

## **EVENT PERMIT**



Ordinance 17-08

## Boca Grande Farm and Fish Market

PERMIT NUMBER: TMP2018-10177

December 22, 2018 through April 26, 2019 Fridays only Date(s) of Event:

9:00am until 1:00pm

Property Owner:

LEE COUNTY

Applicant:

JEAN BAER

Description:

Farmer's Market

Location of event:

305 WHEELER RD, BOCA GRANDE, FL 33921

Boca Grande Ball Field on Wheeler Rd

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:

SPECIAL EVENT PERMIT

USE OF COUNTY PROPERTY PERMIT

PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Section 1 - develope in o	RMATION (All Permit Types)	
Fitle of Event / Name of Production	Boca Grande Farm and Fish	h Market
Date(s) of Event / Production:	Fridays, Dec. 22, 2018 tha	
Location(s) of Event:	Boca Grande Ball Field on 305 Wheeler Rol.	Wheeler
Name of Applicant:	Local Roots, LLC	
Applicant Address:	1418 Sandcastle Rd Sanibel, FL 33957	
Applicant Phone Number:	239-691-9249	
Contact Person: (If different from applicant)	Tean Baer Be	etsy Ventura
Contact Phone Number: (If different from applicant)	239-691-9249 2	39-218-1055
Email Address:	imbaera concestinet	
Estimated Attendance:	400	
Event Description: Include each activity, when activities take place, etc.	Farmers Market each F	riday
Hours of Operation:	9 am to 1 pm	SOCIETIES AND THE STATE OF THE
STRAP # of Parcel:	14432001000050010 23	432000000071100
Owner of Premises*:	Lee County Government	

<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 p		
Are any temporary structures to be insta	lled for the event? Yes No	Type: 40 Vendors - 10×10 Te
Do you have the appropriate permits for		☐ Yes ☐ No
* For a 'Special Event' and 'Use of Count indentified, including all parking areas.  Insurance Company Insuring the Event:	y Property' permit, submit a site plan wi Herdrick Insu	
Note: Certificate of Insurance must be submitted	d at time of application	
Surety Company Bonding this Event (Na	me and Address):	A
Will Vehicles be Used as Part of This  Event?  Yes  No  If yes, automobile coverage must be included on the certificate of insurance.	Will Food be Available at this Event?  Yes No  If yes, products liability coverage must be included on the certificate of insurance.	Will Alcoholic Beverages be served/consumed at this Event?  Yes No  If yes, liquor liability coverage must be included on the certificate of insurance.
The second secon	Independent Various	Food Vendors
Type of Food being Served: $\overline{\mathcal{B}\mathcal{B}}$	a, La sagna, Bak	ked Goods, Fish
Section II - USE OF COUNTY P		
Organization Sponsoring the Event:	Local Roots,	TTC
	r Solicitation in the County Rights-of-W	
Name of Charity:		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration nur	nber:	
range of registration with the Dept of Agriculture &	& Consumer Services \$496.405 or proof the organization	on is exempt from this requirement. §316.2045)
Section III - SALE/CONSUMP	TION OF ALCHOLIC BEVERAGES	PERMIT
Is alcohol being sold/consumed on Co If Yes, then a "Lee County Alcohol Permit" is require	unty Property? d. Only non-profit organizations can sell alcohol on Cou	Yes No
Non-profit certificate/registration nur	mber:	
Please note: A permit from the State of Florid further details	a Division of Alcoholic Beverages and Tobacco m	ay also be required; please call (239) 344-0885 for



#### Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT Type of Production (choose all that apply): Still Photos TV Commercial TV Series / Pilot TV Movie or Special Public Service Announcement Industrial / Documentary Will any of the following be needed or included\*? No Yes Street Closure Yes ┌ No Traffic / Crowd Control No ☐ Yes Fire or Burning Yes No **Explosives or Pyrotechnics** ┌ No Yes Animals, Large or Small No ┌ Yes Construction of Any Kind ☐ No Yes Large and/or Numerous Vehicles ┌ No ☐ Yes Helicopters, Boats, etc. Yes Stunts ┌ No Yes Other \* For any marked Yes, provide further details below: 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 of locals hired: Number in Crew: Number in Cast: Estimate amount spent in Lee County: Total budget: Number of shooting days: Hotel room nights: 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 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**

Date

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

Signature of Applicant

Print Name of Applicant and Title 10/30/18Date



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

Check the appropria	te box(es) below	<i>':</i>		,		* .
☐ SPECIAL EVI	NT PERMIT					
✓ USE OF COU	INTY PROPERTY PE	RMIT				
PERMIT TO	SELL AND CONSUM	IE ALCOHOLIC BE	VERAGES WITH	IIN LEE COUNTY F.	ACILITIES	
FILM PERM	Т					
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEA	ASE INDICATE BI WITH FOR THEIR	ELOW WHAT A	RRANGEMENTS Y	OUR ORGANIZ	ZATION
	Parking in authorize	ed areas only.				CONTRACTOR
Parking:	Tarking in datas.	,		-		
						-
Deputies (How Many?):	None					-
Fee for Services:	None					
	THE COLUMN TO TH					
Special Arrangements:	None					
	######################################					
	Print Name:	Lt. K. Sonier	<i>!</i>	,		
	Signature:	A. J.	2508			,
	ř	Gi suston				
	Title:	Special Events, P	'ermits and Deta	IIS		
	Date:	11/1/18				

Page | 6



#### 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 appropria	te box(es) below			
SPECIAL EVI	ENT PERMIT			
	JNTY PROPERTY PE	RMIT	•	
FILM PERM				
AFTER REVIEWING THE A	APPLICATION, PLEA CANT TO COMPLY V	SE INDICATE BELOW WHAT VITH FOR THEIR EVENT.	ARRANGEMENTS YOU	RORGANIZATION
Fire Guards (How Many?)				
Fee for Services:				
Flammable Vegetation:			-	
		and the second s		
First Aid Equipment:				
			and the second s	
Fire Extinguishing:				
				^
:				
Special Arrangements:		or an open flame, the tent mus	t have a fire	
	extinguish In case of	en. emergency dial 911.		
	Commonweal of the commonweal o		e de la composition	
	Print Name:	C.W. Blosser		
	Signature:	C.W. Blosser		
	Title:	Fire Chief		
	Date:	<b>10/31</b> /2018		
Annual Control of the	· · · · · · · · · · · · · · · · · · ·	Page   7	and the second s	



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

Check the appropri	ate box(es) belov	v:
SPECIAL EV	ENT PERMIT	
✓ USE OF CO	UNTY PROPERTY PE	ERMIT
FILM PERM	IT	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE ICANT TO COMPLY	ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WITH FOR THEIR EVENT.
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, contact our office at
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins  Objective proceeds a Higgins on the Courty, Department of Public Safety,  Object 2016, 12,12 15 50027 - 05 100  Date 2016, 12,12 15 50027 - 05 100
	Title:	Division Chief
	Date:	12-12-18



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

Check the approprie	nte box(es) belo	w:	
SPECIAL EV			
□ USE OF CO	UNTY PROPERTY F	PERMIT	
PERMIT TO	SELL AND CONSU	ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	FACILITIES
FILM PERM			
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL	EASE INDICATE BELOW WHAT ARRANGEMENTS Y WITH FOR THEIR EVENT.	YOUR ORGANIZATION
	*	·	
Parking:	Park in designated a	areas as directed by Parks & Recreation. No event parking o	n Lee County maintained
	road rights-of-way.		
Ingress and Egress:	Use all established	means of ingress and egress.	**
			~
Special Arrangements:	None.		
		¥1. 14 1	
			*
	Print Name:	Bryan Miller	1. % N0
	Signature:	Bryan D. Miller  Digitally signed by Bryan D. Miller Date: 2018.11.01 08:27:35 -04'00'	- -
	Title:	Senior Project Manager	<u>.</u>
	Date:	November 1, 2018	



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

SPECIAL EV	ENT PERMIT						
☑ USE OF CO	UNTY PROPERTY I	PERMIT					•
PERMIT TO	SELL AND CONSU	ME ALCOHOLI	C BEVERAGES	S WITHIN LEE	COUNTY FA	CILITIES	
FILM PERM	IIT ·						
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PL	EASE INDICAT LY WITH FOR T	E BELOW WI HEIR EVENT.	HAT ARRANG	GEMENTS YO	UR ORG	ANIZATION
Illumination:	Weekly daytime eve	ent. Illumination	will not be requ	ired.			
					d at the De	aca Grandi	Rall Field
Parking Areas:	Parking will be avai site, 305 Wheeler R	lable in two desi d.	gnated ares for	and vendors to	cated at the bo	ica Granue	- Dan Field
		-					
Special Arrangements:	Existing contract w	ith Lee County P	arks and Recrea	tion has site sp	ecific details o	f market o	perations on
	Fridays.						
			٠.			ų	
	«				• 4		
	Print Name:	Alise Flanjack		•			• .
	Signature:	Abse	Flant	ek			
	Title:	Deputy Directo					
	Date:	Nov. 5, 2018					

Boca Farm: Fish 12/22/18 - 4/26/18 Boca Ballfields

Check the appropriate box(es) below:

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

Check the appropriate	e box(es) belo	ow:	
SPECIAL EVEN	NTY PROPERTY P	PERMIT	
FILM PERMIT		JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES	
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	PPLICATION, PL	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIO LY WITH FOR THEIR EVENT.	N
nsurance Requirements:	loccurrence to pro	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County.	analog (
Special Arrangements:	A Certificate of In Board of County additional insure	nsurance shall be submitted as evidence of the required coverage listing Lee County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as ared.	1
	Subject to proof	f of insurance.	
		en e	***
	Print Name:	Mike Figueroa	
	Signature:	$\mathcal{X}$	
	Title:	Risk Program Manager	
	Date:	October 31, 2018	

LOCAL-6

OP ID: LS



## CERTIFICATE OF LIABILITY INSURANCE

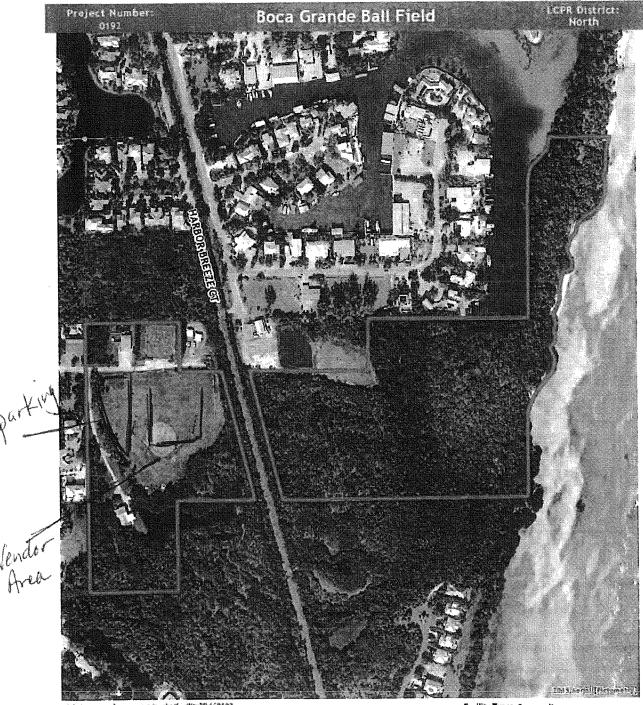
02/14/2018

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.

REPRESENTATIVE OR PRODUCER, A	ND TH	IE C	ERTIFICATE HOLDER.						
IMPORTANT: If the certificate holder	is an	ADD	ITIONAL INSURED, the press and conditions of the	ie polic	y, certain po	nicies may i	AL INSURED provisions equire an endorsement	s or b	e endorsed. latement on
this certificate does not confer rights	o the	certi	ficate noider in lieu of st						
PRODUCER		317	-848-9075	NAME:	CT Larry Sp	iker ext zu	) FAY 7	347 Q	10 0003
Pro Insur.inc. dba				PHONE (A/C, No	317-84	8-9075	(AÎĈ, No):	311-04	48-9093
Campbell Risk Management 9595 Whitley Drive, Suite 204				E-MAIL	ss: Ispilker@	campbellr	sk.com		
Indianapolis, IN 46240				INSURER(S) AFFORDING COVERAGE					NAIC#
Larry Spilker ext 203					INSURER A. The Hartford				
				INSURE	RA			MANUFACTURE CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR	
INSURED Local Roots LLC 1418 Sandcastle Road				INSURE	RB;	PARTICIPATION OF THE PROPERTY OF THE PARTICIPATION			
Sanibel, FL 33957				INSURE	R.C:				
Outhough a const				INSURE	RD:				
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			- 1000000	INCOME			REVISION NUMBER:		
			NUMBER:	UE DES	N ISSUED TO	THE INCHIDE	D NAMED ABOVE FOR TH	HE PO	LICY PERIOD
THIS IS TO CERTIFY THAT THE POLICIE INDICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	EQUIR	(EME	THE INCHEANCE AFFORE	DED BY	THE POLICIE	S DESCRIBED PAID CLAIMS.	OCUMENT WITH RESPECT TO HEREIN IS SUBJECT TO	OT TO	WHICH THIS THE TERMS,
B.O.O.	ADDL INSD	SUBR	POLICY NUMBER	erander of Ports (Ind.), "At 1811111	POLICY EFF	POLICY EXP	LIMIT	s	
LTR THE COMMONWARD	INSD	YYYD	, 52(81)		January VIII.		EACH OCCURRENCE	5	1,000,000
A X COMMERCIAL GENERAL LIABILITY		A A A A A A A A A A A A A A A A A A A	000011004121		02/27/2019	02/27/2019	DAMAGE TO RENTED PREMISES (Ea occurrence)	s	1,000,000
CLAIMS-MADE X OCCUR	Y		36SBMBB1424		UZIZIIZUIO	UENELIEU 13		,	10,000
	. ]						MED EXP (Any one person)	\$	1,000,000
			•				PERSONAL & ADV INJURY	3	2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	3	version and a series of the se
X POLICY PRO-					- Anna anna anna anna anna anna anna ann		PRODUCTS - COMP/OP AGG	\$ 5	2,000,000
OTHER;	+-	-			1		COMBINED SINGLE LIMIT	\$	
AUTOMOBILE LIABILITY						****	(Ea accident)	1	and the second district the second
OTUA YNA							BODILY INJURY (Per person)	5	
OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$	
HIRED NON-OWNED AUTOS ONLY		1			and and		PROPERTY DAMAGE (Per accident)	\$	
AUTOS ONLY AUTOS ONLI								3	
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EXCESS LIAB CLAIMS-MAC	E						AGGREGATE	5	
DED RETENTION\$						<del> </del>	PER OTH-	3	<u></u>
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  Y/1						-	STATUTE ER	ļ	
ANY PROPRIETOR PARTICIPAL TO THE PARTICIPAL T	7.1		and the second s				E.L. EACH ACCIDENT	<u> </u>	The second secon
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A	i					E.L. DISEASE - EA EMPLOYEE	\$	
If you describe under							E.L. DISEASE - POLICY LIMIT	s	
DESCRIPTION OF OPERATIONS below		+			<u> </u>	1	A CONTRACTOR OF THE PARTY OF TH		
	-				i.	-			
						<u>!</u>		1	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEH	ICLES (	ACOF	RD 101, Additional Remarks Sche	dule, may	be attached if mo	ore space is requ	red)		
Lee County Board of County Com.,	are a	ıddi	tional insured's.						
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				J	1.00				
				10	al) 18				
			•	*					
CERTIFICATE HOLDER				CAN	ICELLATION	<u> </u>	Wan		
Lee County Board of				I TH	F FXPIRATIO	N DATE TH	DESCRIBED POLICIES BE ( IEREOF, NOTICE WILL ICY PROVISIONS.	CANCE BE D	LLED BEFORE BELIVERED IN
County Com				-		(PA) T 1 T() -			
2115 Second Street				AUTH	IORIZED REPRES	n 12			
Fort Myers, FL 33901					$\cup \mathcal{U} \subset$	Clase			
Fort myers, 1 E 55301				1	THU-	1			
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ACORD 25 (2016/03)

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0 62.5 125

Feet

rty Appraise i's Office. Property lines on this page are approximate and have not been surveyed

N

Facility Type: Community \*GIS Calculated Acres: 26.6

Address: 105 Wheeler Road Boca Grande, FL 33921

Commissioner District: 1

0.07

Community Park Impact Fee District: North (\$1)