

EVENT PERMIT



Ordinance 17-08

Kindness Bus Visit

PERMIT NUMBER: TMP2018-10178

January 8, 2019 from 3:30pm until 4:30pm Date(s) of Event:

Property Owner:

LEE COUNTY

Applicant:

AMY-JANE MCWILLIAM

239-533-4748

Description:

Kindness Club program with speaker and the Kindness Bus.

Location of event:

519 CHIQUITA BLVD N, CAPE CORAL, FL 33993

Northwest Regional Library 519 Chiquita Blvd N.

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

Alcoholwithin Lee County Facilities

Film, Video & Photography



Event Application

Check	the	appropriate	box(e	es) bel	ow:
-------	-----	-------------	-------	---------	-----

K	SPECIAL EVENT PERMIT
×	USE OF COUNTY PROPERTY PERMIT
	PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	FILM PERMIT

Fitle of Event / Name of Production	Kindness Bus Visit
Date(s) of Event / Production:	1/8/2019 (NW) 1/14/2019 (SC)
Location(s) of Event:	Northwest Regional Library, 519 Chiquita Blvd. N., Cape Coral, FL 33993 — TMP 2018 - 1017. South County Regional Library, 21100 Three Oaks Pkwy, Estero, FL 33928 — TMP 2018 - 1017.
Name of Applicant:	Amy-Jane McWilliam
Applicant Address:	Library Administration 2345 Union St. Fort Myers, FL 33901
Applicant Phone Number:	239-533-4808
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	amcwilliam@leegov.com
Estimated Attendance:	up to 100 people at each location (200 total)
Event Description: Include each activity, when activities take place, etc.	At both locations, the visit is part of the Kindness Club program. In the meeting room, families will join in a discussion about kindness and listen to the guest speaker, Bob Votruba, read his book. After the discussion, families will be able to check out the Kindness Bus that Bob drives around the country. The entire program lasts about one hour.
	1/8/2019 - 3:30-4:30, 1/14/2019 - 4:30-5:30
Hours of Operation:	Northwest Regional Library 10-44-23-C1-00001:0010
STRAP # of Parcel:	South County Regional Library 34-46-25-E2-U2125.2396
Owner of Premises*:	Lee County BOCC

^{*}Notarized statement from the property owner specifically consenting to the proposed use required.



Fill out the following questions for allpermit types:

Vhat is the Zoning Classification of the p	oremises? PUD	
re any temporary structures to be insta	illed for the event? Yes 🗷 No 🧻	ype:
o you have the appropriate permits for	the temporary structures?	Yes No
For a 'Special Event' and 'Use of Count dentified, including all parking areas.	ty Property' permit, submit a site plan wit	h all proposed facilities and activ
nsurance Company Insuring the Event:	Self-Insured	
lote: Certificate of Insurance must be submitted	d at time of application	
Surety Company Bonding this Event (Na	me and Address): NA	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Ever
🗷 Yes 🔲 No	Yes 🗷 No	☐ 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 included on the certificate of insurar
Name & Address of Organization Providing Food:		
Type of Food being Served:		
Section II - USE OF COUNTY P	ROPERTY PERMIT	el en de le vertra foi en receive de retra esta en la companyación de la companyación de la companyación de l El en de le vertra foi en receive de la companyación de la companyación de la companyación de la companyación
gi. Managa anakannya jiga pisakanga jama anaka pisamatanga na ikina salah pisaka sa nahisa pisakan hiki salah kita	ende versig in een seen en een en een een een en en en en en	en land to land when a to the properties for the problems are up to the grant the capital and
Organization Sponsoring the Event: Le	e County Library System	,
Fill out this portion for applications fo	r Solicitation in the County Rights-of-Wa	y:
Name of Charity:		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration nur	mber:	
(Proof of registration with the Dept. of Agriculture &	& Consumer Services §496.405 or proof the organization	is exempt from this requirement. §316.204.
Section III - SALE/CONSUMP	TION OF ALCHOLIC BEVERAGES I	'ERIMI I
and the state of t	તર્જી દી. તરફ કેન્દ્ર કર્યા તું તમારે કે દી. કરફ કરફ કરફ કરફ કરવા તું કરફ કરફ કરફ કરફ કરફ કરફ કરફ કરફ કરફા કેટ	Care To Editor Complete protected in representatives for the experience and complete consultative pro-
Is alcohol being sold/consumed on Con If Yes, then a "Lee County Alcohol Permit" is required	unty Property? d. Only non-profit organizations can sell alcohol on Coun	Yes No
Non-profit certificate/registration nur (Required if alcohol is to be <u>SOLD</u> at the event)	mber:	
	a Division of Alcoholic Beverages and Tobacco ma	also be required; please call (239) 344-0



e of Production (choose all tha	the state of the s			
TV Movie or Special	TV Series / Pilot	TV Comme	rcial 🔲 Still Photo	DS
Public Service Announcement	☐ Industrial / Documentary	Other:		
any of the following be neede	ed or included*?			
Street Closure		☐ Yes	∏ No	
Traffic / Crowd Con		☐ Yes	□ No	
Fire or Burning	and the second s	☐ Yes	□ No	
Explosives or Pyrot	echnics	☐ Yes	□ No	
Animals, Large or S	mall	☐ Yes	□ No	
Construction of Any	er a particular properties and security of the experimental and the experiment for the security of the experiment	☐ Yes	□ No	
Large and/or Nume	erous Vehicles	☐ Yes	□ No	
Helicopters, Boats,	etc.	Yes	□ No	
Stunts		☐ Yes	□ No	
Other	a to the metalogic tests mercent of \$ 100 to \$100.	☐ Yes	□ No	
	urther details below.			
	urther details below.			
	urther details below.			
	urther details below.			
Special Parking Requirements:	ed: (Personnel, equipment, faci	ilities, etc.)		
Special Parking Requirements:		ilities, etc.)		
Special Parking Requirements: City or County Services Requirements		ilities, etc.)		
Special Parking Requirements: City or County Services Requir	ed: (Personnel, equipment, faci			
Special Parking Requirements: City or County Services Requir		ds on production in	n Florida to track the e	economic impa
Epecial Parking Requirements: City or County Services Requir The following information is rethe industry. If exact figures a	ed: (Personnel, equipment, faci	ds on production ir e as closely as poss	n Florida to track the eible.	economic impa
Special Parking Requirements: City or County Services Requir	ed: (Personnel, equipment, faci equired for local and state record re not available, please estimate Number in Crew:	ds on production ir e as closely as poss	ible.	economic impa

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	Melesa Son Bale_ Witness
Amy-Jane McWilliam Print Name of Applicant and Title CLS, YS Programming Coordinator	Melissa Ann Bakur Print Name of Witness
$\frac{12/10/2018}{\text{Date}}$	12/10/2018 Date
vace	



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

S USE OF COUNTY PROPERTY PERMIT

PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI	T
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only.
Deputies (How Many?):	Noné
Fee for Services:	None
Special Arrangements:	None
	Print Name: Lt. K. Sonjer
	Signature: July Jan 95087
	Title: Special Events, Permits and Details
	Date: 12/10/18
ere open, service, ser in producera langual article or extensively adviced in	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 appropriate box(es) below:

SPECIAL EV	ENT PERMIT	
🔀 USE OF CO	UNTY PROPERTY F	PERMIT
☐ FILM PERM	11T	
AFTER REVIEWING THE WILL REQUIRE THE APPLI	APPLICATION, PLE	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WITH FOR THEIR EVENT.
Fire Guards (How Many?)	N/A	
Fee for Services:	N/A	
Flammable Vegetation:	N/A	
First Aid Equipment:	None needed, call 91	11 if there is a medical emergency.
Fire Extinguishing:	N/A	
Special Arrangements:	There were no spe	cial arrangements asked for or needed.
	Print Name:	Todd Rigoni
	Signature:	Digitally eigned by: Todd Rigoni DN: CN = Todd Rigoni email = tigoni@capocoral.net C = AD g/U = CCFD Date: 2016,12.12 08:47:04 -45007
	Title:	Special Operations Battalion Chief
	Date:	12/12/2018



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:
FILM PERM	UNTY PROPERTY PERMIT
AFTER REVIEWING THE A WILL REQUIRE THE APPLI	PPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	N/A
Fee for Services:	N/A
Flammable Vegetation:	N/A
First Aid Equipment:	Call 911 for Emergencies
Fire Extinguishing:	Call 911 for Emergencies
Special Arrangements:	
	Print Name: Scott Danielson Signature: Title: Lt. Fire Prevention Date: 12/6/2018



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

Check the appropriate box(es) below:

SPECIAL EVI		'DNAIT	
☑ USE OF COU	JNTY PROPERTY PE IT	:KIVII)	
AFTER REVIEWING THE WILL REQUIRE THE APPLI	APPLICATION, PLE	ASE INDICATE BELOW WHAT ARRANGEMENTS Y 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:	Douglas B. Higgins	
	Signature:	Douglas B. Higgins opening to the control of the Country Department of Public Schery. Department of Pub	-
·	Title:	Division Chief	
	Date:	12-05-18	•



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

Check the appropria	ite box(es) belo	ow:
☐ SPECIAL EV	ENT PERMIT	
USE OF COL	JNTY PROPERTY	PERMIT
PERMIT TO	SELL AND CONSU	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IT	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PI	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Parking:	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.	
	E _{gas} of the collision context, when also context of the Collision behavior from 1986, or the collision fellow Albert I	
	Print Name:	Bryan Miller
	Signature:	Bryan D. Miller Date: 2018.12.06 09:20:42 -05'00'
	Title:	Senior Project Manager
	Date:	December 6, 2018



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

Check the appropri	ate box(es) bei	ow:			
·	UNTY PROPERTY	PERMIT UME ALCOHOLIC BEVI	ERAGES WITHIN LEE (COUNTY FACILITIES	
FILM PERA	NIT		,		
AFTER REVIEWING THE WILL REQUIRE THE APP				MENTS YOUR ORGANIZATI	ON
Illumination:	N/A				
Parking Areas:	N/A	**************************************		**************************************	
		·			
Special Arrangements:	N/A - Event is not o or programs.	on or near Lee County Parl	s and Recreation facilities	es and will not affect our operati	ons
	Print Name:	Alise Flanjack			
	Signature:	Alise Flanjack	tayusty jáptatí by Kine Hurjaíð. Dag neiðne flýglag, coll þæðala þrá tapa þóng ernlar tar Frifret i bryggjarnskild frammus. Om colntalarð fram 133 októf	ody, a multi-ut (a.5 depressions	
	Title:	Deputy Director			
	Date:	December 12, 2018	i .		
Kindress Bus Bray Systems	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Page 10	·		, P.A



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

Check the appropria	te box(es) be	low:	
SPECIAL EVE USE OF COU PERMIT TO S FILM PERMI	NTY PROPERTY SELL AND CONS	PERMIT SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNT	Y FACILITIES
AFTER REVIEWING THE A	APPLICATION, I CANT TO COMI	PLEASE INDICATE BELOW WHAT ARRANGEMENTS PLY WITH FOR THEIR EVENT.	S YOUR ORGANIZATION
Insurance Requirements:	occurrence to pr	reral liability insurance with minimum limits of One Million lotect against bodily injury and/or property damage relative event within Lee County. equired	Dollars (\$1,000,000) pereto applicants use of
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: Signature: Title:	Mike Figueroa At Join	
	Date:	Program Manager December 5, 2018	

