



EVENT PERMIT

Ordinance 17-08



One Small Step

PERMIT NUMBER: TMP2019-00044

Date(s) of Event: February 17, 2019 from 9:30am until 4:00pm

Property Owner: LEE COUNTY

Applicant: Amanda Tokarski
815-272-7181

Description: Event with bounce houses, obstacle course, fun walk, face painting, food trucks, silent auction

Location of event: 9200 CORKSCREW PALMS BLVD, ESTERO, FL 33928
Estero Community Park

Will the event be attended by 1000 or more people ? No

Will the event be held on County Owned Property ? Yes

Will there be alcohol consumed or sold at the event ? No

Will a bond be posted for this event ? No

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners
Lee County, Florida

 2-1-19
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

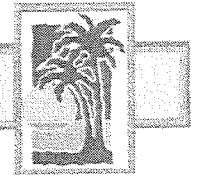
Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

ONE SMALL STEP

Lee County Event Permit Application



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 I - GENERAL INFORMATION (All Permit Types)

Title of Event / Name of Production	One Small Step
Date(s) of Event / Production:	February 17, 2019
Location(s) of Event:	Estero Community Park 9200 Corkscrew Palms Blvd Estero
Name of Applicant:	Amanda Tokarski
Applicant Address:	20485 Larino Loop Estero FL 33928
Applicant Phone Number:	815 272-7181
Contact Person: (If different from applicant)	"
Contact Phone Number: (If different from applicant)	"
Email Address:	tokarski.amanda@gmail.com
Estimated Attendance:	200

Event Include each activity, when activities take place, etc.	9:30 am Registration Bounce Houses, obstacle course, fun walk, face painting, food trucks, silent auction 9:30a-3p
Hours of Operation:	9:30am - 4pm
STRAP # of Parcel:	
Owner of Premises*:	

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

Lee County Event Permit Application



Fill out the following questions for all permit types:

What is the Zoning Classification of the premises?

Park

Are any temporary structures to be installed for the event?

☒ Yes

☐ No

Type:

bounce house

☒ Yes

☐ No

Do you have the appropriate permits for the temporary structures?

* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event:

NFP Property & Casualty
PKA Low & Johnson Inc.

Note: Certificate of Insurance must be submitted at time of application

Surety Company Bonding this Event (Name and Address):

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.

Name & Address of Organization Providing

Food:

Up North Doggs & JewBans Deli

Type of Food being Served:

hot dogs, sandwiches, burgers.

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Foundation for Prader-Willi Research

Fill out this portion for applications for Solicitation in the County Rights-of-Way:

Name of Charity: One Small Step / Foundation for Prader-Willi Research

Address of Charity: 340 S. Lemon Avenue # 3620, Walnut, CA 91789

Phone Number: 812-929-9997 - Sarah Peden

Non-profit certificate/registration number: 31-1763110

(Proof of registration with the Dept. of Agriculture & Consumer Services §496.405 or proof the organization is exempt from this requirement. §316.2045)

Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property?

☐ Yes

☒ No

If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number:

(Required if alcohol is to be **SOLD** at the event)

Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details

Lee County Event Permit Application



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply):

- ☐ TV Movie or Special ☐ TV Series / Pilot ☐ TV Commercial ☐ Still Photos
- ☐ Public Service Announcement ☐ Industrial / Documentary ☐ Other: _____

Will any of the following be needed or included*?

Street Closure

☐ Yes ☒ No

Traffic / Crowd Control

☐ Yes ☒ No

Fire or Burning

☐ Yes ☒ No

Explosives or Pyrotechnics

☐ Yes ☒ No

Animals, Large or Small

☐ Yes ☒ No

Construction of Any Kind

☐ Yes ☒ No

Large and/or Numerous Vehicles

☐ Yes

☒ No

Helicopters, Boats, etc.

☐ Yes

☒ No

Stunts

☐ Yes

☒ No

Other

☐ Yes

☐ No

* 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 in Cast: _____ Number in Crew: _____ Number of locals hired: _____

Total budget: _____ Estimate amount spent in Lee County: _____

Hotel room nights: _____ Number of shooting days: _____
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 premises 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.

Amanda Tokarski

Signature of Applicant

Amanda Tokarski, host

Print Name of Applicant and Title

Witness

Print Name of Witness

Date

1/17/2019

Date

Lee County Event Permit Application



LEE COUNTY SHERIFF'S DEPARTMENT
14750 SIX MILE CYPRESS PARKWAY
FORT MYERS, FLORIDA 33912
(239) 477-1199

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
☒ USE OF COUNTY PROPERTY PERMIT
☐ PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:

Parking in authorized areas only.

Deputies (How Many?):

None

Fee for Services:

None

Special Arrangements:

None

Print Name: Lt. K. Sonier

Signature:

Lt. K. Sonier 95087

Title:

Special Events, Permits and Details

Date:

1/29/19

Lee County Event Permit Application



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:

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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:

1/29/2019

Lee County Event Permit Application



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

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
☒ USE OF COUNTY PROPERTY PERMIT
☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Treatment Facilities:

None necessary.

Medical Personnel:

None necessary.

Medical Supplies /
Equipment:

None necessary.

Safety Requirements:

No additional precautions necessary.

Fee for Services

Not applicable.

Special Arrangements:

Please call 911 in the event of an emergency. To arrange special event coverage, contact our office at 239 533-3911.

Print Name: Douglas B. Higgins

Signature: Douglas B. Higgins

Digitally signed by Douglas B. Higgins
DN: cn=Douglas B. Higgins, o=Lee County, Department of Public Safety,
ou=Division of EMS, email=dhiggins@leegov.com, c=US
Date: 2019.01.30 16:28:26 -0500

Title: Division Chief

Date: January 30, 2019

Lee County Event Permit Application



DEPARTMENT OF TRANSPORTATION
1500 MONROE STREET
FORT MYERS, FL 33901
(239) 533-8580

Check the appropriate box(es) below:

- ☐ SPECIAL EVENT PERMIT
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☐ FILM PERMIT

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Parking:

Park in designated areas. No event parking on Lee County maintained road rights-of-way.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

None.

Print Name: Bryan Miller

Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller
Date: 2019.01.29 12:17:36 -05'00'

Title: Senior Project Manager

Date: January 29, 2019

Lee County Event Permit Application



LEE COUNTY PARKS AND RECREATION
3410 PALM BEACH BOULEVARD
FORT MYERS, FLORIDA 33916
(239) 533-7275

Check the appropriate box(es) below:

- ☐ SPECIAL EVENT PERMIT
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☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Illumination:

The event organizer is to provide own lighting if needed.

Parking Areas:

All vehicles must use designated parking area in the parking lots. No vehicles on the central lawn area. Organizers may drop off supplies via the service road between the Rec Center and the Chiller area and then remove vehicles. For overflow parking, contact Select Real Estate Office Manager, Stephanie Miller at 239-851-0995 Stephanie@selectre.net and also contact Keith at Collier Association Management 239-793-1643. Must obtain authorization to use their respective parking lots.

Special Arrangements:

No staking of tents or any inflatable devices, must use water barrels or sand bags. Organizers must order a dumpster if food vendors are on site and portable toilets if needed at organizers expense. No Banners or signs are permitted outside of the park boundaries.

Outdoor restrooms open at 7:00 am and close at 9:00 pm

Parks Gates open at 6:00 am

Rec Center restrooms open Sat and Sun at 9:00 am - 5:00 pm

Contact Trever Snearley at 239-771-1079 or the Rec Center at 239-498-0415 for questions

Print Name: Alise Flanjack

Signature:

Alise Flanjack

Title:

Deputy Director

Date:

January 30, 2019

One Small Step
Ester Park
2/17/19

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT
COUNTY ADMINISTRATION BUILDING - 4TH FLOOR
2115 SECOND STREET
FORT MYERS, FLORIDA 33901
(239) 533-2221

Check the appropriate box(es) below:

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Insurance Requirements:

Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.

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: Mike Figueroa

Signature:

Title: Risk Program Manager

Date: January 29, 2019



FOUND-5

OP ID: DO

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/15/2019

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 have ADDITIONAL INSURED provisions or 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).

PRODUCER NFP Property & Casualty FKA Low & Johnson, Inc. 8201 N. Hayden Road Scottsdale, AZ 85258 Deborah Olander, CIC	480-706-7055	CONTACT NAME Deb Olander, CIC, CISR	PHONE (A/C, No, Ext): 480-706-7055	FAX (A/C, No): 480-948-1707
		E-MAIL ADDRESS: deb.olander@nfp.com		
INSURER(S) AFFORDING COVERAGE				NAIC #
INSURER A: Philadelphia Indemnity Ins Co				18058
INSURER B:				
INSURER C:				
INSURER D:				
INSURER E:				
INSURER F:				

INSURED Foundation for Prader
Willi Research
340 S Lemon Ave #3620
Walnut, CA 91789-2706

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	ADDITIONAL INSURED	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> FRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	Y	PHPK1820740	06/10/2018	06/10/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Adv one person) \$ excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		PHPK1820740	06/10/2018	06/10/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ 0		PHUB629246	06/10/2018	06/10/2019	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 PCO Agg \$ 4,000,000
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N <input type="checkbox"/> N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

One Small Step walk on 2/17/19 at Estero Community Park, 9200 Corkscrew Palms Blvd, Estero, FL 33928. Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees and public officials are additional insured for General Liability including Products and Completed Operations

Ok 01/29/2019

CERTIFICATE HOLDER

CANCELLATION

Lee County Board of County Commissioners PO Box 398 Fort Myers, FL 33902	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
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FOUND-5

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01/15/2019

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INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Philadelphia Indemnity Ins Co		18058
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED Foundation for Prader
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	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A				E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

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CERTIFICATE HOLDER

CANCELLATION

Lee County Board
of County Commissioners
PO Box 398
Fort Myers, FL 33902

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

A fun group walk will happen @ 10:30 on the Yellow Trail



ESTERO COMMUNITY PARK

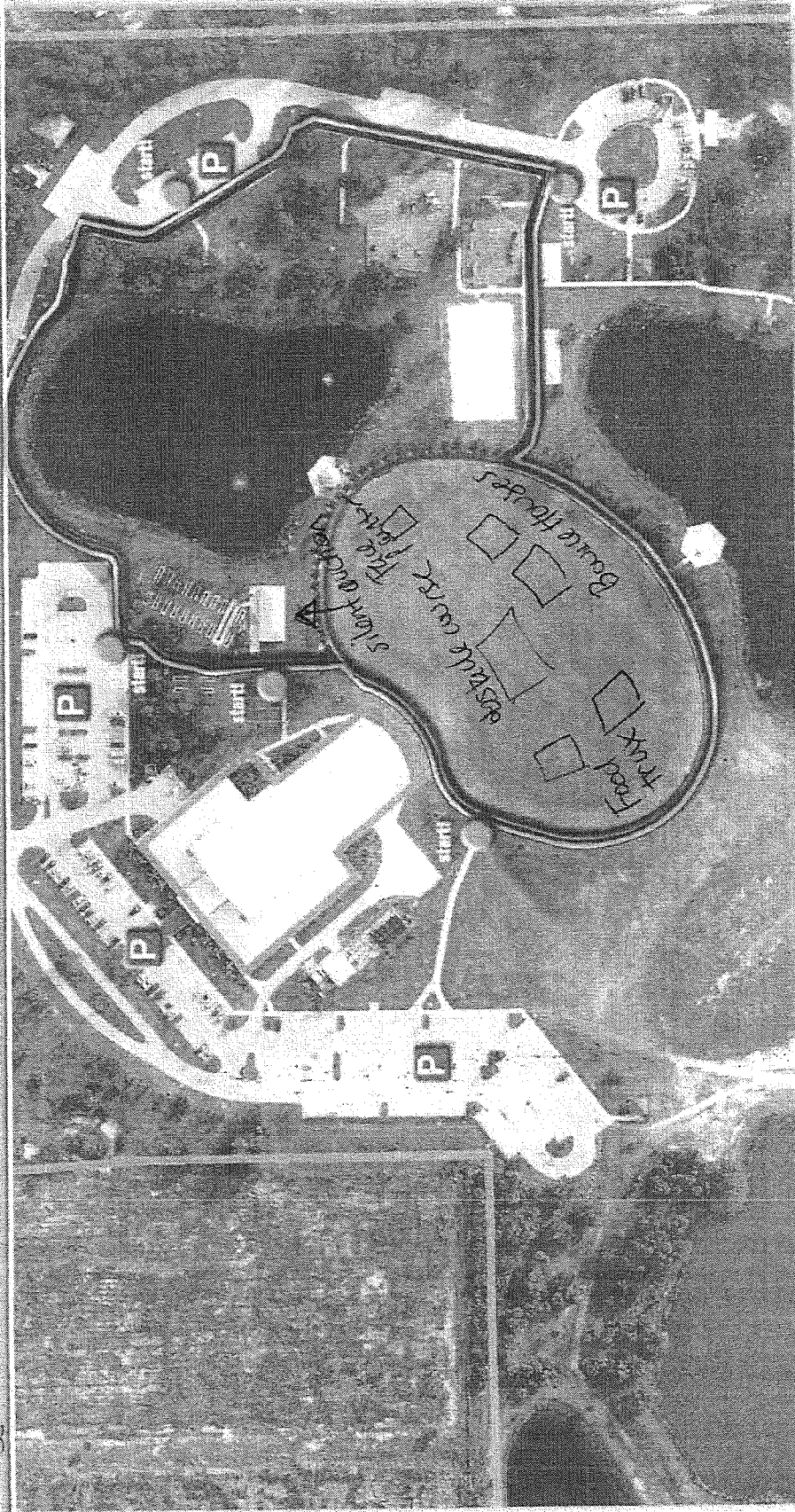
9200 Corkscrew Palms Blvd.

Estero, Florida 33928

239-948-0415



LEE COUNTY
Parks & Recreation



Red Trail = Loop 0.25 mile
Lake Trail = Loop 0.4 mile
Yellow Trail = 1/2 mile



American Heart
Association

Learn and Live

"Lee County Parks & Recreation...The Natural Place To Play"

WWW.LEEPARKS.ORG

FACILITY SALES RECEIPT

Receipt # 448172
 Payment Date: 06/29/2018
 Household: 110482
 Phone: (815)272-7181



AMANDA TOKARSKI
 20485 LARINO LOOP
 ESTERO FL 33928

Terry Park
 3410 Palm Beach Blvd
 Fort Myers FL 33916
 Phone: (239)533-7275
 Visit us on the Web at: www.leeparks.org

Reservation Details: Estero Community Park, Estero Park St/Lawn

Reserv. Contact: Amanda Tokarski
 Phone Number: (815)272-7181
 Reserv. Number: 34877
 Status: Firm

Date(s) And Times	New Fees	Total Fees	New Paid	Total Paid	Amount Due
Sun 02/17/2019 12:00A to 12:00A	500.00	500.00	500.00	500.00	0.00
Deposit:	500.00	500.00	500.00	500.00	0.00

Reservation Details: Estero Community Park, Estero Wedding Gazebo

Reserv. Contact: Amanda Tokarski
 Phone Number: (815)272-7181
 Reserv. Number: 34877
 Status: Firm
 Purpose: event

Date(s) And Times	New Fees	Total Fees	New Paid	Total Paid	Amount Due
Sun 02/17/2019 8:00A to 5:00P	50.00	50.00	50.00	50.00	0.00

Facility Comments

Please have this confirmation receipt with you on the day of your function. Be advised that you have reserved your site for a private event (birthday party, business meeting, family picnic, etc.) If you have reserved for a fundraiser or community event you must contact the booking facility immediately. If you fail to contact the facility you could risk cancellation or postponement of your event.

All decorations must be removed and properly disposed of by the end of the permit. Destruction or damage to facilities or equipment will be cause to refuse future permits and loss of deposit for damages. Lee County reserves the right to cancel the permit, change meeting room or limit space availability without notice and without an adjustment in total cost. This permit is only for the date(s) shown and should not be construed as an ongoing permit.

Alcohol is prohibited. Pets on-leash in designated areas only.

Bands may be allowed by prior approval with written permission of park supervisor. Music should be restricted to your party and not be a nuisance to other park users.

Parking fees may apply at some locations and are not included.

Cancellation/Permit Changes: All cancellations or permit changes must be made by calling the location directly with a minimum of 72 hours prior to permit date. A \$10 cancellation fee will apply.

FACILITY SALES RECEIPT



Receipt # 448172
Payment Date: 06/29/2018
Household: 110482

Processed on 06/29/18 @ 2:04pm by ts1

Total New Deposit Fees	500.00
Total New Fees	550.00
Discount Applied	0.00
Total New Taxes	0.00

Total Due	1,050.00
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Total Deposit Fees Paid	500.00
Total Fees Paid	550.00
Total Taxes Paid	0.00

Total Paid	1,050.00
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Household Balance Information

Overall Household Credit Balance Available	0.00
Overall Household Balance Due	0.00

Payment of: 1,050.00 Made By: VISA/MC Auth: 03501C Card#: xxxxxxxxxxxx4342 With Reference:

Tax ID # (59-6000-702) Note: Cancellation requests are not accepted online, you must call.

Please use our Program Evaluation survey to rate any classes you have taken:
<http://www.surveymonkey.com/s/Program-evaluation>

THIS CHARGE WILL APPEAR ON YOUR CREDIT CARD STATEMENT AS TERRY PARK.