

EVENT PERMIT



Ordinance 17-08

BARNETT/ESSMAN WEDDING

PERMIT NUMBER: TMP2020-00057

Date(s) of Event: NOVEMBER 14, 2020 3:00PM UNTIL 7:00PM

Property Owner:

LEE COUNTY

Applicant:

RUTH BARNETT

727-643-3367

Description:

WEDDING CEREMONY ON BANYAN STREET ON NOVEMBER 14, 2020 FROM

3:00PM UNTIL 7:00PM INCLUDES SET UP, CEREMONY, AND CLEAN UP.

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

BANYAN STREET

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

County Manager Date

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Barnett/Essman - Banyan Street Wedding11/14/20

TMP2020-00057



Event Application

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT	
☑ USE OF COUNTY PROPERTY PERMIT	
PERMIT TO SELECTIVE CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FA	CILITIES
FILM PERMIT	

Section I - GENERAL INFORMATION (All Permit Types)			
Title of Event / Name of Production	BARNETT / ESSMAN WEDDING		
Date(s) of Event / Production:	NOVEMBER 14, 2020		
Location(s) of Event:	BANYAN STREET		
Name of Applicant:	RUTH BARNETT		
Applicant Address:	6745 BURNING TREE DRIVE SEMINOLE, FL 33777		
Applicant Phone Number:	727-643-3367		
Contact Person: (If different from applicant)			
Contact Phone Number: (If different from applicant)			
Email Address:	BARNETT262@GMAIL.COM		
Estimated Attendance:	200		
Event Description: Include each activity, when activities take place, etc.	Wedding Ceremony on Banyan Street 3:30PM - 6:30p (includes set-up, wedding, clean-up		
Hours of Operation:	3:00p.m 7:00p.m.		
STRAP # of Parcel:	14432001000050010		
Owner of Premises*:	LEE COUNTY GOVERNMENT		

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



Fill out the following questions for allpermit types:

What is the Zoning Classification of the I	premises? D.O.T RIGHT OF WAY / PUB	BLIC FACILITY
Are any temporary structures to be insta	lled for the event? Yes No	Type: FLORAL DECORATIONS
Do you have the appropriate permits for	the temporary structures?	Yes V No
* For a 'Special Event' and 'Use of Count indentified, including all parking areas.	ry Property' permit, submit a site plan wit	th all proposed facilities and activities
Insurance Company Insuring the Event:	TBD	
Note: Certificate of Insurance must be submitted	at time of application	
Surety Company Bonding this Event (Na	me and Address): N/A	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
☐ Yes	Yes No	✓ Yes
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization TE Providing Food:	BD	
Type of Food being Served: Wedding F	ood TBD	
The state of the s		
Section II - USE OF COUNTY PR	ROPERTY PERMIT	
Organization Sponsoring the Event: N//	A	
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	7
Name of Charity:		
Address of Charity:		
Address of Charity: Phone Number:		
Phone Number:		
Phone Number: Non-profit certificate/registration num		s exempt from this requirement. §316.2045)
Phone Number: Non-profit certificate/registration number (Proof of registration with the Dept. of Agriculture & Control of the Control of the Control of Agriculture & Control of the Co	ber:	
Phone Number: Non-profit certificate/registration number (Proof of registration with the Dept. of Agriculture & Consumption of the Consumption of	ober: Consumer Services §496.405 or proof the organization i ON OF ALCHOLIC BEVERAGES P	ERMIT
Phone Number: Non-profit certificate/registration number (Proof of registration with the Dept. of Agriculture & Consumption of the Consumption of	ober: Consumer Services §496.405 or proof the organization i ON OF ALCHOLIC BEVERAGES Planty Property? Only non-profit organizations can sell alcohol on County	ERMIT



TO OF Product	ion (choose all tha	at applyl.								
TV Movie or		TV Series	/ Pilot	П	TV Commer	cial	Г	Still Photo	is.	
	ce Announcement				Other:	Ciui		Jen i noto		
			· · · · · · · · · · · · · · · · · · ·	1-	Other			***********		
	following be need	ed or included*?		4						
	treet Closure				Yes	-	No			
	raffic / Crowd Con	itrol			Yes		No			
Fi	ire or Burning				Yes		No			
Ex	xplosives or Pyrot	echnics			☐ Yes		No			
Α	nimals, Large or S	mall			☐ Yes		No			
	construction of An				Yes		No			
	arge and/or Nume				☐ Yes	П	No			
Н	lelicopters, Boats,	etc.			Yes		No			
St	tunts				☐ Yes		No			
0	Other				Yes		No			
			low:					,		
								4		
Special Parkin	ng Requirements:							,		
Special Parkin	ng Requirements:									
Special Parkin	ng Requirements:									
	ng Requirements:	ed: (Personnel, e		ities, e	tc.)					
		ed: (Personnel, e		ities, e	tc.)					
		ed: (Personnel, e		ities, e	tc.)					
City or Count			quipment, facili	,		-lorida	a to tr	ack the ec	onomic im	ıpa
City or Count	ry Services Require	quired for local a	quipment, facili	s on pr	oduction in I		a to tra	ack the ec	onomic im	npa
City or Count The following the industry.	cy Services Require g information is rea If exact figures ar	quired for local a e not available, p	quipment, facili	s on pr	roduction in I	le.		ack the ec	onomic im	npa
City or Count The following the industry. Number in Cas	cy Services Require g information is rea If exact figures ar	quired for local a e not available, p	quipment, facili nd state records please estimate	s on pr as clos	roduction in I sely as possib	le.			onomic im	npa
City or Count	y Services Require g information is red If exact figures ar	quired for local a re not available, p Nu Es	quipment, facili nd state records please estimate nmber in Crew:	s on pr as clos	roduction in I sely as possib	le.			onomic im	ıpa

Applicant Agreement - Signature Required



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted permises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

Rute Jarnet		
Signature of Applicant	Witness	e
Ruth Barnett		
Print Name of Applicant and Title	Print Name of Witness	
12/9/2019		
Date	Date	

PLEASE SEE ATTACHED SIGNED AGREEMENT



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

Check the appropri	ate box(es) below:
┌─ SPECIAL EV	ENT PERMIT
∇ USE OF CO	UNTY PROPERTY PERMIT
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	ΙΤ
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized parking areas only.
Deputies (How Many?):	Two deputies for road closure, traffic control and security on Banyan Street between Park Ave and Gilchrist while wedding takes place.
Fee for Services:	Traffic detail is \$58/hr per deputy with a four hour minimum.
Special Arrangements:	Each end of Banyan Street must be blocked in order to provide safety and security to
,	participants. All chairs, tables and other items used for the event must be removed from the roadway as soon as possible in order to reopen Banyan Street.
	Print Name: 11 S Brady
	P. V. D. O. A. I
	Signature: Af Steven Brady
	Title: Special Events, Permits and Details

Date:



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	cles) below:
---------------------------	------	----------

- F SPECIAL EVENT PERMIT
- X 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?)	2 fire guar	rds @ 4 hours each
Fee for Services:	\$60.00 /he	our per guard. Total \$480.00
	Contact N	lancy at BGFD to make arrangements for payment.
Flammable Vegetation:		
First Aid Equipment:		
Fire Extinguishing:		
		er of guests and chairs, the Permit holder must hire fire guards to be in St in case of emergency. In the event that access is needed on Banyan
Special Arrangements:	St, fire guards wi on Banyan St. Pe immediate remo	Il stop the ceremony and co-ordinate removal of guests/items/etc. placed rmit holder must have a team available, on site, to facilitate the val of all items/guests. Any damage to BGFD vehicles while making ncy will be the responsibility of the permit holder.
		n case of Emergency DIAL 911
	Print Name:	C.W. Blosser
	Signature:	a Blom
	Title:	Fire Chief
	Date:	02/25/2020



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		
∪SE OF CO	UNTY PROPERTY P	ERMIT	
FILM PERM	1IT		
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGA WITH FOR THEIR EVENT.	NIZATION
Treatment Facilities:	None necessary.		`
Medical Personnel:	None necessary.		
Medical Supplies / Equipment:	None necessary.		
Safety Requirements:	No additional precau	utions necessary.	
		,	
Fee for Services	Not applicable.		-
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. To arrange special event coverage, contact our o	office at
	Print Name:	Douglas B. Higgins	
(Signature:	Douglas B. Higgins	
	Title:	Division Chief	
	Date:	December 10, 2019	



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

Check the appropri	ate box(es) bel	ow:	
☐ SPECIAL EV	ENT PERMIT	PERMIT	
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	FACILITIES
FILM PERM	П		
		LEASE INDICATE BELOW WHAT ARRANGEMENTS LY WITH FOR THEIR EVENT.	YOUR ORGANIZATION
Parking:		areas. No event parking permitted that will unduly obstruct parking is permitted on the Banyan Street right-of-way in it	
Ingress and Egress:	Use all established	means of ingress and egress.	×
Special Arrangements:	Use Lee County Sh	neriff's Office for assistance with traffic control.	
	Print Name:	Bryan Miller	*
	Signature:	Bryan D. Miller Digitally signed by Bryan D. Miller Date: 2019.12.09 11:56:46 -05'00'	
	Title:	Senior Project Manager	
	Date:	December 9, 2019	



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

Check the appropri	ate box(es) bel	low:
SPECIAL EV	ENT PERMIT	
✓ USE OF CO	UNTY PROPERTY	PERMIT
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	шт	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Illumination:		loud on premises. Any additional lighting must be provided by permit holder. I trees or bushes on Banyan Street
Parking Areas:	Overflow parking,	use existing parking at the Boca Grande Community Park and Center
Special Arrangements:	Guests must stay - Must provide ins	anyan Street guidelines set forth by LEE COUNTY D.O.T representative. on County property at all times surance with Lee County BOCC being additionally insured and adhere to all rules unty Landes procedures.
	Print Name:	Jesse Lavender
	Signature:	Jesse Lavender Charles 2019 12:09 10:00:38 10:50
	Title:	Director
	Date:	12/9/19



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

Check the appropriat	te box(es) be	low:
SPECIAL EVE	NT PERMIT	
∪SE OF COU	NTY PROPERTY	PERMIT
PERMIT TO	CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	Γ	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Insurance Requirements:	occurrence to pr	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County.
	(\$1,000,000) per	Liquor Liability insurance will be required with minimum limits of One Million Dollars occurrence. Should Host Liquor Liability coverage be afford under the Commercial policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.
Special Arrangements:		nsurance shall be submitted as evidence of the required coverage listing Lee County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an
	Subject to proof	of insurance.
	Print Name:	Mike Figueroa
	Signature:	Mike Join
·	Title:	Risk Program Manager
	Date:	January 31, 2020



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/30/2020

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(les) 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 Will Maddux PHONE (530) 477-6521 FAX (A/C, No): East Main Street Insurance Services, Inc. Will Maddux ADDRESS; info@theeventhelper.com PO Box 1298 INSURER(S) AFFORDING COVERAGE NAIC# INSURER A: Evanston Insurance Company **Grass Valley** CA 95945 35378 INSURED INSURER B : INSURER C: Ruth Barnett INSURER D 6745 Burning Tree Drive INSURER E : Seminole FL 33777 INSURER F **REVISION NUMBER: COVERAGES CERTIFICATE 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 POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) TYPE OF INSURANCE LHARTS POLICY NUMBER \$ 1,000,000 COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE X OCCUR 100,000 Host Liquor Liability 5,000 MED EXP (Any one person) Retail Liquor Liability 3DS5470-M2034223 11/14/2020 11/15/2020 1,000,000 PERSONAL & ADV INJURY 12:01 AM 12:01 AM \$ 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE JECT LOC POLICY 1,000,000 PRODUCTS - COMPIOP AGG s Deductible \$ 1,000 OTHER! COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILELIABILITY ANY AUTO **BODILY INJURY (Per person)** \$ OWNED AUTOS ONLY SCHEDULED **BODILY INJURY (Per accident)** \$ NON-OWNED AUTOS ONLY HIRED AUTOS ONLY PROPERTY DAMAGE (Per accident) UMBRELLA LIAB EACH OCCURRENCE OCCUR \$ **EXCESS LIAB** CLAIMS-MADE AGGREGATE DED RETENTION \$ WORKERS COMPENSATION PER STATUTE AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE E.L. EACH ACCIDENT N/A (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate holder listed below is named as additional insured per attached MEGL 2217 01 19. Attendance: 180, Event Type: Wedding. OK 01/31/2020 **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 AUTHORIZED REPRESENTATIVE PO Box 398 Fort Myers FL 33902

© 1988-2015 ACORD CORPORATION. All rights reserved.



EVANSTON INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

SCHEDULE

Name Of Additional Insured Person(s) Or Org	ganization(s):	 	
Lee County Board of County Commissioners PO Box 398 Fort Myers, FL 33902			

- A. Section II Who is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule of this endorsement, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by the acts or omissions of any insured listed under Paragraph 1. or 2. of Section II Who is An Insured:
 - 1. In the performance of your ongoing operations; or
 - 2. In connection with your premises owned by or rented to you.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

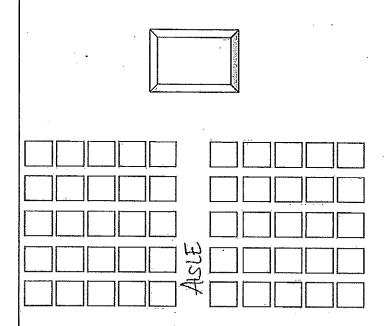
- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

All other terms and conditions remain unchanged.

Gilchrist Ave.



CHAIRS =

Park Ave.

	Section 1
	The property of the second of
(COOM)	
	f is emp
7 × × × × × × × ×	GWST ← → CHAIRS
13 1 3 1 1 1	
	CIVEST ENTER
1	

.