

EVENT PERMIT



Ordinance 17-08

PAN-FLORIDA CHALLENGE CANCER RIDE

PERMIT NUMBER: TMP2021-00251

Date(s) of Event: MARCH 26, 2022

Property Owner:

LEE COUNTY ROW

Applicant:

JERI GOETZ

239-272-9345

Description:

PFC Cancer Ride, A charity bike ride event. Will start and finish at FGCU

Buckingham Complex. Riders line up along to take off around 8:00AM Assisted by support vehicles in front and behind cyclists. After the 30 or 63 MI rides, they are

Location of event: 4000 ROW BUCKINGHAM RD

LEE COUNTY RIGHT OF WAYS

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

ftmpprmt specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Pan-Florida Challenge Cancer hide



Event Application

heck the appropriate box(es) below:
☐ SPECIAL EVENT PERMIT
□ USE OF COUNTY PROPERTY PERMIT
$\ \square$ 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	Pan-Florida Challenge Cancer Ride				
Date(s) of Event / Production:	March 26, 2022				
Location(s) of Event:	FGCU Buckingham Complex 5820 Buckingham Rd, Fort Myers, FL 33905				
Name of Applicant:	Jeri Goetz				
Applicant Address:	2097 Trade Center Way, Suite D, Naples, FL 34109				
Applicant Phone Number:	(239) 298-1620				
Contact Person: (If different from applicant)	Tina Le				
Contact Phone Number: (If different from applicant)	(239) 272-9345				
Email Address:	tina@panfloridachallenge.org				
Estimated Attendance:	150				
Event Description: Include each activity, when activities take place, etc.	The PFC Cancer Ride, a charity bike ride event, will start and finish at FGCU Buckingham Complex. Riders line up to take off around 8am, assisted by support vehicles in front and behind the cyclists. After riders finish their 30 or 62 mile bike ride, they are provided with an arrival meal/refreshments and enjoy DJ entertainment. 100 mi riders go to Sebring, FL. All activities will be ongoing				
Hours of Operation:	6am-3pm				
STRAP # of Parcel:	17-44-26-00-00002.0000; 18-44-26-00-00003.000; 07-44-26-00-00005.0000				
Owner of Premises*:	Florida Gulf Coast University				

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



What is the Zoning Classification of the premises? Agriculture					
Are any temporary structures to be insta	alled for the event? 🛛 Yes 🔲 No	Type: Tent			
Do you have the appropriate permits for the temporary structures?					
* 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: Affinity Group Underwriters, United States Liability Company					
Note: Certificate of Insurance must be submitted	at time of application				
Surety Company Bonding this Event (Na	me and Address):				
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?			
⊠ Yes □ No	⊠ Yes	☐ Yes			
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.			
Name & Address of Organization Providing Food: McAlister's Deli (3409 Forum Blvd, Fort Myers, FL 33905)					
Type of Food being Served: Boxed Lunches; sandwiches					
Section II - USE OF COUNTY PROPERTY PERMIT					
Organization Sponsoring the Event: Pan-Florida Challenge					
Fill out this portion for applications for Solicitation in the County Rights-of-Way:					
Name of Charity: Pan-Florida Challenge					
Address of Charity: 2097 Trade Center Way, Suite D, Naples, FL 34109					
Phone Number: (239) 298-1620					
Non-profit certificate/registration number: 47-2993766					
(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 Cour	nty 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 <u>SOLD</u> 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



pe of Product	ion (choose all that	apply):							
TV Movie or	Special	TV Serie	es / Pilot		TV Comme	rcial		Still Photos	
Public Service	ce Announcement	☐ Industria	l / Documentary		Other:				
/ill any of the f	ollowing be needed	d or included*	'?						
St	treet Closure				☐ Yes		No		
T	raffic / Crowd Cont	rol			☐ Yes		No		
Fi	ire or Burning				☐ Yes		No		
E	xplosives or Pyrote	chnics			☐ Yes		No		
A	nimals, Large or Sm	nall			☐ Yes		No		
С	onstruction of Any	Kind			☐ Yes		No		
La	arge and/or Numer	rous Vehicles			☐ Yes		No		
Н	elicopters, Boats, e	etc.			☐ Yes		No		
St	tunts				☐ Yes		No		
0	ther				☐ Yes		No		
Special Parkin	g Requirements:								
City or Count	y Services Required	d: (Personnel,	equipment, facilit	ies, et	c.)				
_	information is requ						to tra	ack the econo	mic impact
the industry.	If exact figures are	not available,	please estimate a	as close	ely as possib	le.			
Number in Cas	:t:		Number in Crew:		Nun	nber of	locals	hired:	
Total budget:			Estimate amount sp	ent in I	ee County:				
Hotel room nig	ghts:		Number of shooting	days:					
	number of rooms x r	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.



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	Witness
Jeri Goetz Executive Direction Print Name of Applicant and Title	Tina Le Print Name of Witness
11/1/2021 Date	



LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

	(255) 477-1155
Check the appropri	ate box(es) below:
	UNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorizd areas only. Roadways will not be impeded.
Deputies (How Many?):	FGCU will require one deputy will be hired to control the exit of participants onto Buckingham Rd at start of ride.
Fee for Services:	Please contact details at 239-477-1199
Special Arrangements:	Participants must abide by all Florida State Statutes when riding on roadways.
	Print Name: Captain S. Brady Signature: Special Events, Permits and Details Date: Page 15



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:

	VENT PERMIT DUNTY PROPERTY MIT	PERMIT			
AFTER REVIEWING THE A WILL REQUIRE THE APPL				IGEMENTS YOUR OR	GANIZATION
Fire Guards (How Many?)	11/1	1			
Fee for Services:	N/A	1			
Flammable Vegetation:	N/B	<i>f</i>			
First Ald Equipment:	N/	4			
Fire Extinguishing:	N/	4			
Special Arrangements:	N//	A			
	Print Name: Signature: Title:	Ted File	Koss		
	Date:	1/02.	22, 202	(



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 2000 Main St., Suite #100 FORT MYERS, FL 33901 (239) 533-3911

Check the appropri	ate box(es) belo	w:
SPECIAL EV	ENT PERMIT	
☐ USE OF CO	UNTY PROPERTY P	ERMIT
FILM PERM	1IT	
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	the support vehicles directives, and the F	the LCSO, LCEMS concurs with the plan for traffic control at the FGCU entrance and leading and following the participants. Applicants shall follow all CDC and FDOH orida Governor's Executive Orders concerning health and safety, especially with and the number of people congregating at the event.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in the 239 533-3911.	event of an emergency. To arrange special event coverage, contact our office at
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins Depthy (great by Douglas Higgins of the Charles) and Property Company Medical Services, Late Courty & Mark's Services, Late Courty & Ma
	Title:	Division Chief
	Date:	November 30, 2021



DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

Check the appropri	ate box(es) bel	low:
	UNTY PROPERTY	PERMIT UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM		
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	No event parking o	on Lee County maintained road rights-of-way.
Ingress and Egress:	Use all established	means of ingress and egress.
Special Arrangements:	Event bicyclists sha	all conform with Florida Statutes pertaining to bicycle operation on-road.
	Print Name:	Bryan Miller
	Signature:	Bryan Miller Digitally signed by Bryan Miller Date: 2021.11.08 07:39:13 -05'00'
	Title:	Senior Project Manager
	Date:	November 8, 2021



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (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 N/A **Parking Areas:** N/A - Event is not on or near Lee County Parks and Recreation property and will not affect our operations **Special Arrangements:** or programs. Print Name: Alise Flanjack Signature: Alise Flanjack Title: **Deputy Director** Date:

Pan-Florida Challenge Cancer Bike Ride . FGCU Buckrigham Site

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LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR 2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221

Check the appropriat	e box(es) be	low:
	NT PERMIT	
USE OF COU	NTY PROPERTY	PERMIT
PERMIT TO S	ELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	•	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIO PLY WITH FOR THEIR EVENT.
	per occurrence	neral liability insurance with minimum limits of One Million Dollars (\$1,000,000) to protect against bodily injury and/or property damage relative to applicants used event within Lee County.
openia, mangement	County Board o	nsurance shall be submitted as evidence of the required coverage listing Lee f County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate n additional insured. of insurance.
		Mike Figueroa
	Signature:	Mike Frie
	Title:	Risk Program Manager
	Date:	November 9, 2021



LEE COUNTY VISITOR & CONVENTION BUREAU 2201 SECOND STREET, SUITE 600 FORT MYERS, FLORIDA 33901 (239) 338-3500

Check the appropriat	e box(es) be	low:
FILM PERMIT	ONLY	
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Special Arrangements:	NIA	
Other:	NIA	
	Print Name: Signature: Title: Date:	Miriam Doson Miriam Doson Communications Coordinatel 11/5/21



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/72021

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(les) 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). CONTACT Thomas Wyss
PHONE
(A/C, No, Ext):
E-MAIL

TWYSS (Baguinet Affinity Group Underwriters FAX (A/C, No): 804-273-9989 4510 Cox Road, #111 ADDRESS: twyss@agu.net Glen Allen, VA 23060 INSURER(S) AFFORDING COVERAGE INSURER A: United States Liability Company 25895 INSURED **INSURER B:** Pan Florida Challenge INSURER C: 2097 Trade Center Way, Ste D INSURER D Naples, FL 34109 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. ADDL SUBR INSR WVD TYPE OF INSURANCE POLICY EFF POLICY EXP POLICY NUMBER LIMITS **GENERAL LIABILITY** EACH OCCURRENCE DAMAGE TO RENTED 1,000,000 X COMMERCIAL GENERAL LIABILITY 100,000 PREMISES (Ea occurrence) \$ CLAIMS-MADE X OCCUR MED EXP (Any one person) 5,000 A х NPP16006019 10/1//2021 10/1//2022 PERSONAL & ADV INJURY 1,000,000 2,000,000 **GENERAL AGGREGATE** \$ GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG 2,000,000 \$ PRO-JECT X POLICY AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) ANY AUTO BODILY INJURY (Per person) ALL OWNED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS **BODILY INJURY (Per accident)** \$ HIRED AUTOS PROPERTY DAMAGE (Per accident) UMBRELLA LIAB OCCUR 1,000,000 **EACH OCCURRENCE** S EXCESS LIAB CUP1566793 **CLAIMS-MADE** 10/1/2021 10/1/2022 AGGREGATE 1,000,000 S DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY WC STATU-TORY LIMITS OTH. ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT N/A (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Non-Profit event planner- fund raiser OK 11/09/2021 For event taking place March 25-27, 2022 **CERTIFICATE HOLDER** CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE Lee County Board of County Commissioners THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. PO Box 398 Fort Myers, FL 33902 AUTHORIZED REPRESENTATIVE

ACORD 25 (2010/05)



