

EVENT PERMIT



Ordinance 17-08

ROYAL PALM PLAYER'S THE 32nd ANNIVERSARY SHOW

PERMIT NUMBER: TMP2022-00050

Date(s) of Event: APRIL 8, 2022

Property Owner:

LEE COUNTY

Applicant:

ALICE COURT

416-451-6362

Description:

ROYAL PALMS PLAYER'S THE 32nd ANNIVERSARY SHOW COCKTAIL

RECETION AND PREFORMANCE AT BOCA GRANDE COMMUNITY CENTER ON

APRIL 8, 2022 FROM 6:00PM UNTIL 9:00OM

Location of event:

131 1ST ST W, BOCA GRANDE, FL 33921

BOCA GRANDE COMMUNITY CENTER

Will the event be attended by 1000 or more people?

Will the event be held on County Owned Property? Yes

Will there be alcohol consumed or sold at the event? To Be Consumed

Will a bond be posted for this event?

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

County/Manager

2/15/2022

ftmpprmt_specialevent.rpt

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Boyal Palms Phyer's - The 32nd Anniversery Show



Event Application

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

... USE OF COUNTY PROPERTY PERMIT

EN PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Royal Palm Player's presents The 32nd Anniversary Show
Date(s) of Event / Production:	April 8, 2022
Location(s) of Event:	Boca Grande Community Center
Name of Applicant:	Royal Palm Players
Applicant Address:	131 First St. W PO Box 954 Boca Grande, FL 33921
Applicant Phone Number:	941-964-2670
Contact Person: (If different from applicant)	Alice:Court
Contact Phone Number: (If different from applicant)	416-451-6362
Email Address:	royalpalmplayers@comcast.net
Estimated Attendance:	160
Event Description: Include each activity, when activities take place, etc.	Cocktail Reception at 6 pm Performance at 7 pm
Hours of Operation:	6pm - 9pm
STRAP # of Parcel:	
Owner of Premises*:	Lee County

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



What is the Zoning Classification o	f the premises?				
Are any temporary structures to be	e installed for the event? Yes X No	Туре:			
Do you have the appropriate perm	its for the temporary structures?	Xes T. No			
* For a 'Special Event' and 'Use of oidentified, including all parking are	County Property' permit, submit a site plan w as.	rith all proposed facilities and activities			
Insurance Company Insuring the E	vent: Evanston Insurance C	Company			
Note: Certificate of Insurance must be sub	mitted at time of application				
Surety Company Bonding this Ever	nt (Name and Address):				
Will Vehicles be Used as Part of Event?	This Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?			
下 Yes	<u>į</u> Σi Yes Γi No	🔀 Yes 🦵 No			
If yes, automobile 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:	Boca Bay Pass Club				
Type of Food being Served: ho	rs d'oeuvres				
Section II - USE OF COUNT Organization Sponsoring the Even	TY PROPERTY PERMIT				
Section III - SALE/CONSU	MPTION OF ALCHOLIC BEVERAGES	PERMIT			
is alcohol being sold/consumed o	n County Property?	× Yes × No			
If Yes, then a "Lee County Alcohol Permit" is re	equired. Only non-profit organizations can sell alcohol on Cou	nty Property.			
Non-profit certificate/registration (Required if alcohol is to be <u>SOLD</u> at the event					
Please note: A permit from the State of F further details	Florida Division of Alcoholic Beverages and Tobacco ma	y also be required; please call (239) 344-0885 for			



pe of Production (choose all tha	t app	ily):					
TV Movie or Spe	cial	Ti	TV Series / Pilot	_	TV Commercia	al j	Still Photos	
Public Service Ar	nouncement		Industrial / Documentary	X	Other: Social	Rece	eption and entertainment	
/ill any of the follov	ving be neede	d or i	included*?					
Street	Closure				T Yes	∑ N	lo	
Traffic	:/Crowd Con	trol			T Yes	X V	10	
Fire o	r Burning				T Yes	X N	10	
Explos	sives or Pyrote	echni	cs		Yes	N N	lo .	
Anima	mall			∏ Yes	X: N	lo		
Const	ruction of Any	/ Kind	í		☐ Yes	X N	lo .	
Large	and/or Nume	rous	Vehicles		「T. Yes	X N	lo .	
Helico	pters, Boats,	etc.			T Yes	N XI	No	
Stunts	;				T: Yes	<u> </u>	No	
Other					T Yes	X I	lo	
Special Parking Re	quirements:							
The following info	rmation is rec	quirec	ersonnel, equipment, facilit d for local and state records	s on pr	oduction in Flo	rida t	o track the economic imp	- pact
Number in Cast:	12	: HOL (available, please estimate a Number in Crew: 6			er of ic	ocals hired:	
Total budget:			Estimate amount sp					
Hotel room nights:			Number of shooting	days:	*****			,
	number of rooms	c numb	er 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.

The Cour	Katheen Killeher
Signature of Applicant	Witness \
	·
Alice Court	Kothleen Kelleher
Print Name of Applicant and Title	Print Name of Witness
01/19/22	01/19/22
Date	Date



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

Check the appropriate box(es) below:

┌─ SPECIAL EV	ENT PERMIT
I⊠ USE OF CO	UNTY PROPERTY PERMIT
, ,	≫ EX AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	
,	
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only.
Deputies (How Many?):	none
Fee for Services:	none
	Alcoholic beverages must stay within the confines of the event.
Special Arrangements:	Aconolic beverages must stay within the contines of the event.
	Print Name: Captain, S. Brady
	Signature: Cast-Steva-Brody
	oposia, Evento, i elimio and betaile
	Date: 1/24/2)



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:

- F SPECIAL EVENT PERMIT
- IX 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?)		None
Fee for Services:		None
Flammable Vegetation:		None
First Ald Equipment:		
1		None
Fire Extinguishing:		
		None
Special Arrangements:		
		În case of emergency - Dial 911
	Print Name:	C.W. Blosser
	Signature:	CAL
	Title:	Fire Chief
	Date:	01/31/2022

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

Check the appropri	ate box(es) belov	W:
SPECIAL EV SUSE OF CO FILM PERM	UNTY PROPERTY P	ERMIT
		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:		ow all CDC and FDOH directives, and the Florida Governor's Executive Orders and safety, especially with regards to COVID-19 and the number of people event.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. To arrange special event coverage, contact our office at
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins Dystals River by Douglas 1 Ho year On conditional to the County Emergency Medical Services, that County Philade Safety. On conditional One of the conditional transfer conditional County Emergency Medical Services, conditional County Emergency Indiana.
	Title:	Division Chief
	Date:	January 25, 2022



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

Check the appropri	ate box(es) bel	ow:	
SPECIAL EV	ENT PERMIT		
⊠ USE OF CO	UNTY PROPERTY	PERMIT	
▼ PERMIT TO	SELL AND CONS	JME ALCOHOLIC BEVERAGES WI	THIN LEE COUNTY FACILITIES
FILM PERM	11T		
		LEASE INDICATE BELOW WHAT LY WITH FOR THEIR EVENT.	ARRANGEMENTS YOUR ORGANIZATION
Parking:			r maintained road rights-of-way where parking raffic including pedestrians and bicyclists.
Ingress and Egress:	Use all established	means of ingress and egress.	
Special Arrangements:	None.		
	Print Name:	Bryan Miller	
	Signature:		ned by Bryan Miller 01.21 05:50:05 -05'00'
	Title:	Senior Project Manager	
	Date:	January 21, 2022	



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

Check the appropri	ate box(es) belo	low:	
, ,	UNTY PROPERTY	PERMIT UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES	
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PI LICANT TO COMP	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATELY WITH FOR THEIR EVENT.	TION
Illumination:	N/A-Indoor event		
Parking Areas:	Parking In desigant	nted community center parking, only.	***************************************
Special Arrangements:	Alcohol will not be	e sold on site and consumption must stay in areas designated my county staff.	
	Print Name:		
	Signature:	Callee Via	
	Title:	Operations Manager	
	Date:	1/21/2022	

Boca - Royal Pala Players - Show 4/8/2022 Page 10



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

Check the appropriate box(es) below:

FILM PERMIT	NTY PROPERTY ELL AND CONSI	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION OF WITH FOR THEIR EVENT.
	occurrence to pro aforementioned In addition, Host (\$1,000,000) per General Liability	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County. Liquor Liability insurance will be required with minimum limits of One Million Dollars occurrence. Should Host Liquor Liability coverage be afford under the Commercial policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate
Special Arrangements:		
	Print Name:	Mike Figueroa
	Signature:	Mike Figure -
	Title:	Risk Program Manager
	Date:	February 7, 2022



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/04/2022

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 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).

	is certificate does not confer rights to	o the	certi	ficate holder in lieu of su			HE CO				
PROI	DUCER				CONTACT Will Maddux						
Eas	t Main Street Insurance Services, Inc.				PHONE (A/C, No, Ext); (530) 477-6521 FAX (A/C, No):						
Wil	Maddux				E-MAIL ADDRES	ss: info@the	eventhelper.c	com			
PO	Box 1298					INSURER(S) AFFORDING COVERAGE				NAIC#	
Gra	ss Valley			CA 95945	INSURE	INSURER A: Evanston Insurance Company 3537					
INSU	RED				INSURER B:						
	Royal Palm Players, Inc.				INSURE	RC:					
	Alice Court					The contract					
	131 First St. W	i –				INSURER D: INSURER E:					
	Boca Grande			FL 33921	INSURE						
CO		TIFIC	ATE	NUMBER:	INCOME			REVISION NUMBER:			
IN	DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY I KCLUSIONS AND CONDITIONS OF SUCH	EQUIR PERTA POLIC	EMEI AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	VE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS ED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS,						
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE \$	1,00	00,000	
	CLAIMS-MADE X OCCUR								100,	,000	
	Host Liquor Liability								5,00	0	
Α	Retail Liquor Liability	Y		3DS5472-M2684675		04/08/2022	04/09/2022	PERSONAL & ADV INJURY \$	1,00	00,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:					12:01 AM	12:01 AM	GENERAL AGGREGATE \$	2,00	00,000	
	POLICY PRO- LOC							PRODUCTS - COMP/OP AGG \$	1,00	00,000	
	OTHER:							Deductible \$	1,00	10	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident) \$			
	ANY AUTO							BODILY INJURY (Per person) \$			
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident) \$			
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident) \$			
	AUTOS ONET							\$			
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE \$			
	EXCESS LIAB CLAIMS-MADE							AGGREGATE \$			
	DED RETENTION\$	1						s			
	WORKERS COMPENSATION							PER OTH- STATUTE ER			
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT \$	š		
	OFFICER/MEMBEREXCLUDED? (Mandatory In NH)	N/A						E.L. DISEASE - EA EMPLOYEE \$	7		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$			
Cert	cription of operations / Locations / vehic ificate holder listed below is named as a ndance: 160, Event Type: Social Recept	additio	nal i	nsured per attached MEGL	2217 ()1 19.	e space is requir	ed)			
				OK 02/07	7/202	2					
				7.	1						
				Mike	fro.	<u> </u>					
CE	RTIFICATE HOLDER				CAN	CELLATION					
					SHO	OULD ANY OF	N DATE THE	ESCRIBED POLICIES BE CAN EREOF, NOTICE WILL BE EY PROVISIONS.			
	Lee County Board of County PO Box 398	Com	miss	ioners	AUTHO	RIZED REPRESE	NTATIVE ///	Il Maddwp			
	. Fort Myers			FI 33902	MIN 11 CORREY						



EVANSTON INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

SCHEDULE

Name	Of	Addit	lional	Insu	red	Per	son(s)	Or	Organi	zation	(s):
1 0		👝			~						

Lee County Board of County Commissioners PO Box 398 Fort Myers, FL 33902

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule of this endorsement, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by the acts or omissions of any insured listed under Paragraph 1. or 2. of Section II Who Is An Insured:
 - 1. In the performance of your ongoing operations; or
 - In connection with your premises owned by or rented to you.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

All other terms and conditions remain unchanged.

RE: [EXTERNAL] Lee County Event Application permit to serve alcohol



From Figueroa, Mike <MFigueroa@leegov.com>

To Kathy Kelleher <kathy@royalpalmplayers.com>, RISK <RISK@leegov.com>

Date 2022-01-21 14:21

2022.04.08 - Royal Palm Player's - 32nd Anniversary Show - COI.pdf (~104 KB) Use-Special Event Permit (Alcohol).pdf (~1.1 MB)

Kathy-

Hope all is well. This office is in receipt of your permit application for the Royal Palm Player's – The 32nd Anniversary Show event scheduled for April 8, 2022, at Boca Grande Community Center. Before this department can approve our section, we will need a certificate of insurance naming Lee County BoCC as the certificate holder and as an additional insured (see attached requirements). The certificate of insurance provided does not meet these requirements.

If there are any questions, please don't hesitate to contact me, thanks.

Respectfully,



Mike Figueroa | Risk Program Manager

Risk Management

P.O. Box 398, Fort Myers, FL 33902-0398

office: (239) 533-0833

email: mfigueroa@leegov.com

web: www.leegov.com

Connect With Us On Social Media









Please be advised Contact Information for Risk Management is 239-533-0835 or risk@leegov.com

From: Kathy Kelleher <kathy@royalpalmplayers.com>

Sent: Thursday, January 20, 2022 3:38 PM

To: RISK <RISK@leegov.com>

Subject: [EXTERNAL] Lee County Event Application permit to serve alcohol

Attn: Risk Management, Mike Figueroa, Risk Manager

Dear Mr. Figueroa,

Here is our completed event application with permit to serve alcohol. Attached is our special event insurance. Please sign off on your specific section and return to me so I may submit the completed application to Lee County. Please let me know if you have any questions. Or if there is anything further we need to do.

Thanks,

Kathy

Kathy Kelleher

Royal Palm Players

941-964-2670