

EVENT PERMIT



Ordinance 17-08

INDIA FEST 2019

PERMIT NUMBER: TMP2019-00101

Date(s) of Event: MARCH 23, 2019 FROM 11:00AM UNTIL 5:00PM

Property Owner:

LEE COUNTY

Applicant:

RAJIV VARSHNEY

239-822-7002

Description:

CULTURAL FESTIVAL FEATURING MUSIC, DANCE AND FOOD OF INDIA

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

ESTERO COMMUNITY PARK

Will the event be attended by 1000 or more people? Yes

Will the event be held on County Owned Property? Yes

Will there be alcohol consumed or sold at the event?

No

Will a bond be posted for this event?

No

Permit Conditions:

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

Board of County Commissioners Lee County, Florida

County Manager Date

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

INDIA FEST 2019

TMP 2019-00101



Event Application

Check the appropriate box(es) belo	N	N
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X	SPECIAL EVENT PERMIT
X	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 India Fest 2019 Production Date(s) of Event / March 23, 2019 **Production:** Estero Recreation Center Location(s) of Event: India Association of Fort Myers Name of Applicant: PO Box 07183 **Applicant Address:** Fort Myers, FL 33919 Applicant Phone Number: 239-822-7002 **Contact Person:** Rajiv Varshney (If different from applicant) **Contact Phone Number:** (If different from applicant) rajiv.varshney@iafortmyers.org **Email Address:** 2000 throughout the day **Estimated Attendance:** Outdoor cultural festival featuring the music, dance, and food of India **Event Description:** Include each activity, when activities take place, etc. 11 a.m. to 5:00 pm **Hours of Operation:** 34-46-25-e4-0100C.017A STRAP # of Parcel: 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	premises? RPD	, ,
Are any temporary structures to be inst	alled for the event?	Type: TENT
Do you have the appropriate permits fo	r the temporary structures?	▼ Yes
* For a 'Special Event' and 'Use of Coun indentified, including all parking areas.	nty Property' permit, submit a site plan wit	th all proposed facilities and activities
Insurance Company Insuring the Event:	Mt. Vernon Fire Insurance Co.	
Note: Certificate of Insurance must be submitte	d at time of application	8
Surety Company Bonding this Event (Na	ame 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	⊠ Yes ☐ No	☐ Yes
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:	ultiple	
Type of Food being Served: Indian Food		
Type of Food being Served.		
Section II - USE OF COUNTY P	ROPERTY PERMIT	
Organization Sponsoring the Event: Inc.	dia Association of Fort Myers	
	r Solicitation in the County Rights-of-Way	y:
Name of Charity:		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration nun	nber:	
(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/CONSUMPT	TION OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being sold/consumed on Coulf Yes, then a "Lee County Alcohol Permit" is required	unty Property? I. Only non-profit organizations can sell alcohol on Count	Yes No
Non-profit certificate/registration nun (Required if alcohol is to be <u>SOLD</u> at the event)	nber:	
	a Division of Alcoholic Beverages and Tobacco may	also be required; please call (239) 344-0885



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

		TV Series / Pilot		TV Commer	Ciai		Still Ph	UlUS	
	rvice Announcement	Industrial / Documentary		Other:					
Vill any of th	e following be needed or	included*?							
	Street Closure			Yes		No			
	Traffic / Crowd Control			[Yes		No			
	Fire or Burning			T Yes	Г	No			
	Explosives or Pyrotechn	CS		☐ Yes	П	No			
	Animals, Large or Small			☐ Yes	Г	No			
	Construction of Any Kind			☐ Yes	П	No			
	Large and/or Numerous	Vehicles		☐ Yes		No			
	Helicopters, Boats, etc.			☐ Yes	П	No			
	Stunts			Yes	П	No			
	Other			Yes		No			
							øs.		
Special Par	rking Requirements:								
Special Par	rking Requirements:						•		
		Personnel, equipment, facil	ities, e	rtc.)			•		
		Personnel, equipment, facil	ities, e	etc.)					
		Personnel, equipment, facil	ities, e	rtc.)					
City or Cou	unty Services Required:(
City or Cou	unty Services Required: (ed for local and state record	s on p	roduction in	Florid ble.	a to t	rack the	e econo	mic impa
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City or Cou	unty Services Required: (ving information is require ry. If exact figures are no	ed for local and state record	s on p	roduction in sely as possik	ole.		rack the	e econo	mic impa
City or Cou The follow the industr	unty Services Required: (ving information is require ry. If exact figures are no	ed for local and state record t available, please estimate	s on p as clo	roduction in sely as possik Nur	ole.			e econo	mic 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 affi	rms that any and all information is accurate to the best of
his/her knowledge.	
Mari	
Tayl	[kind
Signature of Applicant	Witness
Rajiv Varshney Chair BOT	Terna Oxendine
Print Name of Applicant and Title	Print Name of Witness
3/28/19	2/28/19
Date	Date /



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

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

Check the	e appropriate	box(es)	below:
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SPECIAL EVENT PERMIT

FILM PERMIT

USE OF COUNTY PROPERTY PERMIT

Date:

AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only.
Deputies (How Many?):	2 deputies for security 10a-6p 2 deputies for traffic control @ Corkscrew Rd 10a-6p
Fee for Services:	Security rate is \$48/hr per deputy Traffic rate is \$58/hr per deputy There is a 4 hour minimum for each detail.
Special Arrangements:	None
	Print Name: Lt. K. Sonier Signature: 95087 Title: Special Events, Permits and Details



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) below:
X SPECIAL EV	VENT PERMIT
USE OF CC	DUNTY PROPERTY PERMIT
FILM PERM	AUT
AFTER REVIEWING THE AWILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	N/A
Fee for Services:	N/A
Flammable Vegetation:	N/A
First Aid Equipment:	Call 911 for Emergencies
Fire Extinguishing:	Call 911 for Emergencies
Special Arrangements:	
	Print Name: Scott Danielson
	Signature:
	Title: Lt. Fire Prevention
	Date: 3/4/2019



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

Check the appropri	ate box(es) belov	v:
SPECIAL EV	ENT PERMIT	
SE OF CO	UNTY PROPERTY PI	ERMIT
FILM PERM	IT	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE	EASE 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	itions 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 coverage, contact our office at
, , , , , , , , , , , , , , , , , , ,	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins Obterpouglas B. Higgins Obterpougla
	Title:	Division Chief
	Date:	03-01-2019



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

Check the appropri	ate box(es) belo	ow:		
Accesses 1	JNTY PROPERTY		AGES WITHIN LEE COUNTY	FACILITIES
FILM PERM		JIVIE ALCOHOLIC BLVLIN	AGES WITHIN LEE COOKIT	TAGILITIES
lamić "				
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P	LEASE INDICATE BELOW	/ WHAT ARRANGEMENTS	YOUR ORGANIZATION
WILL REQUIRE THE APPL	ICANT TO COMP	LY WITH FOR THEIR EVE		
Darking	No event parking o	n Lee County maintained ro	ad rights-of-way	
Parking:	No event parking o	in Lee County maintained to	ad rights of way.	
ngress and Egress:	Use all established	means of ingress and egress	o.	
Special Arrangements:	Use Lee County Sh	eriff's Office for assistance w	rith traffic control as needed.	
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2019.03.04 08:51:49 -05'00'	
	Title:	Senior Project Manager		
	Date:	March 4, 2019		



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

Check the appropriate box(es) below:

Parties of the state of the	UNTY PROPERTY SELL AND CONS	PERMIT UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	171	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Illumination:	The event organize	er is to provide own lighting if needed.
Parking Areas:	Organizers may dru then remove vehic at 239-851-0995 St	ise designated parking area in the parking lots. No vehicles on the central lawn area. op off supplies via the service road between the Rec Center and the Chiller area and cles. For overflow parking, contact Select Real Estate Office Manager, Stephanie Miller tephanie@selectre.net and also contact Keith at Collier Association Management st obtain authorization to use their respective parking lots.
Special Arrangements:	a dumpster if food or signs are permit Outdoor restroom: Parks Gates open a Rec Center restroo	s or any inflatable devices, must use water barrels or sand bags. Organizers must order vendors are on site and portable toilets if needed at organizers expense. No Banners sted outside of the park boundaries. s open at 7:00 am and close at 9:00 pm at 6:00 am or 5:00 pm or 5
		Alise Flanjack
	Signature: Title:	Abse Flan sek Deputy Director
	Date:	March 4, 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) belo	DW:	
SPECIAL EVEN USE OF COUN PERMIT TO SI FILM PERMIT	NTY PROPERTY I ELL AND CONSU	PERMIT JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	FACILITIES
AFTER REVIEWING THE AWILL REQUIRE THE APPLIC	PPLICATION, PI	LEASE INDICATE BELOW WHAT ARRANGEMENTS LY WITH FOR THEIR EVENT.	YOUR ORGANIZATION
nsurance Requirements:	occurrence to pro	eral liability insurance with minimum limits of One Million Dotect against bodily injury and/or property damage relative event within Lee County.	ollars (\$1,000,000) per to applicants use of
Special Arrangements:	A Certificate of In Board of County (additional insured Subject to proof (erage listing Lee County ertificate holder and as an
	Print Name: Signature:	Mike Figueroa Pake from	
	Title:	Risk Program Manager	
	Date:	March 7, 2019	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/06/2019

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).

lf *h	SUBROGATION IS WAIVED, subject to is certificate does not confer rights to	the c	terms and conditions of the	e policy Ich end	/, certain po orsement(s)	ilicies may r	equire an endorsement.	A Sta	ement on	
	DUCER		CONTACT Gregory Folino							
CoverWallet, Inc.					PHONE (A/C, No, Ext): (646) 844-9933 (A/C, No):					
100 Ave. of the Americas,					E-MAIL ADDRESS: customer.service@coverwallet.com					
Floor 16					INSURER(S) AFFORDING COVERAGE					
					INSURER A: Mount Vernon Fire Insurance Company				NAIC# 26522	
INSURED					INSURER B:					
The India Association of Fort Myers					INSURER C:					
17931 Palm Circle				INSURER D:						
Fort Myers Beach, FL, 33931				INSURER E:						
					INSURER F:					
CO	VERAGES CERT	ATE 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 SUBR INSD WVD		UBR WVD POLICY NUMBER		(MM/DD/YYYY)	FF POLICY EXP (YY) (MM/DD/YYYY) LIMI				
	X COMMERCIAL GENERAL LIABILITY		2				EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,00		
	CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence)	ccurrence) \$ 100,000		
	90.11.000				0011010010	00/40/0000	MED EXP (Any one person)	\$ 5,00	- 27 to 28 out	
Α		Y	NBP2553238	- 1	03/12/2019	03/12/2020	PERSONAL & ADV INJURY	\$ 1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000		
	X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG		00,000	
	OTHER:						COMBINED SINGLE LIMIT	\$		
	AUTOMOBILE LIABILITY						(Ea accident)	\$		
	ANY AUTO						BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS ONLY					16.	BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
	HIRED NON-OWNED AUTOS ONLY		4				(Per accident)	\$		
								\$		
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$		
	DED RETENTION \$						DED OTH	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER OTH- STATUTE ER			
	ANYPROPRIETOR/PARTNER/EXECUTIVE						E.L. EACH ACCIDENT	\$		
	OFFICERIMEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)										
Ok 03/07/2019										
Miles Jogin -										
CERTIFICATE HOLDER CANCELLATION										
Lee County Board of County Commissioners P.O. 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					

