



EVENT PERMIT

Ordinance 17-08



SALT Series Southern Cross

PERMIT NUMBER: TMP2021-00201

Date(s) of Event: DECEMBER 4, 2021 FROM 5:00AM UNTIL 12:00PM

Property Owner: LEE COUNTY

Applicant: MATT DUNN
904-303-0552

Description: 1mile and 5k Open Water Swimming Races

Location of event: 950 ESTERO BLVD, FORT MYERS BEACH, FL 33931
LYNN HALL 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

 10/28/21
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

SALT Series Southern Cross

JMP2021-00201

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	SALT Series Southern Cross
Date(s) of Event / Production:	December 4, 2021
Location(s) of Event:	Lynn Hall Park, 950 Estero Blvd. Fort Myers Beach FL
Name of Applicant:	Matt Dunn / Casey Taker
Applicant Address:	1093 A1A Beach Blvd #118 St. Augustine Beach FL 32080
Applicant Phone Number:	904-303-0552 (Matt Dunn)
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	matt@saltysportsociety.com
Estimated Attendance:	150 (125 Swimmers, 25 Spectators)
Event Description: Include each activity, when activities take place, etc.	1 Mile and 5K Open Water Swimming races
Hours of Operation:	5:00 am – 12:00 pm
STRAP # of Parcel:	
Owner of Premises*:	Lee County Parks & Recreation

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

Lee County Event Permit Application



Fill out the following questions for all permit types:

What is the Zoning Classification of the premises? Lee County Facility

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: HMBD Insurance Co.

Note: Certificate of Insurance must be submitted at time of application

Surety Company Bonding this Event (Name and Address): _____

<p>Will Vehicles be Used as Part of this Event?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, automobile coverage must be included on the certificate of insurance.</p>	<p>Will Food be Available at this Event?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, products liability coverage must be included on the certificate of insurance.</p>	<p>Will Alcoholic Beverages be served/consumed at this Event?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, liquor liability coverage must be included on the certificate of insurance.</p>
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Name & Address of Organization
Providing Food: _____

Type of Food being Served: _____

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: _____

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

Name of Charity: _____

Address of Charity: _____

Phone Number: _____

Non-profit certificate/registration number: _____

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

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

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

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

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


Signature of Applicant

Matthew C. Dunn

Print Name of Applicant and Title

8/13/21

Date


Witness

Casey Taker

Print Name of Witness

8/13/21

Date

Lee County Event Permit Application



LEE COUNTY SHERIFF'S DEPARTMENT
14750 SIX MILE CYPRESS PARKWAY
FORT MYERS, FLORIDA 33912
(239) 477-1199

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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:

Parking in authorized areas only.

Deputies (How Many?):

None

Fee for Services:

None

Special Arrangements:

LCISO Marine Unit will provide assistance during the event for safety and security. Vendor will need to follow all special arrangements with Parks & Rec as indicated on their permit page.

Print Name:

Steven Brady

Signature:

Capt. Steven J. Brady

Title:

Special Events, Permits and Details

Date:

10-6-21

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:

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☐ FILM PERMIT

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Fire Guards (How Many?)

N/A

Fee for Services:

Invoiced

Flammable Vegetation:

Not Permitted

First Aid Equipment:

FMB Ambulance for Standby

Fire Extinguishing:

None

Special Arrangements:

None

Print Name: Jennifer Campbell

Signature:

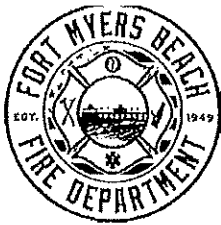
Jennifer Campbell

Title:

Life Safety Official

Date:

9-16-21



FORT MYERS BEACH FIRE DEPARTMENT

17891 SAN CARLOS BOULEVARD - FORT MYERS BEACH, FLORIDA 33931

Special Events Application and Guidebook

Event Type:

<input checked="" type="checkbox"/> Small Outdoor/Indoor Event	<input type="checkbox"/> Large Outdoor/Indoor Event	<input type="checkbox"/> Firework Display
Date of Application: 8/17/2021		Date of Event: 12/4/2021
Location: Lynn Hall Park 950 Estero BLVD, FMB, FL 33931		
Event Start Date/Time: 12/4/2021 9:00 AM		Event End Date/Time: 12/4/2021 1:00PM
Setup Date: 12/4/2020	Setup Time: 5:00 AM	Inspection Time:
Event Sponsor: Salty Sports Society / Lee County Parks and Rec		
Sponsor Contact: Casey Taker	Sponsor Phone #: (615) 948-5522	Sponsor Email: casey@saltysportsociety.com
Anticipated Number of Attendees: 120	Anticipated Number of Event Workers: 22	
Will there be carnival or mechanical rides: NO	Number of Stages: 0	
Total Number of Vendors: 0	Total Number of Hot Food Vendors: 0	
Number of Tents larger than 20 x 20: 0	Number of 10 x 10 Tents: 3	

Every vendor with a booth will receive a fire inspection and is responsible for paying an inspection fee. Please list the contact information for the responsible party below.

Please Note: If the event sponsor elects not to pay the vendor's inspection fee, a list of vendors with full contact information must be provided to the Fort Myers Beach Fire Department. This information will include contact name, number, and e-mail. All inspection fees will be due at time of service. All fees must be paid prior to releasing any permit.

Event applications submitted less than thirty (30) days prior to the event will be subject to additional fees. An expedited review may be requested and will be based upon availability, additional fees will apply.

Applications shall include the following:

- A legible site plan to include proposed layout of the event; fire hydrant locations; fire/emergency access; and distances to any structures.
- A life safety evaluation may be required based on the size of the event in accordance with the firecode.
- All vendors should review FMBFD guidelines, on our website at www.FMBFire.org
- Failure to comply with requirements of the FMBFD may result in additional fees and/or shutdown of the vendor(s).

Mike Hammond	Administrative Use Only	
Submitting Party Name (Print)	Date Received:	
	Received By:	
Submitting Party Name (Sign)	Fees Due:	Paid: <input type="checkbox"/>
Date:	Forwarded for Review: <input type="checkbox"/>	

Speedo SALT Series

Southern Cross Site Map

Legend

- Awards
- Body Marking Tent
- Boneyard (equipment tent)
- Lynn Hall Beach Park
- Merchandise Tent
- Reg Tent
- Southern Cross Course Map
- Staff Parking
- Start/Finish Line Arch
- Timing/Scoring Tent



Google Earth

©2011 Google



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:

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☐ FILM PERMIT

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

Treatment Facilities:

See Special Arrangements below.

Medical Personnel:

See Special Arrangements below.

Medical Supplies /
Equipment:

See Special Arrangements below.

Safety Requirements:

See Special Arrangements below.

Fee for Services

See Special Arrangements below.

Special Arrangements:

EMS defers to Fort Myers Beach Fire District for specifying EMS coverage for this event, as it falls within their response district. Their department can be contacted at (239) 590-4200.

Print Name: Douglas B. Higgins

Signature: Douglas B. Higgins

Digitally signed by Douglas B. Higgins
DN: cn=Douglas B. Higgins, o=Lee County Fire-Paramedic Services, ou=Lee County Public Safety,
email=Douglas.B.Higgins@leefire.org, c=US
Date: 2021.08.23 15:56:29 -0500

Title: Division Chief

Date: August 23, 2021

Lee County Event Permit Application



DEPARTMENT OF TRANSPORTATION
1500 MONROE STREET
FORT MYERS, FL 33901
(239) 533-8580

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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:

None.

Print Name: Bryan Miller

Signature: Bryan Miller

Digitally signed by Bryan Miller
Date: 2021.08.19 08:25:02 -04'00'

Title: Senior Project Manager

Date: August 19, 2021

Lee County Event Permit Application



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

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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.

Illumination:

Supplemental lighting (head lamps) may be used during pre-dawn hours for set up as needed on Dec 4, 2021.

Parking Areas:

Participants will utilize the Lynn Hall Parking lot on a first come first serve basis. Any overflow parking will be guided to the Town's paid parking lots under the bridge and the private parking lot by Winds. Many participants will be staying on the beach and will walk to Lynn Hall Park.

Special Arrangements:

Event organizer must provide adequate staff/Volunteers to ensure that the COVID Safety Plan is being followed as approved and per CDC guidelines. The event organizer and Parks staff will provide adequate staff/volunteers throughout the day for Safety/First Aid stations, course monitoring, litter control and debris clean up during and after the event. Work with the on-site County Park staff for debris/trash collection area during and after the event.

Participants and spectators must disperse and leave the park/beach area to seek safe shelter in their vehicles during lightning alerts and threatening weather.

Print Name: Alise Flanck

Signature:

Alise Flanck

Title:

Deputy Director

Date:

10/21/2021

Lee County Event Permit Application



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

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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:

October 4, 2021



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/24/2021

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 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 HUB INTERNATIONAL INSURANCE SERVICES INC 3633 E BROADWAY STE 200 LONG BEACH, CA 90803-6035 (800) 272-4594		CONTACT NAME: PHONE (A/C, No, Ext): (800) 272-4594 FAX (A/C, No): E-MAIL ADDRESS:		
INSURED SPORTS AND RECREATION PROVIDERS ASSOCIATION (PURCHASING GROUP) AND ITS PARTICIPATING MEMBERS: Salty Sports Society, LLC 1093 A1A Beach Blvd. 118 ST AUGUSTINE BEACH, FL 32080		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: United States Fire Insurance		21113
		INSURER B:		
		INSURER C:		
		INSURER D:		
		INSURER E:		
INSURER F:				

COVERAGES

CERTIFICATE NUMBER: USP345455

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS						
A	GENERAL LIABILITY	X		SRPGAPML-101-0721	12/04/2021 12:01 AM	12/05/2021 12:01 AM	GENERAL AGGREGATE	\$2,000,000.00					
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	\$2,000,000.00					
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$1,000,000.00					
							EACH OCCURRENCE	\$1,000,000.00					
							FIRE DAMAGE (Any one fire)	\$300,000.00					
							MED EXP (Any one person)	\$5,000.00					
	GEN'L AGGREGATE LIMIT APPLIES PER:												
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC												
	AUTOMOBILE LIABILITY											COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO											BODILY INJURY (Per person)	\$
<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$						
<input type="checkbox"/> HIRED AUTO	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$						
	UMBRELLA LIAB						EACH OCCURRENCE	\$					
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE	\$					
	DED	RETENTION \$											
							EACH OCCURRENCE	\$0.00					
							GENERAL AGGREGATE	\$0.00					
							EACH OCCURRENCE	\$					
							GENERAL AGGREGATE	\$					

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

Open Water Swim Event

The Certificate Holder is added as an additional insured but only with respect to liability arising out of the named insured during the policy period.

Scheduled Activities Exclusion Applies-Please Refer to Named Insured Member Certificate of Coverage

CERTIFICATE HOLDER

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

OK 10/04/2021

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

Hub International Insurance Services