



EVENT PERMIT

Ordinance 17-08



SALUTE TO THE BRAVE MUSIC FESTIVAL & EXPO

PERMIT NUMBER: TMP2020-00258

Date(s) of Event: JANUARY 16, 2021

Property Owner: FISCHER FL PROPERTIES I LLC

Applicant: LINDA THOMPSON
239-896-2640

Description: EXPO STATIC BUSINESSES WITH MUSIC FOOD, FOOD TRUCKS, WITH
ALCHOLIC BEVERAGES ON JANUARY 16, 2021 FROM 10:00AM UNTIL 10:00PM

Location of event: 9510 THUNDER RD, FORT MYERS, FL 33913
THUNDER RD

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 ? 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

 12-28-2020
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

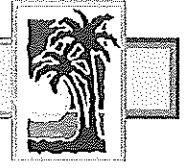
Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

SALUTE TO THE BRAVE MUSIC FESTIVAL & EXPO

TMP2020-00258

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	Salute to the Brave Music Festival & Expo
Date(s) of Event / Production:	January 16, 2021
Location(s) of Event:	9510 Thunder Rd, Ft. Myers, FL 33913
Name of Applicant:	Salute to the Brave Hero Project, Inc
Applicant Address:	5770 Enterprise Pkwy., Ft. Myers, FL 33905
Applicant Phone Number:	(239) 896-2640
Contact Person: (If different from applicant)	Linda Thompson, Pres
Contact Phone Number: (If different from applicant)	
Email Address:	HeroProjectBuild@gmail.com
Estimated Attendance:	500
Event Description: Include each activity, when activities take place, etc.	Expo - Static businesses - 10 am to 4 pm Music - 4 pm to 10 pm
Hours of Operation:	10 am to 10 pm
STRAP # of Parcel:	22-45-25-L3-24000.0030
Owner of Premises*:	Jeffery Scott Fischer

*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? Warehousing, Distribution Terminals/48

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:

BBQ & Taco Works, Showtime
Tag's Whiskey Bent BBQ Food Truck, Sir Pizza

Type of Food being Served: BBQ and Variety, tacos, pizza, Empanadas, rice

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Salute to the Brave Hero Project, Inc

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. §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: 84-2403107

(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):

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

Will any of the following be needed or included*?

- | | | |
|--------------------------------|------------------------------|-----------------------------|
| 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 |

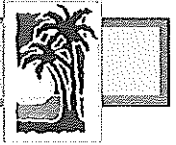
* For any marked Yes, provide further details below:

Special Parking Requirements:

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: _____ 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.

Linda Thompson
Signature of Applicant

Austin Thomas
Witness

Linda Thompson - Pres
Print Name of Applicant and Title

Austin Thomas
Print Name of Witness

12/15/2020
Date

12/15/2020
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. Roadways will not be impeded.

Deputies (How Many?):

None

Fee for Services:

Special Arrangements:

Alcoholic beverages must remain within the confines of the event area.
All amplified sounds must adhere to the Lee county noise ordinances.

Print Name: Lt. S. Brady

Signature:

Lt. Steven T. Brady

Title:

Special Events, Permits and Details

Date:

12-17-20

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

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 due to event being outside
Fee for Services:	N/A
Flammable Vegetation:	N/A
First Aid Equipment:	Call 911 if needed
Fire Extinguishing:	Ensure food vendor and stage area each have appropriate extinguishers on site.
Special Arrangements:	N/A

Print Name: Nate Burley

Signature: Nate Burley

Digitally signed by Nate Burley
Date: 2020.12.16 11:28:27 -05'00'

Title: Division Chief - Fire & Life Safety

Date: December 16, 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
- ☒ 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:

None necessary.

Medical Personnel:

None necessary.

Medical Supplies /
Equipment:

None necessary.

Safety Requirements:

Applicants shall follow all CDC and FDOH directives, and the Florida Governor's Executive Orders concerning health and safety, especially with regards to COVID-19 and the number of people congregating at the event.

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, o=Lee County Emergency Medical Services, Lee County Public Safety
ou=Division Chief, Special Operations and Support Services, email=dhiggins@leacu.com, c=US
Date: 2020.12.18 16:28:47 -0500

Title: Division Chief

Date: December 18, 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:	Park in designated areas. No event parking on 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.

Print Name: Bryan Miller

Signature: Bryan Miller

Digitally signed by Bryan Miller
Date: 2020.12.15 12:43:45 -05'00'

Title: Senior Project Manager

Date: December 15, 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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☐ 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:

Special Arrangements:

Event will not interfere with any Parks and Recreation operations or programs.

Print Name: Alise Flanjack

Signature: Alise Flanjack

Title: Deputy Director

Date: 12/22/2020

Salute To The Brave
Top Rocker Field
1/16/2021

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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☐ 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:

December 15, 2020



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/15/2020

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 East Main Street Insurance Services, Inc. Will Maddux PO Box 1298 Grass Valley CA 95945		CONTACT NAME: Will Maddux PHONE (A/C, No, Ext): (530) 477-6521 FAX (A/C, No): E-MAIL ADDRESS: info@theeventhelper.com	
INSURED Salute to the Brave Hero Project, Inc Linda Thompson 5770 Enterprise Pkwy Fort Myers FL 33905		INSURER(S) AFFORDING COVERAGE INSURER A: Lloyds Syndicate 2623 INSURER B: Lloyds Syndicate 623 INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # AA-1128623 AA-1128623	

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

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	Y	EH-771321-L2310437	01/16/2021 12:01 AM	01/17/2021 12:01 AM	EACH OCCURRENCE
	<input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES
	<input checked="" type="checkbox"/> Host Liquor Liability					MED EXP (Any one person)
	<input type="checkbox"/> Retail Liquor Liability					PERSONAL & ADV INJURY
GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					GENERAL AGGREGATE
	OTHER:					PRODUCTS - COMP/OP AGG
						Deductible
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person)
	<input type="checkbox"/> OWNED AUTOS ONLY	<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident)
	<input type="checkbox"/> HIRED AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY				PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					PER STATUTE <input type="checkbox"/> OTH-ER
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					E.L. EACH ACCIDENT
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A			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 CG 20 26 07 04.
Attendance: 500, Event Type: Charity Benefits, Dances, Auctions, or Sales.

OK 12/15/2020

CERTIFICATE HOLDER**CANCELLATION**

Lee County Board of County Commissioners P.O. Box 398 Fort Myers FL 33902	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

Policy Number: EH-771321-L2310437

COMMERCIAL GENERAL LIABILITY
CG 20 26 07 04

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 PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
Lee County Board of County Commissioners P.O. Box 398 Fort Myers, FL 33902
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

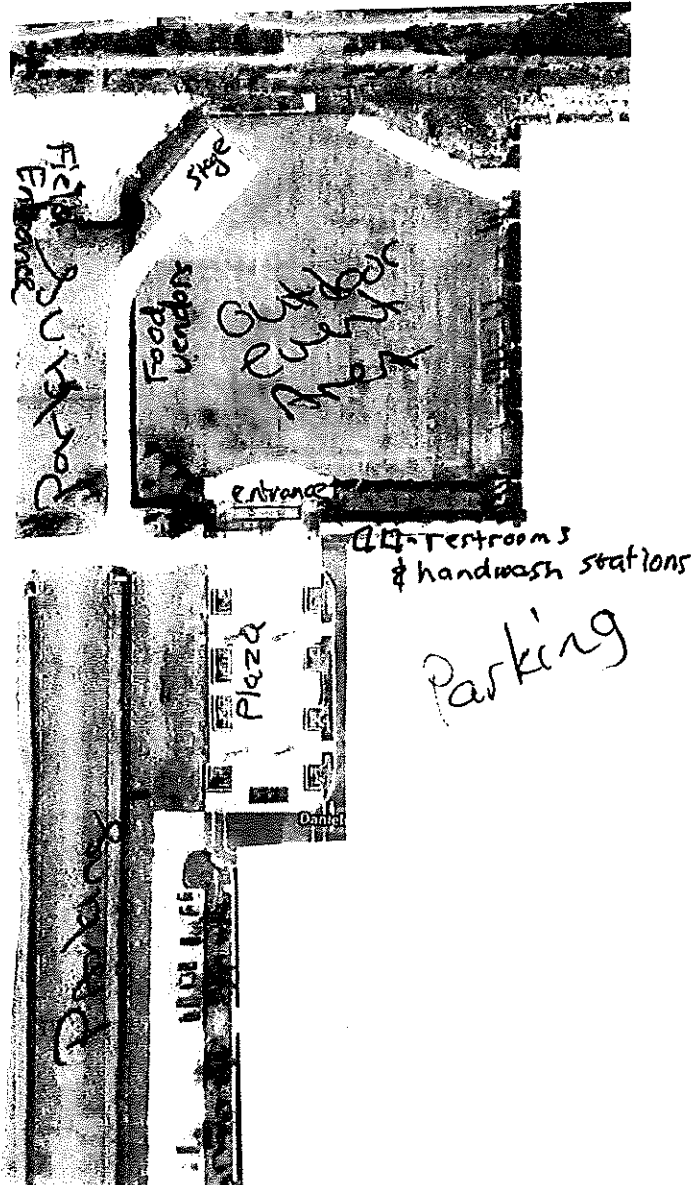
COVID-19 SAFETY PLAN

1. With over 20,000 Sq Ft of outdoor venue, we will admit no more than 500 people throughout the day.
2. We will have signs at the entrance stating to keep a 6-foot distance and wear facemasks.
3. We will encourage anyone 65 years of age and older to avoid large crowds.
4. We will post a sign at the entrance that anyone that is sick or experiencing symptoms of any illness should stay home.
5. We will have monitors encouraging social distancing and face masks throughout the venue.
6. We will have hand sanitizing stations placed throughout the event.
7. We will have a volunteer at the restrooms ensuring bathrooms are disinfected after use.
8. The entire event will be outside.
9. In the case of inclement weather, the event will be canceled.
10. Beverages will be available throughout the event area to avoid dehydration. There are trees on the property to provide shade.

SECTION 5 - DESCRIPTION OF PREMISES TO BE LICENSED
AB&T AUTHORIZED SIGNATURE REQUIRED

Business Name (D/B/A) or Name of Event

Neatly draw a floor plan of the premises in ink, including sidewalks and other outside areas which are contiguous to the premises, walls, doors, counters, sales areas, storage areas, restrooms, bar locations and any other specific areas which are part of the premises where the event will be held. A multi-story building where the entire building is to be licensed must show the details of each floor.





↓
Entrance

FISCHER FLORIDA PROPERTIES, LLC
9510 Thunder Road, Fort Myers, FL 33913
844-749-2363

November 1, 2020

Re: Lee County Special Event Application

I am the property owner of Top Rocker Field and Thunder Plaza located at 9510 Thunder Road, Fort Myers, FL 33913. Savage 4x4 will be hosting Salute to the Brave HERO Project on Saturday, January 16, 2021 on Thunder Plaza and Top Rocker Field at Six Bends.

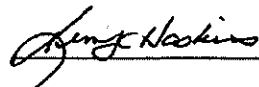
Restrooms will be provided. I have given my permission for this event.

Sincerely,



Jeffery Scott Fischer
Property Owner

Sworn and subscribed before me this day, 11-1-2020, by Jeffery Scott Fischer, who is personally known to me.



Kimberly Haskins
Notary Public
State of Florida



BluSite Solutions of SouthWest Florida,
103 6th Street
Ft. Myers, FL 33907
Tel: (239) 337-7709
Fax: (239) 337-0287



SAVAGE HERO PROJECT
5770 ENTERPRISE PKWY

FT MYERS, FL 33905

Invoice #: 7066711
Invoice Date: Dec 09, 2020
Page #: 1
PO Number:

Quantity	Description	Unit Price	Days Rent	Extension
	(4) BRAVE HERO PROJECT 9510 Thunder Rd TOP ROCKER FIELD - ROCKSTAR HD Fort Myers, FL 33913			
5.00	Special Event Unit Special (Jan 15, 2021 - Jan 18, 2021)	\$ 75.00	1.00	\$ 375.00
5.00	Special Event Unit Environmental reclamation fee (Jan 15, 2021 - Jan 18, 2021)	\$ 4.75	1.00	\$ 23.75
5.00	Special Event Unit Temporary Covid Recovery Fee (Jan 15, 2021 - Jan 18, 2021)	\$ 3.00	1.00	\$ 15.00
1.00	Handicap Unit Special (Jan 15, 2021 - Jan 18, 2021)	\$ 95.00	1.00	\$ 95.00
1.00	Handicap Unit special event delivery fee (Jan 15, 2021 - Jan 18, 2021)	\$ 50.00	1.00	\$ 50.00
1.00	Handicap Unit Environmental reclamation fee (Jan 15, 2021 - Jan 18, 2021)	\$ 4.75	1.00	\$ 4.75
1.00	Handicap Unit Temporary Covid Recovery Fee (Jan 15, 2021 - Jan 18, 2021)	\$ 3.00	1.00	\$ 3.00

Current	30-60	60-90	90-120	120+	Balance Due

TEAR OFF HERE AND RETURN LOWER PORTION WITH YOUR PAYMENT

Customer #:
Invoice #:
Invoice Date:
PO Number:
Invoice Total:

Dept 5947
PO Box 11407
Birmingham, AL 35246-5947

Please Write in Amount of Payment Enclosed

Credit Card #: _____

Exp: ____

Signature: _____

CVC Code ____

BluSite Solutions of SouthWest Florida,
103 6th Street
Ft. Myers, FL 33907
Tel: (239) 337-7709
Fax: (239) 337-0287



SAVAGE HERO PROJECT
5770 ENTERPRISE PKWY

FT MYERS, FL 33905

Invoice #: 7066711
Invoice Date: Dec 09, 2020
Page #: 2
PO Number:

Quantity	Description	Unit Price	Days Rent	Extension
2.00	Sink Unit Special (Jan 15, 2021 - Jan 18, 2021)	\$ 125.00	1.00	\$ 250.00
2.00	Sink Unit Environmental reclamation fee (Jan 15, 2021 - Jan 18, 2021)	\$ 4.75	1.00	\$ 9.50
2.00	Sink Unit Temporary Covid Recovery Fee (Jan 15, 2021 - Jan 18, 2021)	\$ 3.00	1.00	\$ 6.00
6.50 %	Lee	6.50 %		\$ 54.08
	Invoice Total			\$ 886.08

Effective 5/01/2020 - A \$3.00 Temporary Covid Recovery Fee per unit has been applied to your invoice for COVID related expenses, driver essential work, PPE, additional items for sanitizing.

Current	30-60	60-90	90-120	120+	Balance Due
\$ 886.08	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 886.08

TEAR OFF HERE AND RETURN LOWER PORTION WITH YOUR PAYMENT



BluSite Solutions of SouthWest Florida,
Dept 5947
PO Box 11407
Birmingham, AL 35246-5947

SAVAGE HERO PROJECT
Customer #: 013925 - 000004
Invoice #: 7066711
Invoice Date: Dec 09, 2020
PO Number:
Invoice Total: \$ 886.08

Please Write in Amount of Payment Enclosed

Credit Card #: _____

Exp: __/__/__

Signature: _____

CVC Code ____

Transaction Receipt - SW FLORIDA

noreply@virtualterminal.com <noreply@virtualterminal.com>

Wed 12/9/2020 1:51 PM

To: savage4x4-acc@hotmail.com <savage4x4-acc@hotmail.com>

worldpay | OmniFlex
from FIS

Your transaction receipt from:

SW FLORIDA **Date: 12/9/2020 12:51:20 PM CST**

5680 Richlands Hwy **Transaction ID: 2085366929**

FT MEYERS FL 28540

Approval Code: 036656

Response: Approved

Transaction Amount: \$886.08

Approval Amount: \$886.08

Transaction Type: Credit Card Sale

Customer Name: 7066711 Blu Site Solutions

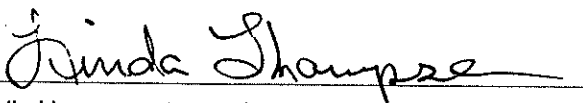
Card Number: xxxx-xxxx-xxxx-8674

Card Type: Visa

Host Response Code: 00

Address Verification Response (AVS): Not Available

CVV Response: Not Available

x 
Cardholder agrees to pay the above amount

Thank You