



EVENT PERMIT

Ordinance 17-08



2019 ROY HOBBS WORLD SERIES #30

PERMIT NUMBER: TMP2019-00316

Date(s) of Event: OCTOBER 19, 2019 THROUGH NOVEMBER 23, 2019
FROM 10:00AM UNTIL 7:30PM

Property Owner: LEE COUNTY

Applicant: TOM GIFFEN
330-352-2171

Description: ADULT AMATEUR BASEBALL TOURNAMENT-- ROY HOBBS BASEBALL LOCKER ROOM PROGRAM WHICH INCLUDES BEER ONLY CONSUMPTION INSIDE LOCKER ROOM AND FIELD ACCESS

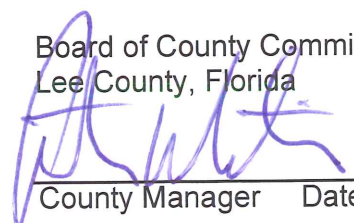
Location of event: 4301 EDISON AVE, FORT MYERS, FL 33916
PLAYER DEVELOPMENT COMPLEX

Will the event be attended by 1000 or more people ?	No
Will the event be held on County Owned Property ?	Yes
Will there be alcohol consumed or sold at the event ?	To Be Consumed
Will a bond be posted for this event ?	No

Permit Conditions:

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

Board of County Commissioners
Lee County, Florida

 10-18-19
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

2019 ROY HOBBS WORLD SERIES #30

TMP2019-00316

Lee County Event Permit Application



Event Application

Check the appropriate box(es) below:

- ☐ SPECIAL EVENT PERMIT
- ☐ USE OF COUNTY PROPERTY PERMIT
- ☒ PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- ☐ FILM PERMIT

Section I - GENERAL INFORMATION (All Permit Types)	
Title of Event / Name of Production	2019 ROY HOBBS WORLD SERIES #30
Date(s) of Event / Production:	OCTOBER 19 THROUGH NOVEMBER 23
Location(s) of Event:	PLAYER DEVELOPMENT COMPLEX, 4301 EDISON AVE, FORT MYERS 33916
Name of Applicant:	ROY HOBBS DIAMOND ENTERPRISES LLC (dba Roy Hobbs Baseball) / ROY HOBBS CONCESSIONS / ROY HOBBS FOUNDATION (501 C 3) +
Applicant Address:	4301-100 EDISON AVE FORT MYERS FL 33916
Applicant Phone Number:	330.352.2171
Contact Person: (If different from applicant)	TOM GIFFEN
Contact Phone Number: (If different from applicant)	SAME
Email Address:	TG@ROYHOBBS.COM
Estimated Attendance:	4,400 tournament participants over 5 weeks; Locker room participation averages 85 per week
Event Description: Include each activity, when activities take place, etc.	Adult Amateur baseball tournament, 27th year in Lee Co. Permit application is 3-part: 1) Beer only consumption-no sale-as part of the Locker Room program. No alcohol may leave the locker room; consumption is supervised by Hobbs staff; no BYOB allowed. Beer available from 3 pm to 6:30 pm; game times are 10 am & 1:45 pm. Locker room services end 90 minutes after 1:45 games are completed. 2) 3 Thursday night player reception events, sponsored by the Roy Hobbs Foundation, +
Hours of Operation:	Tournament play is 8 am to end of play, usually about 5 pm at PDC. At other sites where night game +
STRAP # of Parcel:	204425P2000020000
Owner of Premises*:	Lee Co. Board of Commissioners, administered by Lee County Parks and Recreation Department

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

Lee County Event Permit Application



Fill out the following questions for all permit types:

What is the Zoning Classification of the premises? DNK

Are any temporary structures to be installed for the event? ☐ Yes ☒ No Type: _____

Do you have the appropriate permits for the temporary structures? ☐ Yes ☐ No

* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event: US Fire Insurance covers event itself; Covington Specialty covers RH occupational +

Note: Certificate of Insurance must be submitted at time of application

Surety Company Bonding this Event (Name and Address): _____

<p>Will Vehicles be Used as Part of This Event?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, automobile coverage must be included on the certificate of insurance.</p>	<p>Will Food be Available at this Event?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, products liability coverage must be included on the certificate of insurance.</p>	<p>Will Alcoholic Beverages be served/consumed at this Event?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, liquor liability coverage must be included on the certificate of insurance.</p>
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Name & Address of Organization Providing Food: Roy Hobbs Concerussions / 4301 Edison Ave / Fort Myers. FL. 33916; Thursday night events, Sidelines Sports Grill 4451 Veronica Shoemaker Blvd, Fort Myers

Type of Food being Served: hot dogs, sandwiches, chips, candy bars, soft drinks, water

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: _____

Fill out this portion for applications for Solicitation in the County Rights-of-Way:

Name of Charity: _____

Address of Charity: _____

Phone Number: _____

Non-profit certificate/registration number: _____

(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/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property?

☒ Yes

☐ No

If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number: Daily: Consumption only, and only within the confines of the locker room. +

(Required if alcohol is to be SOLD at the event)

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

Lee County Event Permit Application



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply):

<input type="checkbox"/> TV Movie or Special	<input type="checkbox"/> TV Series / Pilot	<input type="checkbox"/> TV Commercial	<input type="checkbox"/> Still Photos
<input type="checkbox"/> Public Service Announcement	<input type="checkbox"/> Industrial / Documentary	<input type="checkbox"/> Other: _____	

Will any of the following be needed or included*?

Street Closure	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Traffic / Crowd Control	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fire or Burning	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Explosives or Pyrotechnics	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Animals, Large or Small	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Construction of Any Kind	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Large and/or Numerous Vehicles	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Helicopters, Boats, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Stunts	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No

* For any marked Yes, provide further details below:

Special Parking Requirements:

City or County Services Required: (Personnel, equipment, facilities, etc.)

The following information is required for local and state records on production in Florida to track the economic impact of the industry. If exact figures are not available, please estimate as closely as possible.

Number in Cast: _____	Number in Crew: _____	Number of locals hired: _____
Total budget: _____	Estimate amount spent in Lee County: _____	
Hotel room nights: _____ number of rooms x number of nights	Number of shooting days: _____	



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 premises 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




Date



Witness



Print Name of Witness



Date

Lee County Event Permit Application



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

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
☒ USE OF COUNTY PROPERTY PERMIT
☒ PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:

Parking for the events will be in authorized areas only. Right-of-way must not be impeded.

Deputies (How Many?):

None required.

Fee for Services:

None.

Special Arrangements:

It is understood by this office that beer will only be offered at the Players Development Complex, in designated areas and only during established times. Alcohol must not leave the designated area and this along with serving amounts will be monitored by event staff.

Print Name:

Steven Brady

Signature:

A. Steven Brady

Title:

Special Operations Division

Date:

10-3-19

Lee County Event Permit Application



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 COUNTY PROPERTY PERMIT
- ☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Fire Guards (How Many?)

NA

Fee for Services:

Flammable Vegetation:

NA

First Aid Equipment:

on site

Fire Extinguishing:

RHBB providing food set ups and Fire Ezxtinguishers for grilling and outside food preparation

Special Arrangements:

NA

Print Name: Rick Reynolds

Signature:

Title:

Fire Marshal

Date:

10/02/19

Lee County Event Permit Application



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY

2000 Main St., Suite #100

FORT MYERS, FL 33901

(239) 533-3911

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
☒ USE OF COUNTY PROPERTY PERMIT
☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Treatment Facilities:

None necessary.

Medical Personnel:

None necessary.

Medical Supplies /
Equipment:

None necessary.

Safety Requirements:

No additional precautions necessary.

Fee for Services

Not applicable.

Special Arrangements:

Please call 911 in the event of an emergency. To arrange special event coverage, contact our office at 239 533-3911.

Print Name: Douglas B. Higgins

Signature: Douglas B. Higgins

Digitally signed by Douglas B. Higgins
DN: cn=Douglas B. Higgins, ou=Lee County Emergency Medical Services, Lee County Public Safety,
email=Douglas.B.Higgins@leegov.com, c=US
Date: 2019.10.14 12:04:19 -0400

Title: Division Chief

Date: 10-14-2019

Lee County Event Permit Application



DEPARTMENT OF TRANSPORTATION
1500 MONROE STREET
FORT MYERS, FL 33901
(239) 533-8580

Check the appropriate box(es) below:

- ☐ SPECIAL EVENT PERMIT
☐ USE OF COUNTY PROPERTY PERMIT
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☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:

Park in designated areas.

Ingress and Egress:

use all established means of ingress and egress.

Special Arrangements:

None.

Print Name: Bryan Miller

Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller
Date: 2019.10.03 12:52:01 -04'00'

Title: Senior Project Manager

Date: October 3, 2019

Lee County Event Permit Application



LEE COUNTY PARKS AND RECREATION
3410 PALM BEACH BOULEVARD
FORT MYERS, FLORIDA 33916
(239) 533-7275

Check the appropriate box(es) below:

- ☐ SPECIAL EVENT PERMIT
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☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Illumination:

N/A

Parking Areas:

N/A

Special Arrangements:

Permit is for consumption of alcohol to remain within the confined area of the Player Development Clubhouse and Locker room. Event Manager must ensure that all persons stay within the controlled area of the complex.

Print Name: Alise Flanjack

Signature:

Alise Flanjack

Title:

Deputy Director

Date:

Oct. 2, 2019

Hobby Baseball
10/19/19 - 11/23/19
P.D.C.

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT
COUNTY ADMINISTRATION BUILDING - 4TH FLOOR
2115 SECOND STREET
FORT MYERS, FLORIDA 33901
(239) 533-2221

Check the appropriate box(es) below:

- ☐ SPECIAL EVENT PERMIT
☒ USE OF COUNTY PROPERTY PERMIT
☒ PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Insurance Requirements: Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.

In addition, Host Liquor Liability insurance will be required with minimum limits of One Million Dollars (\$1,000,000) per occurrence. Should Host Liquor Liability coverage be afforded under the Commercial General Liability policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.

Special Arrangements: A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured.

Subject to proof of insurance.

Print Name: Mike Figueroa

Signature:

Title: Risk Program Manager

Date: October 2, 2019



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/27/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(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).

PRODUCER	Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250	CONTACT NAME: Frazier Insurance Agency, Inc. PHONE (A/C, No, Ext): (804) 754-7610 FAX (A/C, No): (804) 754-7613 E-MAIL ADDRESS: ifrazier@frazierinsurance.com
	INSURER(S) AFFORDING COVERAGE	
INSURED	Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball 4301-100 Edison Ave. Fort Myers, FL 33916	INSURER A: Aegis Security Insurance Company NAIC # 33898
		INSURER B:
		INSURER C:
		INSURER D:
		INSURER E:
		INSURER F:

COVERAGES CERTIFICATE 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	ADCL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			Policy # FGLSP-100-18 Cert #FFL-S-0030	01/01/2019	01/01/2020 12 01 AM	GENERAL AGGREGATE \$ 2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG \$ 2,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY \$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE \$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER						DAMAGE TO RENTED PREMISES \$ 300,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						MED EXP (Any one person) \$ 5,000.00
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Per accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTO						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS						\$
	UMBRELLA/LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	<input type="checkbox"/> OCCUR						\$
	<input type="checkbox"/> CLAIMS-MADE						\$
	DED						\$
	RETENTION \$						\$
							\$
							\$
							\$
							\$
A	Excess Accident Medical			FR0348	01/01/2019	01/01/2020 12 01 AM	LIMIT \$ 10,000.00 AD&D \$ 10,000.00 DEDUCTIBLE \$ 100.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

Host Liquor coverage is included on the policy

Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

CERTIFICATE HOLDER	CANCELLATION
OK 10/02/2019 Lee County Board of Commissioners PO 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. AUTHORIZED REPRESENTATIVE John W. Frazier

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CERTIFICATE OF LIABILITY INSURANCE

Privacy Security DATE 10/01/2019
Last Sign On: Friday, September 6, 2019 at 11:59 a.m.

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).

PRODUCER	Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250	CONTACT NAME Frazier Insurance Agency, Inc. PHONE (A/C No. Ext) (804) 754-7610 FAX (A/C No) (804) 754-7613 E-MAIL ADDRESS ifrazier@frazierinsurance.com
INSURED	Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises/Roy Hobbs Baseball 4301-100 Edison Ave. Ft. Myers, FL 33916	INSURER(S) AFFORDING COVERAGE INSURER A Aegis Security Insurance Company NAIC # 33898 INSURER B INSURER C INSURER D INSURER E INSURER F

COVERAGES CERTIFICATE NUMBER REVISION NUMBER

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TYPE OF INSURANCE	ADOL RISK	SUBR AND	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC			Policy # FGLSP-100-19 Cert #FFL-S-0030	01/30/2019	01/01/2020 12:01 AM	GENERAL AGGREGATE \$ 2,000,000.00 PRODUCTS - COMP/OP AGG \$ 2,000,000.00 PERSONAL & ADV INJURY \$ 1,000,000.00 EACH OCCURRENCE \$ 1,000,000.00 DAMAGE TO RENTED PREMISES \$ 300,000.00 MED EXP (Any one person) \$ 5,000.00 COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$ DED \$ RETENTION \$
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTO <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						
UMBRELLA/LIAB EXCESS LIAB DED RETENTION \$						
Excess Accident Medical			FR0348	01/30/2019	01/01/2020 12:01 AM	LIMIT \$ 10,000.00 AD&D \$ 10,000.00 DEDUCTIBLE \$ 100.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
POLICY DEDUCTIBLE \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM

57 teams: (see attached list)

Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

CERTIFICATE HOLDER	CANCELLATION
Roy Hobbs Foundation 4301-100 Edison Ave. FL Myers, FL 33916	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 John W. Frazier



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/27/2018

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PRODUCER	Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250	CONTACT NAME	Frazier Insurance Agency, Inc.	
		PHONE (A/C, No., Ext)	(804) 754-7610	FAX (A/C, No.)
		E-MAIL ADDRESS	ifrazier@frazierinsurance.com	
		INSURER(S) AFFORDING COVERAGE	NAIC #	
		INSURER A	Aegis Security Insurance Company	33898
INSURED	Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball 4301-100 Edison Ave. Fort Myers, FL 33916	INSURER B		
		INSURER C		
		INSURER D		
		INSURER E		
		INSURER F		

COVERAGES

CERTIFICATE 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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY			Policy # FGLSP-100-18 Cert #FFL-S-0030	01/01/2019	01/01/2020 12 01 AM	GENERAL AGGREGATE	\$ 2,000,000.00	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COM/OP AGG	\$ 2,000,000.00	
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$ 1,000,000.00	
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE	\$ 1,000,000.00	
	GEN'L AGGREGATE LIMIT APPLIES PER						DAMAGE TO RENTED PREMISES	\$ 300,000.00	
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						MED EXP (Any one person)	\$ 5,000.00	
								\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (E&A accident)	\$
	<input type="checkbox"/> ANY AUTO							BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
<input type="checkbox"/> HIRED AUTO	<input type="checkbox"/> NON-OWNED AUTOS			PROPERTY DAMAGE (Per accident)	\$				
					\$				
	UMBRELLA/LIAB	<input type="checkbox"/> OCCUR					EACH OCCURRENCE	\$	
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE	\$	
	DED	RETENTION \$						\$	
								\$	
								\$	
								\$	
A	Excess Accident Medical			FR0348	01/01/2019	01/01/2020 12 01 AM	LIMIT	\$ 10,000.00	
							AD&D	\$ 10,000.00	
							DEDUCTIBLE	\$ 100.00	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

Host Liquor coverage is included on the policy

Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

CERTIFICATE HOLDER	CANCELLATION
Lee County Board of Commissioners PO 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.
	AUTHORIZED REPRESENTATIVE
	John W. Frazier

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/27/2018

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PRODUCER Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250		CONTACT NAME: Frazier Insurance Agency, Inc. PHONE: (A/C, No, Ext) (804) 754-7610 FAX: (A/C, No) (804) 754-7613 E-MAIL ADDRESS: ifrazier@frazierinsurance.com	
		INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A: Aegis Security Insurance Company	33898
INSURED Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball 4301-100 Edison Ave. Fort Myers, FL 33916		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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A	GENERAL LIABILITY			Policy # FGLSP-100-18 Cert #FFL-S-0030	01/01/2019	01/01/2020 12:01 AM	GENERAL AGGREGATE \$ 2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COM/OP AGG \$ 2,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY \$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE \$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:						DAMAGE TO RENTED PREMISES \$ 300,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						MED EXP (Any one person) \$ 5,000.00
							\$
							\$
							\$
							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Per accident) \$
	ANY AUTO						BODILY INJURY (Per person) \$
	ALLOWED AUTOS		SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	HIRED AUTO		NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB		OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB		CLAIMS-MADE				AGGREGATE \$
	DED		RETENTION \$				\$
							\$
							\$
							\$
							\$
A	Excess Accident Medical			FR0348	01/01/2019	01/01/2020 12:01 AM	LIMIT \$ 10,000.00 AD&D \$ 10,000.00 DEDUCTIBLE \$ 100.00

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POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

Host Liquor coverage is included on the policy

CERTIFICATE HOLDER Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball 4301-100 Edison Ave. Fort Myers, FL 33916	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 John W. Frazier
--	--



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/30/2019

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PRODUCER	CONTACT NAME: Diana Thompson
Hemdon Carr & Company	PHONE (A/C, No, Ext): (239) 939-1996 FAX (A/C, No): (239) 275-0277
10501 Six Mile Cypress Pkwy.	E-MAIL ADDRESS: diana@hemdoncarr.com
Suite 101	INSURER(S) AFFORDING COVERAGE
Fort Myers FL 33966-6400	INSURER A: Hudson Specialty Insurance Company
INSURED	INSURER B: Risk Placement Services, Inc.
Coastal Dayz Brewery LLC	INSURER C:
2161 McGregor Boulevard	INSURER D:
Fort Myers FL 33901	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: CL1942304720 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	Y		H8D100330181	04/27/2019	04/27/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	CL2729594A	04/27/2019	04/27/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Liquor Liability			CL2729594A	04/27/2019	04/27/2020	Limit \$1,000,000

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

Re: Event on 11/6/19
Roy Hobbs Diamond Enterprises, LLC is additional insured with respect to general liability

CERTIFICATE HOLDER

CANCELLATION

Roy Hobbs Diamond Enterprises, LLC 4301 Edison Avenue Fort Myers FL 33916	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
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09/30/2019

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PRODUCER Hemdon Carr & Company 10501 Six Mile Cypress Pkwy Suite 101 Fort Myers FL 33955-6400		CONTACT NAME: Diana Thompson PHONE (A/C, No, Ext): (239) 939-1996 FAX (A/C, No): (239) 275-0277 E-MAIL ADDRESS: diana@hemdoncarr.com	
INSURED Coastal Dayz Brewery LLC 2161 McGregor Boulevard Fort Myers FL 33901		INSURER(S) AFFORDING COVERAGE INSURER A: Hudson Specialty Insurance Company INSURER B: Risk Placement Services, Inc. INSURER C: INSURER D: INSURER E: INSURER F:	


COVERAGES **CERTIFICATE NUMBER:** CL1942304720 **REVISION NUMBER:**

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INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	Y	HBD100330161	04/27/2019	04/27/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ 2,000,000
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					PER STATUTE <input checked="" type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Liquor Liability		CL2729594A	04/27/2019	04/27/2020	Limit \$1,000,000

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

Re Event on 11/6/19
Roy Hobbs Diamond Enterprises LLC is additional insured with respect to general liability

CERTIFICATE HOLDER Roy Hobbs Diamond Enterprises, LLC 4301 Edison Avenue Fort Myers FL 33916	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 
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Roy Hobbs Baseball – RHWS Background

Addendum to Special Events Liquor Liability Application

This application is on behalf of Roy Hobbs Diamond Enterprises LLC (hereafter RHDE) of Fort Myers, Florida.

RHDE is the sole owner and operator of the Roy Hobbs World Series, an amateur baseball tournament for adults ages 30 and over. Roy Hobbs Concessions LLC and Roy Hobbs Foundation (501-c-3) are subsidiaries of Roy Hobbs Diamond Enterprises.

The 2019 event will be held October 19 through November 23 at multiple sites in Lee County, Florida. This Liquor Liability application, however, is limited to one site: The Player Development Clubhouse (PDC) at 4301-100 Edison Avenue, Fort Myers, Florida, 33916.

This will be the 31st year for the Roy Hobbs World Series, the 27th year on the fields of Lee County. The event covers 5 weeks for the first time ever, with different age groups attending each week, playing age group baseball (not softball) on the 23 professional baseball fields located in Lee County. An estimated 270 teams will attend this year, encompassing approximately 4300 amateur baseball players, ages 30-80+. The age groups are set up as follows, in sequential participation over the four weeks: 35+, 45+, 53+, 60+, 65+, 70+ and 75+.

As a part of the Roy Hobbs World Series, RHDE offers an exclusive Clubhouse option for players. The Clubhouse option is held in the major-league clubhouse facility at the PDC Complex. The facility is the former minor-league Spring Training headquarters of the Boston Red Sox and includes five of the 23 fields that RHDE uses for the Roy Hobbs World Series.

The Clubhouse option is an optional extra expense over the cost of the tournament, and it is designed to provide a realistic baseball Clubhouse experience for those who take the option. That experience includes a personal, named locker, full laundry services each day, breakfast in the mornings, snacks, soda and bottled water between and after games, full training services with professional trainers with hot and cold tubs and therapy rooms. And, once a player's games are done for the day, there is access to beer in the clubhouse. Players are limited as to quantities and they are not allowed to remove it from the Clubhouse under penalty of expulsion from both the Clubhouse and the tournament.

The PDC facility is owned by Lee County, Florida, and managed by its Parks & Recreation Department. The facility is leased to RHDE annually for its home offices and for baseball events operated by RHDE, both of which are covered by General Liability insurance policies. The County has allowed RHDE to dispense beer in the Clubhouse for 11 years, since the inception of the Clubhouse option. Lee County Parks and Recreation officials have granted permission for Roy Hobbs to have alcohol on the premises but are requiring RHDE get a County Alcohol Consumption permit to continue its practice of allowing players utilizing the Clubhouse option to consume beer on county premises. The permit application requires RHDE to carry Liquor Liability coverage, hence the reason for this Application. The RHDE Insurance certificate does show Host Liquor coverage; RHDE does not sell alcohol, in the Clubhouse or at its food concession stands.

Over the course of the 5 weeks, the average participation will be 80-85 players a week in the Clubhouse. The Clubhouse is open from 7 a.m. until 90 minutes after the last game of the day ends, no later than 7 p.m. Beer will be available to the players when they have finished playing for the day, and the hours the beer is available is generally 3 p.m. through 6:30 p.m. Each week is a different age group. Week 1 is 35 and over; week 2 is 45 and over; week 3 is 53 and over; week 4 is 60 and over; week 5 is 65 and over.

Beer is kept in a cooler in the Clubhouse training room. The cooler is locked until 2 p.m. and locked again at 7 p.m. when the Clubhouse closes. Players are limited to one beer per visit to the cooler and they are prohibited from taking multiple beers from the cooler. One of our clubhouse attendants is vigilant as to the process. Players are prohibited from taking beer from the clubhouse

under the penalty of expulsion from both the Clubhouse and the tournament. Two members of our staff have taken the Fort Myers Miracle's Alcohol Awareness Training course.

Two important questions are how can we make sure players do not abuse the consumption privileges, and how do we make sure no one removes beer from the building? On the surface, these are legitimate issues, but ones we are very aware of.

We have a lot of help from the players participating in the clubhouse option. They understand and take the guidelines seriously. Each week, we hold mandatory informational meetings about the Clubhouse guidelines, and everyone is required to sign off on those guidelines on the first day.

RHDE has been doing this for more than 10 years with only one documented instance of someone attempting to take beer (unsuccessfully) from the clubhouse. This is a self-policing operation as the players have accepted the responsibility for their behavior. And, it is no secret that RHDE will pull the trigger on anyone abusing the privileges of the Clubhouse. These participants have a lot of personal money tied up in the experience RHDE provides; the last thing they want is to be banned from the clubhouse and dismissed from the tournament. The vast majority of players leaving the clubhouse carry nothing with them since they have a locker, and RHDE personnel are doing their laundry. Those carrying bags out of the Clubhouse get extra scrutiny, and there is only one exit once games are finished for the day.

The alcohol awareness courses had heightened our sensitivity to our participants, and we have more than a decade of experience addressing this issue. For sure, there are clues that we look for, such as multiple trips by one person in a short time, particularly as we get close to closing time, and player bags going out the door. Over the years, we have found random bag checks when players are leaving to be an effective preventative solution. My clubhouse coordinator and I have 25 years of supervising clubhouse events between us, and we are very attuned to player behavior. Additionally, we get additional sets of eyes from our trainers and clubhouse staff, who are in constant contact with the players. The last thing we want is for a player to walk out of that clubhouse having had one too many or to decide to take one for the road. We are watching and interacting with them and will not hesitate to cut someone off. Based on our purchasing and consumption figures over the years, Clubhouse participants average 2 beers per person per day.

We are fortunate that our customers in the Locker Room Option of our event are mature and understand the nature of the opportunity, and they are as protective of it as we are. This is definitely not your corner sports bar clientele, for which we are grateful.

Night events: RHDE will host several Thursday night player receptions at the Player Development Complex. Under the auspices of the 501-c-3 Roy Hobbs Foundation, the RHWS is partnering with one of its sponsors – Sidelines Sports Grill, 4451 Veronica Shoemaker Blvd – to sell beer and finger foods for the players reception. Both Sidelines and Roy Hobbs Concessions will be supplying appetizer-style food. Proceeds of the event will benefit the Roy Hobbs Foundation.

There will be 4 Tuesday night (and 1 Monday night) manager receptions, totally hosted by RHDE and the Roy Hobbs Foundation. There will also be a Wednesday reception for the 80+ umpires in town for the 5 weeks; that is hosted by RHDE/RHF and Coastal Dayz is providing the beer that evening. The dates for these events are included in the application. The night events will be held on the patio area of the Clubhouse for 90 minutes each night within the 5:30-7:30 p.m. time frame. The Area is fenced and gated. There will be one man-gate for entrance and exit; attendees will be their event ID card for admittance; no one will be allowed to depart with alcohol.

Please feel free to contact Tom Giffen, 330.352.2171, with any questions.



Respectfully submitted, October 1, 2019



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**DIV OF ALCOHOLIC BEVERAGES & TOBACCO
2601 BLAIR STONE ROAD
TALLAHASSEE FL 32399-0783**

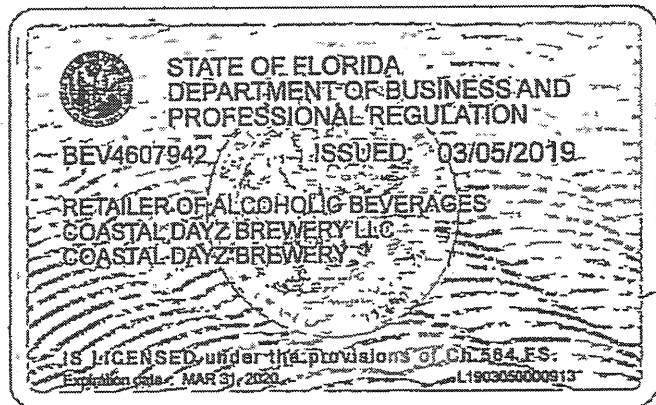
850.487.1395

**COASTAL DAYZ BREWERY LLC
COASTAL DAYZ BREWERY
20217 CASTLEMAINE AVENUE
ESTERO FL 33928**

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbecue restaurants, and they keep Florida's economy strong.

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Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

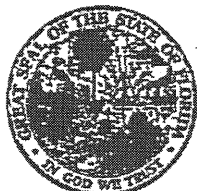
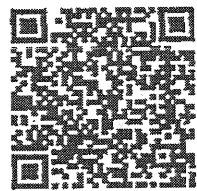


DETACH HERE

RON DESANTIS, GOVERNOR

HALSEY BESHEARS, SECRETARY

STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION DIV OF ALCOHOLIC BEVERAGES & TOBACCO	
LICENSE NUMBER	SERIES
BEV4607942	2COP
The RETAILER OF ALCOHOLIC BEVERAGES Named below IS LICENSED Under the provisions of Chapter 564 FS Expiration date: MAR 31, 2020	
COASTAL DAYZ BREWERY LLC COASTAL DAYZ BREWERY 2161 MCGREGOR BOULEVARD UNIT F FORT MYERS FL 33901	

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and
inge



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

BEV4607035

ISSUED: 04/01/2019

TOB-DUAL LICENSE
RETAILER OF ALCOHOLIC BEVERAGES
MELMAC ENTERPRISES LLC
SIDELINES SPORTS BAR & GRILL
CONSUMPTION ON PREMISES ONLY

IS LICENSED under the provisions of Ch.561 F.S.

Expiration date : MAR 31, 2020

L1904010001421

DETACH HERE

RON DESANTIS, GOVERNOR

HALSEY BESHEARS, SECRETARY

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
DIV OF ALCOHOLIC BEVERAGES & TOBACCO

LICENSE NUMBER	SERIES	TYPE	TOBACCO
BEV4607035	4COP	SFS	DUAL LICENSE

THE RETAILER OF ALCOHOLIC BEVERAGES

NAMED BELOW IS LICENSED

UNDER THE PROVISIONS OF CHAPTER 561 FS.

EXPIRATION DATE: MAR 31, 2020

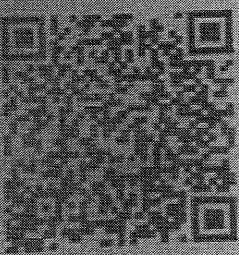
CONSUMPTION ON PREMISES ONLY

MELMAC ENTERPRISES LLC
SIDELINES SPORTS BAR & GRILL
4461 VERONICA SHOEMAKER BLVD
FORT MYERS FL 33916

ISSUED: 04/01/2019

DISPLAY AS REQUIRED BY LAW

SEQ # L1904010003127



CANNOT MOVE FROM
THIS LOCATION





**BUSINESSOWNER'S POLICY
DECLARATIONS**

Issued: 08/19/2019

**AmGUARD Insurance Company
A Stock Company**

Policy No.:
MEBP021622

Renewal of: MEBP929981

POLICY INFORMATION PAGE

[1] **Named Insured and Mailing Address**
MELMAC ENTERPRISES LLC
4451 Veronica S Shoemaker Blvd
Fort Myers, FL 33916

Additional Names of Insured
DBA SIDELINES

[2] **Agency**
K. BELL & ASSOCIATES INC.
49 Main Street
Cold Spring Harbor, NY 11724

[3] **Policy Period**
From September 23, 2019 to September 23, 2020, 12:01 AM, standard time at the insured's mailing address.

[4] **Description of Business**
Full-Service Restaurants

[5] **Coverage**
This policy consists of the Coverage Forms listed on the **Schedule of Forms and Endorsements (IIT SF 01 05)**.

[6] **Premium**
The premium shown below may be subject to adjustment.

	Excluded
Terrorism - Certified Acts	
TOTAL POLICY PREMIUM	\$8,410.00
TOTAL PAYABLE	\$8,410.00

[7] **Payment of Premium**
In return for your payment of premium, and subject to all terms of this policy, we agree with you to provide insurance as stated in this policy.



**BUSINESSOWNER'S POLICY
DECLARATIONS**

Issued: 08/19/2019

Policy No.: MEBP021622

Effective Date: 09/23/2019

SECTION I - PROPERTY COVERAGES AND LIMITS OF INSURANCE

LOCATION: 001 BUILDING: 001
4451 Veronica S Shoemaker Blvd
Fort Myers, FL 33916-2227
Lee County

Property Deductible: \$2,500
Wind/Hail Deductible: N/A
Optional Coverages/Glass Deductible: \$500
Classification: 09661 - Family-style Restaurant - Sales of Alcoholic Beverages up to 50% of Total Sales

COVERAGES:

Awnings Coverage

Limit	\$2,500
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Business Personal Property Coverage

Limit	\$200,000
Valuation	Replacement Cost

Liability

IMPORTANT NOTE	THIS COVERAGE IS RATED BASED ON AN ESTIMATE AND IS SUBJECT TO AUDIT
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Gross Sales at this Location	\$650,000
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Limit	Included
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Accounts Receivable

On-Premises Limit	\$25,000
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Off-Premises Limit	25,000
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Debris Removal

Limit	25%/\$10,000
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Equipment Breakdown Coverage (HSB)

Inspection Contact Name	CAREY MCMAHON
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Phone Number	513-309-8889
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Money and Securities

On Premises Limit	\$5,000
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Off Premises Limit	\$5,000
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Ordinance or Law - Increased Cost Of Construction

Limit	\$10,000
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Outdoor Signs - Optional Coverage

Limit	\$5,000
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Restaurant Coverage

Food contamination Limit	\$10,000
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Advertising Expense Limit	\$3,000
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Spoilage Per Occurrence Limit	n/a
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Brands and Labels	BPP Limit
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**BUSINESSOWNER'S POLICY
DECLARATIONS**

Issued: 08/19/2019

Policy No.: MEBP021622

Effective Date: 09/23/2019

Delivery Errors and Omissions	\$10,000
Fine Arts	\$25,000
Reward Payment	\$5,000
Lock Replacement	\$1,000
Merchandise Withdrawal Expenses	\$25,000
Ordinance or Law - Equipment Coverage	Building/BPP Limit
Credit Card Slips	\$10,000
Restaurant Deluxe Coverage	
Outdoor Property - Fences & Signs	\$10,000/\$30,000
Outdoor Property - Radio & TV Antennas	\$10,000/\$30,000
Outdoor Property - Outdoor Furniture & Decorative Structures	\$10,000/\$30,000
Outdoor Property - Trees, Shrubs & Plants	\$2,000/\$25,000/\$80,000
Outdoor Property - Lawns	\$5,000/\$25,000/\$80,000
Personal Effects	\$25,000
Checked Coats & Bags	\$5,000/\$50,000/\$100,000
Spoilage	
Deductible	\$500
Limit	\$40,000
Description of perishable stock	Restaurants
Breakdown or Contamination Coverage	Yes
Power Outage Coverage	Yes
Check here if a Refrigeration Maintenance Agreement is applicable for this location	Yes
Utility Services - Direct Damage	
Building	No
Personal Property	Yes
Limit	\$25,000
Tenants Improvements and Betterments	No
Utility	Public
Water Supply	Yes
Communication Supply	Yes
Check here to include Overhead Transmission Lines for Communication Supply	Yes
Power Supply	Yes
Check here to include Overhead Transmission Lines for Power Supply	Yes
Utility Services - Time Element	
Waiting Period	Lock In 72 Hour Waiting Period
Time Element Limit	\$25,000
Utility	Public
Water Supply	Yes
Communication Supply	Yes
Check here to include Overhead Transmission Lines for Communication Supply	Yes
Power Supply	Yes
Check here to include Overhead Transmission Lines for Power Supply	Yes
Valuable Papers and Records	
On-Premises Limit	\$25,000
Off-Premises Limit	\$25,000
Water Back-up and Sump Overflow	
Covered Property Limit	\$5,000
Business Income and Extra Expense Limit	\$5,000

**BUSINESSOWNER'S POLICY
DECLARATIONS**

Issued: 08/19/2019

Policy No.: MEBP021622

Effective Date: 09/23/2019

SECTION II – LIABILITY COVERAGES AND LIMITS OF INSURANCE

Each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II – Liability in the Businessowners Coverage form and any attached endorsements.

<u>Coverage</u>	<u>Limits of Insurance</u>
Liability and Medical Expenses - Each Occurrence	\$2,000,000
General Aggregate (Other than Products and Completed Operations)	\$4,000,000
Personal & Advertising Injury	Included
Products & Completed Operations Aggregate	\$4,000,000
Medical Expenses (Each Person)	\$5,000
Liability Property Damage Deductible	None
Liability Deductible - Bodily Injury	None

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STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

BEV4607035

ISSUED: 04/01/2019

TOB-DUAL LICENSE
RETAILER OF ALCOHOLIC BEVERAGES
MELMAC ENTERPRISES LLC
SIDELINES SPORTS BAR & GRILL
CONSUMPTION ON PREMISES ONLY

IS LICENSED under the provisions of Ch. 561 FS.
Expiration date : MAR 31, 2020

L1904010001421

RON DESANTIS, GOVERNOR

DETACH HERE

HALSEY BESHEARS, SECRETARY

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
DIV OF ALCOHOLIC BEVERAGES & TOBACCO

LICENSE NUMBER	SERIES	TYPE	TOBACCO
BEV4607035	4COP	SFS	DUAL LICENSE

The RETAILER OF ALCOHOLIC BEVERAGES

Named below IS LICENSED

Under the provisions of Chapter 561 FS.

Expiration date: MAR 31, 2020

CONSUMPTION ON PREMISES ONLY

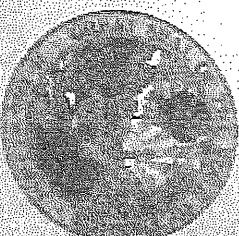
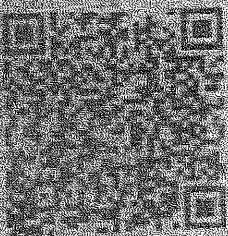
MELMAC ENTERPRISES LLC
SIDELINES SPORTS BAR & GRILL
4451 VERONICA SHOEMAKER BLVD
FORT MYERS FL 33916

ISSUED: 04/01/2019

DISPLAY AS REQUIRED BY LAW

REV. # 1/20/2015/2016

CANNOT MOVE FROM
THIS LOCATION





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DECLARATIONS**

Issued: 08/19/2019

AmGUARD Insurance Company
A Stock Company

Policy No.:
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Renewal of: MEBP929981

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COVERAGES:

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Limit	\$2,500
Business Personal Property Coverage	
Limit	\$200,000
Valuation	Replacement Cost
Liability	
IMPORTANT NOTE	THIS COVERAGE IS RATED BASED ON AN ESTIMATE AND IS SUBJECT TO AUDIT
Gross Sales at this Location	\$650,000
Limit	Included
Accounts Receivable	
On-Premises Limit	\$25,000
Off-Premises Limit	25,000
Debris Removal	
Limit	25%/\$10,000
Equipment Breakdown Coverage (HSB)	
Inspection Contact Name	CAREY MCMAHON
Phone Number	513-309-8889
Money and Securities	
On Premises Limit	\$5,000
Off Premises Limit	\$5,000
Ordinance or Law - Increased Cost Of Construction	
Limit	\$10,000
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Restaurant Coverage	
Food contamination Limit	\$10,000
Advertising Expense Limit	\$3,000
Spoilage Per Occurrence Limit	n/a
Brands and Labels	BPP Limit

**BUSINESSOWNER'S POLICY
DECLARATIONS**

Issued: 08/19/2019

Policy No.: MEBP021622

Effective Date: 09/23/2019

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Utility	Public
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Communication Supply	Yes
Check here to include Overhead Transmission Lines for Communication Supply	Yes
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**BUSINESSOWNER'S POLICY
DECLARATIONS**

Issued: 08/19/2019

Policy No.: MEBP021622

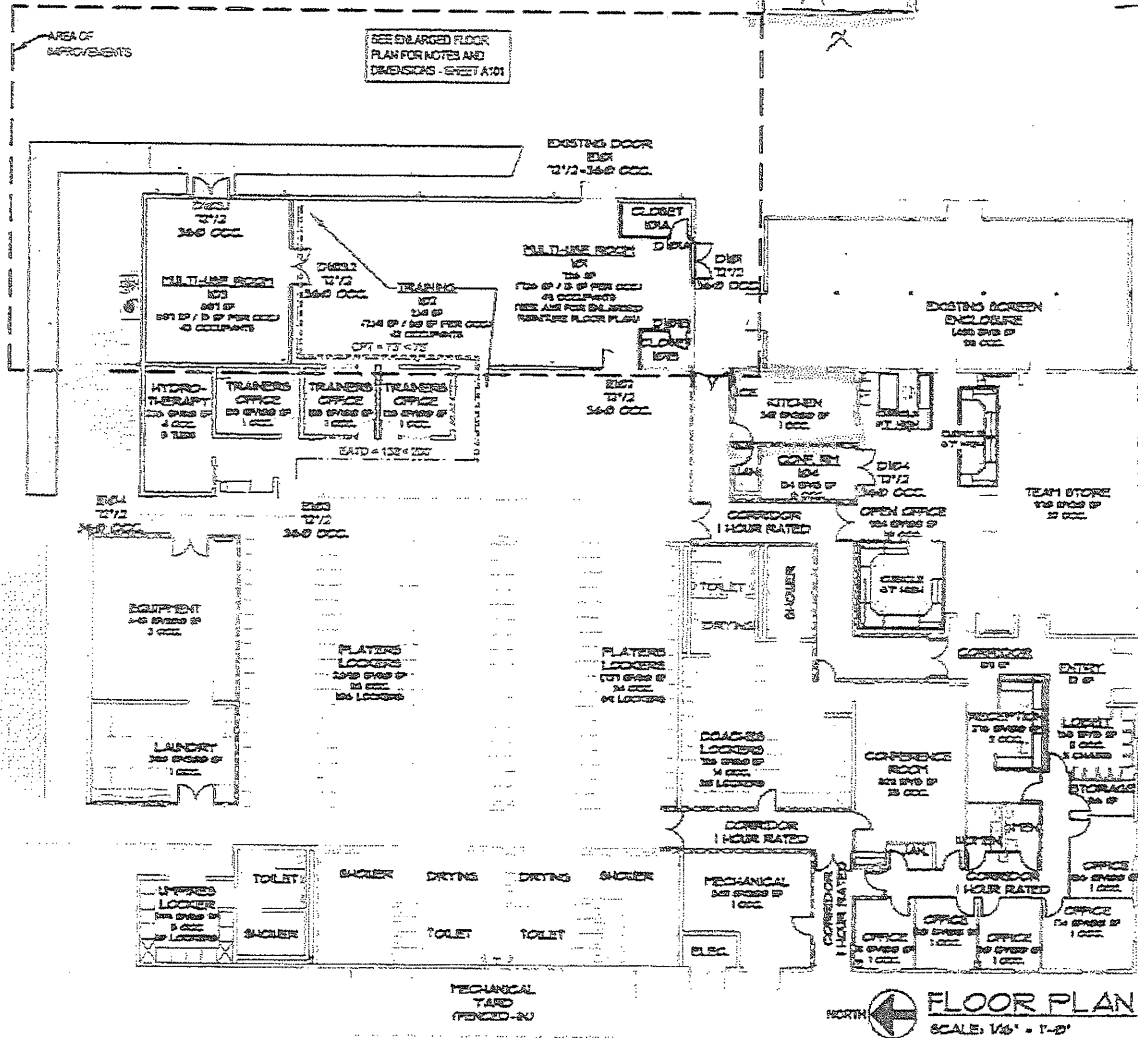
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SECTION II - LIABILITY COVERAGES AND LIMITS OF INSURANCE

Each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Businessowners Coverage form and any attached endorsements.

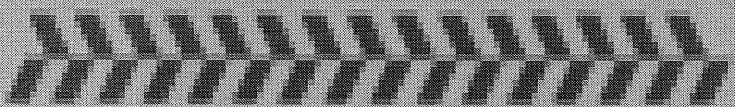
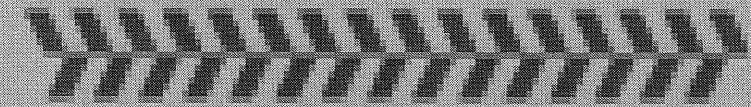
<u>Coverage</u>	<u>Limits of Insurance</u>
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General Aggregate (Other than Products and Completed Operations)	\$4,000,000
Personal & Advertising Injury	Included
Products & Completed Operations Aggregate	\$4,000,000
Medical Expenses (Each Person)	\$5,000
Liability Property Damage Deductible	None
Liability Deductible - Bodily Injury	None

Handwritten signature



"Exhibit A"

2019 ROY HOBBES



WORLD SERIES

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