

EVENT PERMIT



Ordinance 17-08

5K Run

PERMIT NUMBER: TMP2019-00158

Date(s) of Event: June 5, 2019 from 5:00pm until 7:00pm

Property Owner:

LEE COUNTY

Applicant:

Russ Kozar

515-720-150

Description:

5K Run and Lakes Park

Location of event: 7330 GLADIOLUS DR, FORT MYERS, FL 33908

LAKES REGIONAL PARK

Will the event be attended by 1000 or more people?

Will the event be held on County Owned Property?

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

No

Yes

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



Event Application

Check the appropriate	e box(es) below:
SPECIAL EVEN	T PERMIT
☑ USE OF COUN	TY PROPERTY PERMIT
PERMIT TO SE	LL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	
Section I - GENERAL INFO	ORMATION (All Permit Types)
Title of Event / Name of Production	5K run
Date(s) of Event / Production:	06/05/2019
Location(s) of Event:	Lakes Regional Park 7330 Gladiolus Drive Fort Myers FL 33908
Name of Applicant:	Russell Kozar
Applicant Address:	5610 Chelsey LN #203 Fort Myers FL 39912
Applicant Phone Number:	515-720-9150
Contact Person: (If different from applicant)	Russ Kolar
Contact Phone Number: (If different from applicant)	
Email Address:	russ@fleetfeetfortmyers.com
Estimated Attendance:	150
Event Description:	5K fun run June 5th, 5pm to 7:30pm

5pm thru 7:30pm

activities take place, etc.

Hours of Operation:

STRAP # of Parcel:

Owner of Premises*:

26 45 24 00000 8 0000

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



Fill out the following questions for all permit types: What is the Zoning Classification of the premises? Public

What is the Zoning Classification of the	premises? Public Park	The second secon
Are any temporary structures to be inst	alled for the event? Tes X No T	ype:
Do you have the appropriate permits fo	r the temporary structures?	T Yes No
* For a 'Special Event' and 'Use of Cour indentified, including all parking areas.	nty Property' permit, submit a site plan wit	h all proposed facilities and activities
Insurance Company Insuring the Event	K&K Insurance Group	
Note: Certificate of Insurance must be submitte		
Surety Company Bonding this Event (N	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?
Ţ 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:		
Section II - USE OF COUNTY I Organization Sponsoring the Event:	PROPERTY PERMIT Cleet Feet Fort Myers or Solicitation in the County Rights-of-Way	
Name of Charity:		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration nu	mber:	
(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/CONSUMP	TION OF ALCHOLIC BEVERAGES F	'EKIVII I
Is alcohol being sold/consumed on Co	ounty Property? ed. Only non-profit organizations can sell alcohol on Coun	Yes 🔀 No
Non-profit certificate/registration nu (Required if alcohol is to be <u>SOLD</u> at the event)		
Please note: A permit from the State of Flori further details	da Division of Alcoholic Beverages and Tobacco may	also be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

ublic Service Announcement	Industrial / Documentary	Other:			
any of the following be need					
Street Closure		☐ Yes	☐ No	I	
Traffic / Crowd Cor	ntrol	┌─ Yes	□ No		
Fire or Burning	and the second s	Yes	┌ No		
Explosives or Pyrot	technics	Yes	L No		
Animals, Large or S	Small	[Yes	No No		
Construction of Ar	ny Kind	Yes	T No		
Large and/or Num	erous Vehicles	Yes	☐ No		•
Helicopters, Boats	, etc.	Yes	┌ No		
Stunts	on the second of the second	Yes	∏ No		
Other		Yes	No		
·					
·					
For any marked Yes, provide Special Parking Requirements City or County Services Requi		s, etc.)			
pecial Parking Requirements City or County Services Requi	: ired: (Personnel, equipment, facilitie	s, etc.)			
Special Parking Requirements City or County Services Requi	: ired: (Personnel, equipment, facilitie	n production i	n Florida to tr sible.	ack the econo	omic imp
Special Parking Requirements City or County Services Requi	: ired: (Personnel, equipment, facilitie	n production (i closely as poss	n Florida to tr sible. umber of locals		omic imp
Special Parking Requirements City or County Services Requi The following information is the industry. If exact figures	: ired: (Personnel, equipment, facilitie required for local and state records o are not available, please estimate as	n production in closely as poss	umber of locals		omic imp

Applicant Agreement - Signature Required



SECTION I - SAFETY

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

SECTION II - INSURANCE

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

SECTION III - INDEMNIFICATION

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

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

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

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

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

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

Signature of Applicant

Print Name of Applicant and Title

5/3/17

Date

Witness

Drint Nama of Witness

2/5/



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

Check the appropriate box(es) below:

☐ SPECIAL EVI ☐ USE OF COI ☐ PERMIT TO ☐ FILM PERM	JNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only.
Deputies (How Many?):	None
Fee for Services:	None
Special Arrangements:	Race must remain within the confines of the park. Print Name: Lt. K. Sonier
	Signature: Special Events, Permits and Details
	Date: 5/7//9

Pays (



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	ate box(es) belo	w:		
SPECIAL EV	ENT PERMIT			
⋉ USE OF CO	UNTY PROPERTY F	PERMIT		
FILM PERN	NIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLI	EASE INDICATE BELC WITH FOR THEIR EV	OW WHAT ARRANGEMENTS ENT.	S YOUR ORGANIZATION
Fire Guards (How Many?)	N/A			
Fee for Services:	N/A			
Flammable Vegetation:	N/A			
First Ald Equipment:	Call 911 if needed.			
Fire Extinguishing:	N/A			
Special Arrangements:	N/A			TO STATE OF THE ST
			and the second s	
	Print Name:	Nate Burley		
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2019.05.06 15:04:11 -04'00'	
	Title:	Division Chief - Fire & L	ife Safety	<u> </u>
	Date:	May 6,2019		_



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

Check the approprie	ate box(es) belov	v:
☐ SPECIAL EV ☐ USE OF COI ☐ FILM PERM	UNTY PROPERTY PE	ERMIT
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	itions 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
		Douglas B. Higgins
	Signature: Title:	Douglas B. Higgins Compared to the Compared of the Compared
	Date:	05-09-19



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

Check the appropri	ate box(es) belo	w:		
SPECIAL EV SUSE OF CO PERMIT TO FILM PERM	UNTY PROPERTY F SELL AND CONSU	PERMIT IME ALCOHOLIC BEVER	RAGES WITHIN LEE COUNTY	FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, PL LICANT TO COMPL	EASE INDICATE BELO Y WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Parking:	No event parking or	n Lee County maintained r	oad rights-of-way.	
Ingress and Egress:	Use all established i	means of ingress and egre	SS.	
Special Arrangements:	None.	and the second s		and the second s
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2019.05.07 14:17:21 -04'00'	
	Title:	Senior Project Manager		
	Date:	May 7, 2019		



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

Check the appropria	te box(es) belo	w:		
PERMIT TO	JNTY PROPERTY P SELL AND CONSU IT	ME ALCOHOLIC BEVER	AGES WITHIN LEE COUNTY I	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL	EASE INDICATE BELOV Y WITH FOR THEIR EV	V WHAT ARRANGEMENTS Y ENT.	OUR ORGANIZATION
Illumination:	Event organizer mus	st provide own lighting if r	needed to safely run the event.	
Parking Areas:		d to display their event pa	reas inside Lakes Park. Parking is rking pass, display their paid parl	first come, first serve. All king receipt or have a
Special Arrangements:	first stations. All tra- No painting or perr directional signs (IE Race course and pa Event banners may	sh and event trash and de nanent markings allowed	on the pathways.	Cavified risc bases
	Print Name:	Alise Flanjack		
	Signature:	Alise Flanjack	Digitally signed by Alise Flanjack Date: 2019.05.07 13:01:44 -04'00'	
	Title:	Deputy Director		
	Date:	May 7, 2019		



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

Check the appropriate	e box(es) belo	w:
☐ SPECIAL EVEN ☐ USE OF COUN ☐ PERMIT TO SI ☐ FILM PERMIT	NTY PROPERTY P ELL AND CONSU	PERMIT ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	PPLICATION, PL CANT TO COMPL	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Insurance Requirements:	laccurrence to pro	ral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per tect against bodily injury and/or property damage relative to applicants use of event within Lee County.
Special Arrangements:	A Certificate of In Board of County (additional insure Subject to proof	
		A STATE OF THE STA
	Print Name:	Mike Figueroa
	Signature:	Mife Jaguer
	Title:	Risk Program Manager
	Date:	May 7, 2019



CERTIFICATE OF LIABILITY INSURANCE

DATE IMMIDDAYYYY) 05/02/2019

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 OF PRODUCTS AND THE CERTIFICATE OF PRODUCTS AND THE CERTIFICATE OF THE CONTRACT BETWEEN THE ISSUING INSURER(S). 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). CONTACT NAME: Mass Merchandising Underwriting PRODUCER PHONE FAX 260-459-5105 800-426-2889 (A/C. No) K&K Insurance Group, Inc. (A,C, No. Ext) E-MAIL info@sportsinsurance-kk.com 1712 Magnavox Way ADDRESS: PRODUCER CUSTOMERID; Fort Wayne IN 46804 MAINE INSURER(S) AFFORDING COVERAGE Nationwide Mutual Insurance Company 23787 INSURER A INSURED INSURER 8 Twisted Pages LLC INSURER C DBA: Flee! Feet Fort Myers 5610 Chelsey Ln. Apt 203 INSURER D Fort Myers, FL 33912 NSURER E A Member of the Sports, Leisure & Entertainment RPG INSURER F REVISION NUMBER: CERTIFICATE NUMBER: W01432447 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 EXP (MM/DD/YYY) HARTS ADDL SUBR POLICY NUMBER MMADDAYYYY TYPE OF INSURANCE INSD WVD LTR 06/06/2019 \$1,000,000 FACH OCCURRENCE 08/05/2019 6BRPG0000006993700 X COMMERCIAL GENERAL LIABILITY 12:01 AM OAMAGE TO RENTEL: PREMISES (Fa:Occurance) 12:01 AM EDT \$1,000,000 CLAIMS-MADE X GCCUR \$5,000 MED EXP Any one parson \$1,000,000 PERSONAL & ADV INJURY GENERAL AGGREGATE \$5,000,000 \$1,000,000 PRODUCTS -- COMPJOE AGC GEN'L AGGREGATE LIMIT APPLIES PER: PROFESSIONAL (WHILITY POLICY LEGAL LIAB TO PARTICIPANTS \$1,000,000 OTHER COMBINED SINGLE LINE AUTOMOBILE LIABILITY BODILY INJURY (Prespensor) ANY AUTO BOOKY (NULTRY (Per accident. OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY PROPERTYDAMAGE (Per regions) NOT PROVIDED WHILE IN HAWAII EACH GOOLIRRENGE UMBRELLALIAB OCCUR AGGREGATE CLAIMS-MADE EXCESS LIAB DED RETENTION STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY N/A EL BACH ACCIDENT ANY PROPRIETOR/PARTNERS EXECUTIVE OFFICER/MEMBER EL DISEASE - EA EMPLOYER EXCLLIDED? (Mandatory in NH) EL DISEASE - POLICY LIMIT If yes, describe under DESCRIPTION OF OPERATIONS belo 06/08/2019 PRIMARY MELICAL 06/05/2019 6BRPGL000006993700 MEDICAL PAYMENTS FOR PARTICIPANTS 12:01 AM EDT 12:01 AM \$25,000 EXCESS MEDICAL DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Legal Liability to Participants (LLP) limit is a per occurrence limit. Event Name: The Big Run Fort Myers Type of Event: Walk and Run Distance:5K Event Date (including ancillary events and set-up/tear-down): 6/5/2019 to 6/5/2019 Number of Participants: 175 Event Location: Lakes Regional Park , 7930 Gladiplus Dr. Fort Myers 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 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN CERTIFICATE HOLDER Lee County B.O.C.O THE EXPIRATION DATE THEREOF, NOTI ACCORDANCE WITH THE POLICY PROVISIONS PO Box 398 OK 05/07/2019 Fort Myers, FL 33902 AUTHORIZED REPRESENTATIVE (Owner/Lessor of Premises)

Coverage is only extended to U.S. events and activities.

and

^{**} NOTICE TO TEXAS INSUREDS. The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas

