

## **EVENT PERMIT**



Ordinance 17-08

## Caloosahatchee Ultra 50K/Keith Carlton Memorial 25K

PERMIT NUMBER: TMP2018-10162

Date(s) of Event: December 1, 2018 from 7:30am until 5:30pm

Property Owner:

TIITF/COUNTIES

Applicant:

JUSTIN RADLEY

315-374-0356

Description:

Trail running ultra marathon using only the trails on the north side of the road.

Location of event:

19130 N RIVER RD, ALVA, FL 33920

Caloosahatchee Regional Park

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 Dat

ftmpprmt\_specialevent.rpt



## **Event Application**

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



## **Event Application**

Check the appropriate b	ox(es)	below:
-------------------------	--------	--------

F SPECIAL EVENT PERMIT

IX 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	Caloosahatchee Ultra 50k/Keith Carlton Memorial 25k
Date(s) of Event / Production:	December 1, 2018
Location(s) of Event:	Caloosahatchee Regional Park, Alva
Name of Applicant:	Justin Radley
Applicant Address:	1526-2 Park Meadows Drive Fort Myers, FL 33907
Applicant Phone Number:	315-374-0356
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	radleyj@gmail.com
Estimated Attendance:	85
Event Description: Include each activity, when activities take place, etc.	Trail running ultra marathon. 50k starts at 7:30am, 25k at 8am. All races have a cutoff of 5:30pm. U only trails on North side of the road.
Hours of Operation:	5am-7pm, including setup and clean uptime
STRAP # of Parcel:	20432700000010060
Owner of Premises*:	Lee County Parks and Rec

<sup>\*</sup>Notarized statement from the property owner specifically consenting to the proposed use required.



#### Fill out the following questions for allpermit types: What is the Zoning Classification of the premises? Park X 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 indentified, including all parking areas. Insurance Company Insuring the Event: USA Track & Field, Inc. 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? T 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 Providing Food: Type of Food being Served: Section II - USE OF COUNTY PROPERTY PERMIT Organization Sponsoring the Event: Trailhead Ultras, LLC 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: (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? 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 <u>SOLD</u> 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



## Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

manager.	Other:  Yes Yes Yes Yes Yes		No No No			<u> </u>	
	Yes Yes		No				
	Yes Yes		No				
	Yes	- Company of the control of the cont					
	3 .,		No				
	Yes	,,,,,,,,,					
	,	1	No				
	Yes		No.				
	r Yes		No				
	, Yes	, T	No				
	Yes	ŕ	No				
	Yes	Г	No				
	r Yes	Γ	No				
			-			- Constitution of the Cons	
	and the second s	The making the Mark of the Control of State (State	i, <u>3.299</u>	A STATE OF THE STA	and the second s	// ***********************************	
. <b>'</b>							
es, e	etc.)			•		anananananan ara-aranin 1999	
			, ,				
on p s clo	sely as pus	sibie.			conomi	c imp	
	N	umber	of loc	als hired:			
ent in	Lee County					·	
days:	:						
•	on p s clo	es, etc.)  on production is closely as pos	es, etc.)  on production in Floric s closely as possible.  Number of the county:	es, etc.)  on production in Florida to s closely as possible.  Number of locent in Lee County:	es, etc.)  on production in Florida to track the es closely as possible.  Number of locals hired:	es, etc.)  on production in Florida to track the economis closely as possible.  Number of locals hired:	es, etc.)  on production in Florida to track the economic impossible.  Number of locals hired:

## **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.

Race Director

Signature of Applicant

Print Name of Applicant and Htle



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

Check the appropria	te box(es) below:
SPECIAL EVI	INT PERMIT
USE OF COL	INTY PROPERTY PERMIT
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	π
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.
Deputies (How Many?):	None
Fee for Services:	None
Special Arrangements:	Race must remain within the confines of the park.
	Print Name: Captain J. Loethen
	Signature: Caft Toe Han 92/49
	Title: Special Events, Permits and Details
	Date: $10/15/18$



## FIRE DEPARTMENT

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

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

				· · · · · · · · · · · · · · · · · · ·	
Check the appropri	ate box(es) belov	w:			-
SPECIAL EV					
USE OF CO	UNTY PROPERTY P	ERMIT	•		+ 5 · · · .
FILM PERM	1IT				
AFTER REVIEWING THE WILL REQUIRE THE APPLI	ADDITION PLE	ASE INDICATE BE WITH FOR THEIR	LOW WHAT ARR EVENT.	ANGEMENTS YOU!	R ORGANIZATION
Fire Guards (How Many?)	NA				
Fee for Services:	NA				
Flammable Vegetation:	NA				
First Aid Equipment:	NA				· .
Fire Extinguishing:	NA				
Special Arrangements:	Alva Fire Dept. will p	provide personnel to	standby at this event		•
	Print Name:	Brandon Kuhn			B
	Signature:	Bul Ke			
	Title:	Chief			
	Date:	11-28-18	· · ·		



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

Check the approprie	rte box(es) below	V:	
SPECIAL EV		· · · · · · · · · · · · · · · · · · ·	
USE OF COU	UNTY PROPERTY PE IT	RMII	
•		ASE INDICATE BELOW WHAT ARRANGEMENTS YO	UR ORGANIZATION
AFTER REVIEWING THE WILL REQUIRE THE APPL	ICANT TO COMPLY	WITH FOR THEIR EVENT.	
Treatment Facilities:	None necessary.		
Medical Personnel:	We recommend the revent.	race or another entity have medical personnel on site due to 1	the nature of the
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.	e event of an emergency. To arrange special event coverage,	contact our office at
	· ·		
	Print Name:	Douglas B. Higgins	
	Signature:	Douglas B. Higgins  Douglas B. Higgins  Douglas B. Higgins	
	Title:	Division Chief	
	Date:	11-21-18	



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

Check the approprie	ate box(es) belo	ow:		
SPECIAL EV	ENT PERMIT	•		
USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONSU	JME ALCOHOLIC BEVER	AGES WITHIN LEE COUNT	/ FACILITIES
FILM PERM	IIT			
FTER REVIEWING THE VILL REQUIRE THE APPL	APPLICATION, P ICANT TO COMP	LEASE INDICATE BELOV LY WITH FOR THEIR EVE	V WHAT ARRANGEMENTS	YOUR ORGANIZATION
Parking:	Park in designated	areas. No event parking on	Lee County maintained road ri	ghts-of-way,
ngress and Egress:	Use all established	means of ingress and egres	·S.	en e
Special Arrangements:	None.	·		
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2018.10.24 13:24:08 -04'00'	*
	Title:	Project Manager		
	Date:	October 24, 2018		<u>.</u> <u>.</u>



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

Check the appropri	ate box(es) bel	ow:
SPECIAL EV	ENT PERMIT	
	UNTY PROPERTY	
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	iiT	
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Illumination:	N/A event is held w	rithin daylight hours.
Parking Areas:	the parking lot and cars will need to w	in the north parking lot, a small section of the management area #3 directly north of dalong the 1st section of the horse trail called Sunburn Meadow. Volunteers parking ear safety vests at all times. Volunteers must ensure that the fire lanes are not blocked emergency vehicles.
Special Arrangements:	markings must be event can start after	rill need to supply additional portable toilets. All event trash including course disposed of in the dumpster at the campground at the and of the event. Set up for the er 12 pm the day prior to the event. Only 1 camper or tent may be placed in the parking area for the security during the event.
	Print Name:	Alise Flanjack
	Signature:	Alise Flanck
	Title:	Deputy Director
	Date:	November 5, 2018

Ultra 50K/25K CRR 12/1/18



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

Check the appropriat	e box(es) bel	ow:	
F SPECIAL EVE	NT PERMIT		
USE OF COU!	NTY PROPERTY	PERMIT	
PERMIT TO S	ELL AND CONSU	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES	
FILM PERMIT	Г		
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZA LY WITH FOR THEIR EVENT.	TIOI
nsurance Requirements:	occurrence to pro	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) pe otect against bodily injury and/or property damage relative to applicants use of event within Lee County.	er
Special Arrangements:	A Certificate of In Board of County additional insure	isurance shall be submitted as evidence of the required coverage listing Lee Cou Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and a d.	nty is an
	Subject to proof	of insurance.	
	Print Name:	Mike Figueroa	
	Signature:		
	Title:	Risk Program Manager	
	Date:	November 26, 2018	



Lee County Parks and Recreation 3410 Palm Beach Blvd. Fort Myers, FL. 33916 Phone: 239-533-7275

**

This permit entitles holder to exclusive use of the following facilities during the hour and date shown below. This permit also serves as a bill. All reservations must be paid for in advance. A non-refundable \$10 cancellation fee will be applied to facility rental transfers or cancellations received at least 72 hours prior to the facility rental date. Any cancellation made less than 72 hours prior to the facility rental date will not be entitled to any refund. Exceptions to this policy will be made at the discretion of the Parks and Recreation administration staff based on circumstances surrounding the cancellation.

Date issued: 11/23/2018

Name: Justin Radley	Type of Activity: Caloosahatchee Ultra 50K		
Address: 1526-2 park Meadows Drive	Organization/Team: Tra	ailhead Ultras LLC	
City/State/Zip: Fort Myers, Fl. 33907	Phone Number: (315) 374-0356		
		Times	
Date: December 1, 2018	From: 7:00AM	To: 7:00PM	
Date:	From:	То:	
Name of Facility: Caloosahatchee Regional Park 19130 North River Rd., Alva, Fl. 33920	Bldg. / Field #: North Side Trails		
Other Comments:			
Hours: All Day	Rate: \$400.00	Total Fee: \$400.00	

WAIYER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK FOR LEE COUNTY PARKS AND RECREATION OF RISK FOR RECREATION OF RISK FOR RECREATION OF RISK FOR RECREATION OF RECREATION OF RISK FOR RECREATION OF RECREATION OF RECREATION OF RECREATION OF
PROGRAMS/ACTIVITIES PLEASE READ THIS FORM CAREFULLY and be aware man in signing up and participating in Lec-
programs/activities (including transportation services/vehicle operation, when provided). Trecognize and activities (including transportation services/vehicle operation, when provided). Trecognize and activities that my minor child/ward or   m
sustain as a result of said participation. I turner agree to waive and reinfluint and an action that it is a result of participating in such program/activity against the County, including their respective officials, officers, employees, and volunteers (hereinal as a result of participating in such program/activity against the County, including their respective officials, officers, employees, and volunteers (hereinal as a result of participating in such program/activity against the county of the participation
collectively referred as "Parties"). I do never the mean energy that the collectively referred as "Parties"). I do never the mean energy to me or my minor child/ward and arising out of, connected with, or in any way associated with the

Title: Supervisor

I indemnify and hold harmless Lee County, any of its employees and/or agents from any and all claims from my use of county property or participation in any county programs. I will further indemnify and "hold harmless" the County, its employees and/or agents from all costs, expenses and liabilities resulting from any claim brought from my child's/children's use of county property and/or participation in county programs to the extent of the County's liability under general law

minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with these

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above and, for myself, my heirs, assigns, and my minor child(ren)'s involvement or participation in the program as provided above.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering via fax, your facsimile signature shall be substitute for and have the same legal effect as an original form signature.

PARTICIPANT'S SIGNATURE

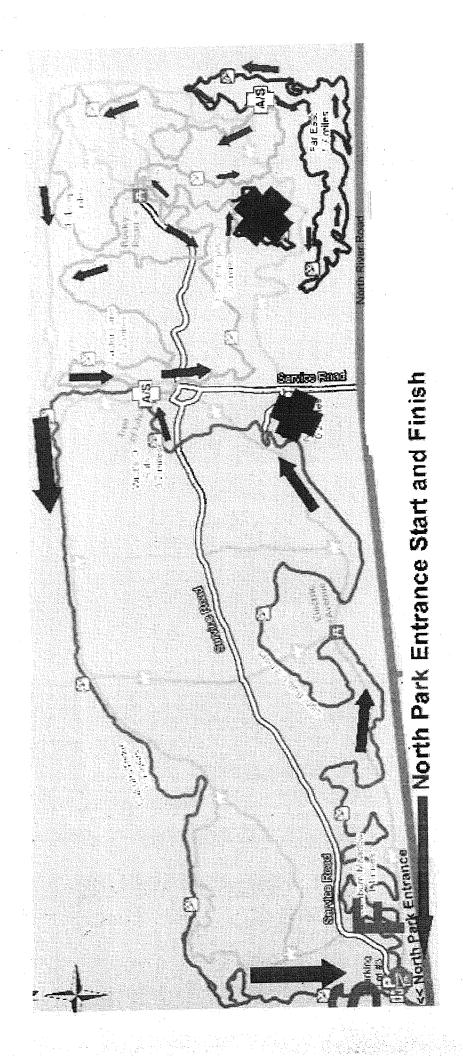
Approved by: James Eash

programs/activities.

PRINT NAME OF PARTICIPANT

Date: 11/23/2018

ALCOHOLIC BEVERAGES ARE NOT ALLOWED IN PARKS OR FACILITIES



#### CERTIFICATE OF INSURANCE

PRINT DATE:

CERTIFICATE NUMBER: 20181029664343

#### AGENCY:

Integro USA Inc. d/b/a Integro Insurance Brokers 2727 Paces Ferry Road, Building Two, Suite 1500 Atlanta, GA 30339 678-324-3300 (Phone), 678-324-3303 (Fax)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

#### NAMED INSURED:

USA Track & Field, Inc. 130 East Washington Street, Suite 800 Indianapolis IN 46204

Trailhead Ultras LLC

#### INSURERS AFFORDING COVERAGE:

INSURER A: Philadelphia Indemnity Ins. Co. NAIC #: 18058 INSURER B: Philadelphia Indemnity Ins. Co. NAIC #: 18058

#### EVENT INFORMATION:

Caloosahatchee Ultra 50k and Keith Carlton Memorial 25k (12/1/2018 - 12/2/2018)

#### POLICY/COVERAGE INFORMATION:

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INS TYPE OF INSURANCE:	POLICY NUMBER(S):	EFFECTIVE:	EXPIRES:	LIMITS:	
A GENERAL LIABILITY	ye manag marini ni e in gunt i managana anganan			The second contract the contract of the contra	
X Occurrence		11/1/2018 12:01 AM	11/1/2019 12:01 AM	GENERAL AGGREGATE (Applies Per Event)	\$3,000,000
X Participant Legal Liability				EACH OCCURRENCE	\$1,000,000
				DAMAGE TO RENTED PREMISES (Each Occ.)	\$1,000,000
				MEDICAL EXPENSE (Any one person)	EXCLUDED
				PERSONAL & ADV INJURY	\$1,000,000
				PRODUCTS-COMP/OP AGG	\$3,000,000
B UMBRELLA/EXCESS LIABILITY				man and the second seco	
X Occurrence	PHUB652176	11/1/2018 12:01 AM	.11/1/2019 .12:01 AM	EACH OCCURRENCE	\$10,000,000
				AGGREGATE (Applies Per Event)	\$10,000,000

## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:

Coverage applies to USA Track & Field sanctioned events and registered practices, including any directly related activities, such as event set-up and tear-down, participant check-in and award ceremonies.

The certificate holder is an additional insured per the following endorsement: Additional Insured - Certificate Holders (Form PI-AM-002)

The General Liability policy is primary and non-contributory with respect to the negligence of the Named Insureds (Form CG 00 01)

The General Liability policy contains a blanket Waiver of Subrogation as required by contract per Waiver of Transfer of Rights of Recovery Against Others (Form CG 24 04).

Excess policy follows form of underlying General Liability.

Ok 11/26/2018

NOTICE OF 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:** 

CERTIFICATE HOLDER:

Lee County BOCC PO Box 398 Fort Myers FL 33902