

EVENT PERMIT



Ordinance 17-08

Roy Hobbs Sunshine Classic Events

PERMIT NUMBER: TMP2019-00037

Date(s) of Event: FEBRUARY 3, 2019 THROUGH MARCH 3, 2019 FROM

10:00AM UNTIL 7:00PM

Property Owner:

LEE COUNTY

Applicant:

TOM GIFFEN

330-352-2171

Description:

ROY HOBBS BASEBALL LOCKER ROOM PROGRAM WHICH INCLUDES BEER

ONLY CONSUMPTION INSIDE LOCKER ROOM AND FIELD ACCESS

Location of event: 4301 EDISON AVE, FORT MYERS, FL 33916

PLAYER DEVELOPMENT COMPLEX

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

ftmpprmt_specialevent.rpt

Date



Event Application

Special Event

Use of County Property

Alcohol within Lee County Facilities

Film, Video & Photography



COMMUNITY DEVELOPMENT

ROY HOBBS SUNSHINE CLASSIC EVENTS.

Tmf2019-00037



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

Title of Event / Name of Production	Roy Hobbs Sunshine Classic Events
Date(s) of Event / Production:	February 3-March 3, 2019, covering 6 age group events during that time period, all under the Sunshine Classic name. Events are SC65s Feb. 3-6; SCF-S/70s Feb. 7-10; SC60s Feb. 11-14; SC50s Feb. 15-18: SC45s Feb. 21-24 and SC35s Feb. 28-March 3
Location(s) of Event:	PLAYER DEVELOPMENT COMPLEX, 4301 EDISON AVE, FORT MYERS 33916
Name of Applicant:	ROY HOBBS BASEBALL / ROY HOBBS CONCESSIONS
Applicant Address:	4301-100 EDISON AVENUE FORT MYERS FL 33916
Applicant Phone Number:	330.352.2171
Contact Person: (If different from applicant)	TOM GIFFEN
Contact Phone Number: (If different from applicant)	SAME
Email Address:	TG@ROYHOBBS.COM
Estimated Attendance:	220 ADULT AMATEUR BASEBALL PLAYERS in each of the events
Event Description: Include each activity, when activities take place, etc.	Roy Hobbs Baseball operates 6 Sunshine Classic age-group events at PDC in February. Included is our locker room (LR) program and field access. Permit application applies specifically to Beer only consumption - no sales - as part of the Locker Room program. No alcohol may leave the LR; consumption is supervised by Hobbs staff; no BYOB allowed. Beer available from 3:30 pm to 7 pm; game times are 10 am and 1:30 pm. Locker room services end 90 minutes after 1:30p games end.
Hours of Operation:	Tournament play is 100 am to end of play, usually about 4 pm at PDC. Basic locker room hours are
STRAP # of Parcel:	204425P2000020000
Owner of Premises*:	Lee Co Board of Commissioners, administered by Lee County Parks and Recreation Department

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



Fill out the following questions for allpermit types:

	2 DMV	
What is the Zoning Classification of the p	oremises? DNK	
Are any temporary structures to be insta	lled for the event? Yes X No	Type:
Do you have the appropriate permits for	the temporary structures?	T Yes No
* For a 'Special Event' and 'Use of Count indentified, including all parking areas.	y Property' permit, submit a site plan wit	h all proposed facilities and activities
Insurance Company Insuring the Event:	Great American E&S Insaurance covers RH; C	ovington Specialty covers RH facility
Note: Certificate of Insurance must be submitted	l at time of application	
Surety Company Bonding this Event (Na	me and Address): NONE	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
☐ Yes	∑ Yes	∑ 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 be included on the certificate of insurance.
	y Hobbs Baseball, our food service is covere nerican E&S policy	d under products liability of our Great
	hamburgers, chickden, salads and sandwich	es; fire extinguishers are positioned in
Type of Food being Served: not dogs, Kitchen and		
Section II - USE OF COUNTY P	ROPERTY PERMIT	
Organization Sponsoring the Event:		
	Solicitation in the County Rights-of-Way	/:
Name of Charity:		
•		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration num	ber:	
(Proof of registration with the Dept. of Agriculture &	Consumer Services §496.405 or proof the organization	is exempt from this requirement. §316.2045)
	ION OF ALCHOLIC BEVERAGES P	
्रीत्री सम्बद्धारात त्रोत्रायकार स्थापनाय स्थापना संस्थान स्थापना स्थापना स्थापना स्थापना स्थापना स्थापना स्था हुन		् सरकारक स्टब्स्ट्रिस्स स्थापन कर व्यवस्थात करणा सम्बद्धान स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थाप
	Only non-profit organizations can sell alcohol on Count	
(Required if alcohol is to be <u>SOLD</u> at the event)	ber: Consumption only, and only within the	
Please note: A permit from the State of Florida further details	Division of Alcoholic Beverages and Tobacco may	also be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

e of Production (choose all th	at app	oly):			, gargarania () , , , , , , , , , , , , , , , , , ,		mmqmq, 35, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
TV Movie or Special	Г	TV Series / Pilot	П	TV C	ommercial	П	Still Photos	5	
Public Service Announcemen	t 🗀	Industrial / Documentary		Othe	er:	 			
I any of the following be need	led or	included*?							
Street Closure					Yes [No			
Traffic / Crowd Co	ntrol			П	Yes [No			
Fire or Burning		A STANDAR MILLER STANDAR MARKET STANDAR		П	Yes [No			
Explosives or Pyro	techni	CS	,,	ìП	Yes [No			
Animals, Large or S	Small	and a segment of the second of			Yes [No			
Construction of Ar	y Kind	1		П	Yes [No			
Large and/or Num	erous	Vehicles		П	Yes [No			
Helicopters, Boats	, etc.			·E	Yes [No			
Stunts				· []	Yes [No			
Other					Yes	 No			
		Tractally below.							
Special Parking Requirements	:		ities,	etc.)					
For any marked Yes, provide Special Parking Requirements: City or County Services Requirements	:		ities,	etc.)					
Special Parking Requirements	red: (Personnel, equipment, facil	ls on p	oroduc	s possible.			onomi	c impa
Special Parking Requirements: City or County Services Requirements: The following information is rethe industry. If exact figures a	red: (Personnel, equipment, facil	ls on p	oroduc	s possible.		rack the ec	onomi	c impa
Special Parking Requirements: City or County Services Requirements The following information is re	red: (Personnel, equipment, facil ed for local and state record t available, please estimate	ls on p	produc psely a	s possible. Numbe			onomi	c 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 o
his/her knowledge.	
Stall .	
Signature of Applicant	Withess
Iom Siffen/owner	ROD JONES
Print Name of Applicant and Title	Print Name of Witness
1-14-18	1-14-19
Date	Date



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

Check the appropri	te box(es) below:
SPECIAL EV	ENT PERMIT JNTY PROPERTY PERMIT
V	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE	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 required.
Fee for Services:	None required.
Special Arrangements:	Beer only consumption in the locker room during established times. Alcohol must not leave the confines of the designated area. Consumption will be monitored by the event staff.
	Print Name: Lt. K. Sonier Signature: 95087 Title: Special Operations Division Date: 1/16/19



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	iate box(es) belo	DW:
SPECIAL E	/ENT PERMIT	
Lunn	OUNTY PROPERTY	PERMIT
☐ FILM PERN	ЛІТ	
FTER REVIEWING THE VILL REQUIRE THE APPL	APPLICATION, PLICANT TO COMPLY	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Fire Guards (How Many?)	N/A	
Fee for Services:	N/A	
Flammable Vegetation:	N/A	
First Aid Equipment:	N/A	
Fire Extinguishing:	Provide a state tagge	ed fire extinguisher by cooking area.
Special Arrangements:		
	Print Name:	Jennifer Campbell
	Signature:	Jennifer Campbell Digitally signed by Jennifer Campbell Date: 2019.01.29 10:33:28-05'00'
	Title:	Fire Marshal
	Date:	1/29/2019



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

Check the approprio	ate box(es) belov	v:
SPECIAL EV		
Name of the second of the seco	JNTY PROPERTY PE	RMIT
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	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, contact our office at
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins Display signed by Douglas 8. Higgins Obt. en-Douglas 8. Higgins Obt. en-Douglas 8. Higgins Date: 2019-01 22 11 25:49 - 46:507 Date: 2019-01 22 11 25:49 - 46:507
	Title:	Division Chief
	Date:	01-23-19



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 CONS	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
_ FILM PERM	1IT	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Parking:	Park in designated a	areas.
Ingress and Egress:	Use all established	means of ingress and egress.
Special Arrangements:	None.	
	Print Name: Signature:	Bryan D. Miller Date: 2019.01.22 09:11:29 -05'00'
	Title: Date:	January 22, 2019



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			
, ,	OUNTY PROPERTY			
• •		UME ALCOHOLIC BEVERAGE	ES WITHIN LEE COU	NTY FACILITIES
FILM PERM	/IT ·			
		LEASE INDICATE BELOW W PLY WITH FOR THEIR EVENT		ITS YOUR ORGANIZATION
Illumination:	N/A			
			*	
Parking Areas:	N/A			
Special Arrangements:	Permit application program. No alcoh	applies specifically to Beer only ol may leave the locker room; co	consumption - no sales ensumption is supervise	: - as part of the Locker Room ed by Roy Hobbs staff. This is
	not a BYOB event. I	Beer will only be available from	4 pm to 7 pm.	
	Print Name	Allse Flanjack		
,		1, - 50	-1 _	***************************************
	Signature:	· Ale Hay	2c/C	determination of the state of t
	Title:	Deputy Director		
	Date:	Jan 15, 201	9	
Susshie Clas	S10	,		
* Pay Hobbs O	PDC	Page 10		
Sunshive Class Pay Hobbs of Feb 3 Mard	13,2019			



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

Check the appropriat	e box(es) bel	ow:	
SPECIAL EVE	NT PERMIT		
USE OF COU	NTY PROPERTY	PERMIT	
⋉ PERMIT TO S	ELL AND CONSI	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILI	TIES
FILM PERMIT	-		
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR PLY WITH FOR THEIR EVENT.	ORGANIZATION
Insurance Requirements:	occurrence to pro	eral liability insurance with minimum limits of One Million Dollars (\$ otect against bodily injury and/or property damage relative to appli event within Lee County.	51,000,000) per icants use of
	(\$1,000,000) per	Liquor Liability insurance will be required with minimum limits of Cocurrence. Should Host Liquor Liability coverage be afford under policy, minimum acceptable limits will be Two Million Dollars (\$2,00)	the Commercial
Special Arrangements:	A Certificate of Ir Board of County additional insure	nsurance shall be submitted as evidence of the required coverage li Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificated.	sting Lee County holder and as an
	Subject to proof	of insurance.	
	Print Name:	Mike Figueroa	
	Signature:	Parky Lynn	
	Title:	Risk Program Manager	
	Date:	January 15, 2019	



DATE: (MM/DD/YYYY) 12/27/2018

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 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).

Certificate floraer in fied of oder strae, early and		
PRODUCER	CONTACT Frazier Insurance Agency, Inc.	
Frazier Insurance Agency, Inc.	PHONE (A/C, No, Ext): (804) 754-7610 FAX (A/C, No): (804) 7	754-7613
P.O. Box 1250	E-MAIL ADDRESS: ifrazier@frazierinsurance.com	
Midlothian, VA 23113-1250	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURERA: Aegis Security Insurance Company	33898
INSURED Sports and Special Event Risk Purchasing Group, Inc.	INSURER B:	
	INSURERC:	
Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball	INSURERD:	
4301-100 Edison Ave.	INSURERE:	
Fort Myers, FL 33916	INSURERF:	
COVERAGES CERTIFICATE NUMBER:	REVISION NUMBER:	
OO V ET (TO E O		

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.

INSR LTR			SUBR	POLICY NÜMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
LIK	GENERAL LIABILITY	mon	*****				GENERAL AGGREGATE	\$ 2,000,000.00
	X COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG PERSONAL & ADV INJURY	\$ 2,000,000.00
	CLAIMS-MADE X OCCUR			Policy # FGLSP-100-18	01/01/2019	01/01/2020	EACH OCCURRENCE	\$ 1,000.000.00 \$ 1,000.000.00
Α	X INCLUDES ATHLETIC PARTICIPANTS			Cert #FFL-S-0030	01/01/2019	12:01 AM	DAMAGE TO RENTED PREMISES	\$ 300,000.00
	GENL AGGREGATE LIMIT APPLIES PER						MED EXP (Any one person)	\$ 5,000.00
	X POLICY PRO- JECT LOC			160				\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO				-		BODILY INJURY (Per person)	\$
	ALLOWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident)	\$
	HIRED AUTO NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLALIAB OCCUR						EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
	DED RETENTION \$							\$
								\$
								\$
								\$
							LIMIT	\$ 10,000.00
	C A said ant Madical			FR0348	01/01/2019	01/01/2020	LIMIT AD&D	\$ 10,000.00
Α	Excess Accident Medical			110070	0 1/0 1/2010	12:01 AM	DEDUCTIBLE	\$ 100.00

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

Host Liquor coverage is included on the policy

Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

CERTIFICATEHOLDER	3
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CANCELLATION

Ok 01/15/2019

Lee County Board of Commissioners PO Box 398

Ft. Myers, FL 33902

My Jim

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

John W. Frazier

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DATE: (MM/DD/YYYY) 12/27/2018

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Page 1972		
PRODUCER	CONTACT Frazier Insurance Agency, Inc.	
Frazier Insurance Agency, Inc.	PHONE (A/C, No, Ext): (804) 754-7610 FAX (A/C, No): (804)	754-7613
P.O. Box 1250 Midlothian, VA 23113-1250	E-MAIL ADDRESS: ifrazier@frazierinsurance.com	
•	INSURER(S) AFFORDING COVERAGE	NAIC#
	INSURERA: Aegis Security Insurance Company	33898
INSURED Sports and Special Event Risk Purchasing Group, Inc.	INSURER B:	
Roy Hobbs Diamond Enterprises LLC	INSURERC:	
DBA Roy Hobbs Baseball	INSURERD:	
4301-100 Edison Ave. Fort Myers, FL 33916	INSURERE:	
1 OF 1817 C. 1 C. 303 10	INSURERF:	
COVERAGES CERTIFICATE NUMBER	D. DEVICION NUMBER.	

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.

| ADDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POUCY EFF (MM/DD/YYYY)	POLICY EXP (MIM/DDYYYY)	LIMITS	:	. ,,,,,,,,,
	GENERAL LIABILITY						GENERAL AGGREGATE	\$	2,000,000.00
	X COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	5	2,000,000.00
١.	CLAIMS-MADE X OCCUR			Policy # FGLSP-100-18			PERSONAL & ADV INJURY	5	1,000,000.00
Α				Cert #FFL-S-0030	01/01/2019	01/01/2020	EACH OCCURRENCE	ş	1,000.000.00
	X INCLUDES ATHLETIC PARTICIPANTS			OCIL#4 E-O-0000		12:01 AM	DAMAGE TO RENTED PREMISES	s	300,000.00
	GENL AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person)	s	5,000.00
	X SCLICY PRO- JECT LOC							\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANYAUTO						BODILY INJURY (Per person)	\$	
	ALLOWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	s	
	HIRED AUTO NON-CWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
<u> </u>								\$	
	UMBRELLALIAB OCCUR						EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE		l				AGGREGATE	\$	
	DED RETENTION S							\$	
		ĺ	i					\$	
								\$	
								\$	
								\$	
Α	Excess Accident Medical	.		FR0348	04/04/0040	1 1	LIMIT	\$	10,000.00
	LACCOS ACCIDENT INEURA			FR0340	01/01/2019		AD&D DEDUCTIBLE	s s	10,000.00 100.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

Host Liquor coverage is included on the policy

Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

Lee County Board of Commissioners PO Box 398	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Ft. Myers, FL 33902	AUTHORIZED REPRESENTATIVE
	John W. Frazier

CANCELLATION

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CERTIFICATE HOLDER



DATE: (MM/DD/YYYY) 12/27/2018

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 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).

originate notice in acc of accidence interior.						
PRODUCER	CONTACT NAME: Frazier Insurance Agency, Inc.					
Frazier Insurance Agency, Inc.	PHONE (A/C, No, Ext): (804) 754-7610 FAX, No): (804) 754					
P.O. Box 1250 Midlothian, VA 23113-1250	E-MAIL ADDRESS: ifrazier@frazierinsurance.com					
indication, and zon to 1200	INSURER(S) AFFORDING COVERAGE	NAIC#				
	INSURERA: Aegis Security Insurance Company	33898				
INSURED Sports and Special Event Risk Purchasing Group, Inc.	INSURER 6:					
Day Habba Diamond Enterprises II C	INSURERC:					
Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball	INSURERD:					
4301-100 Edison Ave.	INSURERE:					
Fort Myers, FL 33916	INSURERF:					
COVERAGES CERTIFICATE NUMBER:	REVISION NUMBER:					

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.

INSR LTR	TYPE OF INSURANCE	ADDL S	SUBR WVD	FOLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/OD/YYYY)	LIMITS	
	GENERAL LIABILITY						GENERAL AGGREGATE	\$ 2,000,000.00
	X COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
1	CLAIMS-MADE X OCCUR						PERSONAL & ADV INJURY	\$ 1,000.000.00
A				Policy # FGLSP-100-18	01/01/2019		EACH OCCURRENCE	\$ 1,000.000.00
	X INCLUDES ATHLETIC PARTICIPANTS			Cert #FFL-S-0030		12:01 AM	DAMAGE TO RENTED PREMISES	s 300,000.00
İ	GENLAGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person)	s 5,000.00
	X POLICY PRO-							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea socident)	\$
	OTUA YNA						BODILY INJURY (Per person)	\$
	ALLOWNED SCHEDULED		İ				BODILY INJURY (Per accident)	S
	HIRED AUTO NON-OWNED AUTOS						PROPERTY DAMAGE (Peraccident)	\$
								\$
	UMERELLALIAB OCCUR						EACH OCCURRENCE	\$
Ì	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
	DED RETENTION \$	1						\$
								\$
								\$
								\$
								\$
							LIMIT	s 10,000.00
A	Excess Accident Medical			FR0348	01/01/2019	01/01/2020 12:01 AM	AD&D DEDUCTIBLE	s 10,000.00 s 100.00
	<u> </u>	1			1	12.017191	DEDUCTIBLE	,,,,,,,

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

Host Liquor coverage is included on the policy

CERTIFICATEHOLDER	CANCELLATION
Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
4301-100 Edison Ave. Fort Myers. FL 33916	AUTHORIZED REPRESENTATIVE
1 311111, 413, 1 2 433 13	John W. Frazier

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DATE: (MM/DD/YYYY) 12/27/2018

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IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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).

certificate f	nolder in lieu of such endorsement(s).							
PRODUCER	RODUCER		CONTACT Frazier Insurance Agency, Inc.					
	Frazier Insurance Agency, Inc.	PHONE (A/C, No, Ext):	(804) 754-7610	FAX (A/C, No): (804) 754-7613				
	P.O. Box 1250	0.000 March 1961 William	frazier@frazierinsurance.com					
	Midlothian, VA 23113-1250		INSURER(S) AFFORDING COVERAGE					
		INSURERA: Aegis Security Insurance Company			33898			
INSURED	orts and Special Event Risk Purchasing Group, Inc.	INSURER B:						
Эр		INSURERC:						
	Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball	INSURERD:						
	4301-100 Edison Ave.	INSURERE:						
	Fort Myers, FL 33916	INSURERF:						
COVERAGE	S CERTIFICATE NUMBER:	,	REVISION NUM	BER:				
COVERAGE	or or or or or or or or or or or or or o		NIGUES MANES ASS	VE FOR THE DO	DUCY PERIOD			

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.

	CLUSIONS AND CONDITIONS OF SUCH	ADDL		LIMITS SHOWN MAY HAVE BEEN REDUC	POLICY EFF	POLICY EXP	LIMITO	and the second
INSR	TYPE OF INSURANCE	INSR	WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS	
LIIX	GENERAL LIABILITY						GENERAL AGGREGATE	\$ 2,000,000.00
	X COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
	CLAIMS-MADE X OCCUR						PERSONAL & ADV INJURY	\$ 1,000.000.00
Α				Policy # FGLSP-100-18	01/01/2019	01/01/2020	EACH OCCURRENCE	\$ 1,000.000.00
, .	X INCLUDES ATHLETIC PARTICIPANTS			Cert #FFL-S-0030		12:01 AM	DAMAGE TO RENTED PREMISES	\$ 300,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person)	\$ 5,000.00
	X POLICY PRO- LOC							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO						BODILY INJURY (Per person)	\$
	ALLOWNED SCHEDULED						BODILY INJURY (Per accident)	\$
	AUTOS AUTOS HIRED AUTO NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
	Acres							\$
	UMBRELLALIAB OCCUR						EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
	DED RETENTION \$	1						\$
								\$
								\$
								\$
								\$
			1			F - 92 - 1722 - 1784	LIMIT	s 10,000.00
Α	Excess Accident Medical			FR0348	01/01/2019	01/01/2020	AD&D	\$ 10,000.00 \$ 100.00
						12:01 AM	DEDUCTIBLE	\$ 100.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

Host Liquor coverage is included on the policy

Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. PO Box 398 Ft. Myers, FL 33902 AUTHORIZED REPRESENTATIVE John W. Frazier	CERTIFICATE NOLDER	C) II (CLLL) (TIO)
Ft. Myers, FL 33902 AUTHORIZED REPRESENTATIVE	Lee County Board of Commissioners	THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN
	Ft. Myers, FL 33902	

CANCELLATION



DATE: (MM/DD/YYYY) 12/27/2018

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Certificate						
PRODUCER		CONTACT Frazier Insurance Agency, Inc.				
	Frazier Insurance Agency, Inc.	PHONE (A/C, No, Ext): (804) 754-7610 FAX (A/C, No): (80			754-7613	
	P.O. Box 1250	Company of the control of the contro	frazier@frazierinsurance.com			
	Midlothian, VA 23113-1250		BE .	NAIC #		
	2	INSURER A:	SURERA: Aegis Security Insurance Company			
INSURED	ports and Special Event Risk Purchasing Group, Inc.	INSURER B:		8		
		INSURERC:	1 10			
	Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball	INSURERD:	ž			
	4301-100 Edison Ave.	INSURERE:				
	Fort Myers, FL 33916			- 8		
			DEVICION NUM	IDED:		

CERTIFICATE NUMBER: COVERAGES

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.

INSR LTR	TYPE OF INSURANCE		SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	* 1880 19 TOOL * 1 TOOL TOOL
A	GENERAL LIABILITY	NOVI	VVVL				GENERAL AGGREGATE	\$ 2,000,000.00
	X COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
	CLAIMS-MADE X OCCUR						PERSONAL & ADV INJURY	\$ 1,000.000.00
	CLAINS-MADE COOCH			Policy # FGLSP-100-18	01/01/2019	01/01/2020	EACH OCCURRENCE	\$ 1,000.000.00
	X INCLUDES ATHLETIC PARTICIPANTS			Cert #FFL-S-0030		12:01 AM	DAMAGE TO RENTED PREMISES	\$ 300,000.00
	BEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person)	\$ 5,000.00
	X POLICY PRO-							\$
	AUTOMOBILE LIABILITY	+	\vdash				COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO						BODILY INJURY (Per person)	·\$
	ALLOWNED SCHEDULED AUTOS AUTOS					167	BODILY INJURY (Per accident)	\$
	AUTOS AUTOS HIRED AUTO AUTOS AUTOS						PROPERTY DAMAGE (Per accident)	\$
	AUTOS				5			\$
	UMBRELLALIAB OCCUR						EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
	DED RETENTION \$	1						\$
								\$
				r.				\$
								\$
				9.				\$
Α							LIMIT	\$ 10,000.00
	Excess Accident Medical			FR0348	01/01/2019	01/01/2020 12:01 AM	AD&D DEDUCTIBLE	\$ 10,000.00 \$ 100.00

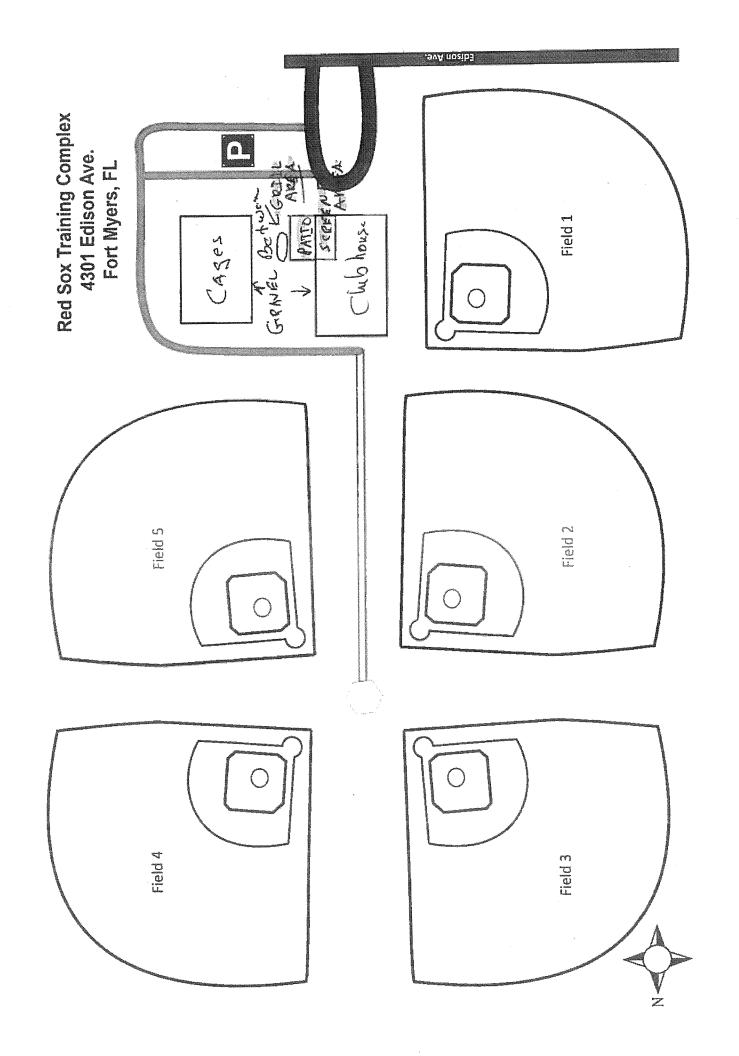
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

Host Liquor coverage is included on the policy

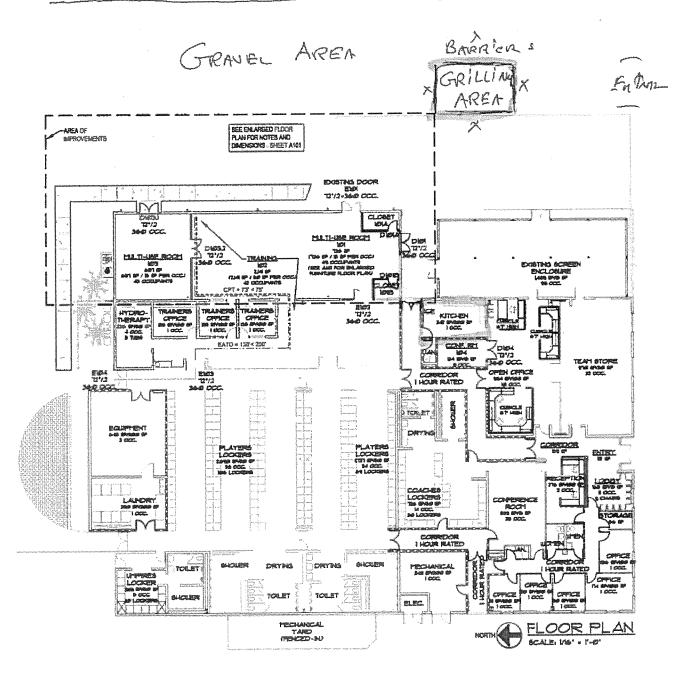
CERTIFICATE HOLDER	CANCELLATION			
Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
4301-100 Edison Ave. Fort Myers, FL 33916	AUTHORIZED REPRESENTATIVE			
1 of this city 1 2 000 10	John W. Frazier			

CANCELLATION

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BATTING CAZES



"Exhibit A"

