



EVENT PERMIT

Ordinance 17-08



ECHO'S GLOBAL FOOD AND FARM FESTIVAL

PERMIT NUMBER: TMP2020-00065

Date(s) of Event: MARCH 13-14, 2020 FROM 9:00AM UNTIL 4:00PM

Property Owner: ECHO INC

Applicant: DANIELLE FLOOD
239-567-3312

Description: OPEN AIR FESTIVAL INCLUDING EDUCATIONAL DISPLAYS, WORKSHOPS, SPECIAL TOURS, CHILDREN'S CRAFTS, ETC AND TICKETED EVENTS ON MARCH 13-14, 2020 FROM 9:00AM UNTIL 4:00PM

Location of event: 17387 DURRANCE RD, NORTH FORT MYERS, FL 33917
ECHO GLOBAL FARM 17391 DURRANCE RD, N. FT. MYERS

Will the event be attended by 1000 or more people ? Yes

Will the event be held on County Owned Property ? No


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

 3-3-2020
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

ECHO'S GLOBAL FOOD AND FARM FESTIVAL

TMP2020-00065

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	ECHO's Global Food and Farm Festival
Date(s) of Event / Production:	March 13-14, 2020
Location(s) of Event:	ECHO Global Farm, 17391 Durrance Road, North Fort Myers, FL 33917
Name of Applicant:	Danielle Flood, Festival Chairperson, PR Manager at ECHO
Applicant Address:	17391 Durrance Road, North Fort Myers, FL 33917
Applicant Phone Number:	239.567.3312
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	dflood@echonet.org
Estimated Attendance:	2000
Event Description: Include each activity, when activities take place, etc.	Ticketed events on March 13, with attendance not to exceed 150. Open-air festival from 9-3 on March 14 including educational displays, workshops, special tours, childrens crafts, etc.
Hours of Operation:	9 am to 4 pm
STRAP # of Parcel:	23-43-25-00-00025.0000
Owner of Premises*:	ECHO Inc.

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

Lee County Event Permit Application



Fill out the following questions for all permit types:

What is the Zoning Classification of the premises? ORPHANAGES, NON-PROFIT SERVICE / 75

Are any temporary structures to be installed for the event? ☒ Yes ☐ No Type: 10x20 tents

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: Moe's Hotdogs LLC, Zaxby's, Sunnydays Ice Creams,

Type of Food being Served: Hot dogs, Chicken Sandwiches, Ice Cream treats, and BBQ baskets with fries.

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: _____

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

Name of Charity: _____

Address of Charity: _____

Phone Number: _____

Non-profit certificate/registration number: _____

(Proof of registration with the Dept. of Agriculture & Consumer Services \$496.405 or proof the organization is exempt from this requirement. 5316.2045)

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

☐ TV Movie or Special ☐ TV Series / Pilot ☐ TV Commercial ☐ Still Photos
☐ Public Service Announcement ☐ Industrial / Documentary ☐ Other: _____

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

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Number in Cast: _____ Number in Crew: _____ Number of locals hired: _____

Total budget: _____ Estimate amount spent in Lee County: _____

Hotel room nights: _____ Number of shooting days: _____

number of rooms x number of nights



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

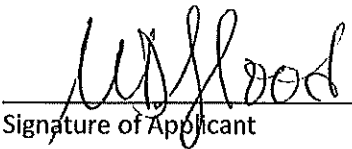


SECTION V - AGREEMENT

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

M. Danielle Flood

Print Name of Applicant and Title

2-28-2020

Date


Witness

Jodee Hanssen

Print Name of Witness

2-28-2020

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.
Deputies (How Many?):	1 deputy for security and presence
Fee for Services:	\$48/hr - 4 hour minimum
Special Arrangements:	None

Print Name: Lt. S. Brady
Signature: *Lt. Steven T. Brady*
Title: Special Events, Permits and Details
Date: 2-19-20

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:

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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.

Fire Guards (How Many?)	NONE
Fee for Services:	NONE
Flammable Vegetation:	NONE
First Aid Equipment:	Call 911 for emergencies
Fire Extinguishing:	Insure all food vendors are compliant with applicable NFPA Standard for fire extinguishers or extinguishing requirements.
Special Arrangements:	Maintain all Fire Lanes and access points for emergency vehicle access

Print Name: Lawrence Nisbet

Signature: 

Title: Fire Chief

Date: 02/18/2020



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
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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.

Treatment Facilities: None necessary.

Medical Personnel: None necessary.

Medical Supplies /
Equipment: None necessary.

Safety Requirements: No additional precautions necessary.

Fee for Services Not applicable.

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

Print Name: Douglas B. Higgins

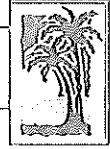
Signature: Douglas B. Higgins

Digitally signed by Douglas B. Higgins
DN: cn=Douglas B. Higgins, ou=Lee County Emergency Medical Services, ou=County Public Safety,
ou=Division of Public Safety Operations and Support Services, email=Douglas.B.Higgins@leco.org, c=US
Date: 2020.02.27 15:51:11 -0500

Title: Division Chief

Date: February 27, 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:

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

Parking:	Park in designated areas. No event parking will be permitted on or within Lee County maintained road rights-of-way.
Ingress and Egress:	Use all established means of ingress and egress.
Special Arrangements:	Use Lee County Sheriff's Office for assistance with traffic control as needed. Consideration should be given to providing traffic control presence using Law Enforcement at the marked and signed Pedestrian mid-block crosswalk on Durrance Rd at the 17391 address during peak times based on flow conditions, vehicular and pedestrian.

Print Name: Bryan Miller

Signature: Bryan D. Miller

Digitally signed by Bryan D. Miller
Date: 2020.02.19 11:22:22 -05'00'

Title: Senior Project Manager

Date: February 19, 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:

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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: 2020.02.18 15:53:06 -05'00'

Title: Administrative Manager

Date: February 18, 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:

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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:

A handwritten signature in cursive script, appearing to read "Mike Figueroa".

Title: Risk Program Manager

Date: February 18, 2020



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/18/2020

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 Brown & Brown Of Florida, Inc. 220 S. Ridgewood Ave. Daytona Beach FL 32114		CONTACT NAME: PHONE: [A/C, No, Ext]: 999-999-9999 E-MAIL: ADDRESS: dgonzalez@bbswfla.com		FAX [A/C, No]: 999-999-9999		
INSURED ECHO, Inc. 17391 Durrance Road North Fort Myers FL 33917		16020		INSURER(S) AFFORDING COVERAGE		NAIC #
				INSURER A : Philadelphia Indemnity Insurance Company		18058
				INSURER B : StarStone National Insurance Company		25496
				INSURER C : ACE Fire Underwriters Insurance Company		20702
				INSURER D :		
				INSURER E :		
				INSURER F :		

COVERAGES

CERTIFICATE NUMBER: 1317577993

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	Y	PHPK2074480	12/12/2019	12/12/2020	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 \$ 3000000/1000000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			PHPK2074480	12/12/2019	12/12/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			88204J191ALI	12/12/2019	12/12/2020	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	Directors & Officers			NFPFL146215812-002	11/1/2019	12/12/2020	2,000,000

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

Certificate Holder is included as Additional Insured with respect to General Liability coverage per policy form.

Lee County Board of County Commissioners is included as Additional Insured with respect to General Liability coverage per policy form.

OK 02/18/2020

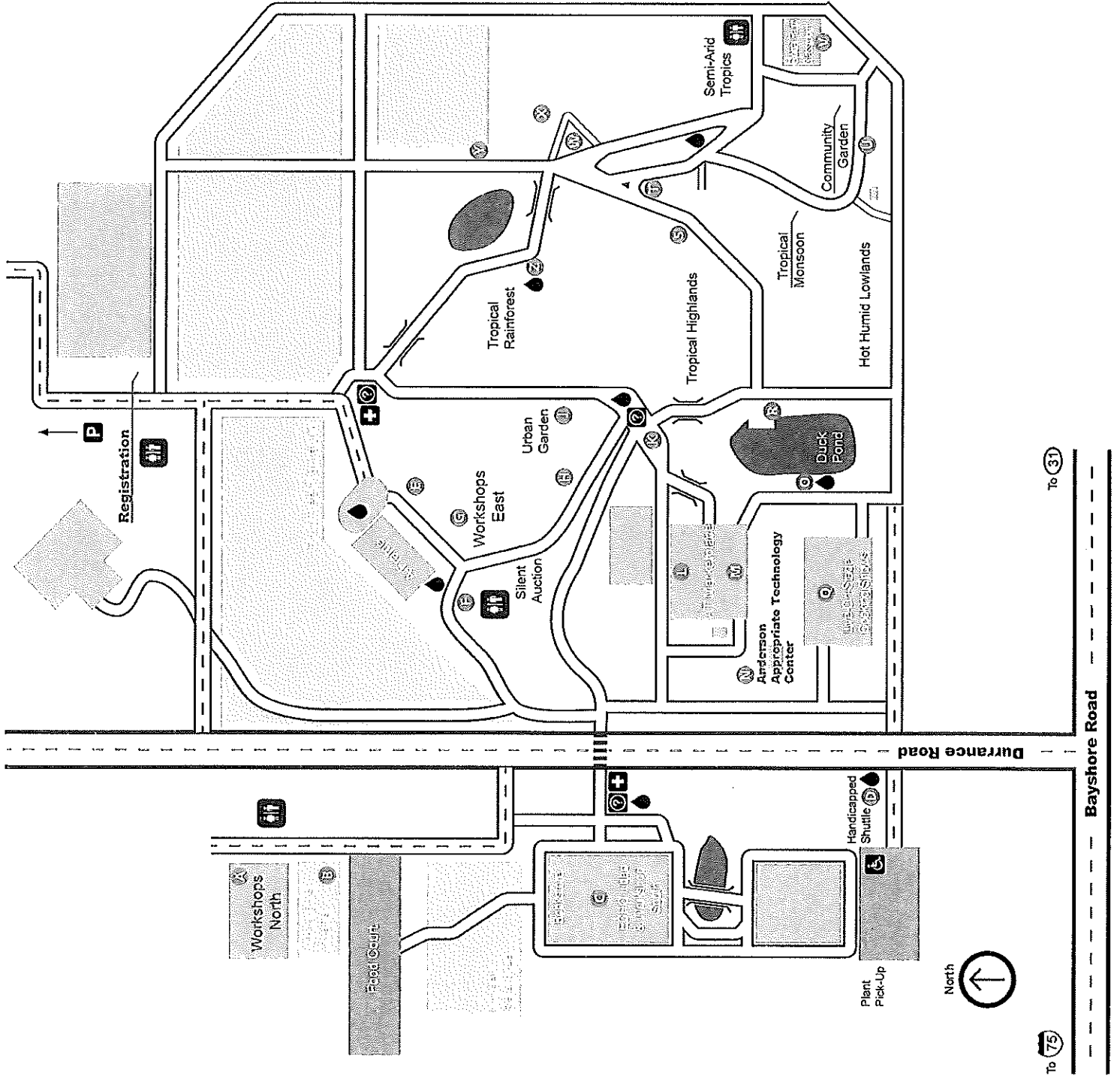
CERTIFICATE HOLDER**CANCELLATION**

Lee County Board of County Commissioners
2120 Main Street
Fort Myers FL 33901

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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Bahia Vista Rd

Bahia Vista Rd

Bahia Vista Rd

Curran Rd

Curran Rd

Curran Rd

Sabal Palm Dr
Sabal Palm Dr

Parking

Parking

Parking

Parking

f

g

ECHO Global Farm

Parking

Parking

Curran Rd

Curran Rd

All Saints E
Catholic ch

Bayshore Rd

(78)

Bayshore Rd

Bayshore

TOURS

DEMOS

WORKSHOPS

SAMPLES

EXHIBITS

ECHO'S *Global* FOOD & FARM FESTIVAL

MAR 13 & 14

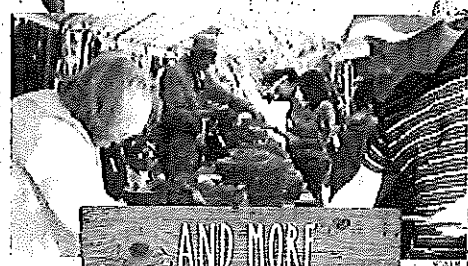
**FORT MYERS,
FLORIDA**



TOURS AND WORKSHOPS



DEMONSTRATIONS



AND MORE

DAY ONE March 13, 2020

Events as scheduled, ticketed separately

Edible Backyard Design Workshop | **FRI, 10 AM & 3 PM** | \$10 pp

Garden & Glass Tour | **FRI, 11 AM & 2 PM** | \$10 pp

Tropical Tasting Lunch | **FRI, 12 PM** | \$25 pp

Farm-Fresh Long Table Dinner Experience | **FRI, 6 PM** | \$85 pp

DAY TWO March 14, 2020

All inclusive - one ticket

Farm Day Festival | **SAT, 9 AM - 3 PM** | \$8 pp, 8 & under free

PRESENTING SPONSOR

Physicians'
Primary
Care

OF SOUTHWEST FLORIDA



THE BEACHES OF
FORT MYERS
AND SANIBEL

TOURIST DEVELOPMENT COUNCIL



TICKETS

Get your tickets today at
echo-north.org/festival or call 239/543-3246

17391 Durrance Road, North Fort Myers, FL 33917