



# EVENT PERMIT

Ordinance 17-08



## EDISON FESTIVAL OF LIGHT 5K RACE

**PERMIT NUMBER:** TMP2021-00021

**Date(s) of Event:** FEBRUARY 20, 2021 FROM 4:00PM UNTIL 7:00PM

Property Owner: LEE COUNTY ROW

Applicant: STEVE SIZEMORE  
239-560-0349

Description: 5K RACE FOR EDISON FESTIVAL ON FEBRUARY 20, 2021 FROM 4:00PM UNTIL 7:00PM USING COUNTY R.O.W. ON N. TAMIAMI TRAIL

Location of event: 65 ROWN TAMIAMI TRL  
**N. TAMIAMI TRAIL RIGHT OF WAY**

Will the event be attended by 1000 or more people ? No

Will the event be held on County Owned Property ? Yes


Will there be alcohol consumed or sold at the event ? No

Will a bond be posted for this event ? No

### Permit Conditions:

- \* Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- \* The premises is to be left in the same condition as it was prior to the event.
- \* The permit is to be readily available for inspection during the entire event.
- \* If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners  
Lee County, Florida

 2/19/21  
County Manager Date



**Lee County**  
*Southwest Florida*

## Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

EDISON FESTIVAL OF LIGHT 5K RACE

TMP 2021-00021

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	Edison Festival of Light 5K Race
Date(s) of Event / Production:	February 20, 2021
Location(s) of Event:	Race turnaround will be on N Tamiami in the area of 1021/1025 N Tamiami Trail, North Fort Myers
Name of Applicant:	Steve Sizemore
Applicant Address:	2310 Edwards Dr. Fort Myers, FL 33902
Applicant Phone Number:	239-560-0349
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	stevesize@yahoo.com
Estimated Attendance:	300
Event Description: Include each activity, when activities take place, etc.	5K race on February 20, 2021 at 5:00 pm
Hours of Operation:	4:00 pm-7:00 pm
STRAP # of Parcel:	<del>11-44-24-02-0000A-0140</del> and <del>11-44-24-00-00019-0000</del> 11-44-24-00-00000-0000
Owner of Premises*:	County Roadway ROW

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



## Lee County Event Permit Application



What is the Zoning Classification of the premises? C1

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: Haas & Wilkerson

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: \_\_\_\_\_

Type of Food being Served: \_\_\_\_\_

### Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Edison Festival of Light

*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: CH2611

(Proof of registration with the Dept. of Agriculture & Consumer Services \$496.405 or proof the organization is exempt from this requirement. \$316.2045)

### Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property?

Yes ☐ No ☒

If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number: \_\_\_\_\_

(Required if alcohol is to be SOLD at the event)

Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details

# Lee County Event Permit Application



Type of Production (choose all that apply):

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

\* For any marked Yes, provide further details below:

Traffic control will be required in the area of 1021 N Tamiami Trail for the race turnaround.

Special Parking Requirements:

All parking will be in downtown Fort Myers

City or County Services Required: (Personnel, equipment, facilities, etc.)

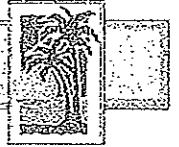
LCSO traffic detail

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.

Signature of Applicant

Steve Sizemore - President

Print Name of Applicant and Title

Witness

Print Name of Witness

2/12/21

Date

2-12-21

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:

All parking for this event will be handled Downtown Ft Myers.

Deputies (How Many?):

One deputy will be required for traffic control at the foot of the bridge to assist in moving vehicles over.

Fee for Services:

Contact Details Unit 239-477-1199 to set up & pay for detail in advance.

Special Arrangements:

Required MOT on the Lee County portion of this event will be handled through Bob's Barricades. City of Ft Myers Public Works Dept and Ft Myers Police Department will be responsible for all MOT and traffic control along the course within the Ft Myers city limits.

Print Name:

Steven Brady

Signature:

Steven T Brady

Title:

Special Operations Division

Date:

2-16-21



## 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?)

NA

Fee for Services:

NA

Flammable Vegetation:

NA

First Aid Equipment:

NA

Fire Extinguishing:

NA

Special Arrangements:

NA

Print Name: Rick Jones

Signature: Rick Jonse

Title: Fire Marshal

Date: 2/17/2021



## 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, ou=Public Safety  
c=US, email=Douglas.B.Higgins@leegov.net, serial=123456789, date=2021.02.16 12:41:31 -0500

Title: Division Chief

Date: February 16, 2021

**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 County road rights-of-way involved along designated route.

**Ingress and Egress:**

Use all established means of ingress and egress.

**Special Arrangements:**

No County maintained roads involved during event. Follow all City of Ft Myers and FDOT permit requirements for traffic control.

**Print Name:** Bryan Miller

**Signature:** Bryan Miller

Digitally signed by Bryan Miller  
Date: 2021.02.12 14:06:45 -05'00'

**Title:** Senior Project Manager

**Date:** February 12, 2021

Lee County Event Permit Application



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

Check the appropriate box(es) below:

- ☐ SPECIAL EVENT PERMIT  
☒ 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.

Illumination:

N/A

Parking Areas:

N/A

Special Arrangements:

Event not on parks' fee property and will not affect any park operations or programs

Print Name:

Alise Flanck

Signature:

Alise Flanck

Title:

Deputy Director

Date:

2/11/2021

EDISON Festival of Light  
5K Run  
2/20/2021

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT  
COUNTY ADMINISTRATION BUILDING - 4<sup>TH</sup> FLOOR  
2115 SECOND STREET  
FORT MYERS, FLORIDA 33901  
(239) 533-2221

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
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☐ FILM PERMIT

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

Insurance Requirements: Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.

Special Arrangements: A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured.

Subject to proof of insurance.

Print Name: Mike Figueroa

Signature:

Title: Risk Program Manager

Date: February 12, 2021

ACORD™

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/05/2021

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER <b>Haas &amp; Wilkerson Insurance</b> 4300 Shawnee Mission Parkway Fairway, KS 66205 913 432-4400	CONTACT NAME: <b>Kim Carter</b>
	PHONE (A/C, No, Ext): <b>913 432-4400</b> FAX (A/C, No): <b>913 749-4841</b> E-MAIL ADDRESS: <b>kim.carter@hwins.com</b>
INSURED <b>Edison Festival of Light, Inc.</b> PO Box 339 Fort Myers, FL 33901	INSURER(S) AFFORDING COVERAGE
	INSURER A: <b>ACE American Insurance Company (CHUBB)</b>
	INSURER B: <b>Berkley National Insurance Company</b>
	INSURER C:
	INSURER D:
	INSURER E:
INSURER F:	

## 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 INSR 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:		G20661549	12/01/2020	12/01/2021	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$Excluded PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$5,000,000 PRODUCTS - COM/OP AGG \$5,000,000 Liquor \$1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY		H08078956	12/01/2020	12/01/2021	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Equipment Floater		MNP1002946	12/01/2020	12/01/2021	Misc Rntd/Brwd Equip: \$50,000 Deduct \$1,000

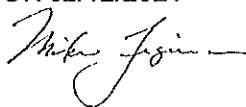

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Landlord (owner or lessee of the site) (Form LD9Z27/L-9Z27S1)

The certificate holder is named as an additional insured on the general liability policy but only with respect to liability arising out of the ownership, maintenance, or use of that part of the premises leased or licensed to the named insured and only during the term of the named insured's lease to occupy or license to use and only to the extent of liability resulting from an occurrence arising out of the named insured's negligence.

## CERTIFICATE HOLDER

## CANCELLATION

<b>Lee County Board of County Commissioners</b> 2120 Main St Fort Myers, FL 33901 OK 02/12/2021 	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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Client#: 1011

EDISOFS

ACORD

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<b>PRODUCER</b> Haas & Wilkerson Insurance 4300 Shawnee Mission Parkway Fairway, KS 66205 913 432-4400		<b>CONTACT NAME:</b> Kim Carter <b>PHONE (A/C, No, Ext):</b> 913 432-4400 <b>E-MAIL ADDRESS:</b> kim.carter@hwins.com <b>FAX (A/C, No):</b> 913 749-4841	
<b>INSURED</b> Edison Festival of Light, Inc. PO Box 339 Fort Myers, FL 33901		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> ACE American Insurance Company (CHUBB) <b>INSURER B:</b> Berkley National Insurance Company <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	
		<b>NAIC #</b> 22667 38911	

## COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED <input type="checkbox"/> AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		H08078956	12/01/2020	12/01/2021	BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ EACH OCCURRENCE \$ AGGREGATE \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTIONS					PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				
B	Equipment Floater		MNP1002946	12/01/2020	12/01/2021	Misc Rntd/Brwd Equip: \$50,000 Deduct \$1,000

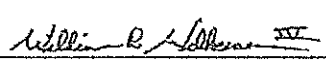
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Landlord (owner or lessee of the site) (Form LD9Z27/L-9Z27S1)

The certificate holder is named as an additional insured on the general liability policy but only with respect to liability arising out of the ownership, maintenance, or use of that part of the premises leased or licensed to the named insured and only during the term of the named insured's lease to occupy or license to use and only to the extent of liability resulting from an occurrence arising out of the named insured's negligence.

## CERTIFICATE HOLDER

## CANCELLATION

Lee County Board of County Commissioners 2120 Main St 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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DIVISION OF CONSUMER SERVICES  
(850) 410-3800



THE RHODES BUILDING  
2005 APALACHEE PARKWAY  
TALLAHASSEE, FLORIDA 32399-6500

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
COMMISSIONER NICOLE "NIKKI" FRIED

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January 13, 2021

Refer To: CH2611

EDISON FESTIVAL OF LIGHT, INC.  
PO BOX 339  
FORT MYERS, FL 33902-0339

RE: EDISON FESTIVAL OF LIGHT, INC.  
REGISTRATION#: CH2611  
EXPIRATION DATE: March 23, 2021

Dear Sir or Madam:

The above-named organization/sponsor has complied with the registration requirements of Chapter 496, Florida Statutes, the Solicitation of Contributions Act. A COPY OF THIS LETTER SHOULD BE RETAINED FOR YOUR RECORDS.

Every charitable organization or sponsor which is required to register under s. 496.405 must conspicuously display the registration number issued by the Department and in capital letters the following statement on every printed solicitation, written confirmation, receipt, or reminder of a contribution:

"A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE."

The Solicitation of Contributions Act requires an annual renewal statement to be filed on or before the date of expiration of the previous registration. The Department will send a renewal package approximately 30 days prior to the date of expiration as shown above.

Thank you for your cooperation. If we may be of further assistance, please contact the Solicitation of Contributions section.

Sincerely,

Cassie Miller  
Regulatory Consultant  
850-410-3719  
Fax: 850-410-3804  
E-mail: [cassie.miller@fdacs.gov](mailto:cassie.miller@fdacs.gov)

## **COVID-19 Safety Plan**

Our event is only utilizing a small portion of Lee County property (approx. 100 yards) as a 5K race turnaround. There will be no crowds, or gatherings of people on county property, therefore, all of the guidelines laid out in the addendum to the special event permit application are not applicable to our race. The majority of the race, and gathering of people will occur within the city limits, and not on county premises. I understand the need to have a plan like this in place, however, I believe this criteria is not applicable to our type of event, as it is just a portion of roadway needed to complete our 5K race.

Thank you.

Steve Sizemore  
President  
Edison Festival of Light

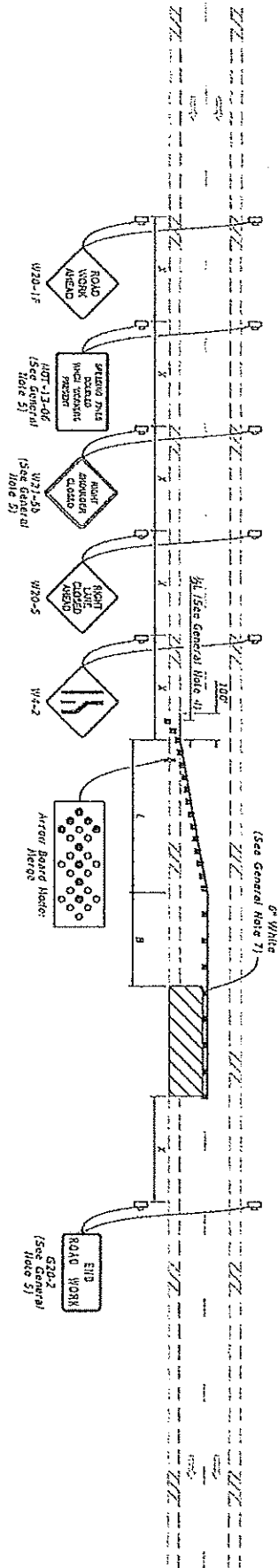
LAST REVISION 11/01/20	DESCRIPTION	FDOT STANDARD PLANS	FY 2021-22	MULTILANE ROADWAY, LANE CLOSURES	INDEX 102-613	SHEET 1 of 5
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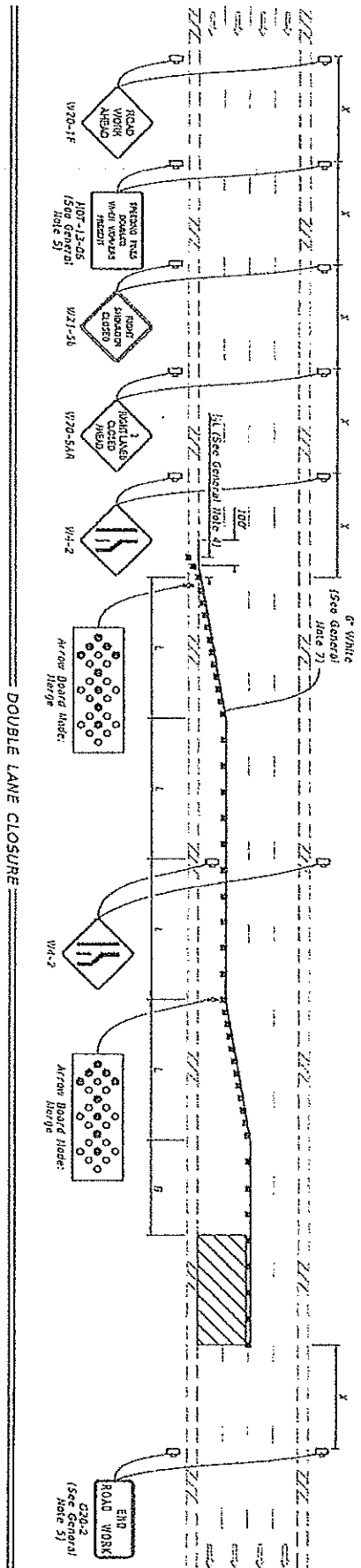
- SYMBOLS:**
- Work Area
  - Channelizing Device (See Index 102-600)
  - Work Zone Sign
  - Lane Identification and Direction of Traffic
  - Arrow Board

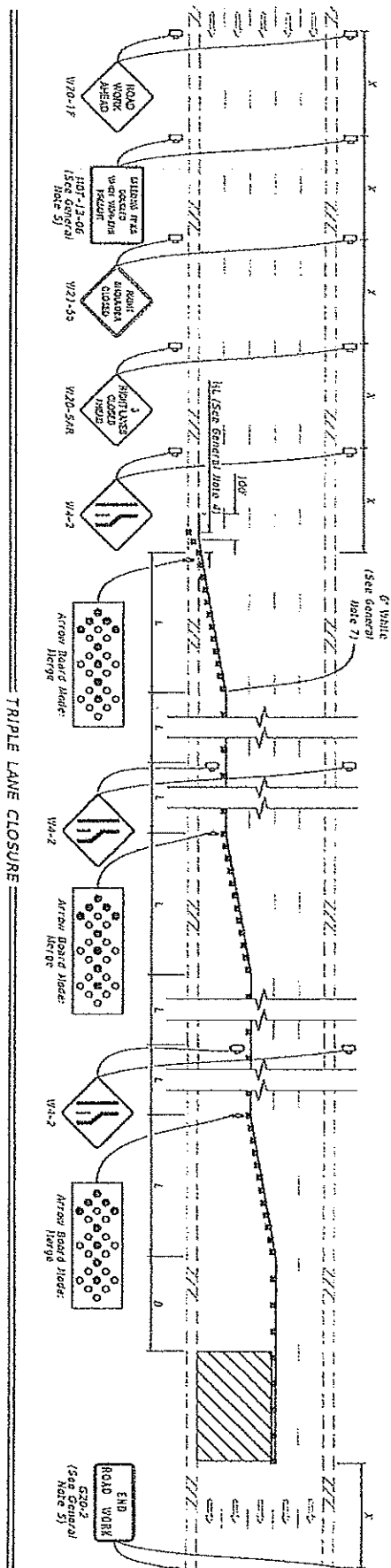
**GENERAL NOTES:**

1. L = Taper Length
2. B = Buffer Length
3. X = Work Zone Sign Distance
4. See Index 102-600 for "C", "D", "E", "F", and Channelizing device spacing values.
5. On undivided highways the median signs as shown are to be omitted.
6. On limited access facilities, only "Shoulder Closed Ahead" signs (W21-SB) and associated work zone sign spacing distances.
7. If the paved shoulder is less than 4' in width, omit the taper and channelizing devices from the paved shoulder.
8. The "Speeding Plaque Doubled when Workers Present" signs (W107-13-06) and "End Road Work" signs (W20-2) and "Shoulder Closed Ahead" signs (W21-SB), along with associated work zone sign distances, may be omitted when the work zone will be in place for 24 hours or less. For Single Lane Closures, arrow boards and buffer (B) may also be omitted when the work zone will be in place for 60 minutes or less and the speed limit is 45 mph or less.
9. Use inverted sign of the illustrations for work on left side of roadways.
10. Temporary pavement markings may be omitted when the work zone is in place for 3 days or less.
11. If the work encroaches on a marked bicycle lane or rideable shoulder, close the lane or shoulder in accordance with the Plans.


**SINGLE LANE CLOSURE**














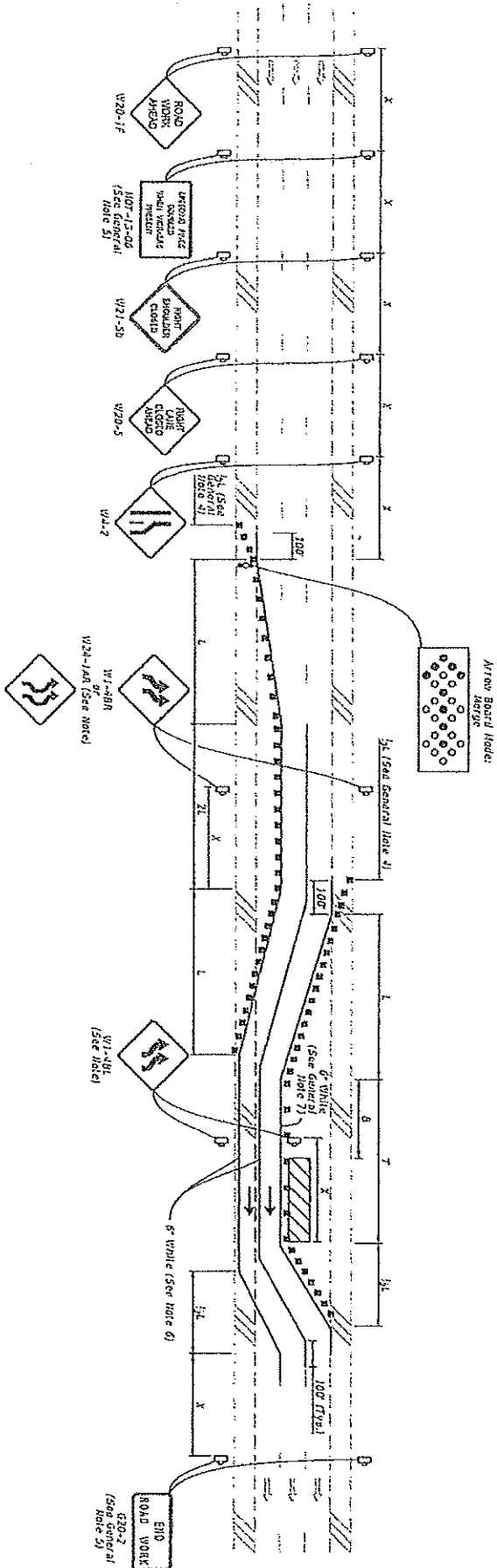
LAST REVISION 11/01/20	DESCRIPTION:		INDEX	SHEET
REVISION		 FY 2021-22 STANDARD PLANS	MULTILANE ROADWAY, LANE CLOSURES	102-613 4 of 5

## SYMBOLS:

- |   |  |
|---|--|
|  | Work Area                                    |
|  | Channelizing Device (See Index 102-600)      |
|  | Work Zone Sign                               |
|  | Lane Identification and Direction of Traffic |
|  | Arrow Board                                  |

## NOTES






if the tangent distance "T" is less than 600', then use "Double Reverse Curve" signs (W24-1A) instead of the first pair of "Reverse Curve" signs (W1-4B) and omit the second pair of "Reverse Curve" signs.



LAST REVISION 11/01/20	DESCRIPTION:	FDOT FY 2021-22 STANDARD PLANS	MULTILANE ROADWAY, LANE CLOSURES	INDEX 102-613	SHEET 5 of 5
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15/12/2022 6:13:58 AM

# SYMBOLS:

-  Work Zone Sign
-  Lane Identification and Direction of Traffic
-  (1) PCIS- Portable Changeable (Variable) Message Sign
-  (2) PMS- Portable Regulatory Sign-Speed Limit When Flashing
-  (3) RSDU- Radar Speed Display Unit

# NOTES:

- When called for in the Plans, use the Motorist Awareness System (MAS) in accordance with the Plans and this Index, when using this detail, locate the MAS devices (i.e., PCIS, PMS, and RSDU) within the advance of the work zone signs and devices in accordance with the Plans or Standard Plans after the appropriate Lane Closed Ahead (W10-1X) sign.
- For a posted speed of 55 mph or greater, display speed with a ten mph reduction. For a posted speed of 60 mph, display a reduced speed of 55 mph. For areas outside of the lane closure, use the posted speed as the work zone speed.
- Only the PCIS in the median for roadways with three lanes or less in the same direction of traffic.

# TYPICAL PCMS DISPLAY:

- With speed reduction:
- Message 1: WORKERS PRESENT AHEAD  
Message 2: SPEED REDUCED NEXT XXMI
- Without speed reduction:
- Message 1: WORKERS PRESENT AHEAD  
Message 2: NEXT XX MILES

# MOTORIST AWARENESS SYSTEM

