



EVENT PERMIT

Ordinance 17-08



WE COUNT - LEHIGH CENSUS BLOCK PARTY

PERMIT NUMBER: TMP2020-00025

Date(s) of Event: MARCH 14, 2020 FROM 11:00AM-3:00PM

Property Owner: LEE COUNTY ROW

Applicant: GWYN GITTENS
239-839-4238

Description: CENSUS EDUCATION & COMPLETION ASSISTANCE TO INCREASE PARTICIPATION IN THE 2020 CENSUS.

Location of event: 2300 ROW JOE AVE

RIGHT-OF-WAY ALONG JOE AVE S BETWEEN LEONARD BLVD S & 24TH ST S

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 ? 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

 2-26-2020
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

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	We Count - Lehigh Census Block Party
Date(s) of Event / Production:	March 14, 2020
Location(s) of Event:	Right-of-Way for Joe Ave S. (Between Leonard Blvd S and 24th ST SW) Lehigh Acres, Florida 33973
Name of Applicant:	Lehigh Complete Count Committee
Applicant Address:	2705 48th St. S. W. Lehigh, 33976
Applicant Phone Number:	239-839-4238
Contact Person: (If different from applicant)	Gwyn Gittens
Contact Phone Number: (If different from applicant)	
Email Address:	lehighcompletecommittee@yahoo.com
Estimated Attendance:	75-250
Event Description: Include each activity, when activities take place, etc.	In order to increase participation in the 2020 Census, we are taking the message to our hardest to count census tracks. We believe education will drive out fear and complacency. Our message We Count. We will have: -2 Census completion areas, by cell phone and by computer using the Goodwill computer lab bus
Hours of Operation:	11:00 a.m. - 3:00 p.m.
STRAP # of Parcel:	Adjacent Parcels to ROW:32442603000060150, 32442603000120240
Owner of Premises*:	Lee Co. BOCC, all activities proposed in ROW.

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

Lee County Event Permit Application



What is the Zoning Classification of the premises? Vacant Residential

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: _____

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

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

Will Vehicles be Used as Part of This Event?

☒ Yes ☐ No

If yes, automobile coverage must be included on the certificate of insurance.

Will Food be Available at this Event?

☒ Yes ☐ No

If yes, products liability coverage must be included on the certificate of insurance.

Will Alcoholic Beverages be served/consumed at this Event?

☐ Yes ☒ No

If yes, liquor liability coverage must be included on the certificate of insurance.

Name & Address of Organization
Providing Food: _____

Lehigh Complete Count Committee

Type of Food being Served: Hot Dogs and Drinks

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: Lehigh Complete Count Committee

Address of Charity: _____

Phone Number: 239-839-4238

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: _____

(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



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

* For any marked Yes, provide further details below:

Goodwill Bus and small food truck

Special Parking Requirements:

none

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: _____ <small>number of rooms x number of nights</small>	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.

Lee County Event Permit Application



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

Witness

Print Name of Applicant and Title

Print Name of Witness

Date

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 in authorized areas only. Roadways are not to be impeded in any way.

Deputies (How Many?):

2 deputies for road closure, traffic control and security on Joe Ave S between Leonard Blvd S and 24th St SW while event takes place.

Fee for Services:

Vendor will contact LCSO details unit at 239-477-1199

Special Arrangements:

Vendor will need to have a minimum of 2 barricades/devices at both Joe Ave S/ Leonard Blvd S and Joe Ave S/ 24th St SW for road closure. Vendor will need to hire 2 deputies for traffic presence to assist with road closure on Joe Ave S. One deputy will be positioned at Joe Ave S/ Leonard Blvd S and one deputy will be positioned at Joe Ave S/ 24th St SW to maintain the safety and security of participants. All items used during event will need to be removed from roadway as quickly as possible when event ends so that road may be reopened.

Print Name: Lt. S. Brady

Signature:

Lt. Steven J. Brady

Title:

Special Events, Permits and Details

Date:

2-13-20

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

Lehigh Acres Fire Control Dist
686 Thomas Sherwin Ave S
Lehigh Acres FL 33974

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?)

N/A

Fee for Services:

N/A

Flammable Vegetation:

N/A

First Aid Equipment:

Fire Extinguishing:

2A:10B:C Fire extinguisher

Special Arrangements:

Do not obstruct traffic of Leonard Blvd S. Maintain minimum 20 feet unobstructed emergency vehicle access on 24th St SW. All persons moving around traffic should have safety vests.

Print Name:

Ken Bennett

Signature:

Ken Bennett

Title:

Asst Chief of Life Safety, Fire Marshal

Date:

2/18/20

we Count - Lehigh Census Block Party - March 14, 2020

Lee County Event Permit Application



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY

2000 Main St., Suite #100

FORT MYERS, FL 33901

(239) 533-3911

Lehigh Acres Fire Control
636 Thomas Sherwin Ave S
Lehigh Acres FL 33974

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:	N/A
Medical Personnel:	N/A
Medical Supplies / Equipment:	N/A
Safety Requirements:	Any persons working / standing around active roads should have safety vests for visibility.
Fee for Services	N/A
Special Arrangements:	

Print Name: Ken Bennett

Signature: Ken Bennett

Title: Asst Chief of Life Safety, Fire Marshal

Date: 2/18/20



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: See Special Arrangements below.

Medical Personnel: See Special Arrangements below.

Medical Supplies / Equipment: See Special Arrangements below.

Safety Requirements: See Special Arrangements below.

Fee for Services: See Special Arrangements below.

Special Arrangements: LCEMS defers to Lehigh Acres Fire Control and Rescue District for specifying EMS coverage for this event, as it falls within their response district. Their contact information is:
636 Thomas Sherwin Ave S, Lehigh Acres, FL 33974
Phone: 239-303-5300 Email: firerescue@lehighfd.com

Print Name: Douglas B. Higgins

Signature: Douglas B. Higgins

Title: Division Chief

Date: February 7, 2020

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
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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:

No event parking permitted on or within the Leonard Boulevard road right-of-way. Roadside parking should be confined to right-of-way along vacant lots and not alongside occupied homes. Any parking outside the right-of-way shall require permission of the lot owner. Parking shall not block or restrict access to occupied homes.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

Shall use Lee County Sheriff's Office for assistance with traffic control as needed. Emergency vehicle access via Joe Ave S shall be maintained at all times. Proper road closure at both ends shall be provided with Barricades and Signs or by Law Enforcement. Also the applicant should reach out to the one occupied home in the block to be closed to solicit a "no objection" response.

Print Name: Bryan Miller

Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller
Date: 2020.01.31 09:34:44 -05'00'

Title: Senior Project Manager

Date: January 31, 2020

Count-Lehigh Census Block Party-March 14, 2020

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:

Event is not on or near Lee County Park property and will not interfere with park operations or programs.

Print Name: Kimberly Garrett

Signature: Kimberly Garrett

Digitally signed by Kimberly Garrett
Date: 2020.01.30 17:02:26 -05'00'

Title: Administrative Manager

Date: January 30, 2020

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
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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.

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.

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: February 20, 2020



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/20/2020

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).

PRODUCER Goodlad & Swank Insurance, LLC 702 LEELEND HEIGHTS BLVD W LEHIGH ACRES FL 33936		CONTACT NAME: CSR HOUSE PHONE (A/C, No, Ext): (239) 674-7630 FAX (A/C, No): (239) 674-7636 E-MAIL ADDRESS:	
INSURED Lehigh Community Services 201 Plaza Dr Lehigh Acres FL 33936-6071		INSURER(S) AFFORDING COVERAGE INSURER A: Scottsdale Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 41297	

COVERAGES **CERTIFICATE NUMBER:** CL2022000486 **REVISION NUMBER:**

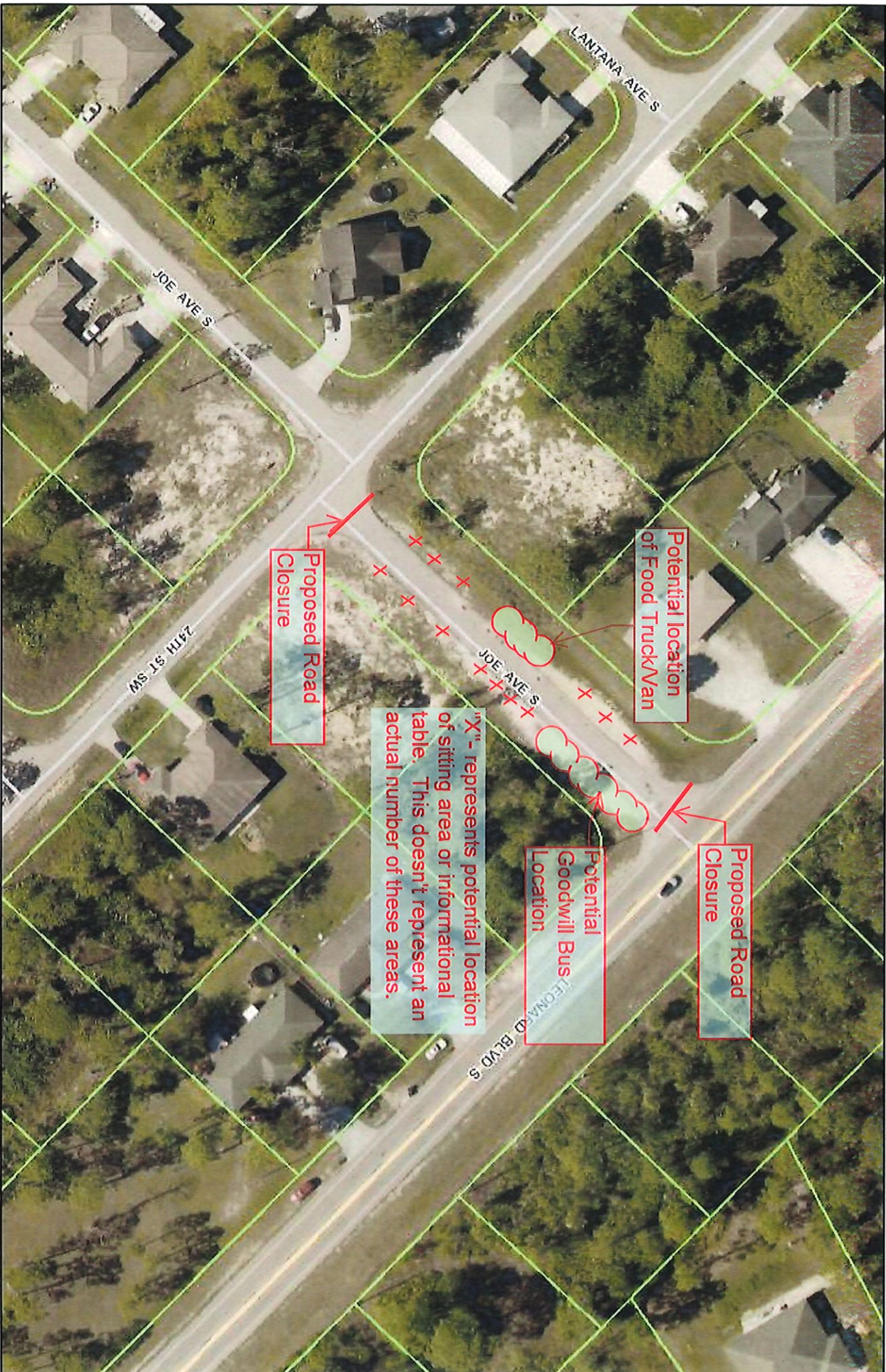
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		CPS3308201	12/23/2019	12/23/2020	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 - COMP/OP AGG \$ 2,000,000 Employee Benefits \$
	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 (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 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)

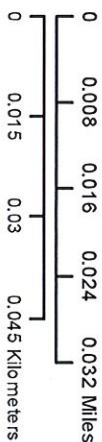
OK 02/20/20

CERTIFICATE HOLDER Lee County Board of County Commissioners PO 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
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South Florida Water Management District
3301 Gun Club Road, West Palm Beach, Florida 33406
561-686-8800; www.sfwmd.gov

Regulation - Application Tools



DISCLAIMER
This map is a conceptual or planning tool only. The South Florida Water Management District does not guarantee or make any representation regarding the information contained herein. It is not to be used for binding and does not affect the interests of any persons or properties, including any present or future right or use of real property and is exempt from public records disclosure and confidential under Section 119.07(3)(e)(1), Florida Statute.