

EVENT PERMIT



Ordinance 17-08

FRANZ/MCDONALD WEDDING

PERMIT NUMBER: TMP2019-00053

Date(s) of Event:

NOVEMBER 1, 2019 ALL DAY AND NOVEMBER 2, 2019

FROM 2:00PM UNTIL 6:00PM

Property Owner:

LEE COUNTY

Applicant:

THOMAS FRANZ

249-895-5338

Description:

REHEARSAL DINNER AT LOUISE DUPONT CROWNINSHIELD COMMUNITY

HOUSE,

WEDDING CEREMONY BANYAN ST

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

Date County Manager

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property

Alcohol within Lee County Facilities

Film, Video & Photography

Franz / McDonald Rehearsal Dinner & Banyan Street Wedding 11/1/19 &11/2/19



Event Application

Check the appropriate box(es) below:

☐ SPECIAL EVENT PERMIT

⋉ USE OF COUNTY PROPERTY PERMIT

PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

| SECTION 1 - OCIACIOAC HAI | ORMATION (All Permit Types) |
|---|---|
| Title of Event / Name of Production | Franz / McDonald Wedding |
| Date(s) of Event / Production: | 11/1/2019 & 11/2/2019 |
| Location(s) of Event: | Crowninshield Community House - Rehearsal Dinner 11/1/19 Banyan Street, Boca Grande - Wedding Ceremony on 11/2/19 |
| Name of Applicant: | Thomas Franz |
| Applicant Address: | 3166 Caroline St. Auburn Hills, MI 48326 |
| Applicant Phone Number: | 249-895-5338 |
| Contact Person: (If different from applicant) | |
| Contact Phone Number: (If different from applicant) | |
| Email Address: | franztho12@gmail.com |
| Estimated Attendance: | 120 |
| Event Description: | Dinner at Crowninshield - Set-up, Reception w/ food, break-down - Full Day Rental |
| Include each activity, when activities take place, etc. | Wedding Ceremony - Set-up, Ceremony, Breakdown |
| Hours of Operation: | All day on 11/1/19, 2:00 PM - 6:00 PM on 11/2/19 |
| STRAP # of Parcel: | 14432001000050010 |
| Owner of Premises*: | Lee County Government |

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



Fill out the following questions for allpermit types:

| What is the Zoning Classification of the p | oremises? Public Facility / Lee County DO | OT Right of Way |
|---|---|---|
| Are any temporary structures to be insta | Illed for the event? Yes No | Type: |
| Do you have the appropriate permits for | the temporary structures? | ☐ Yes No |
| For a 'Special Event' and 'Use of Count indentified, including all parking areas. | y Property' permit, submit a site plan wi | th all proposed facilities and activities |
| Insurance Company Insuring the Event: | TBD | |
| Note: Certificate of Insurance must be submitted | d at time of application | **** |
| Surety Company Bonding this Event (Na | me and Address): | |
| 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 ⋉ 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 be included on the certificate of insurance. |
| Name & Address of Organization Providing Food: | | |
| Type of Food being Served: | | |
| | PORTON OF DANK | |
| Section II - USE OF COUNTY P | KOPEKIT PERWIII | |
| Organization Sponsoring the Event: | | |
| Fill out this portion for applications for | Solicitation in the County Rights-of-Wa | y: |
| Name of Charity: | | |
| Address of Charity: | | |
| Phone Number: | | |
| Non-profit certificate/registration num | hber: | |
| | Consumer Services §496.405 or proof the organization | is exempt from this requirement. §316.2045) |
| Section III - SALE/CONSUMPT | ION OF ALCHOLIC BEVERAGES F | PERMIT |
| Is alcohol being sold/consumed on Cou If Yes, then a "Lee County Alcohol Permit" is required | Inty Property? Only non-profit organizations can sell alcohol on Count | ▼ Yes |
| Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event) | | |
| 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

| oe or Production (choose at TV Movie or Special | TV Series / Pilot | Γ'n | / Comme | rcial 🔀 Still Pho | tos |
|--|--|----------------|------------------|------------------------|--|
| Public Service Announcem | nent Industrial / Documentar | y F o | ther: | | |
| I any of the following be n | eeded or included*? | | | | |
| Street Closure | | 1 | 又 Yes | ┌ No | |
| Traffic / Crowd | Control | 1 | - Yes | ⊠ No | |
| Fire or Burning | | 1 | - Yes | IX No | |
| Explosives or P | yrotechnics | - 1 | [—] Yes | ⊠ No | |
| Animals, Large | or Small | | - Yes | ⊠ No | |
| Construction o | f Any Kind | | — Yes | ⊠ No | |
| Large and/or N | lumerous Vehicles | 1 | [—] Yes | ⊠ No | |
| Helicopters, Bo | ats, etc. | 1 | ─ Yes | ⊠ No | |
| Stunts | | | T Yes | ∏ No | |
| Other | | | — Yes | ⊼ No | |
| Special Parking Requireme | nts: | | | | |
| | | | | | |
| City or County Services Re | quired: (Personnel, equipment, fa | cilities, etc. |) | | |
| | | | | | |
| | | | | | |
| | is required for local and state reco res are not available, please estima | | | | economic impac |
| Number in Cast: | Number in Crew | • | Nu | ımber of locals hired: | |
| Total budget: | Estimate amount | t spent in Le | e County: | | |
| Hotel room nights: | Number of shoot | ting days: | | | 22.000 22.000 20.0000 20.000 20.000 20.000 20.000 20.000 20.000 20.000 20.000 20.000 20.0000 20.0000 20.000 20.000 20.000 20.000 20.000 20.000 20.000 20.000 20.000 20.000 20.000 |
| | | 0 | | | |

number of rooms x number of nights

Applicant Agreement - Signature Required



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted permises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

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.

| Thomas F | Kelly McDorald Witness |
|-----------------------------------|------------------------|
| Signature of Applicant | Witness |
| Thomas Franz | Kelly McDonald |
| Print Name of Applicant and Title | Print Name of Witness |
| 6-11-19 | 6/11/18 |
| Date | Date |



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

| Check the appropri | ate box(es) be | low: |
|---|----------------------|--|
| ☐ SPECIAL EV | /ENT PERMIT | |
| ∇ USE OF CO | UNTY PROPERTY | PERMIT |
| F PERMIT TO | SELL AND CONS | SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES |
| FILM PERM | | |
| AFTER REVIEWING THE WILL REQUIRE THE APP | APPLICATION, I | PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT. |
| Parking: | Parking in author | prized parking areas only. |
| , | | |
| Deputies (How Many?): | Two deputies fo | r road closure, traffic control and security on Banyan Street between Park Ave |
| | and Gilchrist Wh | ile wedding takes place. |
| | | |
| | | the state of the second state and the second state of the second s |
| Fee for Services: | Traffic detail is \$ | 58/hr per deputy with a four hour minimum. |
| | | |
| | Each and of Bar | nyan Street must be blocked in order to provide safety and security to |
| Special Arrangements: | participants. All | chairs, tables and other items used for the event must be removed from the |
| | roadway as soo | n as possible in order to reopen Banyan Street. |
| | | |
| | , controversion | |
| | | |
| | | |
| | Print Name: | Lt. K. Sonier |
| | Signature: | J. Ju Jon 95087 |
| | Title: | Special Events, Permits and Details |
| | Date: | 1/2/19 |
| | | |



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 appropriate box(es) below:

F SPECIAL EVENT PERMIT

X USE OF COUNTY PROPERTY PERMIT

| FILM PERM | IT | |
|---|---|--|
| | | ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WITH FOR THEIR EVENT. |
| Fire Guards (How Many?) | 2 fire guard | ds @ 4 hours each |
| ee for Services: | \$60.00 /ho | our per guard. Total \$480.00 |
| | Contact N | ancy at BGFD to make arrangements for payment. |
| Flammable Vegetation: | anne di panne de la constitució de la c | |
| First Aid Equipment: | | |
| | | |
| Fire Extinguishing: | L | |
| Special Arrangements: | on Banyan St. Pei immediate removances to emerger | per of guests and chairs, the Permit holder must hire fire guards to be an St in case of emergency. In the event that access is needed on Banyan II stop the ceremony and co-ordinate removal of guests/items/etc. placed rmit holder must have a team available, on site, to facilitate the val of all items/guests. Any damage to BGFD vehicles while making ncy will be the responsibility of the permit holder. In case of Emergency DIAL 911 |
| | Print Name: | C.W. Blosser |
| | Signature: | C. Blom |
| | Title: | Fire Chief |
| | Date: | 01/15/2019 |
| and a principal operation of a second of the second | Marketine in the second marketing in the second | |



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

| SPECIAL EVENT PERMIT USE OF COUNTY PROPERTY PERMIT FILM PERMIT AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Treatment Facilities: None necessary. | |
|--|----------------------|
| AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Treatment Facilities: None necessary. | |
| AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Treatment Facilities: None necessary. | |
| WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Treatment Facilities: None necessary. | |
| | R ORGANIZATION |
| Mara possessi | |
| Medical Personnel: None necessary. | |
| Medical Supplies / None necessary. Equipment: | |
| 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, co 239 533-3911. | ontact our office at |
| Print Name: Douglas B. Higgins | |
| Signature: Douglas B. Higgins Stronger 124 (Douglas & Hoggers Department of The Configuration Angains on Fundament of The Configuration Angains on Fundament Configuration (Fundament Configuration Co | |
| Title: Division Chief | |
| Date: 12-28-2018 | |



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

| Check the approprie | ate box(es) belo | ow: | | |
|--|--|---|--|-----------------|
| ☐ SPECIAL EV | ENT PERMIT | | | |
| ☑ USE OF CO | UNTY PROPERTY | PERMIT | • | |
| F PERMIT TO | SELL AND CONSU | JME ALCOHOLIC BEVER | AGES WITHIN LEE COUNTY FAC | CILITIES |
| FILM PERM | IT | | | |
| AFTER REVIEWING THE WILL REQUIRE THE APPL | APPLICATION, PI | LEASE INDICATE BELOV LY WITH FOR THEIR EVI | W WHAT ARRANGEMENTS YOU ENT. | JR ORGANIZATION |
| Parking: | Park in designated | areas. No event parking on | the Banyan Street road right-of-way. | |
| | - | | | |
| | STREET, STREET | | and the second seco | |
| Ingress and Egress: | Use all established | means of ingress and egre | 55. | |
| | Management | | | |
| | | | | |
| | | | | |
| Special Arrangements: | Use Lee County Sh | neriff's Office for assistance | with traffic control. | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | and the second s | |
| | | | | |
| | Print Name: | Bryan Miller | | |
| | Signature: | Bryan D. Miller | Digitally signed by Bryan D. Miller Date: 2018.12.26 10:48:20 -05'00' | |
| | Title: | Senior Project Manager | | |
| | Date: | December 26, 2018 | | |

Franz / McDonald Rehearsal Dinner & Banyan Street Wedding 11/1-11/2/19

Lee County Event Permit Application



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

| Check the appropri | ate hox(es) held | PW/* * | | | |
|---|---|---|--|---------------------------|--|
| SPECIAL EV | | | | | |
| , | UNTY PROPERTY I | PERMIT | | | |
| * ' | | | BEVERAGES | WITHIN LEE COUNTY | FACILITIES |
| FILM PERM | IIT | | | | |
| AFTER REVIEWING THE WILL REQUIRE THE APP | | | | AT ARRANGEMENTS ' | YOUR ORGANIZATION |
| Illumination: | No open flames ald | oud on premises. A | Any additiona | I lighting must be provid | ed by permit holder. |
| | No illumination on t | irees or busnes On | i Banyari Stre | et | |
| | | | | | |
| Parking Areas: | Use Community H | ouse parking lot an | d existing pa | rking at the Boca Grand | e Community Park and |
| Special Arrangements: | Guests must stay of Deputies required All trash must fit in Must provide insuland guidelines see Alcohol must be reception. | on County property I entire length of w into two 90 gallon g urance with Lee Co et forth by the Loise contained inside of | at all times edding ceren parbage containing the parbage containing the parbage containing the Louise Containing the Louise Containing Containi | ainers provided by the C | community House. d and adhere to all rules sentative. ouse during the |
| | Print Name: | Jesse Lavender | <i></i> | Joe Wier | |
| | Signature: | Jun Jav | <u></u> | | |
| | Title: | <i>O</i> Director | | Supervisor | |

12/20/18

Date:

12/20/18



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

| Check the appropriat | e box(es) belo | ow: |
|--|---|---|
| ☐ SPECIAL EVER ☐ USE OF COUN ☐ PERMIT TO SI ☐ FILM PERMIT | NTY PROPERTY ELL AND CONSU | PERMIT IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES |
| AFTER REVIEWING THE A WILL REQUIRE THE APPLIC | PPLICATION, PI CANT TO COMPI | LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT. |
| nsurance Requirements: | occurrence to pro | eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County. |
| Special Arrangements: | A Certificate of Ir Board of County additional insure Subject to proof | |
| | Print Name: | Mike Figueroa |
| | Signature: | Party Join |
| | Title: | Risk Program Manager |
| | Date: | December 20, 2018 |

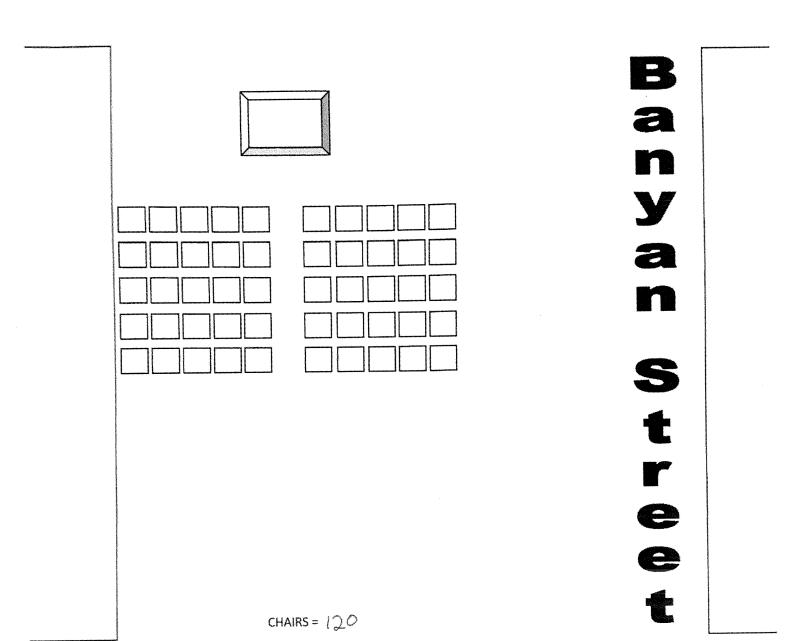


CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/28/2018 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(les) 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). CONTACT NAME: Mass Merchandising PHON 866-267-5244 260-459-5502 (A/C, No): K&K Insurance Group, Inc. (A/C, No, Ext): 1712 Magnavox Way weddings@kandkinsurance.com ADDRESS: PRODUCER CUSTOMER ID: Fort Wayne, IN 46804 INSURER(S) AFFORDING COVERAGE NAIC # 23787 INSURER A: Nationwide Mutual Insurance Company INSURED INSURER B: Tommy Franz 3166 Caroline St INSURER C: Aubum Hills, MI 48326 INSURER D A Member of the Sports, Leisure & Entertainment RPG INSURER E: INSURER F: **CERTIFICATE NUMBER: W01347398** 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. POLICY EFF (MM/DDYYYY) **POLICY EX** HIMITS ADDL SUBR POLICY NUMBER TYPE OF INSURANCE (MM/DD/YYYY) LTR FACH OCCURRENCE \$1,000,000 6BWED0000006938500 11/02/2019 11/03/2019 COMMERCIAL GENERAL LIABILITY Х 12:01 AM EDT 12:01 AM DAMAGE TO RENTED PREMISES (Ea Occurrence) \$1,000,000 \$5,000 MED EXP (Any one person) \$1,000,000 PERSONAL & ADV INJURY Host Liquor Liability Included \$5,000,000 GENERAL AGGREGATE GENT AGGREGATE LIMIT APPLIES PER PRODUCTS - COMP/OP AGG \$1,000,000 POLICY LEGAL LIAB TO PARTICIPANTS COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY (Ea accident) BODILY INJURY (Per person) ANY AUTO SCHEDULED AUTOS NON-OWNED AUTOS ONLY BODILY INJURY (Per accident) OWNED AUTOS ONLY PROPERTY DAMAGE AUTOS ONLY EACH OCCURRENCE OCCUR UMBRELLA LIAB AGGREGATE CLAIMS-MADE RETENTION DED OTHER WORKERS COMPENSATION AND N/A STATUTE **EMPLOYERS' LIABILITY** E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER E.L. DISEASE - EA EMPLOYEE EXCLUDED? (Mandatory in NH) ELL DISEASE - POLICY LIMIT If yes, describe under DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 161, Additional Remarks Schedule, may be attached if more space is required) If the event continues past 12:01 am at the location named on the certificate of insurance, such continuation shall be considered as the event date. The event includes set up and break down, at the event location, that occurs no more than 24 hours prior to the event or 24 hours after the event. The event also includes the rehearsal or rehearsal dinner if scheduled within 48 hours of the event, if the event is a wedding. Liquor Liability (as provided by CG 00 01 04 13) applies only if the insured is not in the business of manufacturing, distributing, selling, serving or furnishing Property Damage Liability, as provided by this policy (including Damage to Premises Rented to You), is subject to a \$1,000 per occurrence deductible. The certificate holder is added as an additional insured, but only for liability caused, in whole or in part, by the acts or omissions of the named insured. CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED Lee County Board of County Commissioners Ok 12/20/2018 IN ACCORDANCE WITH THE POLICY PROVISIONS P.O. Box 398 Ft Merys, FL 33902 AUTHORIZED REPRESENTATIVE Owner, manager or lessor of the premises Statt herburg

Gilchrist Ave.



Park Ave.