

## **EVENT PERMIT**



Ordinance 17-08

## Private Party

PERMIT NUMBER: TMP2018-10182

Date(s) of Event: January 26, 2019 from 6:00pm until 10:00pm

Property Owner:

LEE COUNTY

Applicant:

Robert McKinney

317-294-2604

Description:

Cocktails, dinner, speaker

Location of event: 131 1ST ST W, BOCA GRANDE, FL 33921

Louise DuPont Crowninshield Community House

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?

To Be Consumed

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

12-19-18



## **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

McKinney Private Party - Louis DuPont Crowninshield House - Saturday, January 26, 2019

TMP2018-10182



## **Event Application**

Check the appropriate	e box(es) below.
SPECIAL EVEN	NT PERMIT
	NTY PROPERTY PERMIT
E PERMIT TO S	MXXNIX CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	
Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Private Party
Date(s) of Event / Production:	Saturday, January 26, 2019
Location(s) of Event:	Louise DuPont Crowninshield Community House
Name of Applicant:	Robert McKinney
Applicant Address:	1708 Jose Gaspar P.O. Box 104 Boca Grande, FI 33921
Applicant Phone Number:	317-294-2604
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	rhm647@comcast.net
Estimated Attendance:	75
Event Description: Include each activity, when activities take place, etc.	Cocktails, Dinner, Speaker
Hours of Operation:	Set-up during the day, start at 6:00p.m 10:00p.m.
STRAP # of Parcel:	14432001000050010
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 pre	mises? Public Facili	ty		
Are any temporary structures to be installe	d for the event?	Yes 🔀 No	Туре:	
Do you have the appropriate permits for th	e temporary structu	ires? N/A	Yes	No
<ul> <li>For a 'Special Event' and 'Use of County Findentified, including all parking areas.</li> </ul>	Property' permit, su	bmit a site plan	with all proposed fa	cilities and activities
Insurance Company Insuring the Event: Lib	erty Mutual			
Note: Certificate of Insurance must be submitted at	time of application			
Surety Company Bonding this Event (Name	e and Address): N/A			
Will Vehicles be Used as Part of This V Event?	Vill Food be Availab	le at this Event?		lic Beverages be med at this Event?
r Yes   ▼ No	<b>▼</b> Yes	☐ No	▼ Yes	∏ No
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability included on the certific	coverage must be cate of insurance.	If yes, liquor liab included on the	oility coverage must be certificate of Insurance.
Name & Address of Organization Newli	ns, 440 Park Ave			
Type of Food being Served: Appetizers / Fi	nger Foods / Sandwid	thes		
Section II - USE OF COUNTY PRO	PERTY PERMIT			
Organization Sponsoring the Event:				
Fill out this portion for applications for So	olicitation in the Co	unty Rights-of-V	Vay:	
Name of Charity:				
Address of Charity:				
Phone Number:				
Non-profit certificate/registration numbe	r:			
(Proof of registration with the Dept. of Agriculture & Cor	nsumer Services §496.405	or proof the organizat	ion is exempt from this re	quirement. §316.2045)
Section III - SALE/CONSUMPTIO	N OF ALCHOLIC	BEVERAGES	PERMIT	
Is alcohol being Md/consumed on County If Yes, then a "Lee County Alcohol Permit" is required. Or	y Property? nly non-profit organization:	s can sell alcohol on Co	Yes Yes	No
Non-profit certificate/registration number (Required if alcohol is to be <u>SQLD</u> at the event)		44.64		
Please note: A permit from the State of Florida Div further details	vision of Alcoholic Bever	rages and Tobacco n	nay also be required; ple	ease call (239) 344-0885 t



ection IV - FILM / VIDE	O / PHOTOGRAPHY PER	IMI i	N/A		
e of Production (choose all th	at apply):				
TV Movie or Special	TV Series / Pilot		TV Commerci	al 🗀	Still Photos
Public Service Announcemer	t 🗍 Industrial / Documenta	iry 🗀	Other:		
I any of the following be need	ded or included*?				
Street Closure			Yes	☐ No	
Traffic / Crowd Co	ntrol		Yes	☐ No	
Fire or Burning			Yes	∏ No	
Explosives or Pyro	technics		☐ Yes	☐ No	
Animals, Large or	Small		Yes	∏ No	
Construction of A	ny Kind		Yes	∏ No	
Large and/or Nun	nerous Vehicles		Yes	☐ No	
Helicopters, Boats	s, etc.		Yes	∏ No	
Stunts			Yes	∏ No	
Other			Yes	∏ No	
Special Parking Requirements				····	
special Parking Requirements	•	, , , , , , , , , , , , , , , , , , ,			
	d. (Dansan Landina and 6				
Lity or County Services Requi	red: (Personnel, equipment, f	acinics, t			
The following information is r the industry. If exact figures	equired for local and state rec are not available, please estim	ords on p ate as clo	roduction in Fl sely as possible	orida to	track the economic impa
Number in Cast:	Number in Crev	v:	Numb	er of loca	ils hired:
Total budget:	Estimate amou	nt spent in	Lee County:		
Hotel room nights:	Number of sho	oting days			

#### **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

Witness

Print Name of Applicant and Title

Print Name of Witness

U 28 18

Date



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

Check the appropriate box(es) below:

PERMIT TO  FILM PERM  AFTER REVIEWING THE	JNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
Parking:	Parking in authorized areas only.
Deputies (How Many?):	None
Fee for Services:	None
Special Arrangements:	Alcoholic beverages must stay within the confines of the event.
	Print Name: Lt. K. Sonjer  Signature:   Title: Special Events, Permits and Details  Date:   12/13/18



## 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.

FILM PERM	ENT PERMIT UNTY PROPERTY PE IIT	ERMIT	
AFTER REVIEWING THE A	APPLICATION, PLEA CANT TO COMPLY	ASE INDICATE BELOW WHAT ARRAN WITH FOR THEIR EVENT.	GEMENTS YOUR ORGANIZATION
Fire Guards (How Many?)			
Fee for Services:			
Flammable Vegetation:			
First Aid Equipment:			
Fire Extinguishing:			
Special Arrangements:	In C	Case of Emergency - DIAL 911	
	Print Name:	C.W. Blosser	
	Signature:	C.W. Blosser	
	Title: Date:	Fire Chief 12/172018	
		Page   7	



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

Check the appropri	iate box(es) belo	w:	
SPECIAL EV	VENT PERMIT		
IX USE OF CO	OUNTY PROPERTY P	PERMIT	
FILM PERN	<b>/I</b> IT		
		EASE INDICATE BELOW WHAT ARRANGEMENTS Y WITH FOR THEIR EVENT.	YOUR ORGANIZATION
Treatment Facilities:	None necessary.		
	1		
Medical Personnel:	None necessary.	,	
	l		
Medical Supplies / Equipment:	None necessary.		
Safety Requirements:	No additional precau	utions 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 coverag	e, contact our office at
	Print Name:	Douglas B. Higgins	_
	Signature:	Douglas B. Higgins  Option Styles A Right Labe Code, Department of Naker Salety, Depar	_
	Title:	Division Chief	-
	Date:	12-1218	-



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

Check the appropri	ate box(es) bel	ow:		
	OUNTY PROPERTY SELL AND CONS		RAGES WITHIN LEE COUNT	Y FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APP	E APPLICATION, P LICANT TO COMP	LEASE INDICATE BELO' LY WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	S YOUR ORGANIZATION
Parking:	Park in designated prohibited or would	areas. No event parking on d interfere with the safe pa	Lee County maintained road ri ssage of emergency vehicles.	ghts-of-way where parking
Ingress and Egress:	Use all established	means of Ingress and egre	55.	
Special Arrangements:	None.			
	Print Name:	Bryan Miller		_
	Signature: Title:	Bryan D. Miller Senior Project Manager	Digitally signed by Bryan D. Miller Date: 2018.12.17 14:18:14 -05'00'	
	Date:	December 17, 2018		
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#### LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

Check the appropri	ate box(es) belo	ow:		
	UNTY PROPERTY SELL AND CONSU		RAGES WITHIN LEE COUNTY	FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PI LICANT TO COMP	LEASE INDICATE BELOV LY WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Illumination:	Any additional light	ting must be provided by p	ermit holder. Open flame candl	les are prohibited.
Parking Areas:	Parking is permitte Louise DuPont Cro	d in existing parking areas wninshield Community Ho	located at the Boca Grande Comuse Parking Lot.	nmunity Park and the
Special Arrangements:	must be contained Recreation Director Permits already gra	inside the Louise DuPont ( or Deputy Director appro- nted at the Boca Grande C	ordinance #95-09 (selling & cons Crowninshield Community Hous wes this alcohol permit by signin ommunity park).	e. Lee County Parks & g below (2- Alcohol
	Print Name:	Jesse Lavender	Joe Wier	
	Signature:	Jesse Lavender	Digitally signed by Jesse Lavender Date: 2018.12.12 10:36:34 -05'00'	
	Title:	Director	Supervisor	
	Date:	12/12/18	12/4/18	
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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 appropriat	e box(es) bel	ow:
SPECIAL EVEING USE OF COUNTY PERMIT TO S	NTY PROPERTY ELL AND CONSI	PERMIT JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE A	PPLICATION, P	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
nsurance Requirements:	occurrence to pro aforementioned In addition, Host (\$1,000,000) per	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per object against bodily injury and/or property damage relative to applicants use of event within Lee County.  Liquor Liability insurance will be required with minimum limits of One Million Dollars occurrence. Should Host Liquor Liability coverage be afford under the Commercial policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.
Special Arrangements:	A Certificate of In Board of County additional insure Subject to proof	
	Print Name:	Mike Figueroa
	Signature:	This Joi-
	Title:	Risk Program Manager
	Date:	December 18, 2018



06/05 Edition

Ok 12/18/2018

This frim

## Certificate of Insurance

	Robert & Shelley McKinney is insured for the coverage an
This is to certify that	Name of Policyholder (s)
provisions of a Home Owners A (Typ	Personal Liability Policy under H3X-248-553223-40 &LJI-248-928430-21 (Policy Number)
Section II Liability Coverages	hereby extended to the following location:
Lee County Board Of County	ommisioners, PO Box 398, Ft. Myers, FL 33902
Host Liquor Liability	
	(Name and/or Address of Location)
for the following specific period policy.	of time $\frac{01/26/2019}{\text{(Date of Event)}}$ and is subject to all terms, exclusions and conditions of the above
Personal Liability Limit \$	5,000,000
Medical Payments to Others L	nit \$ 5,000
Mail address if different from property address. 647 Somerset Drive W Indianapolis, IN 46260	This certification or verification of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term of condition of any contract or other document with respect to which this certificate or verification of insurance 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.
Date 12/12/2018	SECRETARY PRESIDENT  Countersigned by:  Authorized Representative

