

EVENT PERMIT



Ordinance 17-08

MARCH OF DIMES BIKERS FOR BABIES HELMET DRIVE

PERMIT NUMBER: TMP2018-10059

Date(s) of Event: October 27, 2018 from 9:00am until 1:00pm

Property Owner:

LEE COUNTY ROW

Applicant:

MEGAN FLORES

239-271-2564

Description:

Solicitation of donations at multiple intersection to benefit March of Dimes.

Location of event:

ROW S CLEVELAND AVE/ DANIELS PKWY, FORT MYERS, FL

MULTIPLE ROW

Will the event be attended by 1000 or more people? No

Will the event be held on County Owned Property? Yes

Will there be alcohol consumed or sold at the event? No

Will a bond be posted for this event?

No

Permit Conditions:

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

Board of County Commissioners Lee County, Florida

County Manager Date

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



Event Application

Check the	appropriate	box(es)	below:
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F SPECIAL EVENT PERMIT

□ USE OF COUNTY PROPERTY PERMIT

PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Section I - GENERAL INFO	ORMATION (All Permit Types)
Title of Event / Name of Production	March of Dimes Bikers for Babies Helmet Drive
Date(s) of Event / Production:	Saturday, October 27, 2018
Location(s) of Event:	Multiple intersections in Lee County
Name of Applicant:	Megan Flores
Applicant Address:	March of Dimes Donation Processing Center - FL Fort Myers PO Box 673667 Marietta, GA 30006
Applicant Phone Number:	Office: 239-271-2564 Cell:239-315-3162
Contact Person: (If different from applicant)	Secondary Contact: Trent Howe
Contact Phone Number: (If different from applicant)	Office: 239-271-2564
Email Address:	maflores@marchofdimes.org
Estimated Attendance:	
Event Description: Include each activity, when activities take place, etc.	Individuals (Biker Groups, etc.) solicit donations at multiple intersections in Lee County benefiting March of Dimes Bikers for Babies on Saturday, October 27, 2018 from 9 a.m. to 1 p.m. Requested Intersections: Daniels Parkway and US 41, College Parkway and US 41, Summerlin Road and Cypress Lake Drive, Gladiolus Drive and US 41, Daniels Parkway and Six Mile Cypress, Daniels Parkway and Treeline Avenue, Alico Road and Ben Hill Griffin Parkway, Corkscrew Road and Ben Hill Griffin Parkway. Bonita Beach Road and US 41, Bonita Beach Road and Old 41, Bonita Beach Road and
Hours of Operation:	9:00 a.m 1:00 p.m.
STRAP # of Parcel:	N/A 24452400000000000
Owner of Premises*:	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 allpermit types: What is the Zoning Classification of the premises? IX No Type: [Yes Do you have the appropriate permits for the temporary structures? * For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities indentified, including all parking areas. Insurance Company Insuring the Event: March of Dimes Foundation Note: Certificate of Insurance must be submitted at time of application Surety Company Bonding this Event (Name and Address): Will Alcoholic Beverages be Will Food be Available at this Event? Will Vehicles be Used as Part of This served/consumed at this Event? Event? ┌ Yes X No X No T Yes IX No ┌─ Yes If yes, liquor liability coverage must be If yes, products liability coverage must be If yes, automobile coverage must be included on the certificate of insurance. included on the certificate of insurance. included on the certificate of insurance. Name & Address of Organization N/A Providing Food: Type of Food being Served: N/A Section II - USE OF COUNTY PROPERTY PERMIT Organization Sponsoring the Event: March of Dimes Foundation Fill out this portion for applications for Solicitation in the County Rights-of-Way: Name of Charity: March of Dimes Foundation Address of Charity: March of Dimes Donation Processing Center - FL Fort Myers PO Box 673667 Marietta, GA 30006 Phone Number: 239-271-2564 Non-profit certificate/registration number: 85-8012566499C-5 (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 IV No Is alcohol being sold/consumed on County Property?

Is alcohol being sold/consumed on County Property?	1 , 103	X 110
If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell a	lcohol on County Property.	$\mathbf{v} = \mathbf{v}_{i}$
Non-profit certificate/registration number: N/A (Required if alcohol is to be <u>SOLD</u> at the event)		
Please note: A permit from the State of Florida Division of Alcoholic Beverages and further details	l Tobacco may also be required;	please call (239) 344-0885 for
THE CONTROL OF THE CO	magnification of the second of	and the second of the second o



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Public Service Announcement Industrial / Documentary Other: Charitable Solicitation at Intersections I any of the following be needed or included*? Street Closure	oe of Production (ch TV Movie or Specia			Series / Pilot		TV Comm	ercial	┌ Stí	II Photos	
Street Closure			•		ary 🗵	Other: Ch	aritable	Solicitati	on at Intersect	ions
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		number of room	s x number o	of nights			parameter of the		and the same of the same of the	

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.

Maria Clara	
Signature of Applicant	Witness
Development	
Megan Hoves, Manager Print Name of Applicant and Title	Print Name of Witness
9-4-18	
Date	Date



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

Check the appropri	ate box(es) below:
☐ SPECIAL EV	ENT PERMIT
∪SE OF CO	UNTY PROPERTY PERMIT
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	1fT
r. T	
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only. Roadways and right-of-ways must not be impeded.
Deputies (How Many?):	none
,	
Fee for Services:	none
Special Arrangements:	All rules and regulations on permit regarding proper procedure and safety must be followed.
	Print Name: Lt. K. Sonier
	Construe Visit - and
	Signature: 4508)
	Title: Special Events, Permits and Details
	Date: 8/27/18



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 appropri	ate box(es) below:
☐ SPECIAL EV ☑ USE OF CO ☐ FILM PERM	UNTY PROPERTY PERMIT — Lee Blud & Gunnery Ad N Only MIT
AFTER REVIEWING THE WILL REQUIRE THE APPLI	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	None
Fee for Services:	None - No Inspection required.
Flammable Vegetation:	IN [#
First Aid Equipment:	Provide hydration supplies. Provide maintain first aid bit. 94 for all other emergencies.
Fire Extinguishing:	N/H- Pedes Frans
Special Arrangements:	No Sefety take to all persons.
	Print Name: Ken Bennett Signature: Ken Back Title: Asst Chief of Lofe Solehy Division Date: Angust 24, 2018



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

Check the	appropriate	box(es)	below:
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▼ SPECIAL EVENT PERMIT

□ USE OF COUNTY PROPERTY PERMIT

FILM PERM			
AFTER REVIEWING THE WILL REQUIRE THE APPLI	APPLICATION, PLEA	ASE INDICATE BELOW WHAT ARRANGEMENTS YOU WITH FOR THEIR EVENT.	OUR ORGANIZATION
Treatment Facilities:	None necessary.		
Medical Personnel:	None necessary.		
Medical Supplies / Equipment:	None necessary.		
Safety Requirements:	No additional precau	tions 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	e, contact our office at
	Print Name: Signature:	Douglas B. Higgins Douglas B. Higgins Digitally agreed by Discription B. Higgins and Control of Popular States Discription of the American of the American States and Control of Control	·
	Title:	Division Chief	
	Date:	08-24-18	



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

Check the appropri	ate box(es) bel	ow:		
SPECIAL EV	ENT PERMIT			
⋉ USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONSU	JME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNT	Y FACILITIES
FILM PERM	MIT			
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELO LY WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	S YOUR ORGANIZATION
Parking:	No event parking o	n Lee County maintained :	roads.	
	to any control of the			
Ingress and Egress:	Use all established	means of ingress and egre	SSS.	
•	agregative constant			
	·			

Special Arrangements:	responsible for imp Conditions for Coll Roadways" attache	olementing the Traffic Safe ection of Donations in Cou ed as conditions of permit.	with traffic control, if necessary. ty Plan, the min. requirements a inty Rights-of-way and Un-incor Note: Lee County does not pro oaches which are maintained by	are detailed in the "Permit porated Lee County vide permit authorization
				and the second s
	Print Name:	Bryan Miller		_
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2018.08.23 12:11:54 -04'00'	
	Title:	Project Manager		_
	Date:	August 23, 2018		



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

Check the appropriate box(es) below:

F SPECIAL EVENT PERMIT

DELUSE OF COUNTY PROPERTY PERMIT

THE PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

T FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Parking Areas: Illumination: and will net Frent 1st fo with operations

Special Arrangements:

N/A

Swarbad

Signature: Print Name: Ause

Title:

Date:

B. Kors for Bubies

Page |10



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

Check the appropriat	e hox(es) held	DW:		
		•	4.3	
SPECIAL EVE	NT PERMIT			
▼ USE OF COU				
PERMIT TO S	ELL AND CONSU	IME ALCOHOLIC BEVERAGES WITHIN LEE COUN	TY FACILITIES	
FILM PERMIT			:	
AFTER REVIEWING THE A	PPLICATION, PICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMEN LY WITH FOR THEIR EVENT.	TS YOUR ORGANIZA	NOITA
nsurance Requirements:	occurrence to pro	eral liability insurance with minimum limits of One Millio otect against bodily injury and/or property damage relate event within Lee County.	n Dollars (\$1,000,000) po tive to applicants use of	er
		-		
	-			
Special Arrangements:	A Certificate of Ir Board of County additional insure	surance shall be submitted as evidence of the required Commissioners, P.O. Box 398, Fort Myers, FL 33902 as th d.	coverage listing Lee Coι e certificate holder and	unty as an
	Subject to proof	of insurance.		
	Subject to proof			
		and the same of th	himmer, communications and the masses	
	Print Name:	Mike Figueroa	· 	
	Signature:	Mike Join		
	Title:	Risk Program Manager	· · ·	
	Date:	August 23, 2018		

CORD

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 06/08/2018

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).

continuate account to the control to give the second		
PRODUCER	CONTACT NAME:	
Aon Risk Services Northeast, Inc. Morristown NJ Office	PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105	
Morristown NJ Ollic 44 Whippany Road, Suite 220 Morristown NJ 07960 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE NAIC #	#
INSURED March of Dimes Foundation 1275 Mamaroneck Ave White Plains NY 10605 USA	INSURER A: The Travelers Indemnity Co. 25658	
	INSURER B: Great Northern Insurance Co. 20303	
	INSURER C: Vigilant Ins Co 20397	
	INSURER D:	
	INSURER E:	
	INSURER F:	

	ACCTICIOATE MUMBICED, \$70071\$19190	REVISION NUMBER
COVERAGES	CERTIFICATE NUMBER: 570071612139	I/LVIDICIA IADIRIDEI

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.

Limits shown are as requested. Limits shown are as requested

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN WAY HAVE BEEN REDUCED BY FAIR CEANING.								
INSR LTR	NSR TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY	INSE	1	35812529	10/31/2017		EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
							MED EXP (Any one person)	\$10,000
							PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:	1					GENERALAGGREGATE	\$2,000,000
	POLICY X PRO- X LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
	OTHER:							-
В	AUTOMOBILE LIABILITY			7352-50-21	10/31/2017	10/31/2018	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X ANYAUTO		1				BODILY INJURY (Per person)	
	OWNED SCHEDULED						BODILY INJURY (Per accident)	
	AUTOS ONLY X HIRED AUTOS NON-OWNED						PROPERTY DAMAGE (Per accident)	
	ONLY AUTOS ONLY							
A	X UMBRELLA LIAB X OCCUR			ZUP71M1676717NF	10/31/2017	10/31/2018	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE				-		AGGREGATE	\$5,000,000
	DED X RETENTION \$10,000	1					Products/Completed O	\$5,000,000
С	WORKERS COMPENSATION AND	<u> </u>	-	1871737006	10/31/2017	10/31/2018	X PER STATUTE OTH-	
	EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$1,000,000
	OFFICER/MEMBER EXCLUDED?						E.L. DISEASE-EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT	\$1,000,000
						-		
			1			<u> </u>		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Event: Bikers For Babies Helmet Drive Location: Multiple Intersections in Lee County, FL Date: October 27, 2018
Lee County Board of Commissioners, City of Cape Coral, Motorsports of Fort Myers LLC., 9501 Thunder Road, Fort Myers, Fischer Florida Properties I, LLC, Fort Myers, FL, Fischer Entertainment, LLC, Fort Myers, FL are included as Additional Insured in accordance with the policy provisions of the General Liability policy.

Ok, 08/23/2018 MF

CERTIFICATE HOLDER	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.			
City of Cape Coral 1015 Cultural Park Boulevard Cape Coral FL 33990 USA	Authorized REPRESENTATIVE Am Risk Services Northeast Inc.			
· ·	Son Stisk Services Northeast Inc.			

Mach of Dimes - Bikers for Babies 2018 Helmet Drive Saturday, October 27, 2018 9:00 AM – 1:00 PM

Intersections

2018 Intersections

Cape Permit

- Veterans and Santa Barbara-Lost Riders
- Del Prado and Cape Coral Parkway
- Del Prado and Hancock Associates & Bruce L Scheiner
- Del Prado and Pine Island

Lee County Permit

- Daniels and 41
 - County Road and State Road
- College Parkway and 41
 - County Road and State Road
- Summerlin and Cypress SWFL HOG
 - County Road and County Road
- Gladiolus and 41
 - County Road and State Road
- Daniels and Six Mile Cypress Roughnecks
 - o County Road and County Road
- Daniels and Tree Line
 - County Road and County Road
- Alico Road and Ben Hill Griffin Parkway
 - County Road and County Road
- Lee Boulevard and Gunnery Road
 - County Road and County Road
- San Carlos Blvd. and Kelly Road
 - City of Bonita Road and County Road
- Luckett Road and Enterprise Parkway
 - County Road and County Road