

EVENT PERMIT



Ordinance 17-08

ELDER/FIELDING WEDDING & RECEPTION

PERMIT NUMBER: TMP2019-00261

Date(s) of Event: OCTOBER 17, 2020

Property Owner:

LEE COUNTY

Applicant:

SARAH FIELDING

918-237-6410

Description:

WEDDING CEREMONY ON BANYAN STREET RECEPTION AT LOUISE DUPONT

CROWNINSHIELD COMMUNITY HOUSE OCTOBER 17, 2020 FROM 8:00AM

UNTIL 12:00AM

Location of event: 131 1ST ST W, BOCA GRANDE, FL 33921

BANYAN STREET, LOUISE DUPONT CROWNINSHIELD COMMUNITY HOUSE B

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.

oard of County Commissioners County, Florida

ounty Manager Date

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property

Alcohol within Lee County Facilities

Film, Video & Photography

ELDER/FIELDING WEDDING & RECEPTION

TMP 2019- 00261



Event Application

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- ▼ USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELEAND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	ELDER / FIELDING WEDDING & RECEPTION
Date(s) of Event / Production:	OCTOBER 17, 2020
Location(s) of Event:	BANYAN STREET and THE LOISE DUPONT CROWNINSHIELD HOUSE IN BOCA GRANDE
Name of Applicant:	SARAH FIELDING
Applicant Address:	2614 EXECUTIVE WAY, APT. 102 WICHITA, KS 67226
Applicant Phone Number:	918-237-6410
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	SARAHFIELDING92@GMAIL.COM
Estimated Attendance:	45
Event Description: Include each activity, when activities take place, etc.	Wedding Ceremony on Banyan Street 3:30PM - 6:30p (includes set-up, wedding, clean-up Reception at Community House: Set-up 8:00am. Reception & Clean-up12:00pm - 11:59pm
Hours of Operation:	8:00a.m 11:59p.m.
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	he premises? D.O.T RIGHT OF WAY / Public Fa	cility
Are any temporary structures to be in	nstalled for the event? Yes No	Туре:
Do you have the appropriate permits	for the temporary structures?	⊤ Yes
* For a 'Special Event' and 'Use of Co indentified, including all parking area.	unty Property' permit, submit a site plan wit s.	th all proposed facilities and activities
Insurance Company Insuring the Ever	nt: TBD	
Note: Certificate of Insurance must be submi	tted at time of application	
Surety Company Bonding this Event (Name and Address): N/A	
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.
Name & Address of Organization Providing Food:	TBD	
Type of Food being Served: Wedding	Food TBD	
Section II - USE OF COUNTY	PROPERTY PERMIT	
Organization Sponsoring the Event:	N/A	
Fill out this portion for applications f	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 PE	RMIT
Is alcohol being sold/consumed on Co	ounty Property? ed. Only non-profit organizations can sell alcohol on County (☐ Yes ☐ No Property.
Non-profit certificate/registration nu (Required if alcohol is to be <u>SOLD</u> at the event)	mber: N/A CONSUME ONLY	

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



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT N/A

pe of Production (choose all that appl	y):						
TV Movie or Special	TV Series / Pilot	F	T¥ Comme	rcial	_ S	till Photos	
Public Service Announcement	Industrial / Documentary	Г	Other:				
ll any of the following be needed or i	ncluded*?						
Street Closure			Yes	_	No		
Traffic / Crowd Control			┌─ Yes		No		
Fire or Burning			┌ Yes		No		
Explosives or Pyrotechnic	s		T Yes	Γ	No		
Animals, Large or Small			┌ Yes	Г	No		
Construction of Any Kind			Yes	_	No		
Large and/or Numerous V	'ehicles		T Yes	Г	No		
Helicopters, Boats, etc.			Yes		No		
Stunts			T Yes		No		
Other			┌ Yes	_	No		
and Darling David			· · · · · · · · · · · · · · · · · · ·			***************************************	
pecial Parking Requirements:		***************************************		•••	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	***************************************	en de la companya de
ity or County Services Required: (Pe	rsonnel, equipment, facilit	ies, et	c.)				
			***************************************	······································	**************************************		***************************************
~							
he following information is required ne industry. If exact figures are not a	for local and state records vailable, please estimate a	on pro	duction in F ly as possib	lorida le.	to trac	k the econor	nic impac
Number in Cast:	Number in Crew;		Num	ber of	locals h	ired:	
otal budget:	Estimate amount spe	ent in L	ee County:			***************************************	
Hotel room nights:	Number of shooting	days:					
number of rooms x number	-				<u></u>		

Report 3

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.

Southfielding	Non alex
Signature of Applicant	Witness
Sarah Folding	_ Jos Elder
Print Name of Applicant and Title	Print Name of Witness
7/30/2019	7-30-19
Date	Date



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

спеск тпе арргорги	ate box(es) below:
• •	UNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized parking areas only.
Deputies (How Many?):	Two deputies for road closure, traffic control and security on Banyan Street between Park Ave and Gilchrist while wedding takes place.
Fee for Services:	Traffic detail is \$58/hr per deputy with a four hour minimum.
Special Arrangements:	Each end of Banyan Street must be blocked in order to provide safety and security to participants. All chairs, tables and other items used for the event must be removed from the roadway as soon as possible in order to reopen Banyan Street.
	Print Name: Lt. S. Brady Signature: A. Steven T. Strady Title: Special Events, Permits and Details Date: 8-/2-/9



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

FILM PERMIT

TX USE OF COUNTY PROPERTY PERMIT

AFTER REVIEWING THE VILL REQUIRE THE APPLI	APPLICATION, PL	EASE INDICATE BELOW V Y WITH FOR THEIR EVENT.	WHAT ARRANGEMEN	NTS YOUR ORGANIZATION
Fire Guards (How Many?)		None		
ee for Services:		None		
Flammable Vegetation:		None		
First Aid Equipment:		None		
Fire Extinguishing:	รู้เก็บ กระบาทเก็บกร้างเก็บของกับของกับเก็บของกับเก็บของกับของที่สื่อสุดเล	None		
Acceptanticum		None		
Special Arrangements:	and all objects f	EMERGENCY access on I rom the street to allow eme naking access to emergence	orgency vehicle acces y will be the responsit	s. Any damage to BGFD
		In case of emerg	ency - DIAL 911	
y.	Print Name:	C.W. Blosser		gospalastus
	Signature:	CBL		
\$	Title:	Fire Chief	and the second s	unitary de-
	Date:	08/07/2019		



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

Check the appropri	ate box(es) belo	w:							
SPECIAL EV	ENT PERMIT								
▼ USE OF CO	▼ USE OF COUNTY PROPERTY PERMIT								
FILM PERM	1IT								
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL	EASE INDICATE BELOW WHAT ARRANGEMENTS Y WITH FOR THEIR EVENT.	YOUR ORGANIZATION						
Treatment Facilities:	None necessary.		OCCUPATION AND AND AND AND AND AND AND AND AND AN						
Medical Personnel:	None necessary.								
Medical Supplies / Equipment:	None necessary.								
Safety Requirements:	No additional precau	utions necessary.	, was a second and a second a second and a second a second and a second a second and a second and a second a second and a second a seco						
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	e, contact our office at						
	Print Name:	Douglas B. Higgins							
	Signature:	Douglas B. Higgins On confunction Propose and and County Department of Funds Salary County C							
	Title:	Division Chief							
	Date:	08-13-2019							



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

Cneck the approprie	ite box(es) be	iow:		
SPECIAL EV	ENT PERMIT			
▼ USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERA	AGES WITHIN LEE COUNTY	FACILITIES
FILM PERM	IT			
		PLEASE INDICATE BELOW PLY WITH FOR THEIR EVE	/ WHAT ARRANGEMENTS NT.	YOUR ORGANIZATION
Parking:	Park in designated	areas. No event parking on o	or within the Banyan Street righ	t-of-way.
Ingress and Egress:	Use all established	means of ingress and egress	•	30
		,		
Special Arrangements:	Use Lee County Sh	eriff's Office for assistance w	ith traffic control as needed.	
ŗ				
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2019.08.08 14:18:29 -04'00'	
	Title:	Senior Project Manager		
	Date:	August 8, 2019		



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

Check the appropr	iate box(es) be	low:								
SPECIAL EVENT PERMIT										
₩ USE OF CO	☑ USE OF COUNTY PROPERTY PERMIT									
X PERMIT TO	SELL AND CONS	SUME ALCOHOLIC BEVER	AGES WITHIN LEE COUNT	Y FACILITIES						
FILM PERM	ЛІТ									
		PLEASE INDICATE BELOV PLY WITH FOR THEIR EVE	V WHAT ARRANGEMENTS	S YOUR ORGANIZATION						
Illumination: No open flames aloud on premises. Any additional lighting must be provided by permit holder. No illumination on trees or bushes on Banyan Street										
Parking Areas:	Use Community H	ouse parking lot and existing	parking at the Boca Grande C	Community Park and Center						
Special Arrangements:	stay on County pro - All trash must fit i - Must provide insu guidelines set forth - Alcohol must be o Lee County Park	operty at all times into two 90 gallon garbage c urance with Lee County BOC n by the Loise DuPont Crown contained inside of the Louis	orth by LEE COUNTY D.O.T reproperties on tainers provided by the Coron tainers provided by the Coron tains and the control of the control of the coron tails and the coron tails are puty Director approves this also y Park) by signing below.	nmunity House. nd adhere to all rules and s. se.						
	Print Name:	Jesse Lavender	Joe Wier							
	Signature:	Jesse Lavender	Digitally signed by Jesingesh Date: 2019.08.06 17:14:24 -0400	R Wier						
	Title:	Director	Supervisor							
* .	Date:	8/6/19	8/6/19							



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

Check the appropriat	te box(es) be	low:								
SPECIAL EVE	SPECIAL EVENT PERMIT									
⋉ USE OF COU	NTY PROPERTY	PERMIT								
▼ PERMIT TO	ERKXXXXX CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES								
FILM PERMIT	Γ									
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.								
Insurance Requirements:	occurrence to pr	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.								
	(\$1,000,000) per	Liquor Liability insurance will be required with minimum limits of One Million Dollars occurrence. Should Host Liquor Liability coverage be afford under the Commercial policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.								
Special Arrangements:										
	Print Name: Signature: Title:	Mike Figueroa Thiku Jujiu Risk Program Manager								
	Date:	August 9, 2019								



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/07/2019

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 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).

PRO	DUCER		, ,		CONTAC NAME:	Robert	V. Nuccio			
R١	/ Nuccio and Associates				PHONE (A/C, No, Ext): (800) 364-2433 FAX (A/C, No): (818) 980-1595) 980-1595
10:	148 Riverside Drive				E-MAIL ADDRES	s: suppor	t@rvnuccio.			
Tol	uca Lake, CA 91602					1.6	URER(S) AFFOR	DING COVERAGE	1, 3, 75	NAIC#
					INSURE			rance Company		21873
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Sa	rah Fielding				INSUREI					
26	14 North Executive Way Apt 102				INSUREI	17.5			5 35 4	But the state
Wio	chita, KS 67226				INSURE					
					INSURE		1 3 1 W			
00	VERAGES CER	TIFIC	CATE	NUMBER:	INCORE			REVISION NUMBER:		
T IN C E	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY I XCLUSIONS AND CONDITIONS OF SUCH	OF I QUIF PERT POLI	NSUF REME AIN, CIES.	RANCE LISTED BELOW HA'NT, TERM OR CONDITION THE INSURANCE AFFORD	OF ANY	CONTRACT THE POLICIES EDUCED BY F	THE INSURE OR OTHER DESCRIBED PAID CLAIMS.	DOCUMENT WITH RESP	ECT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIM	TS	
Α	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY	· √		OLP1041101		10/17/2020	10/19/2020	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
	CLAIMS-MADE ✓ OCCUR		14.		. 1			MED EXP (Any one person)	S	None
	✓ Host Liquor Incl							PERSONAL & ADV INJURY	\$	1,000,000
	Tiost Eighor mor		ě.			, L. (1)		GENERAL AGGREGATE	s	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:		1.5	# 5 K S			Die Wie	PRODUCTS - COMP/OP AGG		1,000,000
	POLICY PRO- JECT LOC							COMBINED SINGLE LIMIT	\$	
	AUTOMOBILE LIABILITY		1.7		91114.		1 E	(Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	ALL OWNED SCHEDULED AUTOS NON-OWNED		1.	ROTA ARK		14-74		BODILY INJURY (Per accident PROPERTY DAMAGE	-	
	HIRED AUTOS AUTOS				-		,	(Per accident)	\$	
			_						\$	11. 1 2. 1
	UMBRELLA LIAB OCCUR						× × ×	EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE		400	pactor that				AGGREGATE	\$	1 1 1 1 1 1 1 1 1
	DED RETENTION \$							I WC STATIL OTH	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N				46.7%	11.44		WC STATU- TORY LIMITS ER	1 1 1 1 1	91 7 10 5 1
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$	
	(Mandatory in NH)		1000	10000 1000	GC .	2000		E.L. DISEASE - EA EMPLOYE	E \$	H. C. S
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
			,500 20 V			8 8 8 8				
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	ES (Attach	ACORD 101, Additional Remarks	Schedule	if more space is	required)			
	ate of Event: From 12:01AM on 10/2									
Ty	pe of Event: Wedding (Rehearsal, R	lehe	arsal	Dinner, Ceremony, Re	ception	1)				
Ad	Iditional Insured: Lee County Board	of C	Count	y Commissioners Word	ding: L	ee County B	Board of Cou	unty Commissioners,	a politi	ical
su	bdivision & Charter County of the S	tate	of FI	orida are Additional Ins	sured o	n the Gener	al Liability	as required by writter	contr	act.
TH	IS CERTIFICATE IS NOT VALID WIT	ΓΗΟΙ	JT TI	HE RVNA ADDITIONAL	INSURE	D ENDORS	EMENT FOR	М		
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1.1	R LICH ALE BUILDER				UMING					

Lee County Board of County Commissioners

P.O. Box 398

Ft. 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.

Robert V. Junio

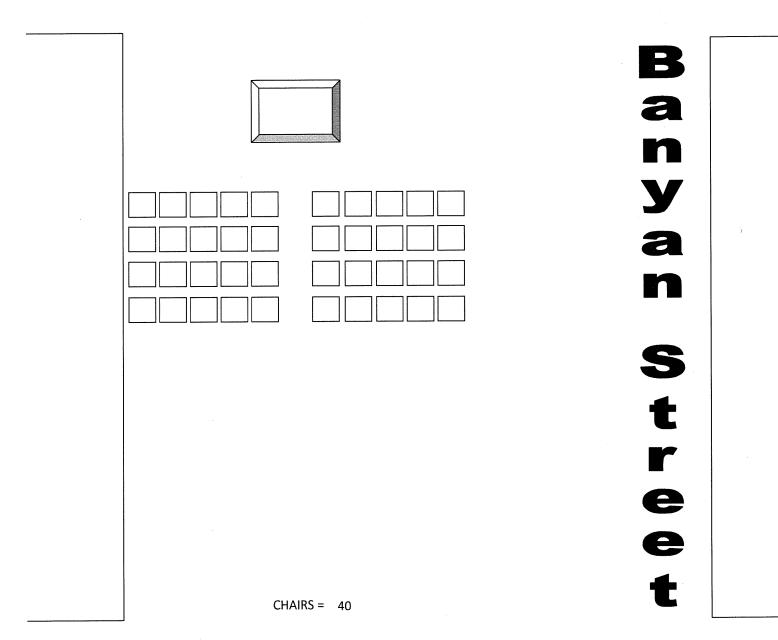
AUTHORIZED REPRESENTATIVE

Robert V. Nuccio

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OK 08/09/2019

Gilchrist Ave.



Park Ave.

AGREEMENT FOR EXTRA-DUTY DETAIL SERVICES

This Agreement for Extra-Duty Detail Services ("The Agreement" or "Agreement"), effective upon the date of LCSO's signature, is made by and between Sheriff Carmine Marceno, in his official capacity as Sheriff in and for Lee County, Florida and the Lee County Sheriff's Office (hereinafter "LCSO"), and Elder-Fielding Wedding , (hereinafter "Entity"), and collectively as "the parties", hereby agree as follows:

WITNESSETH:

WHEREAS, Entity plans to engage in an event as set forth, and at a location set forth, in Exhibit A and desires, as a security measure, a law enforcement presence at said event; and

WHEREAS, the LCSO is willing to provide law enforcement personnel, acting in an extra-duty detail capacity, to provide services described herein and set forth in Exhibit A while wearing LCSO uniforms, utilizing LCSO vehicles, and other LCSO property; and

WHEREAS, Exhibit A attached hereto is a material part of the Agreement and is incorporated and merged as if fully set forth herein.

NOW THEREFORE, in consideration of the mutual covenants and obligations undertaken by the parties as contained herein, and for other good and valuable consideration, the parties hereto agree as follows:

1. Authority.

The Entity expressly represents it or they are legally authorized to bind the Entity. The Entity fully comprehends and acknowledges the LCSO is acting in reliance on this, as well as other representations the Entity has made to members of the LCSO. The Entity further expressly represents that it or they has/have acquired all necessary applicable permits to engage in the event for which they are requesting LCSO law enforcement personnel as set forth in **Exhibit A**.

2. Description and Schedule of Event.

The description of the event, including the time, place, and duration, are set forth in Exhibit A, which is attached hereto and incorporated as if full set forth herein.

3. Term of Agreement.

The term of this Agreement shall begin on the first day of the event and terminate on the last day of the event as set forth in Exhibit A.

4. Assessment of Security Needs and Authority Retained by LCSO.

The Entity understands and consents to the LCSO conducting an assessment of the security needs of the Entity for the event location set forth in Exhibit A. The Entity understands the assessment of the referenced security needs by the LCSO is conducted by the LCSO, at their sole and absolute discretion, to allow LCSO to determine the minimum number of extra-duty detail law enforcement personnel adequate for the event. The Entity acknowledges the assessment of security needs by LCSO as set out herein does not constitute a representation, promise, guarantee or warranty by LCSO that LCSO will be able to supply the minimum number of off-duty or extra-duty detail law enforcement personnel which LCSO determines are required.

The Entity understands the extra duty detail services provided to the Entity are intended to offer an immediate presence of uniformed, sworn law enforcement personnel and to, by their presence alone, serve to potentially deter unruly or unlawful behavior. The Entity fully understands and accepts that by LCSO providing extra duty detail services pursuant to this Agreement LCSO is not assuming any duties of protection or care to any persons who may or may not be present at the location of the event as set forth in Exhibit A. The Entity acknowledges the extra-duty detail services provided by LCSO are merely to serve as a supplement to other measures and/or care provided or taken by the Entity and the Entity specifically DOES NOT expect or rely on LCSO to exclusively assume any duties of care.

5. Scheduling and Command.

The primary duties and essential functions of law enforcement personnel providing extra-duty detail services shall be as assigned by LCSO command.

The selection and scheduling of the law enforcement personnel providing extra-duty detail services shall be in accordance with the practices and policies of LCSO.

6. Termination of Agreement.

As set forth in Exhibit A.

7. Compensation.

As set forth in Exhibit A.

8. Independent Relationships.

The parties to this Agreement are solely independent of each other and are contracting with each other for the sole purpose of the obligations set forth in the Agreement. Nothing in this Agreement shall create a partnership, joint venture, agency, or employer/employee relationship. Neither party may make, or undertake, any commitments or obligations on behalf of the other.

9. Waiver of Terms and Conditions.

The failure of LCSO to insist on any one or more instances of performance of any of the terms and conditions of this Agreement or to exercise any right or privilege contained in this Agreement, or the waiver of any breach of the terms and conditions of this Agreement, shall not be considered as having waived any such terms, conditions, rights or privileges of the Agreement, and the same shall continue and remain in force and effect.

10. Severability.

It is the intention of the parties that this Agreement is in compliance with all relevant state and federal statutes, regulations, and governmental agency guidelines governing the relationship between the parties at the time of execution. If any provision of this Agreement is subsequently rendered invalid or unenforceable by any local, state or federal statute or regulation, or declared null and void by any court of competent jurisdiction, the remaining provisions of this Agreement will remain in full force and effect.

11. Third Party Beneficiaries.

This Agreement is intended solely for the benefit of the parties hereto and shall not, directly or by implication, create any rights, claims, obligations, or duties to any third party not a signatory to this Agreement.

12. Assignment.

This Agreement shall not be assigned in whole or in part by either party without the express prior written consent of the other party.

13. Binding Effect.

This Agreement shall be binding upon the parties hereto and shall inure to the benefit of the Entity or the LCSO, as applicable.

14. Governing Law.

This Agreement shall be controlled, interpreted, construed, and enforced in accordance with the laws of the State of Florida without regard to conflict of laws. The exclusive venue for any dispute arising out of this Agreement shall be in a court of competent jurisdiction in Lee County, Florida.

15. Titles or Captions.

The paragraph titles or captions contained in this Agreement are inserted only as a matter of convenience and for reference and in no way define, limit, extend, modify, amplify, or describe the scope of this Agreement or the intent of any provision hereof.

16. Draftsmanship.

Any conflict in the terms of this Agreement shall be construed in favor of LCSO.

17. Amendments.

This Agreement may only be modified or amended by the mutual written agreement of the parties. Any such modification or amendment shall be signed by each party and shall be attached to and become a part of this Agreement.

18. Indemnification.

The Entity agrees to indemnify and hold harmless LCSO, and its employees, volunteers, and agents for and from any and all claims (direct or derivative), damages, costs, expenses, demands of whatsoever kind or nature, and causes of action, arising from or related to the Entity's performance, nonperformance, action(s), omission(s), or failure to act related to any duty or obligation imposed upon LCSO pursuant to the Agreement. This indemnification obligation shall not be subject to any limitation as to the amount or type of recovery sought, or, on the amount or type of insurance coverage secured by the Entity. Further, the Entity shall require all their insurance carriers, with respect to all insurance policies to which they are a party, to waive all rights of subrogation against LCSO incidental to the extra-duty detail service described herein.

19. Sovereign Immunity.

Nothing herein contained in this Agreement is intended, nor shall be construed, to waive any of the limitations of liability and other defenses provided by sovereign immunity and the strict financial limitations set forth in Florida Statute 768.28.

20. Extra-Duty Detail Indemnification.

Nothing contained in this Agreement shall in any way limit or impeded application of the indemnification language in Florida Statute 30.2905.

21. Recitals/Entire Agreement.

The recitals above are incorporated herein as if fully restated. This Agreement constitutes the entire agreement between the parties hereto and supersedes all prior oral or written agreements, representations, statements, negotiations, understandings, proposals, and undertakings with respect to the subject matter hereof.

IN WITNESS WHEREOF the parties hereto have executed this Agreement as of the day and year first written above.

ENTITY	CARMINE MARCENO, SHERIFF O/BO THE LEE COUNTY SHERIFF'S OFFICE
Elder- Fielding Wedding	OTTIOE .
2614 Executive Way Apt 102 Wichita KS 67226	
By: Sarah Fjelding	By:
c icalli	Sheriff/Designee
Print Name: Sarah Fielding	Print Name:
Date: 8-20-2015	Date:

Carmine Marceno Sheriff



State of Florida County of Lee

Exhibit A Detail Request Form

Please fill out the Extra Duty Request form attached to this document completely. All details are a minimum of four (4) hours with the exception of boat details which are a minimum of six (6) hours and a half hour drive time to and from the detail location. When five (5) or more deputies are assigned to an event, a supervisor with the rank of Sergeant or above will be assigned at an upgraded hourly charge. Depending on the type of event or crowd size, it will be at the discretion of the Sheriff's Office to determine the number of deputies needed.

The current detail rat	es are:		
Security	\$48/hr	Traffic	\$58/hr
Funeral Escort	\$48/hr	Security Supervisor	\$58/hr
Escort	\$48/hr	Traffic Supervisor	\$68/hr
Boat	\$48/hr	Civil Stand-by	\$68/hr
Holiday/Last Minute	\$68/hr	Prisoner Transport	\$68/hr

Details are charged a \$15 <u>per deputy</u> vehicle rate (when applicable). All boat details are charged a \$20 per hour boat rate (when applicable).

Extra Duty Details will not be provided to any person, firm or organization whose members, business or operations are of questionable nature; or for any event that will discredit the assigned Deputy, Sheriff's Office or County. The Sheriff's Office reserves the right to cancel the detail without notice and to recall the deputy(s) when necessary for community safety without penalty.

The Lee County Sheriff's Office will be the only armed personnel at any event where the detail is taking place. Any private security company that is hired to work alongside the Sheriff's Office will be a reputable, licensed and insured company whose employees are State D licensed unarmed security guards. Proof of the signed contract with private security company will be required.

In order to cancel a detail, notice must be given to the Detail Coordinator twenty-four (24) hours prior to the start of the detail either by phone or email. If the cancellation is less than twenty-four (24) hours, a four (4) hour charge per deputy will be billed. In the case of weather, notice of cancellation must be received within two (2) hours of the starting time otherwise a two (2) hour charge per deputy will be billed. In the event of a cancellation after business hours, please call 239-477-1000 and ask to have the on-call Detail Coordinator call you.

Unless otherwise specified, full payment of all details must be received one (1) week prior to the start of the event in the form of a cashier's check, money order, business check or cash. The Lee County Sheriff's Office does not accept credit cards or personal checks. Payments can be sent to: The Lee County Sheriff's Office 14750 Six Mile Cypress Pkwy., Fort Myers, FL 33912 ATTN: Details Unit.

LEE COUNTY SHERIFF'S OFFICE USE ONLY				
Total Deputy(ies) 2	Total Hours 4 each	Rate per Hour	Vehicle Rate Waived	
Supervisory Deputy(ies)	Total Hours	Rate per Hour	Vehicle Rate	
Entity				



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14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

Detail Request Form - continued

LCSO Details Main Phone Number: 239-477-1199				
Vendor Information				
Business Name: Elder- Fielding Wedding				
Street: 2614 Executive Way Apt 102				
City: Witchita	State: KS Zip Code: 67226			
Business Contact: Sarah Fielding	Phone: 918-237-6410			
Email Address: sarahfielding92@gmail.com				
	Information			
Detail Location: Banyan Street Between Parl	k and Gilchrist			
Street:				
City: Boca Grande	State: FL Zip Code:			
Contact During Event: Sarah Fielding	Phone: 918-237-6410			
	Event Time: 3p-7p			
Anticipated Crowd Size : 45	Type of Event: Wedding			
Additional Security Working Detail: Yes V No If Yes, how many?				
Permits Attached: 📝 Yes 🔲 No	Alcohol Served: Yes V No			
Detail	Information			
Security ☐ Traffic ☑	Prisoner Transport			
Escort Holiday	Funeral Escort			
Last Minute Stand-by	3			
Marked Vehicle 📝 Yes 🗌 No	Unmarked Vehicle 🗸 Yes 🗌 No			
Uniformed Deputy 🗸 Yes 🗌 No	Plain Clothes Deputy 🔲 Yes 🔽 No			
Detail Description:				
Two deputies for road closure, traffic control and security on Banyan Street between Park Ave and Gilchrist while wedding takes place. Each end of Banyan Street must be blocked in order to provide safety and security to the participants. All chairs, tables and other items used for the event must be removed from the roadway as soon as possible to reopen Banyan Street. Payment is due one month before the event in the form of a cashiers check, money order or cash. Please do not send payment now. If for any reason the wedding is canceled, the Sheriff's Office needs to be notified to take the event off of our schedule. Estimated total for detail \$464.				
	Smah Jedding 8/22/19			



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