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES	PERMIT
	Only non-profit organizations can sell alcohol on Cour	
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber: Consumption only, and only within th	e confines of the locker room. NO sales.
	Division of Alcoholic Beverages and Tobacco ma	y also be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

e of Production (choose all that	apply):	-			
TV Movie or Special	TV Series / Pilot		TV Comme	rcial 📙	Still Photos
Public Service Announcement	☐ Industrial / Documentary		Other:		
I any of the following be neede	d or included*?				
Street Closure			☐ ¥es	☐ No	
Traffic / Crowd Cont	rol		☐ Yes	┌ No	
Fire or Burning	unannan kiku 199 menerus untuk ir manan muu tikiki 1995 menenna keliki 1995 menerus 1995 menerus 1995 menerus		Yes	┌ No	· ·
Explosives or Pyrote	chnics	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	☐ Yes	☐ No	, prophysical
Animals, Large or Sn	nall		Yes	┌ No	Section Section 1
Construction of Any	Kind		☐ Yes	∏ No	
Large and/or Numer	ous Vehicles		Yes	∏ No	
Helicopters, Boats, e	etc.		☐ Yes	☐ No	• •
Stunts	dan permanakan da Salat Anderson van de 1993 blem da da de Anderson Anderso		☐ Yes	☐ No	
Other			Yes	☐ No	
Special Parking Requirements:					
		001-001-001-001-001-001-001-001-001-001			
City or County Services Require	d: (Personnel, equipment, facili	ties, ε	etc.)		
The following information is rec the industry. If exact figures are	uired for local and state records e not available, please estimate	s on p as clo	roduction in sely as possil	Florida to ble.	track the economic impac
Number in Cast:	Number in Crew:		Nur	mber of loca	als hired:
Total budget:	Estimate amount sp	ent in	Lee County:		

Applicant Agreement - Signature Required



SECTION I - SAFETY

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

SECTION II - INSURANCE

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

SECTION III - INDEMNIFICATION

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

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

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

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

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

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

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

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

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

Signature of Applicant

Witness

Print Name of Applicant and Title

Print Name of Witness



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

Check the appropria	te box(es) below:	
F SPECIAL EVI	ENT PERMIT	
	JNTY PROPERTY PERMIT	
	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES	
FILM PERM	Ť.	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.	
Parking	Parking in authorized areas only.	
Parking:	Tanking in California and a series of the california and a ser	
Deputies (How Many?):	None	
Deputies (now many:).	None.	
Fee for Services:	None.	ė
ee (or services.		
Special Arrangements:	Beer will be consumed within the confines of the locker room druing established times only.	
	Alcohol will not leave the confines of the locker room. Consumption will be monitored by the event staff.	
	Print Name: Lieutenant D. Petracca	
	Signature: 93/47	
	Title: Special Operations Division	
	Date:	

April 12-15 SOUTH WEST FLORIDA SPRING FLING

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.

SPECIAL EV		
USE OF CO	UNTY PROPERTY PERMIT	
FILM PERM	ιπ · · · · · · · · · · · · · · · · · · ·	
ER REVIEWING THE L REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHA CANT TO COMPLY WITH FOR THEIR EVENT.	T ARRANGEMENTS YOUR ORGANIZATION
Guards (How ny?)	None	
for Services:	none	
mmable Vegetation:		
st Aid Equipment:	Ma.	
	none	
e Extinguishing:	Fire extinguishers s for 2AIOBE FOR EXT	ire automatic suppr
	Fire extinguishers s	half be grovided
ecial Arrangements:	ma critical rest	
	New	Consider the Constant of Section 2015 of Secti
	Print Name: Aysta/ Naeje	eli-Dossen
	Signature: Gall Mel. D. Title: Seain Fuo Un	05501
*	Slaver Fue Un	sylven



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

Check the approprie	ate box(es) belov	v :	
SPECIAL EV	ENT PERMIT		
⊠ USE OF CO	UNTY PROPERTY PE	ERMIT	
FILM PERM	HT.		
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE	ASE INDICATE BELOW WHAT ARRANGEMENTS YOU WITH FOR THEIR EVENT.	R ORGANIZATION
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, co	ntact our office at
	Print Name:	Douglas B. Higgins	
	Signature:	Douglas B. Higgins Obtained by Douglas B. Higgins Obtained by Douglas B. Higgins Obtained Description of the State Object of Boths (Balled Beginson) County Department of Public Safety, Object of Boths, Balled Beginson (Balled Beginson) County (Ba	
	Title:	Division Chief	• •
	Date:	04-12-2018	



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

Check the appropri	ate box(es) belo	ow:		
USE OF CO			RAGES WITHIN LEE COUNT	Y FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P ICANT TO COMP	LEASE INDICATE BELC LY WITH FOR THEIR EV	W WHAT ARRANGEMENT /ENT.	S YOUR ORGANIZATION
Parking:	Park in designated	areas.		
Ingress and Egress:	Use all established	means of ingress and egre	25S. · · ·	
Special Arrangements:	None.			
	Print Name:	Bryan Miller	•	
	Signature: Title:	Bryan D. Miller Senior Project Manager	Digitally signed by Bryan D. Miller Date: 2018.04.11 10:03:46 -04'00'	_
	Date:	April 11, 2018		



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

спеск те арргоры	ute box(es) bei	OW.
☐ SPECIAL EV		
f	UNTY PROPERTY	
Control		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERM	ИП	
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Illumination:	n/a	
Parking Areas:	Park in designated	parking spaces.
		•
Special Arrangements:	This is the 5th Spri	ng Fling event in Lee County, operated by the Wagner Wooden Bat Classic on April
special Arrangements.	12-15, 2018, Sprin	g Fling has hired Roy Hobbs to operate its locker room program and field access. applies specifically to Beer only consumption - no sales - as part of the Locker Room
	brogram. No alcoh	nol may leave the locker room; consumption is supervised by Hobbs staff; no BYOB
	90 minutes after 1:	ilable from 4 pm to 7 pm; game times are 9:30 am & 1:30 pm. Locker room services end :30 games end.
	Print Name:	Jesse Lavender
	Signature:	Vary John
		Director
	Title:	· .
	Date:	April 3, 2018



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

Check the appropriat	te box(es) bel	low:	
SPECIAL EVE	NT PERMIT		
USE OF COU		PERMIT	
PERMIT TO S	ELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FA	ACILITIES
FILM PERMI	Γ.		
AFTER REVIEWING THE A	APPLICATION, F CANT TO COMF	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR PLY WITH FOR THEIR EVENT.	OUR ORGANIZATION
Insurance Requirements:	occurrence to pr	neral liability insurance with minimum limits of One Million Doll rotect against bodily injury and/or property damage relative to I event within Lee County.	ars (\$1,000,000) per applicants use of
	(\$1,000,000) per	t Liquor Liability insurance will be required with minimum limit occurrence. Should Host Liquor Liability coverage be afford un policy, minimum acceptable limits will be Two Million Dollars	nder the Commercial
Special Arrangements:	A Certificate of I Board of County additional insure	nsurance shall be submitted as evidence of the required covers	age listing Lee County ificate holder and as an
	Subject to proof	f of Insurance.	
	Print Name:	Mike Figueroa	e e e e e e e e e e e e e e e e e e e
	Signature:	D/	
	Title:	Risk Program Manager	
	Date:	April 5, 2018	•



CERTIFICATE OF LIABILITY INSURANCE

ELECTRON CONTROL CONTR

DATE (MM/90/YYYY) 1/12/2018

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 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).

certificate holder in lieu of such endorsement(s	3).	CONTACT				
RODUCER		CONTACT Frazier	Insurance A			
Frazier Insurance Agency, Inc.		PHONE (A/C, No. Ext). (804) 754-7610 FAX (A/C No. (804) 754-7613				
P.O. Box 1250		E-MAIL ADDRESS ifrazier@frazierinsurance.com				
Midlothian, VA 23113-1250			JRER(S) AFFORT	DING COVERAGE	NAIC #	
•		INSURERA Aegis	Security In	surance Company	33898	
		MOONE, MA	, 0000,77, 111		30000	
NSURED. Sports and Special Event Risk Purchasing Group, Inc.	INSURERB.					
Roy Hobbs Diamond Enterpri	INSURERC.					
DBA Roy Hobbs Baseball		INSURERO				
c/o 1602 Rolling Hills Drive, S	Suite 104	INSURERE				
Richmond, VA 23229		INSURERF	•	,		
COVERAGES CERTIFICA	ATE NUMBER:		REV	ISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF I INDICATED NOTWITHSTANDING ANY REQUIREM CERTIFICATE MAY BE ISSUED OR MAY PERTA EXCLUSIONS AND CONDITIONS OF SUCH POLICIE	MENT, TERM OR CONDITION OF AIN. THE INSURANCE AFFORDED IS LIMITS SHOWN MAY HAVE BEEL	ANY CONTRACT OR BY THE POLICIES	DESCRIBED I	HEREIN IS SUBJECT TO	ALL THE TERMS.	
ISR TYPE OF INSURANCE INSR WA		MINDOWYY	(MM/SD/YYYY)	LIMITS	\$ 2,000.000.00	
GENERAL LIABILITY			-	PRODUCTS - COMP/OP AGG		
X COMMERCIAL GENERAL SIABILITY			ļ	PERSONAL & ADV INJURY	\$ 2,000,000.00	
GLAIMS-MADE X OCCUR	Policy # FGLSP-100-	-18	01/04/2010	EACH OCCURRENCE	\$ 1,000.000.00	
A	Cert #FVA-S-0002		12:01 AM	DAMAGE TO RENTED	\$ 1,000,000,00	
X INCLUDES ATHLETIC PARTICIPANTS				PREMISES MED EXP (Any one person)		
GEN'L AGGREGATE LIMIT APPLIES PER:			•	HOST LIQUOR LIABILITY	3 5,000.00 INCLUDED	
X POLICY PRO. LOC				COMBINED SINGLE LIMIT	<u> </u>	
AUTOMOBILE LIABILITY				(Ealaccident) BODILY INJURY (Per person)	\$ 1	
ANY AUTO				BODILY INJURY (Per ascident)	\$	
ALL OWNED SCHEDULED AUTOS AUTOS				PROPERTY DAMAGE	3	
HIRED AUTO NON-OWNED AUTOS				(Per acadimi)	3	
				EACH OCCURRENCE	\$	
UMBRELLALIAS OCCUR				AGGREGATE	3	
EXCESS LIAB CLAIMS-MADE DED RETENTION \$					\$	
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					s. 10,000.00	
A Excess Accident Medical	FR0134	01/01/2018	01/01/2019 12:01 AM	LIMIT AD&D DEDUCTIBLE	\$ 10,000.00 \$ 10,000.00 \$ 100.00	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OF		chedule if more space is requ	wed)	Ole		
Certificate Holder is An Additional Insured,	But Only As Respects The Op		med Insure	d. Ohmbylas /	2013	
CERTIFICATEHOLDER		CANCELLATION				
Lee County Board of Comm PO Box 398 Ft. Myers, FL 33902	nissioners	SHOULD ANY OF T THE EXPIRATION ACCORDANCE WITH	DATE THE	ESCRIBED POLICIES BE (REOF, NOTICE WILL PROVISIONS	CANCELLED BEFORE BE DELIVERED IN	
i sa izijologi i iz odobi				- 6 - 1 - 1		
				John W. Frazier		
		© 19	88-2010 AC	CORD CORPORATION.	All rights reserved	



CERTIFICATE OF LIABILITY INSURANCE

1/12/2018

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 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 matters holder in line of such endorsement(s).

certificate noider in fieu of such endoise	menus).		2004710				
MODUCER .			CONTAC NAME	Frazier	Insurance A	Agency, Inc.	
Frazier Insurance Agency,	Inc.		PHONE (A/C, No	Ext. (804)	754-7610	FAX FAX No. (80	04) 754-7613
P.O. Box 1250			E-MAIL ADDRES	18) frazierinsu	rance.com	
Midlothian, VA 23113-1250)		33227722			DING COVERAGE	MAIC #
		•	INSURES	a Aedi	s Security In	surance Company	33898
1204ED			!				
Sports and Special Event Risk Purchasing C	kroup Inc	•	INSURE				
Roy Hobbs Diamond En	Roy Hobbs Diamond Enterprises LLC					***************************************	
DBA Roy Hobbs Baseball				RO .			
c/o 1602 Rolling Hills Dr	ive, Su	ite 104	INSURE	RE			
Richmond, VA 23229	Richmond, VA 23229			RF.			
		E NUMBER	**			/ISION NUMBER	
THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH F	DUIREME PERTAIN OLICIES	NT TERM OR CONDITION OF THE INSURANCE AFFORDED	ANY CC	INTRACT ON E POLICIES	DESCRIBED	HEREIN IS SUBJECT TO	\$2% MACIENTE SESSON.
SR TYPE OF INSURANCE	ODL SUBR ISB WVO	POLICY NUMBER		MINDOWYY	(MNECODYYYYY)	LIMETS	2 222 222 22
GENERAL LIABILITY						GENERAL AGGREGATE	\$ 2,000,000,00
X COMMERCIAL GENERAL CARRITY		***************************************				PRODUCTS - COMP/OP AGG PERSONAL & ADV INJURY	\$ 2,000,000.00
d. AMS-MADE X GCCOR		Policy # FGLSP-100-	-18	01/01/2018	01/01/2010	EACH OCCURRENCE	\$ 1,000,000.00
A		Cert #FVA-S-0002		01/01/2018	12:01 AM	DAMAGE TO RENTED	\$ 1,000,000,00
X INCLUDES ATHLETIC PARTICIPANTS	-					PREMISES MED EXP (Any one person)	
GENT ACCHECATE UNIT APPLIES PER						HOST LIQUOR LIABILITY	\$ 5,000.00 INCLUDED
X POLICY PRO-						COMBAKO SPIGLE LANT	13
AUTOMOBILE LIABILITY						(Eastword) SODILY INJURY (Per person)	1 3
ANYAUTO SCHEDULED	****					BODILY INJURY (Per accident)	\$
AUTOS AUTOS	overess of the same					PROPERTYDAMAGE	s s
HREDAUTO AUTOS						(Per scorers)	\$
	_					EACH OCCURRENCE	\$
UMBRELLALIAS OCCUR						AGGREGATE	\$
EXCESS UAB CLAMOMADE DEO RETENTION \$							\$
							\$
	-						3
		•					<u> </u>
						LIMIT	\$ 10,000.00
A Excess Accident Medical		FR0134		01/01/2018	01/01/2019	· [s 10.000.00
A Excess Accident Medical					12:01 AM	DEDUCTIBLE	\$ 100,00
DESCRIPTION OF OPERATIONS/LOCATIONS/VER POLICY DEDUCTIBLE \$0.00 PER EACH BODILY INJ Certificate Holder is An Additional Ins	URY OR FI	(OLEN 14 DAMAGE CEAM)				d.	
CERTIFICATE HOLDER				LLATION			
Lee County Board of C	Commis	sioners	THE	EXPIRATION	DATE THE	RESCRIBED POLICIES BE C REOF, NOTICE WILL E PROVISIONS	ANCELLED BEFORE SE DELIVERED IN
Ft. Myers, FL 33902		·	AUTHORI	ZED REPRESE	ITATIVE		
7						John W. Frazier	+ 1
•						**	***
	William .		•••••	© 19	88-2010 AC	ORD CORPORATION	All rights reserved

