



# EVENT PERMIT

Ordinance 17-08



**RIVERDALE WILDCATS, INC**

**PERMIT NUMBER: TMP2021-00146**

**Date(s) of Event:** SEPTEMBER 2021 THROUGH NOVER 2021

Property Owner: LEE COUNTY

Applicant: JERRY DAVIS  
239-321-0984

Description: POP WARNER FOOTBALL AND CHEER ON SATURDAYS SEPTEMBER 3,2021  
THROUGH NOVEMBER 30, 2021  
8:00AM UNTIL 7:00PM

Location of event: 9800 BUCKINGHAM RD, FORT MYERS, FL 33905  
**LEHIGH COMMUNITY 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 ? 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

 9/11/21  
County Manager Date

ftmpprmt\_specialevent.rpt



## Temporary Permit

Special Event per Ord. 17-08

Permit Number: TMP2021-00146

Issued Date: 09/09/2021

Expiration Date: 12/01/2021

Owner Name: LEE COUNTY

Applicant: JERRY DAVIS

Project Name: RIVERDALE WILDCATS, INC

Description: POP WARNER FOOTBALL AND CHEER ON SATURDAYS SEPTEMBER 3, 2021 THROUGH NOVEMBER 30, 2021  
8:00AM UNTIL 7:00PM

Job Address: 9800 BUCKINGHAM RD, FORT MYERS, FL 33905

GENERAL INFORMATION	
Current Florida Building Code: Florida Building Code 7th Edition (2020)	Directions: LEHIGH COMMUNITY PARK
Event End Date: 11/30/2021	Event End Time: 19:00 07:00 PM
Event Start Date: 09/03/2021	Event Start Time: 08:00 08:00 AM
Type of Permit: Special Event per Ord. 17-08	
SPECIAL EVENTS	
Alcoholic Beverages?: No	Bond Required?: No
Date(s) of Event: SEPTEMBER 2021 THROUGH NOVEMBER 2021	Event on County Property?: Yes
Special Event > 1000?: No	

- NO SMOKING SIGNS ARE REQUIRED.
- Tents up to 2500 sq. ft. must have Two (2) classification type 2A fire extinguishers. Flame resistance certificates must be on the job site for inspection.
- Tents will be at least twelve (12) feet from all property lines and have an unobstructed passageway or fire road not less than twelve feet wide and free from guy ropes or other obstructions on all sides of tent. Tents must maintain minimum 25' setback from all road right of way. Tents will not block any driveway, fire hydrant or fire access to any building.
- Tents that will be occupied after sunset will have lights and emergency lighting at each exit.
- All other applicable requirements of N.F.P.A. 102 will be complied with.

REQUEST AN INSPECTION ONLINE @ <https://accelaaca.leegov.com> or CALL 239-533-8997 OPTION 1  
WHEN PROMPTED FOR THE PERMIT NUMBER ENTER TMP2021-00146

### Required Inspections

DATE: BY:

902 Fire Final

Request Inspection through the IVR or eConnect website, then contact the Tice fire district to schedule a time at 239-694-2380

Tent Fire Dept Insp

Fire department inspection required on ALL TENTS, contact the fire department directly. 239-694-2380

Other Inspection

This temporary use permit is valid for one year from the date of issuance. This permit does not allow more than 8 scheduled events from date of issuance. A scheduled event is to allow for the sale of flowers, vegetables or other crops grown on this property each year. Each event may not exceed two days.

Separate permits would be required for the construction of any structures, buildings, or the installation of any utilities.

TMP2021-00146

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES OR FEDERAL AGENCIES.

THIS PERMIT IS VOID IF THE FIRST INSPECTION IS NOT MADE WITHIN (6) MONTHS FROM THE DATE ISSUED OR IF NO INSPECTION HAS BEEN MADE FOR A PERIOD OF SIX (6) MONTHS FROM THE MOST RECENT PASSED INSPECTION. BUILDING PLANS MUST BE ON JOB AT TIME OF INSPECTION. REINSPECTION FEE \$50.00

**THIS CARD MUST BE PLACED ON A BOARD AT EYE LEVEL SO IT CAN BE READ FROM THE STREET AND BE PROTECTED FROM THE WEATHER.**





Lee County  
*Southwest Florida*

# Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

Riverdale Wildcats

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TMP2021-00146

# 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	RIVERDALE WILDCATS, INC
Date(s) of Event / Production:	AUGUST 1 NOVEMBER 2021
Location(s) of Event:	9800 BUCKINHAM PARK
Name of Applicant:	WILLIE BLANKS, SR
Applicant Address:	3106 JEFFEGOTT STREET, FORT MYERS, FL 33916
Applicant Phone Number:	239-321-0984
Contact Person: (If different from applicant)	JERRY DAVIS
Contact Phone Number: (If different from applicant)	239-822-0570
Email Address:	willieblanks35@gmail.com
Estimated Attendance:	100 per game
Event Description: Include each activity, when activities take place, etc.	POP WARNER FOOTBALL ON SATURDAYS
Hours of Operation:	8:00 AM- 7:00 PM.
STRAP # of Parcel:	
Owner of Premises*:	

\*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? \_\_\_\_\_

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: \_\_\_\_\_

9800 BUCKINGHAM PARK

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

Hot dog - HB, SACKS

### Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: \_\_\_\_\_

RIVERDALE WILDCATS

### 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 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.

*Jerry Davis*  
Signature of Applicant

JERRY DAVIS  
Print Name of Applicant and Title

8/4/21  
Date

*Randy M. Dyer*  
Witness

Randy M. Dyer  
Print Name of Witness

August 4, 2021  
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:

To be handled by event staff. If a large crowd is anticipated, additional deputies should be hired to contain and limit any parking issues.

Deputies (How Many?):

2 deputies required per game. This permit page and the detail request form have been filled out according to the schedule that was provided on the application and does not include any additional play off games. Additional games that need be added to the schedule at a later date should be submitted via email to the Lee County Sheriff's Office Details units no later than one week in advance.

Fee for Services:

There is a four hour minimum per deputy on all LCSO details. Contact the Lee County Sheriff's Office Details Unit for cost.

Special Arrangements:

Details will need to be paid for in advance no less than one week prior to the start of each game. If the detail is not paid for in advance, Lee County Parks & Rec will be notified and cancellation of the event may be the result. LCSO is not responsible for seeking out payments. The league is responsible for confirming game dates and times prior to the start of the event to ensure proper coverage. The league is responsible for any time worked by deputies over the scheduled detail times. All changes/additions to game dates or times must be done by email to the Details Unit. Should any game be cancelled/rescheduled, it is the responsibility of the league to notify the Details Unit via email with 24 hour notice. Failure to do so will result in full charge.

Print Name: Lt. S. Brady

Signature:

*Lt. Steven T. Brady*

Title:

Special Events, Permits and Details

Date:

8-17-21

**Carmine Marceno**  
**Sheriff**



**State of Florida**  
**County of Lee**

**"Proud to Serve"**

**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.

**The current detail rates are:**

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

*Details are charged a \$15 per deputy 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.**

LEE COUNTY SHERIFF'S OFFICE USE ONLY			
Total Deputy(ies) <u>2</u>	Total Hours <u>4 each</u>	Rate per Hour <u>\$48</u>	Vehicle Rate <u>Waived</u>
Supervisory Deputy(ies) _____	Total Hours _____	Rate per Hour _____	Vehicle Rate _____
<u>Willie Blanco</u> Entity		<b>SIGN HERE</b>	

*At the moment we are D2 AS A Traveling Team  
no home games has been assigned.*



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

# Detail Request Form - continued

LCSO Details Main Phone Number: 239-477-1199		
<b>Vendor Information</b>		
Business Name: <u>Riverdale Wildcats Pop Warner Football</u>		
Street: <u>8141 Blue Daze Ct</u>		
City: <u>Lehigh Acres</u>	State: <u>FL</u>	Zip Code: <u>33972</u>
Business Contact: <u>Jerry Davis / Willie Blanks</u>		Phone: <u>239-822-0570 / 239-321-0984</u>
Email Address: <u>hqjd11@gmail.com / willieblanks35@gmail.com</u>		
<b>Event Information</b>		
Detail Location: <u>Buckingham Community Park</u>		
Street: <u>9800 Buckingham Rd</u>		
City: <u>Fort Myers</u>	State: <u>FL</u>	Zip Code: <u>33905</u>
Contact During Event: <u>Jerry Davis/Willie Blanks</u>		Phone: <u>239-822-0570/239-321-0984</u>
Event Date: <u>8/28/21, 9/11/21, 9/18/21, 10/2/21, 10/16/21</u>		Event Time: <u>4p-8p</u>
Anticipated Crowd Size : <u>100 per game</u>		Type of Event: <u>Pop Warner Football</u>
Additional Security Working Detail: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how many? _____		
Permits Attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Alcohol Served: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>Detail Information</b>		
Security <input checked="" type="checkbox"/>	Traffic <input type="checkbox"/>	Prisoner Transport <input type="checkbox"/>
Escort <input type="checkbox"/>	Holiday <input type="checkbox"/>	Funeral Escort <input type="checkbox"/>
Last Minute <input type="checkbox"/>	Stand-by <input type="checkbox"/>	
Marked Vehicle <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Unmarked Vehicle <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Uniformed Deputy <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Plain Clothes Deputy <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Detail Description: Details will be paid at least 1 week prior to each game. If detail is not paid in advance, Parks & Rec will be notified & event may be canceled. LCSO is not responsible for seeking out payment. League is responsible for confirming dates/times prior to start of event to ensure proper coverage. League is responsible for additional time should detail run over. All changes/additions to dates/times must be done by email to Details Unit. Should game be canceled/rescheduled, it is the responsibility of the league to notify Details Unit via email 24 hrs in advance. Failure to do so will result in full charge.		



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14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

## 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?)

Fee for Services:

Flammable Vegetation:

First Aid Equipment:

Fire Extinguishing:

Special Arrangements:

Designated caller for 911.

Print Name:

Signature:

Title:

Date:

Shena Smart  
Administration  
07/28/2021



## 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, email=doug.higgins@leegov.com, o=Lee County, ou=Public Safety,  
 email=Douglas.B.Higgins@leegov.com, c=US
 

Title: Division Chief

Date: July 28, 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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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 any portion of 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: 2021.07.28 12:47:56 -04'00'

Title: Senior Project Manager

Date: July 28, 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  
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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:

Event organizer must ensure parking is controlled and monitored so no vehicles block any driveways and roads.

Special Arrangements:

Event organizers must follow all policies and, Ordinance 18-12, as well as the Youth League Agreement. Must provide adequate staff and volunteers to manage a safe event and to monitor crowd control.

Print Name:

Jesse Lavender

Signature:

Jesse Lavender

Title:

Director

Date:

July 28, 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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☐ 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: 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: Teresa Zilko

Signature:

Title:

Risk Program Analyst

Date:

August 4, 2021

ACORD™

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/29/2021

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

<b>PRODUCER</b> K&K INSURANCE GROUP, INC. 1712 MAGNAVOX WAY PO BOX 2338 FORT WAYNE IN 46801		<b>CONTACT NAME:</b> Anita Bliss <b>PHONE (A/C, No. Ext):</b> 800-441-3994 x5569 or <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> pop.warner@kandkinsurance.com																						
<b>INSURED</b> The Riverdale Wildcats, Inc. 8141 Blue Daze Ct Lehigh Acres, FL 33972		<b>MEMBER NO:</b> <table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Scottsdale Insurance Company</td> <td></td> <td>41297</td> </tr> <tr> <td>INSURER B: Zurich American Insurance Company</td> <td></td> <td>16535</td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A: Scottsdale Insurance Company		41297	INSURER B: Zurich American Insurance Company		16535	INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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## COVERAGES

CERTIFICATE NUMBER: W00002759

REVISION NUMBER:

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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		KRS 0000008839600	08/01/2021 12:01 AM	08/01/2022 12:01 AM	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS-COMP/OP AGG \$1,000,000 PARTICIPANT LEGAL LIABILITY \$1,000,000
	AUTOMOBILE LIABILITY <input 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						COMBINED SINGLE LIMIT (Ea Accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
A	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE EACH OCCURRENCE AGGREGATE
	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				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
B	PARTICIPANT ACCIDENT			ZPX 0000485085400	08/01/2021 12:01 AM	08/01/2022 12:01 AM	AD&D EXCESS MEDICAL DEDUCTIBLE \$10,000 \$100,000 \$500

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

THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED, BUT SOLELY WITH RESPECT TO THE ACTIVITIES OF THE NAMED INSURED  
 Owner/Lessor/Manager of Premises Utilized for Insured's Activities

SEXUAL ABUSE/MOLESTATION: \$1,000,000 PER OCCURRENCE/\$2,000,000 AGGREGATE

## CERTIFICATE HOLDER

Lee County BOCC  
 P O Box 393  
 Fort Myers, FL 33902

OK 8/4/21  
*John Lee*

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Scott Furbush*

&lt;&lt;D&gt;&gt;



ACORD™

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/29/2021

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## PRODUCER

K&K INSURANCE GROUP, INC.  
1712 MAGNAVOX WAY  
PO BOX 2338  
FORT WAYNE IN 46801

## CONTACT

NAME: Anita Bliss

## PHONE

(A/C, No, Ext): 800-441-3994 x5569 or FAX (A/C, No):

## E-MAIL

ADDRESS: pop.warner@kandkinsurance.com

## INSURED

The Riverdale Wildcats, Inc  
8141 Blue Daze Ct  
Lehigh Acres, FL 33972

## MEMBER NO:

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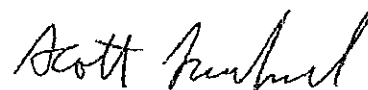
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AUTHORIZED REPRESENTATIVE



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