

EVENT PERMIT



Ordinance 17-08

ISLANDFEST-MULLET TOSS & SEAFOOD FESTIVAL

PERMIT NUMBER: TMP2020-00064

Date(s) of Event: MARCH 14, 2020 FROM 10:00AM UNTIL 4:00PM

Property Owner:

LEE COUNTY

Applicant:

JENNIFER JENNINGS

239-283-0888

Description:

FUNDRAISER COMPETITION FOR VARIOUS AGE CATEGORIES BOTH MALE

AND FEMALE SEEING WHO CAN TOSS A MULLET FISH THE FARTHEST ON

MARCH 14, 2020 FROM 10:00AM UNTIL 4:00PM

Location of event: 5675 SESAME DR, BOKEELIA, FL 33922

PHILLIPS PARK

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?

Sold and 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

ISLANDFEST. MULLET TOSS & SEAFOOD FESTIVAL

TMP 2020 - 00064



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

		-			
Title of Event / Name of Production	IslandFest - Mullet Toss & Seafood Festival	The same of the sa			
Date(s) of Event / Production:	March 14th 2020		:		
Location(s) of Event:	Phillips Park -5675 Sesame Drive				
Name of Applicant:	Greater Pine Island Chamber of Commerce	<u> </u>	<u> </u>	- nu-	
Applicant Address:	P.O. Box 325 Matlacha FL 33993				
Applicant Phone Number:	283-0888 office or 239-333-7502 Cell	1	<u> </u>		
Contact Person: If different from applicant)					:
Contact Phone Number: (If different from applicant)					
mail Address:	info@pinelslandchamber.org				
stimated Attendance:	500				
vent Description: aclude each activity, when activities take place, etc.	Non profit fundraiser - competition in various age categories ma mullet fish the farthest	le and	female	who cai	n throw a
					:
ours of Operation:	10am to 4pm				
FRAP # of Parcel:	28-44-22-03-0000F.0010 5675 Sesame	Dr, Bo	keelia fl	0	:
wner of Premises*:	Lee County	<u>!</u>			<u></u>

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



Fill out the following questions for allpermit types:

				A-1
What is the Zoning Cla	ssification of the	premises?		:
Are any temporary stru	ictures to be inst	alled for the event?	Yes X No	Type:
Do you have the appro	priate permits fo	r the temporary struc	ctures?	Yes No
* For a 'Special Event' a indentified, including a	and 'Use of Coun I parking areas.	ty Property' permit, s	submit a site plan w	ith all proposed facilities and activities
Insurance Company Ins	uring the Event:			
Note: Certificate of Insurance	e must be submitted	d at time of application		
Surety Company Bondi	ng this Event (Na	me and Address):		
Will Vehicles be Used Event?	as Part of This	Will Food be Availa	ble at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
Γ Yes p	₹ No	▼ Yes	┌ No	⊠ Yes □ No
If yes, automobile cover included on the certificate	rage must be e of insurance.	If yes, products liability included on the certifi	coverage must be cate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Org Providing Food:	anization Gre	ater Pine Island Chamb	per of Commerce	:
Type of Food being Serv	seafood, pulle	ed pork , hamburger, ho	t dogs, fries	
Section II - USE OF	COUNTY PR	OPERTY PERMIT	•	i , , , , , , , , , , , , , , , , , , ,
Organization Sponsoring	g the Event:			the second
Fill out this portion for a	pplications for S	olicitation in the Cou	ınty Rights-of-Way:	,
Name of Charity:				
Address of Charity:				
Phone Number:				:
Non-profit certificate/re	gistration numbe	er: 59-0995723		
:			proof the organization is	exempt from this requirement. §316.2045)
Section III - SALE/C				
Is alcohol being sold/cons If Yes, then a "Lee County Alcohol F	sumed on County Permit" is required. On	/ Property? ly non-profit organizations ca	an sell alcohol on County Pr	X Yes
Non-profit certificate/reg	istration number			
		ision of Alcoholic Beverag	es and Tobacco may also	be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

		Number of shooting d					
Total budget: Hotel room nights:	· · · · · · · · · · · · · · · · · · ·	Estimate amount sper	nt in Le	e County:			
Number in Cast:	:	Number in Crew:	T/	Numb	er of locals	hired:	
The following informat the industry. If exact f	ion is required igures are not a	for local and state records of available, please estimate as	on pro close	duction in Flo ly as possible	orida to tra !.	ick the econom	ic impact o
	•			·			
City or County Service	s Required: (Pe	ersonnel, equipment, faciliti	es, et	c.)			
		7		ALIAN			
Special Parking Requir	ements:				:		
	<u>:</u>				:		
* For any marked Yes,	provide furthe	r details below:					
Other				Yes	No		
Stunts	:			┌ Yes	┌ No		
	ers, Boats, etc.			Yes	, No		
	l/or Numerous			Yes	No		
	tion of Any Kind	d		├ Yes ├ Yes	∏ No		
	Large or Small	ics		Yes	┌ No		
Fire or Bu	s or Pyrotechn	io.		Yes	∏ No		
	Crowd Control			Yes	┌ No		
Street Ci				Yes	┌ No		
Will any of the followin		rincluded*?					
		Industrial / Documentary	F	Other: not	applicable		:
		, , , , , , , , , , , , , , , , , , , ,		TV Comme	; <i>i</i> /	Still Photos	4
Type of Production (ch TV Movie or Specia							•

Applicant Agreement - Signature Required



SECTION I - SAFETY

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

SECTION II - INSURANCE

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

SECTION III - INDEMNIFICATION

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

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

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

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

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

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

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

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

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

Signature of Applicant

Signature of Applicant

Signature of Applicant and Title

Print Name of Applicant and Title

Date

Date



	LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199	
Check the appropr	ate box(es) below;	
T SPECIAL E	/ENT PERMIT	
r USE OF CO	UNTY PROPERTY PERMIT	
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACI	LITIES
F FILM PERI	117	
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU LICANT TO COMPLY WITH FOR THEIR EVENT.	R Organization
Parking:	Parking in authorized areas only. Right-of-way should not be blo	cked.
Deputies (How Many?):	One deputy for security and presence throughout the event area from 930a-530p.	scheduled
Fee for Services:	\$48/hr	
Special Arrangements:	Event should not impede the normal flow of traffic in any way. If it found to, vendor may be responsible for hiring an additional depu control.	has been ly for traffic
	Print Name: Lt. S. Brady Signature: Lt. S. Brady Title: Special Events, Permits and Details Date: 2-27-20	
	Page 6	



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?)	Ø	1999-19, <u>anakadè</u> k <u>a anamp</u> yyyyen is		The special of the second seco
Fee for Services:	Ø		·	Barrel as 1772 - Marketing the spring property Bridge day
Flammable Vegetation:	à			
First Aid Equipment:	Lee County EMS stationed at 1,5700 Pine Island Road, Bothe	MPI Lelia	FCD , FL	Station 33922
Fire Extinguishing:	MPIFCD Station 1 will respon 5700 pine Island Road, 1304	od. eelic	L, FL	339 AZ.
Special Arrangements:	No tent's larger than 10×10. Fire extinguisher must be near o	yrill	•	
	Print Name: Courtney Urich Signature: Continey Urich Title: Fire Inspector Date: 2.20.20			_
	Page [7			

DPS or LCEMS File Reference:	IslandFest - Mullet	Foss & Seafood Festival - Greater PI Chamber of comme	rce - Bokeelia	-03-14-2020	
	L	ee County Event Permit Application			
	EMERGE	NCY MEDICAL SERVICES / PUBLIC SAI 2000 Main St., Suite #100 FORT MYERS, FL 33901 (239) 533-3911	FETY		
Check the appropr	iate box(es) be	elow:			
F SPECIAL E	VENT PERMIT				
IX USE OF CO	OUNTY PROPERTY	Y PERMIT	;		
FILM PERM	ЛІТ				
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, I	PLEASE INDICATE BELOW WHAT ARRAI PLY WITH FOR THEIR EVENT.	NGEMENT	rs your o	RGANIZATION
Treatment Facilities:	None necessary.				
Medical Personnel:	None necessary.				
Medical Supplies / Equipment:	None necessary.				
Safety Requirements:	No additional prec	autions necessary.			
Fee for Services	Not applicable.				
Special Arrangements:	Please call 911 in th 239 533-3911.	e event of an emergency. To arrange special ev	ent covera	ge, contact o	ur office at
			1 1		
	Print Name:	Douglas B. Higgins			
	Signature:	Douglas B. Higgins	edical Services, less than the fields belong the	ra- 5	
	Title:	Division Chief		-	
	Date:	February 20, 2020			

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

		(239) 533-8	3580		
Check the appropi	iate box(es) l	below:			
	VENT PERMIT				
	DUNTY PROPER	TV DEDMIT			
		NSUME ALCOHOLIC BE	VEDACEC MUTUUM	l FE AALV	
FILM PERI	/IIT	TOOME NECONOLIC BE	VERAGES WITHIN	LEE COU	NIY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, LICANT TO CON	PLEASE INDICATE BE MPLY WITH FOR THEIR	LOW WHAT ARRA EVENT.	NGEMEN	ITS YOUR ORGANIZATIO
Parking:	No event parking	g on Lee County maintaine	d road rights-of-way.		
Ingress and Egress:	Use all establishe	ed means of ingress and eg	ıress.		
Special Arrangements:	None.				
opedia Arrangements.	моле.				

	Print Name:	Bryan Miller			
	Signature:	Bryan D. Miller	Digitally signed by Brya Date: 2020.02.18 13:02:	n D. Miller 09 -05'00'	_
	Title:	Senior Project Manager			_
	Date:	February 18, 2020	794		_
					•

Mullet Toss-Phillips Park- 3,

Lee County Event Permit Application



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

Check	the	appro	oriate	box(es)	below:
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- F SPECIAL EVENT PERMIT
- IX USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

AFTER REVIEWING THE ADDITION DIGAGE INDICATE	
AFTER REVIEWING THE APPLICANT TO COMPLY WITH SON THE APPLICANT TO COMPLY WITH SOM THE APPLICANT TO COMPLY WITH SON THE APPLICANT TO COMPLY WITH SOM THE APPLICANT TO COMPLY WITH SON THE APPLICANT TO COMPLY WITH SOM THE APPLICANT TO COMPLY WITH SOM THE APPLICANT TO COMPLY WITH THE	ARRANGEMENTS VOLID ODCANIZATION
WILL REQUIRE THE APPLICANT TO COMPLY WITH COR THEIR	ANTIMOEMENTS TOOK OKOANIZATION
WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.	

FILM PE	RMIT	and opposit Liverity 123
AFTER REVIEWING THE AF	IE APPLICATION, PLICANT TO COM	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION OF THEIR EVENT.
Illumination:	N/A-Daytime eve	nt.
Parking Areas:	Parking will be ha parking areas, me	andled by the event organizer. Event organizer must ensure parking is in designated ust also work with the surrounding businesses to coordinated overflow parking.
Special Arrangements:	exits to ensure alc	begin on 3/13/20 @ 3pm. Clean up from the event must be complete no later than Alcohol must be in contained area of the park and an attendant must be present at all cohol does not leave the area. LCSO will need to be onsite during the event. Event ovide adequate staff to handle trash and litter clean up after the event. All trash/ at into the dumpster on site. Overnight security will NOT be provided by Parks and
	Print Name: Signature: Title: Date:	Kimberly Garrett Kymlerly Sursott Administrative Manager October 30, 2019

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

Check the	appropria	te box(es) below:
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- 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:
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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 afford 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:

Risk Program Manager

Date:

Title:

February 17, 2020



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/07/2020

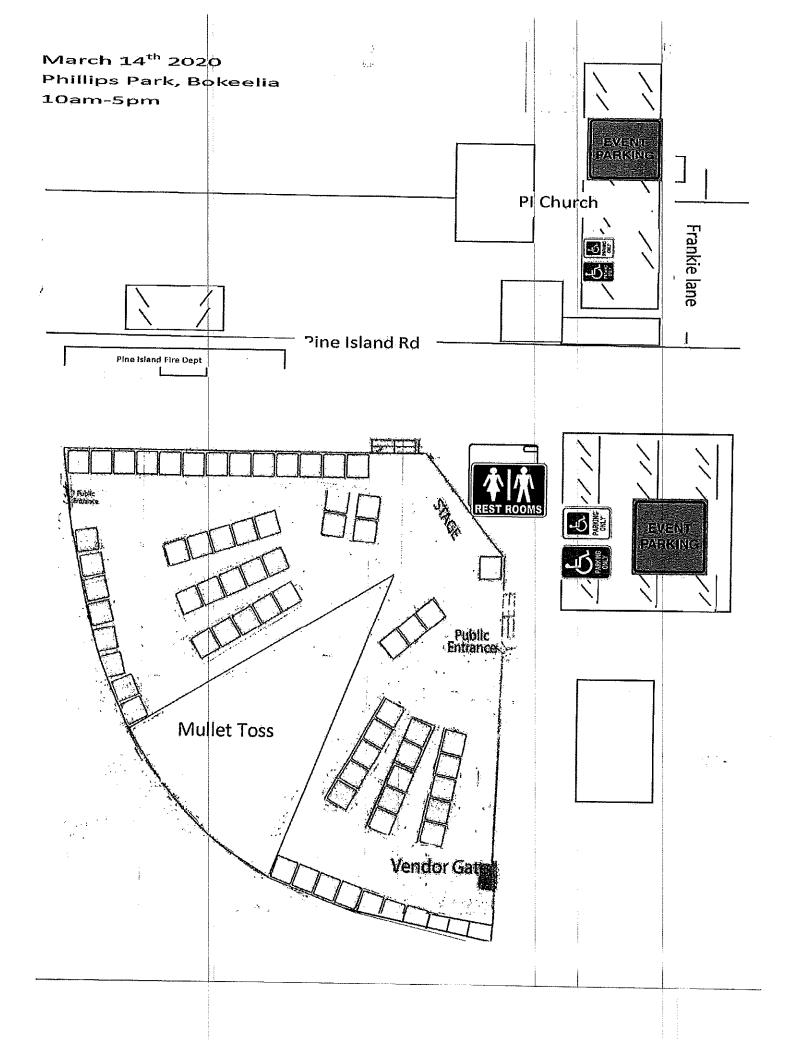
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN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

whom a Associates insulance Agency					283-3333		FAX (A/C, No): (239)	283-3385		
O. Box 62049				E-MAIL ADDRESS: olivia@s	sutton-associate	s.com				
fort Myers	F/ 0200			INSURER(S) AFFORDING COVERAGE				NAIC#		
ISURED	FL 33906			INSURER A: MOUNT VERNON FIRE INS. CO.				26522		
Greater Pine Island Chamber	i of Con		_	INSURER B:	····					
PO Box 325	or Cor	nmerc	8	INSURER C:						
PO 60X 323				INSURER D:						
Mattacha				INSURER E :						
			FL 33993	INSURER F:						
			NUMBER: CL20270038			REVISION NUMB	ER:	}		
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.										
R TYPE OF INSURANCE	ADD	LSUBR	POLICY NUMBER	POLICY EFF	POLICYEXP					
COMMERCIAL GENERAL LIABILITY	HIGOL	WVU	POLICY NUMBER	(MMJDD/YYYY)	(MM/DD/YYYY)	/	LIMITS	0.000		
CLAIMS MADE X OCCUR						EACH OCCURRENCE DAMAGE TO RENTED	100	0,000		
SS SIND NAME (F) OCCOR		1		ļ	,	PREMISES (Ea occurre	nce) \$ 100,			
	1		SE2001345	03/13/2020	03/16/2020	MED EXP (Any one pen	4.00			
GENT AGGREGATE LIMIT APPLIES PER:	†			0012072020	03/10/2020	PERSONAL & ADV INJ		0,000		
PRO-	H				ļ	GENERAL AGGREGAT		0,000		
OTHER:]				PRODUCTS - COMP/O		5		
AUTOMOBILE LIABILITY	-	╁	**************************************			COMBINED SINGLE LI	\$			
ANY AUTO						(Ea accident)				
OWNED SCHEDULED						BODILY INJURY (Per pe		<u> </u>		
AUTOS ONLY AUTOS NON-OWNED						BODILY INJURY (Per ac PROPERTY DAMAGE				
AUTOS ONLY AUTOS ONLY					1	(Per accident)	\$			
UMBRELLA LIAB CCCUE	-						S			
EVCESS HAD HOCCUR						EACH OCCURRENCE	\$			
CCAIMS-MADE	H					AGGREGATE	\$			
DED RETENTION S WORKERS COMPENSATION						PER I	\$			
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE YIN]]				i	STATUTE	OTH- ER			
OFFICER/MEMBER EXCLUDED?					}	E.L. EACH ACCIDENT	\$			
If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMP				
DESCRIPTION OF OPERATIONS DEIGN	-	\vdash				E.L. DISEASE - POLICY	LIMIT S			
						1				
I CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (AC	OPD 10	d Addison Donate Colod Jo		ان ب					
RTIFICATE HOLDER IS LISTED AS AN AD DUOR LIABILITY INCLUDED IN COVERAG ENT: ISLAND FEST-MULLET TOSS -SEAF CATION: PHILLIPS PARK 5675 SESAME D	OOD I	NAL IN	SURED. (AL 3/14/2020. A, FL 33922 OK (02/17/2020 hip Lyn _				77700000		
RTIFICATE HOLDER			**************************************	CANCELLATION						
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. 2115 SECOND ST AUTHORIZED REPRESENTATIVE						BEFORE				
FORT MYERS			FL 33901	<	Scott S	outton				
		************				CORD CORPORA	TION. All right	s reserved		

ORD 25 (2016/03)

The ACORD name and logo are registered marks of ACORD



Carmine Marceno Sheriff



State of Florida County of Lee

Exhibit A Detail Request Form

Please fill out the Extra Duty Request form attached to this document completely. All details are a minimum of four (4) hours with the exception of boat details which are a minimum of six (6) hours and a half hour drive time to and from the detail location. When five (5) or more deputies are assigned to an event, a supervisor with the rank of Sergeant or above will be assigned at an upgraded hourly charge. Depending on the type of event or crowd size, it will be at the discretion of the Sheriff's Office to determine the number of deputies needed.

Security Funeral Escort	\$48/hr \$48/hr	Traffic	\$58/hr
Escort	\$48/hr	Security Supervisor Traffic Supervisor	\$58/hr \$68/hr
Boat	\$48/hr	Civil Stand-by	\$68/hr
Holiday/Last Minute	\$68/hr	Prisoner Transport	\$68/hr

Details are charged a \$15 <u>per deputy</u> vehicle rate (when applicable). All boat details are charged a \$20 per hour boat rate (when applicable).

Extra Duty Details will not be provided to any person, firm or organization whose members, business or operations are of questionable nature; or for any event that will discredit the assigned Deputy, Sheriff's Office or County. The Sheriff's Office reserves the right to cancel the detail without notice and to recall the deputy(s) when necessary for community safety without penalty.

The Lee County Sheriff's Office will be the only armed personnel at any event where the detail is taking place. Any private security company that is hired to work alongside the Sheriff's Office will be a reputable, licensed and insured company whose employees are State D licensed unarmed security guards. Proof of the signed contract with private security company will be required.

In order to cancel a detail, notice must be given to the Detail Coordinator twenty-four (24) hours prior to the start of the detail either by phone or email. If the cancellation is less than twenty-four (24) hours, a four (4) hour charge per deputy will be billed. In the case of weather, notice of cancellation must be received within two (2) hours of the starting time otherwise a two (2) hour charge per deputy will be billed. In the event of a cancellation after business hours, please call 239-477-1000 and ask to have the on-call Detail Coordinator call you.

Unless otherwise specified, full payment of all details must be received one (1) week prior to the start of the event in the form of a cashier's check, money order, business check or cash. The Lee County Sheriff's Office does not accept credit cards or personal checks. Payments can be sent to: The Lee County Sheriff's Office 14750 Six Mile Cypress Pkwy., Fort Myers, FL 33912 ATTN: Details Unit.

LEI			
Total Deputy(ies) 1	Total Hours 8	Rate per Hour \$48	Vehicle Rate Waived
Supervisory Deputy(ies)	Total Hours	Rate per Hour	Vehicle Rate



"The Lee County Sheriff's Office is an Equal Opportunity Employer" 14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

Page 1 of 2

LCSO Form 389 (revised 10/23/2018 C.Gambino #06-188)