

EVENT PERMIT



Ordinance 17-08

3OCA GRANDE ART CENTER-ART & PHOTOGRAPHY SHOWS

PERMIT NUMBER: TMP2019-00360

11/21/2019, 12/13/2019, 01/23/2020, 01/30/2020, Date(s) of Event:

02/06/2020, 02/13/2020, 02/27/2020, 03/06/2020,

03/19/2020, 03/30/2020, AND 04/02/2020 FROM 4:00PM

UNTIL 7:30PM

Property Owner:

LEE COUNTY

Applicant:

JOY STROTHER

941-964-1700

Description:

ART & PHOTOGRAPHY MEETINGS & SHOWS WITH A COCKTAIL RECEPTION

STARTING ON 11/21/19 & RUNNING VARIOUS DATES UNTIL END DATE OF

4/02/2020 FROM 4:00PM UNTIL 7:30PM

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

DISHONG-BOWEN COMMUNITY HOUSE/BOCA GRANDE COMMUNITY PARK

Will the event be attended by 1000 or more people? No

Will the event be held on County Owned Property? Yes

To Be Consumed Will there be alcohol consumed or sold at the event?

Will a bond be posted for this event? No

Permit Conditions:

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

Board of County Commissioners Lee County, Florida

County Manager Date

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Boca Grande Art Center - Art Shows - 2019/2020 Season

TMP2019-00360





Event Application

Check the appropriate box(es) below:

- F SPECIAL EVENT PERMIT
- □ USE OF COUNTY PROPERTY PERMIT
- $\overline{\times}$ PERMIT TO FLYND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Boca Grande Art Center - Art & Photography Shows
Date(s) of Event / Production:	11/21/2019, 12/13/2019, 1/23/20, 1/30/20, 2/6/20, 2/13/20, 2/27/20, 3/6/20, 3/19/20, 3/30/20 4/2/20
Location(s) of Event:	Dishong-Bowen Community House / Boca Grande Community Park / Dishong Bowen House
Name of Applicant:	Joy Strother
Applicant Address:	236 Banyan Street Boca Grande, FI 33921
Applicant Phone Number:	1-941-964-1700
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	joy@bocagrandeartcenter.org
Estimated Attendance:	200
Event Description: Include each activity, when activities take place, etc.	Art/Photography meetings/shows with a cocktail reception.
Hours of Operation:	4:00p.m 7:30p.m.
STRAP # of Parcel:	144320010000500100
Owner of Premises*:	Lee County Government

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



Fill out the following questions for all permit types:

What is the Zoning Classification of	the premises? Public Facility	
Are any temporary structures to be	nstalled for the event? ☐ Yes ☐ No	Type:
Do you have the appropriate permit	s for the temporary structures?	Yes 🔀 No
* For a 'Special Event' and 'Use of C indentified, including all parking are	ounty Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Eve	ent: Italiano Insurance Services, Inc.	
Note: Certificate of Insurance must be subn	nitted at time of application	
Surety Company Bonding this Event	(Name and Address): N/A	
Will Vehicles be Used as Part of Th Event?	is Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
⊤Yes ▼No	⊠ Yes	▼ Yes No
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food:	N/A	
Type of Food being Served: Hors d'o	euvers	
Section II - USE OF COUNTY	PROPERTY PERMIT	and the experience of the expe
Organization Sponsoring the Event:	Boca Grande Art Center	
Fill out this portion for applications	for Solicitation in the County Rights-of-Way	<i>/:</i>
Name of Charity:		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration n	umber:	
	e & Consumer Services §496.405 or proof the organization	s exempt from this requirement, §316,2045)
Section III - SALE/CONSUM	PTION OF ALCHOLIC BEVERAGES P	energyatus da esta esta esta en esta en esta en ERMIT
Is alcohol being sold/consumed on C If Yes, then a "Lee County Alcohol Permit" is requi	ounty Property? red. Only non-profit organizations can sell alcohol on County	▼ Yes ■ No Property.
Non-profit certificate/registration no (Required if alcohol is to be <u>SOLD</u> at the event)	umber: 85-8012708897C-9	
Please note: A permit from the State of Flor further details	ida Division of Alcoholic Beverages and Tobacco may a	also be required; please call (239) 344-0885 for



ection IV - FILM / VIDEO / PHOTO	SKAPHY PEKIVI	Amount I I I I I I I I I I I I I I I I I I I	N//	4		
pe of Production (choose all that apply):						
TV Movie or Special TV Ser	ies / Pilot	Γ	TV Comme	rcial	Still Photos	
Public Service Announcement Industr	ial / Documentary	Г	Other:			
ll any of the following be needed or included	! *?					
Street Closure			Yes	No		
Traffic / Crowd Control			Yes	┌ No		
Fire or Burning			┌ Yes	┌ No		
Explosives or Pyrotechnics			T Yes	┌ No		
Animals, Large or Small			☐ Yes	┌ No		
Construction of Any Kind			┌─ Yes	T No		
Large and/or Numerous Vehicles	J		┌─ Yes	┌ No		
Helicopters, Boats, etc.			☐ Yes	☐ No		
Stunts			┌─ Yes	┌ No		
Other			T Yes	┌ No		
Special Parking Requirements:						
City or County Services Required: (Personne	l. equipment, facili	ities. e	tc.)			
		*				
he following information is required for loca	ıl and state record	s on pi	roduction in	Florida to t	track the economic i	mpa
					track the economic in	mpa
he industry. If exact figures are not available			sely as possil			mpa
he industry. If exact figures are not available Number in Cast:	e, please estimate	as clos	sely as possil Nur	ole.		mpa
The following information is required for local he industry. If exact figures are not available Number in Cast: Total budget: Hotel room nights:	e, please estimate Number in Crew: —	as clos	sely as possil Nur	ole.		mpa

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 a	ffirms that any and all information is accurate to the best (
his/her knowledge.	
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mostrother.	LOND COLL
Signature of Applicant	Witness
Jay Strother	Tonya H. Doherli
Print Name of Applicant and Title	Print Name of Witness
10-31-19	10.31.19
Date	Date



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

Check the appropriate box(es) below:

SPECIAL EV	/ENT PERMIT
.⋉ USE OF CO	UNTY PROPERTY PERMIT
PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	
÷ .	
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only.
•	
Deputies (How Many?):	None
ŧ	
•	
Fee for Services:	None
Special Arrangamento	
Special Arrangements:	Alcoholic beverages must remain within the confines of the event.
Special Arrangements: .	Alcoholic beverages must remain within the confines of the event.
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Special Arrangements:	
Special Arrangements:	Alcoholic beverages must remain within the confines of the event. Print Name: Lt. Brady
Special Arrangements:	
Special Arrangements:	Print Name: Lt. S Brady Signature: Steve Frack
Special Arrangements:	Print Name: Lt. S Brady Signature: Steve Hand



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

FILM PERMIT

IX USE OF COUNTY PROPERTY PERMIT

AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, I	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	The state of the s	None
Fee for Services:		
	o sa c'hannada da sa c'hannada	None
Flammable Vegetation:		
		None
First Aid Equipment:		
PRINCE AND		None
Fire Extinguishing:		
		None
Special Arrangements:		
		In case of emergency - Dial 911
	Print Name:	C.W. Blosser
	Signature:	CAL
	Title:	Fire Chief
	Date: 11/19/	/19



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

Check the appropri	ate box(es) belo	w:					
☐ SPECIAL EV	ENT PERMIT				÷	*.	
	UNTY PROPERTY F	PERMIT					,
FILM PERN	MIT			•			
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PL	EASE INDICATE I	BELOW WHAT REVENT.	ARRANGEME	NTS YOUI	R ORGAN	IOIŢĄŞII
Treatment Facilities:	None necessary.		**************************************		•		
		•		•	*		
Medical Personnel:	None nécessary.		· .	*		•	
Medical Supplies /	None necessary.		46.00	Z*			*,
Equipment:	The state of the s			•		,	•
Safety Requirements:	No additional preca	utions necessary.					
					<i>2</i>		
5.6							
Fee for Services	Not applicable.	•			•		
						,	•
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emerg	ency. To arrange	special event co	verage, con	tact our of	fice at
•	·				* ***		
•	Print Name:	Douglas B. Higgins	5.				
•	Signature:	Douglas B. H	iggins of the company	oogsal ili seggess gigess oveline Chanes browngesch Missocial Swiss, e.g., Creek reight Spatialonsk sond Sugarach Swinner, winsklingbrog plans 224 465327	conta Poste S. Anta dengas cost ~ A	, ,	
	Title:	Division Chief		ŧ			
	. Date:	11-05-2019					,



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

Check the appropri	iate box(es) be	elow:	•		`	* .
SPECIAL EV	/ENT PERMIT	•		i ·	*	
⋉ USE OF CO	OUNTY PROPERTY	Y PERMIT			\$	•
₹ PERMIT TO	SELL AND CONS	SUME ALCOHOLIC BEVER	RAGES WITHIN LE	E COUNTY F	ACILITIES	
FILM PERM	AIT .					
		PLEASE INDICATE BELOV PLY WITH FOR THEIR EVI		GEMENTS Y	OUR ORGAN	IZAŢION
				,		
Parking:	Vehicles shall not not park in such a	be parked in such a manner manner that would block sid	as to block the free a dewalks or bikeways.	ind safe flow o	f traffic. Vehicle	es shall
	•	and the second of the second o				
Ingress and Egress:	Access to parking	shall be only at established of	driveways.	-		
	normal management of the control of					
Special Arrangements:	Use Sheriff or High	nway Patrol officers to contro	al traffic as needed		*	
appoint in an Bernenea.			n traine as needed.			
\$	The state of the s			• .	•	,
•		· · · · · · · · · · · · · · · · · · ·			•	
	Print Name:	Stephen M. Jansen	,			*
	Signature:	Stephen M. Jansen, P.E., FI Lic No. 043618	Digitally signed by Stophen 55 Lansen, F.S., 1915; No. 109; 1, volumentes 61 Lansen, F.S., Frinches 64 Lansen, F.S., Frinches 54 Stophen 56; 1916; No. 104 Stophen 56; No. 104 S	• 048018 •Dees of Intersections/poss		
•	Title:	Traffic Engineer				
	Date:	Nov 5, 2019	>		0	. •
	•				-	

Boca Grande Art Center - Art Shows - 2019/20 Season

Lee County Event Permit Application



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

Check the appropr	iate box(es) be	low:		.8		
- SPECIAL E	VENT PERMIT			,		
	DUNTY PROPERTY	Y PERMIT *				
		SUME ALCOHOLIC BEVE	RAGES WITHIN LF	F COUNTY FA	CILITIES	,
FILM PERI		× 6	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_ 000.417.77	0,211,20	
						*
AFTER REVIEWING THE WILL REQUIRE THE APP	E APPLICATION, I	PLEASE INDICATE BELO	W WHAT ARRANG	SEMENTS YOU	ur organi	ZATIO
			/ San F W E -	,		
Illumination:		g must be provided by pern	nit holder and remove	ed after the ever	nt. Open flam	ies are
*,	prohibited.		*			, ^
	*					*
Parking Areas:	Parking is permitte	ed in existing parking areas	located at the Boca G	Grande Commur	nity Park	***************************************
	The state of the s	3 f			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
E .	***************************************				6 %	
Special Arrangements:	Permit Holder mus	st follow all guidelines unde	er ordinance #95-09 (c	calling and cons	umption) All	alcoho
, mangements.	consumption must	t stay within the designated	d area discussed with	the P&R supervi	isor at the Boo	arcono Ia ,
	NAVA - 00000000	•		4		
	already granted at	Recreation Director or Dep the Boca Grande Commun.	outy Director approve itv Park) by signing be	es this alcohol po elow.	ermit (2 - perr	nits
			, , , , , ,			

					ar "	
				v		
	Print Name:	Jesse Lavender	. Joe Wier			
•	Signature:	Jesse Lavender	Digitally signed by Jesse Date: 2019.11.06 14:29:3	şeph R V	Vier	*, .
	Title:	Director	Supervisor	,	,	, š
	· Date:	11/6/19	11/4/1	19		



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	low:		•	•	
SPECIAL EVE	ENT PERMÎT	•	,		,	
□ USE OF COU	INTY PROPERT	Y PERMIT	*			•
PERMIT TO	CONS	SUME ALCOHOLIC	BEVERAGES WI	THIN LEE COUNT	Y FACILITIE	S
FILM PERMI						*
AFTER REVIEWING THE A	APPLICATION, CANT TO COM	PLEASE INDICATE PLY WITH FOR THE	BELOW WHAT	ARRANGEMENT	S YOUR OF	RGANIZATIO
				-		
Insurance Requirements:	occurrence to p	neral liability insurance rotect against bodily i I event within Lee Cou	injury and/or prop	mits of One Million erty damage relativ	Dollars (\$1,00 e to applicar	00,000) per ots use of
	(\$1,000,000) per	t Liquor Liability insur occurrence. Should I policy, minimum acc	Host Liquor Liabilit	ty coverage be affo	d under the	Commercial
			·	•		
Special Arrangements:	A Certificate of In Board of County additional insure	nsurance shall be sub Commissioners, P.O. ed.	mitted as evidence Box 398, Fort Myei	e of the required co rs, FL 33902 as the c	verage listing ertificate hol	Lee County Ider and as an
	Subject to proof	of insurance.				
	· · · · · · · · · · · · · · · · · · ·				•	
	Print Name:	Mike Figueroa	•			
	Signature:	This for	graduan managa		•	*
	Title:	Risk Program Manag	jer			•
	Date:	November 5, 2019				•



LEE COUNTY VISITOR & CONVENTION BUREAU 2201 SECOND STREET, SUITE 600 FORT MYERS, FLORIDA 33901 (239) 338-3500

Check the appropriate box(es) below:

FILM PERMIT ONLY

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

Special Arrangements:	
Other:	
	Print Name:
	Signature:
	Title:
	Date:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/28/2019

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

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). 941-964-0400 CONTACT Italiano Insurance Services In NAME: ITALIANO INSURANCE-BOCA P. O. Box 1406 Boca Grande, FL 33921 PHONE (AC, No, Ext): 941-964-0400 FAX 941-964-0595 E-MAIL ADDRESS: @Italianoinsurance.com Italiano Insurance Services In INSURER(S) AFFORDING COVERAGE INSURER A: Hartford INSURED Boga Grande Art Center Inc INSURER B : P O Box 979 Boca Grande, FL 33921 INSURER C: INSURER D INSURER E 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. ADDL SUBR INSD WVD TYPE OF INSURANCE POLICY NUMBER X COMMERCIAL GENERAL LIABILITY 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE 21SBMRS7373 1,000,000 11/20/2019 11/20/2020 10,000 MED EXP (Any one person) 1,000,000 PERSONAL & ADV INJURY GEN'L AGGREGATE LIMIT APPLIES PER 2,000,000 GENERAL AGGREGATE POLICY PRO-2,000,000 PRODUCTS - COMP/OP AGG OTHER: AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) ANY ALITO BODILY INJURY (Par person) OWNED AUTOS ONLY SCHEDULED AUTOS BODILY INJURY (Per accide PROPERTY DAMAGE (Per accident) HIRED AUTOS ONLY UMBRELLA LIAB OCCUR EACH OCCURRENCE \$ EXCESS LIAB CLAIMS-MADE AGGREGATE **RETENTIONS** WORKERS COMPENSATION AND EMPLOYERS' LIABILITY PER STATUTE , ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT OFFICER/MEMBER (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) The above listed certificate holder has been named as additional insured with respects to the above listed General Liability policy for the event on 11/21/19, 12/13/19, 1/23/20, 1/30/20, 2/6/20, 2/13/20, 2/27/20, 3/6/20, 3/19/20, 3/30/20, 4/2/20. Host liquor is included. OK 11/05/2019 CERTIFICATE HOLDER 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. Lee County Board of County Commissioners P O Box 398 AUTHORIZED REPRESENTATIVE Fort Myers, FL 33902 elua, Uds

ACORD 25 (2016/03)

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