

EVENT PERMIT



Ordinance 17-08

HOGS AND AIR DOGS

PERMIT NUMBER: TMP2019-00309

Date(s) of Event: NOVEMBER 15, 16, 17, 2019

Property Owner:

FISCHER FL PROPERTIES I LLC

Applicant:

AIMEE MCLAUGHLIN

239-849-1187

Description:

ANNUAL DOCK JUMPING EVENT FEATURING FAMILY PETS JUMPING FROM A

DOCK INTO A POOL. FESTIVAL TYPE ATMOSPHERE WITH VARIOUS

VENDORS AND FOOD TRUCKS ON NOVEMBER 15, 16, 17, 2019 FROM 9:00AM

Location of event: 9510 THUNDER RD, FORT MYERS, FL 33913

SIX BENDS/TOP ROCKER FIELD

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

Will the event be held on County Owned Property? No

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

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

HOGS AND AIR DOGS

TMP2019-00309



Event Application

Check the	appropriate	e box(es) be	low:
×	SPECIAL EVEN	NT PERMIT	

Email Address:

Estimated Attendance:

Include each activity, when activities take place, etc.

Event Description:

☐ USE OF COUNTY PROPERTY PERMIT ☐ PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES ☐ FILM PERMIT							
Section I - GENERAL INF	ORMATION (All Permit Types)						
Title of Event / Name of Production	Hogs and Air Dogs						
Date(s) of Event / Production:	November 15, 16, 17 2019						
Location(s) of Event:	Six Bends/Top Rocker Field 9510 Thunder Road Fort Myers FL 33913						
Name of Applicant:	Gulf Coast Humane Society						
Applicant Address:	2010 Arcadia Street Fort Myers FL 33916						
Applicant Phone Number:	239-332-0364						
Contact Person: (If different from applicant)	Aimee McLaughlin						
Contact Phone Number: (If different from applicant)	239-849-1187						

9:00 am- 5:00 pm all three days **Hours of Operation:**

700 plus

224525L3240000010 STRAP # of Parcel:

Owner of Premises*: Jeffrey Scott Fischer

events@gulfcoasthumanesociety.org

atmosphere with vendors and food trucks.

Annual dock jumping event featuring family pets jumping from a dock into a pool. Festival type

^{*}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? Commercial	
Are any temporary structures to be inst	alled for the event? 🔀 Yes 📗 No	Type: Pool/Dock
Do you have the appropriate permits fo	r the temporary structures?	Yes No
* For a 'Special Event' and 'Use of Coun indentified, including all parking areas.	ty Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event:	McGriff Insurance Services	
Note: Certificate of Insurance must be submitte		
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	⋉ Yes	☐ 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.
Providing Food:	rious food trucks	·
Type of Food being Served: BBQ, italian	ice	
Section II - USE OF COUNTY PI	ROPERTY PERMIT	
Organization Sponsoring the Event:	If Coast Humane Society	
	Solicitation in the County Rights-of-Way	<i>!</i> :
Name of Charity:	·	
Address of Charity:		
Phone Number:		
Non-profit certificate/registration num	ber:	
(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	ON OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being sold/consumed on Coul If Yes, then a "Lee County Alcohol Permit" is required.	nty Property? Only non-profit organizations can sell alcohol on Count	☐ Yes No , Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber:	
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



pe of Production	on (choose all tha	it apply):						
TV Movie or :	Special	TV Series	s / Pilot		TV Comme	rcial 🗀	Still Phot	os
Public Service	Announcement	☐ Industrial	/ Documentary		Other:	·		
/ill any of the fo	llowing be neede	ed or included*	?					
Str	eet Closure			4	☐ Yes	∏ No		
Tra	affic / Crowd Con	trol			☐ Yes	┌ No		
Fir	e or Burning				☐ Yes	☐ No		
Ex	plosives or Pyrote	echnics			☐ Yes	☐ No		
An	imals, Large or Si	mall			☐ Yes	☐ No		
Со	nstruction of Any	· Kind			☐ Yes	☐ No		
Lai	rge and/or Nume	rous Vehicles			┌ Yes	∏ No		
He	licopters, Boats,	etc.			☐ Yes	∏ No		
Stı	unts				☐ Yes	☐ No		
Ot	her	-			☐ Yes	☐ No		
* For any mark	ed Yes, provide fu	urther details be	elow:					
·		urther details be	elow:					
	ed Yes, provide fu	urther details be	elow:					
		urther details be	elow:					
		urther details be	elow:					
Special Parking				lities, et	tc.)			
Special Parking	r Requirements:			lities, et	tc.)			
Special Parking	r Requirements:			lities, et	tc.)			
Special Parking City or County	Requirements: Services Require	d: (Personnel,	equipment, faci			Florida to 1	rack the e	conomic im
Special Parking City or County The following i	r Requirements:	d: (Personnel,	equipment, facil	ds on pr	oduction in	Florida to t	rack the e	conomic im
Special Parking City or County The following i	Requirements: Services Require nformation is rec	d: (Personnel, quired for local e not available,	equipment, facil	ds on pr	oduction in ely as possi	Florida to to ble.		conomic im
Special Parking City or County The following ithe industry. I	Requirements: Services Require nformation is rec	d: (Personnel, quired for local e not available,	equipment, faci and state record please estimate	ds on pr e as clos	roduction in ely as possi Nu	ble.		conomic im
City or County The following i the industry. I	Requirements: Services Require nformation is rec f exact figures are	d: (Personnel, quired for local e not available,	equipment, faci and state record please estimate umber in Crew:	ds on preas clos	roduction in ely as possi Nu	ble.		conomic im

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

aliblia

Date

Print Name of Witnes

9-16-19

Date



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

	(239) 477-1199
Check the appropri	ate box(es) below:
	ENT PERMIT
,	UNTY PROPERTY PERMIT
FILM PERM	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES IIT
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking on site in authorized areas only.
Deputies (How Many?):	None
Fee for Services:	None
Special Arrangements:	Event will not impede the flow of traffic in any way. Should traffic become impeded, vendor will be responsible for hiring extra duty detail deputies for traffic control at the expense of the vendor.
	Print Name: Lt. S. Brady
	Signature: A. Steven Brady

9-24-19

Title:

Date:

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 appropriate box(es) below:

SPECIAL EVENT PERMIT

┌ USE OF CC	OUNTY PROPERTY MIT	PERMIT		
	APPLICATION, PL	EASE INDICATE BEL Y WITH FOR THEIR E	OW WHAT ARRANGEMENTS VENT.	YOUR ORGANIZATION
Fire Guards (How Many?)	0			
Fee for Services:	NA			
Flammable Vegetation:	NA			
First Aid Equipment:	CALL 911 IF NEEDED)		<u> </u>
Fire Extinguishing:	Any cooking must h	ave appropriate extingu	isher on site. Food trucks required	to be NFPA 96 compliant.
Special Arrangements:	Food trucks shall be	set up and ready for ins	spection no later than 8am on Nov.	15.
	Print Name:	Nate Burley		
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2019.09.20 09:07:38 -04'00'	
	Title:	Division Chief - Fire & l	ife Safety	
	Date:	September 20, 2019		



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 2000 Main St., Suite #100 FORT MYERS, FL 33901 (239) 533-3911

USE OF COUNTY PROPERTY PERMIT

FILM PERI	ЛП		
		EASE INDICATE BELOW WHAT ARRANGEMENTS Y WITH FOR THEIR EVENT.	OUR ORGANIZATION
Treatment Facilitíes:	None necessary.		
Medical Personnel:	None necessary.		
Medical Supplies / Equipment:	None necessary.		
Safety Requirements:	No additional precau	utions 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	e, contact our office at
	Print Name:	Douglas B. Higgins	
	Signature:	Douglas B. Higgins Douglas B. Higgins District of the Control of the State of the Control of t	
	Title:	Division Chief	
	Date:	October 04, 2019	



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

Check the appropri	ate box(es) be	low:		
SPECIAL E\	/ENT PERMIT			
USE OF CC	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNTY	' FACILITIES
FILM PERN	AIT			
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P LICANT TO COMP	PLEASE INDICATE BELO PLY WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Parking:	Park in designated	areas. No event parking or	n Lee County maintained road rig	ghts-of-way.
				Action (1981)
Ingress and Egress:	Use all established	means of ingress and egre	SS.	
			· ·	
Special Arrangements:	Use Law Enforcem	ent for assistance with traf	fic control as needed.	
	Print Name:	Bryan Miller		
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2019.09.18 12:27:30 -04'00'	
	Title:	Senior Project Manager		
	Date:	Sept 18, 2019		

Hogs and Air Dogs-Six Bends in Ft. Myers-Nov. 15-17,2019

Lee County Event Permit Application

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

Check the appropr	riate box(es) below:
USE OF CO	VENT PERMIT DUNTY PROPERTY PERMIT DISELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES MIT
	E APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLICANT TO COMPLY WITH FOR THEIR EVENT.
Illumination:	N/A
Parking Areas:	N/A
special Arrangements:	N/A-Event is not on or near Lee County Parks and Recreation property and will not affect our operations or programs
	Print Name: Kimberly Carrett Signature: Junilerly Larrett Title: Jaministrative, Mar. Date: 9/35/3019



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

Check the appropria	te box(es) be	elow:	
▼ SPECIAL EVE	NT PERMIT		
USE OF COU	NTY PROPERTY	Y PERMIT	
PERMIT TO S	ELL AND CONS	SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILI	TIES
FILM PERMI	Γ		
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR PLY WITH FOR THEIR EVENT.	ORGANIZATION
Insurance Requirements:	occurrence to pr	neral liability insurance with minimum limits of One Million Dollars (\$ rotect against bodily injury and/or property damage relative to applid l event within Lee County.	
Special Arrangements:	A Certificate of Ir Board of County additional insure	nsurance shall be submitted as evidence of the required coverage list Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate	ting Lee County holder and as an
	Subject to proof		:
	Subject to proof	of insurance.	:
	Print Name:	Mike Figueroa	
	Signature:	Mike from -	
	Title:	Risk Program Manager	
	Date:	September 18, 2019	

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/16/2019

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. INFORTANT. If the certificate holder is an Abbrilland monotonic in the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

this certificate does not comer any rights to the comments in						
PRODUCER	CONTACT Mary Hoshor					
McGriff Insurance Services	PHONE (A/C, No, Ext): 239-433-7149 FAX (A/C, No): 86	66-802-8680				
13515 Bell Tower Drive	E-MAIL ADDRESS: mhoshor@mcgriffinsurance.com					
Fort Myers, FL 33907	INSURER(S) AFFORDING COVERAGE	NAIC#				
239 433-4535	INSURER A: Alliance of Nonprofits ins RRG	10023				
INSURED	INSURER B : Zenith Insurance Company	13269				
Gulf Coast Humane Society Inc.	INSURER C : North American Elite Insurance Company	29700				
2010 Arcadia Street	INSURER D:					
Fort Myers, FL 33916	INSURER E:					
	INSURER F:					

					HOOKEK D.					
	Fort Myers, FL 33916					RE:				
						INSURER F:				
	OFD:	TIFICA	TE	MUMPED.	REVISION NUMBER:					
CO	VERAGES CER	HEIGA	(IE	NUMBER:		LIGOUED TO			POLICY	PERIOD
IV	THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW F INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORD EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY H					CONTRACTOR	DESCRIBED I	HEREIN IS SUBJECT TO A	10 1111	Oil IIIIO
INSR LTR		ADDL SU	UBR			POLICY FEE	POLICY EXP (MM/DD/YYYY)	LIMITS	3	
	Y COMMERCIAL GENERAL LIABILITY	X		201857196				EACH OCCURRENCE	s1,000	0,000
Α		^		201001100		, .		DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,	000
	CLAIMS-MADE X OCCUR							MED EXP (Any one person)	\$5,000)
								PERSONAL & ADV INJURY	\$1,00	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$2,000	0,000
	PRO-							PRODUCTS - COMP/OP AGG	\$2,00	0,000
	X POLICY JECT LOC								\$	
_	OTHER: AUTOMOBILE LIABILITY	-	\dashv	201857196		11/04/2019	11/04/2020	COMBINED SINGLE LIMIT (Ea accident)	s1,000	,000
С				201001100		,		BODILY INJURY (Per person)	\$	
	X ANY AUTO OWNED SCHEDULED							BODILY INJURY (Per accident)	\$	
	AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE (Per accident)	\$	
	AUTOS ONLY AUTOS ONLY		1					0. 21. 22.22.22	S	

RE: Hogs and Air Dogs Event November 15,16,17, 2019 When required by written contract, Lee County Board of County Commissioners is included as Additional Insured for general liability.

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

201857196UMB

Z126666805

OK 09/18/2019

CERTIFICATE HOLDER

UMBRELLA LIAB

WORKERS COMPENSATION

EXCESS LIAB

Х OCCUR

DED X RETENTION \$10000

AND EMPLOYERS' LIABILITY
ANY PROPRIETOR/PARTNER/EXECUTIVE
OFFICER/MEMBER EXCLUDED?

(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below

CLAIMS-MADE

NIA

Х

Lee County Board of County Commissioners

P. O. Box 398 Fort Myers, FL 33902 CANCELLATION

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

Keren Fitzgert. 1 Keston

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s1,000,000

s1,000,000

\$1,000,000

E.L. EACH ACCIDENT

E.L. DISEASE - EA EMPLOYEE \$1,000,000

E.L. DISEASE - POLICY LIMIT | \$1,000,000

AGGREGATE

11/04/2019 11/04/2020 EACH OCCURRENCE

06/23/2019 06/23/2020 X PER STATUTE

132GULFCOA19 Client#: 1766995

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/16/2019

\$1,000,000

\$1,000,000

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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 any rights to the certificate holder in lieu of such endorsement(s).				
PRODUCER	CONTACT Mary Hoshor			
McGriff Insurance Services	PHONE (A/C, No, Ext): 239-433-7149 FAX (A/C, No): 866-8	02-8680		
13515 Bell Tower Drive Fort Myers, FL 33907	E-MAIL ADDRESS: mhoshor@mcgriffinsurance.com			
	INSURER(S) AFFORDING COVERAGE	NAIC#		
239 433-4535	INSURER A: Alliance of Nonprofits Ins RRG	10023		
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Gulf Coast Humane Society Inc.	INSURER C : North American Elite Insurance Company	29700		
2010 Arcadia Street	INSURER D :			
Fort Myers, FL 33916	INSURER E:			
	INSURER F:			
COVERAGES CERTIFICATE NUMBER:	REVISION NUMBER:	,		
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HA' INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION O CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDE!	F ANY CONTRACTOR OTHER DOCUMENT WITH RESPECT TO WH	ICH THIS		

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) LIMITS TYPE OF INSURANCE POLICY NUMBER \$1,000,000 COMMERCIAL GENERAL LIABILITY 11/04/2018 11/04/2019 EACH OCCURRENCE 201857196 X DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 CLAIMS-MADE X OCCUR \$5.000 MED EXP (Any one person) \$1,000,000 PERSONAL & ADV INJURY \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE PRODUCTS - COMP/OP AGG \$2,000,000 POLICY OTHER: 11/04/2018 11/04/2019 COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 AUTOMOBILE LIABILITY 201857196 C BODILY INJURY (Per person) \$ ANY AUTO SCHEDULED BODILY INJURY (Per accident) \$ OWNED AUTOS ONLY AUTOS NON-OWNED AUTOS ONLY PROPERTY DAMAGE (Per accident) HIRED AUTOS ONLY X UMBRELLA LIAB 11/04/2018 11/04/2019 EACH OCCURRENCE \$1,000,000 Δ 201857196UMB X Χ OCCUR

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) RE: Hogs and Air Dogs Event November 15,16,17, 2019

Z126666805

When required by written contract, Lee County Board of County Commissioners is included as Additional Insured for general liability.

CERTIFICATE HOLDER	CANCELLATION
Lee County Board of County Commissioners P. O. Box 398	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Fort Myers, FL 33902	AUTHORIZED REPRESENTATIVE
	Warm & beard. 1800 to.

CANCELLATION

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AGGREGATE

E.L. EACH ACCIDENT

E.L. DISEASE - EA EMPLOYEE \$1,000,000

E.L. DISEASE - POLICY LIMIT | \$1,000,000

06/23/2018 06/23/2019 X STATUTE

EXCESS LIAB

(Mandatory in NH)

WORKERS COMPENSATION

AND EMPLOYERS' LIABILITY

DED X RETENTION \$10000

ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?

if yes, describe under DESCRIPTION OF OPERATIONS below

CLAIMS-MADE

Y/N

N N/A

Client#: 1766995

ACORD.

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tina continuate accentications	,	CONTACT Many Hosbor		(#)
PRODUCER		CONTACT Mary Hoshor		
McGriff Insurance Services		PHONE (A/C, No, Ext): 239-433-7149	FAX (A/C, No): 866-8	302-8680
13515 Bell Tower Drive		E-MAIL ADDRESS: mhoshor@mcgriffinsurance.com	n	
Fort Myers, FL 33907		INSURER(S) AFFORDING COVERA		NAIC #
239 433-4535		INSURER A: Alliance of Nonprofits Ins RRG		10023
Gulf Coast Humane Society Inc. 2010 Arcadia Street Fort Myers, FL 33916		INSURER B : Zenith Insurance Company		13269
	Society Inc.	INSURER C : North American Elite Insurance Comp	oany	29700
		INSURER D:		
	33916	INSURER E:		
		INSURER F:		4 2
COVERAGES	CERTIFICATE NUMBER:	REVISION NUM	IBER:	

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. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER 11/04/2019 11/04/2020 EACH OCCURRENCE s1,000,000 COMMERCIAL GENERAL LIABILITY 201857196 X Α DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 X OCCUR CLAIMS-MADE \$5,000 MED EXP (Any one person)

\$1,000,000 PERSONAL & ADV INJURY GENERAL AGGREGATE \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$2,000,000 X POLICY 100 OTHER: 11/04/2019 11/04/2020 COMBINED SINGLE LIMIT \$1,000,000 AUTOMOBILE LIABILITY 201857196 C BODILY INJURY (Per person) X ANY AUTO SCHEDULED AUTOS BODILY INJURY (Per accident) OWNED AUTOS ONLY PROPERTY DAMAGE (Per accident) NON-OWNED HIRED AUTOS ONLY X AUTOS ONLY 11/04/2019 11/04/2020 EACH OCCURRENCE s1,000,000 201857196UMB Α X UMBRELLA LIAB X OCCUR \$1,000,000 AGGREGATE **EXCESS LIAB** CLAIMS-MADE DED X RETENTION \$10000 06/23/2019 06/23/2020 X PER STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Z126666805 В \$1,000,000 E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N E.L. DISEASE - EA EMPLOYEE \$1,000,000 (Mandatory in NH) E.L. DISEASE - POLICY LIMIT | \$1,000,000 f yes, describe under DESCRIPTION OF OPERATIONS below

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

RE: Hogs and Air Dogs Event November 15, 16, 17, 2019

When required by a written contract, Fischer Florida Properties I, LLC and Fischer Entertainment, LLC are included as additional insured for general liability.

CERTI	FICATE	HOLDER	3

CANCELLATION

Fischer Florida Properties I, LLC and Fischer Entertainment LLC 9510 Thunder Road Fort Myers, FL 33913 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

Heren Fitzgud. 1Keston

Client#: 1766995

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/16/2019

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 configurate does not confer any rights to the certificate holder in lieu of such endorsement(s).

this certificate does not comer any rights to the certificate holder in hear	or odori oridereditional-).	
PRODUCER	CONTACT Mary Hoshor	
McGriff Insurance Services	PHONE (A/C, No, Ext): 239-433-7149 FAX (A/C, No): 866-8	302-8680
13515 Bell Tower Drive	E-MAIL ADDRESS: mhoshor@mcgriffinsurance.com	
Fort Myers, FL 33907	INSURER(S) AFFORDING COVERAGE	NAIC#
239 433-4535	INSURER A: Alliance of Nonprofits Ins RRG	10023
INSURED	INSURER B : Zenith Insurance Company	13269
Gulf Coast Humane Society Inc.	INSURER C : North American Elite Insurance Company	29700
2010 Arcadia Street	INSURER D:	
Fort Myers, FL 33916	INSURER E :	
	INSURER F:	
COVERAGES CERTIFICATE NUMBER:	REVISION NUMBER:	

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(E)	CLUSIONS AND CONDITIONS OF SUCH				N REDUCED	BY PAID CLAI	M5.	
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	3
A	X COMMERCIAL GENERAL LIABILITY	Х		201857196	11/04/2018		EACH OCCURRENCE	\$1,000,000
^	CLAIMS-MADE X OCCUR	-					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	\$5,000
							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	\$2,000,000
	OTHER:							\$
C	AUTOMOBILE LIABILITY			201857196	11/04/2018	11/04/2019	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
١	X ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED SCHEDULED						BODILY INJURY (Per accident)	\$
	W HIRED W NON-OWNED						PROPERTY DAMAGE (Per accident)	\$
	AUTOS ONLY AUTOS ONLY							\$
A	X UMBRELLA LIAB X OCCUR			201857196UMB	11/04/2018	11/04/2019	EACH OCCURRENCE	\$1,000,000
	EXCESS LIAB CLAIMS-MADE			20,000,1000,111			AGGREGATE	\$1,000,000
1	10000							\$
В	WORKERS COMPENSATION			Z126666805	06/23/2018	06/23/2019	X PER OTH-	
١٦	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE						E.L. EACH ACCIDENT	\$1,000,000
	OFFICER/MEMBER EXCLUDED? N (Mandatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000
	DESCRIPTION OF OPERATIONS BRIOW							

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

RE: Hogs and Air Dogs Event November 15, 16, 17, 2019

When required by a written contract, Fischer Florida Properties I, LLC and Fischer Entertainment, LLC are included as additional insured for general liability.

CERTIFICATE HOLDER	CANCELLATION
Fischer Florida Properties I, LLC and Fischer Entertainment LLC	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
9510 Thunder Road	AUTHORIZED REPRESENTATIVE
Fort Myers, FL 33913	Heren Fitzgud 1 Keston

Client#: 1766995

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/16/2019

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tins ceri	illicate does not comer	any rigino to the cortined to the		
PRODUCER			CONTACT Mary Hoshor	
McGriff I	nsurance Services		PHONE (A/C, No, Ext): 239-433-7149 FAX (A/C, No):	866-802-8680
13515 Bell Tower Drive			E-MAIL ADDRESS: mhoshor@mcgriffinsurance.com	
Fort Mye	rs, FL 33907		INSURER(S) AFFORDING COVERAGE	NAIC#
239 433-4			INSURER A : Alliance of Nonprofits Ins RRG	10023
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	i ,	INSURER D:		
	16	INSURER E :		
			INSURER F:	
COVERAG	nee.	CERTIFICATE NUMBER:	REVISION NUMBER:	
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RE: Hogs and Air Dogs Event November 15,16,17, 2019

When required by written contract, Lee County Board of County Commissioners is included as Additional Insured for general liability.

P. O. Box 398 Fort Myers, FL 33902 Authorized Representative	
Lee County Board of County Commissioners SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIN ACCORDANCE WITH THE POLICY PROVISIONS.	D BEFORE /ERED IN
CERTIFICATE HOLDER CANCELLATION	

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FISCHER FLORIDA PROPERTIES, LLC

9510 Thunder Road, Fort Myers, FL 33913 844-749-2363

October 1, 2019

Re: Lee County Special Event Application

I am the property owner of Top Rocker Field and Thunder Plaza located at 9510 Thunder Road, Fort Myers, FL 33913. Gulf Coast Humane Society will be hosting their Hogs & Air Dogs Friday, November 15, 2019 - Sunday, November 17, 2019 on Thunder Plaza and Top Rocker Field at Six Bends.

Restrooms will be provided. I have given my permission for this event.

Sincerely,

Jeffery Scott Fischer

Property Owner

Sworn and subscribed before me this day, 10 - 14 - 19, by Jeffery Scott Fischer, who is personally known to me.

KIMBERLY HASKINS Commission # FF 938566 Expires March 21, 2020

Kimberly Haskins

Notary Public

State of Florida



3350 Old Metro Pkwy. • Fort Myers, FL 33916 844-WEPOTTY (937-6889)

October 11, 2019

To whom it may concern,
Garden St. Portables will be providing Gulf Coast
Humane Society with four portable restrooms
located at 9510 Thunder Rd, Fort Myers, FL, 33913
from 11/14/19 until 11/18/19. If you have any
questions or need further information please contact
our office.

Jordyn Leverone 239-210-2174 office@gsportables.com



