

EVENT PERMIT



Ordinance 17-08

ECHO'S GLOBAL FOOD AND FARM FESTIVAL 2022

PERMIT NUMBER: TMP2022-00065

Date(s) of Event: March 9, 2022 - March 12, 2022

Property Owner:

ECHO INC

Applicant:

KRISTIN MUSKO

239-567-3344

Description:

Open air festival including educational displays, workshops, special tours, children's

March 9, 2022 - March 12, 2022 from 10:30AM until 3:00PM varying times.

Location of event:

17391 DURRANCE RD, NORTH FORT MYERS, FL 3917

17391 Durrance Rd

Will the event be attended by 1000 or more people? Yes

Will the event be held on County Owned Property? No

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

County Manager

3-9-2022

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Echo's Global Food and Form Festival 2012

TMP2422-00065



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

Title of Event / Name of Production	ECHO's Global Food and Farm Festival 2022		
Date(s) of Event / Production:	March 9 - 12, 2022		
Location(s) of Event:	ECHO Global Farm, 17391 Durrance Road. N. Fort Myers, FL 33917		
Name of Applicant:	Danielle Flood, Festival Chairperson, PR Manager at ECHO		
Applicant Address:	17391 Durrance Rd. N. Fort Myers, FL 33917 (Office)		
Applicant Phone Number:	239-567-3312		
Contact Person: (If different from applicant)	Kristen Musko		
Contact Phone Number: (If different from applicant)	239-567-3344		
Email Address:	kmusko@echonet.org		
Estimated Attendance:	2000		
Event Description: Include each activity, when activities take place, etc.	March 9, 2022 10:30 - 11:30 Rosy Tomorrow's Cooking Demonstration, 12 - 1:00 PM Tropical Tasting Lunch and 1:30 - 2:30 PM Kombucha Demonstration March, 10, 2022 10:30 - 11:30 AM Herb Growing workshop, 12:00 - 1:00 Tropical tasting lunch, 1:30 - 2:30 Hands on Grafting workshop March 11, 2022 10:30 - 11:30 Edible backyard design tour, 12-1:00 Tropical Tasting lunch, 1:30 - 2:30 Cooking w/ Tropical Plants March 12, 2022 9:00 - 3:00PM Farm Day to include a schedule of various workshops. cooking shows, food trucks, market garden, silent auction and plant sales.		
Hours of Operation:	9:00 - 4:00 PM		
STRAP # of Parcel:	23-43-25-00-00025.0000		
Owner of Premises*:	ECHO, Inc.		

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



What is the Zoning Classification of the	ne premises? ORPHANAGES, NO	N-PROFIT SERVICE / 75
Are any temporary structures to be in	nstalled for the event? Yes No	Type: 10X20 tents
Do you have the appropriate permits	for the temporary structures?	⊠ Yes
* For a 'Special Event' and 'Use of Cor identified, including all parking areas.	unty Property' permit, submit a site plan wit	h all proposed facilities and activities
Insurance Company Insuring the Eve	nt: Brown & Brown of Florid	a, Inc.
Note: Certificate of Insurance must be submit	tted at time of application	
Surety Company Bonding this Event	Name and Address):	
Will Vehicles be Used as Part of Thi Event?	s Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
├ Yes ▼ No	⊠ Yes □ No	☐ 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: Type of Food being Served: BBQ	City Smoke BBQ, Forever Grounded Coffee Bar, Sunn Chicken & pulled pork, Coffee, I	
Section II - USE OF COUNTY	PROPERTY PERMIT	
Organization Sponsoring the Event:	LCEC, Mercola Market, Walker F	arms, Coastal Breeze News
Section III - SALE/CONSUM	PTION OF ALCHOLIC BEVERAGES F	PERMIT
Is alcohol being sold/consumed on C If Yes, then a "Lee County Alcohol Permit" is requi	County Property? red. Only non-profit organizations can sell alcohol on County	Yes No
Non-profit certificate/registration no (Required if alcohol is to be <u>SOLO</u> at the event)	umber:	
Please note: A permit from the State of Flori	da Division of Alcoholic Beverages and Tobacco may a	also be required; please call (239) 344-0885 for



		oly):						
e or Special		TV Series / Pilot		TV Comm	nercial	Г	Still Photos	
rvice Announcemen	it 🗀	Industrial / Documentary		Other: _		-		
ne following be need	led or	included*?					***************************************	
Street Closure				☐ Yes	-	No		
	ntrol			-	-			
Fire or Burning				100				
Explosives or Pyro	techni	ics		☐ Yes	Г			
Animals, Large or	Small			-	Г			
Construction of Ar	ny Kind	1		Yes	F			
Large and/or Num	erous	Vehicles		☐ Yes	Ē			
Helicopters, Boats	, etc.			┌ Yes	Ē	No		
Stunts				☐ Yes	Г	No		
Other				┌ Yes	Г	No		
rking Requirements:								
		ersonnel, equipment, facilit	ies, etc	c.)				
		ersonnel, equipment, facilit	ies, eta	c.)				
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unty Services Requir	ed: (Pe	d for local and state records	s on pr	oduction in	n Florida ble.			mic impac
unty Services Requir ing information is re ry. If exact figures ar	ed: (Pe	d for local and state records available, please estimate a	s on prosses close	oduction in	ble.			mic impac
	Street Closure Traffic / Crowd Co Fire or Burning Explosives or Pyro Animals, Large or Construction of Ai Large and/or Num Helicopters, Boats Stunts Other	ne following be needed or Street Closure Traffic / Crowd Control Fire or Burning Explosives or Pyrotechni Animals, Large or Small Construction of Any Kind Large and/or Numerous Helicopters, Boats, etc. Stunts Other	Traffic / Crowd Control Fire or Burning Explosives or Pyrotechnics Animals, Large or Small Construction of Any Kind Large and/or Numerous Vehicles Helicopters, Boats, etc. Stunts	Street Closure Traffic / Crowd Control Fire or Burning Explosives or Pyrotechnics Animals, Large or Small Construction of Any Kind Large and/or Numerous Vehicles Helicopters, Boats, etc. Stunts Other	Street Closure	Street Closure	Street Closure	Street Closure



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 Witness		
Danielle Flood, Festival Chairperson, PR Manager	Kristen Musko, Executive Assistant		
Print Name of Applicant and Title	Print Name of Witness		
2:23-27 Date	9-92-3099		



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

Check the appropriat	e box(es,	below:
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- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- F 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:	Parking in autho	rized areas only.					
	The state of the s						
Deputies (How Many?):	None require	ed by LCSO. Ven	dor requests 1	deputy for	r security &	& presenc	e.
	The state of the s						
	mary control of the c	2					
Fee for Services:	Contact LCSO	Details Unit				!! : 	
Special Arrangements:	None			***************************************	***************************************		······································
	Print Name:	Captain, S. Bra	dy				
	Signature:	Capt Site	va Sro	ly			
	Title:	Special Events, P	ermits and Details	5			
	Date:	2/28/2	2				
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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

FILM PERMIT

USE OF COUNTY PROPERTY PERMIT

AFTER REVIEWING THE A WILL REQUIRE THE APPLI	PPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.	
Fire Guards (How Many?)	None .	
Fee for Services:	\$100	-
Flammable Vegetation:	N/A	
First Aid Equipment:	N/A	
Fire Extinguishing:	N/A	
Special Arrangements:	All Tents, food trucks, and concessions shall be inspected prior to opening and comply with Florida Fire Prevention Code	
	Print Name: William Underwood Signature: Fire Chief	
	Date: March 8th 2022	



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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▼ 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 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 Douglas B. Higgins	
	Title:	Division Chief	
	Date:	March 8, 2022	



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

Check the appropri	iate box(es) be	low:		
	VENT PERMIT			
☐ USE OF CO	DUNTY PROPERTY	/ PERMIT		
	SELL AND CONS		VERAGES WITHIN LEE COUNTY F	FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APP	E APPLICATION, I LICANT TO COMI	PLEASE INDICATE BE PLY WITH FOR THEIR	LOW WHAT ARRANGEMENTS Y EVENT.	OUR ORGANIZATION
Parking:	Park in designated rights-of-way.	l areas. No event parking	permitted on any portion of Lee Cou	nty maintained road
Ingress and Egress:	Use all established	I means of ingress and eq	gress.	
Special Arrangements:	providing traffic co	ontrol presence at the ma	ce with traffic control. Consideration arked and signed Pedestrian Crosswa times based on flow conditions, both	lk across Durrance Road
	Print Name:	Bryan Miller		
	Signature:	Bryan Miller	Digitally signed by Bryan Miller Date: 2022.02.25 07:19:06 -05'00'	
	Title:	Senior Project Manager		
	Date:	February 25, 2022		



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

спеск тпе арргорі	ite box(es) below:	
	ENT PERMIT	
USE OF C	UNTY PROPERTY PERMIT	
	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES	
FILM PER		
AFTER REVIEWING TH WILL REQUIRE THE AP	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIC LICANT TO COMPLY WITH FOR THEIR EVENT.	N
Illumination:	N/A	*****
m /:		
Parking Areas:	N/A	
Special Arrangements:	N/A - Event is not on Parks and Rec property and will not affect county park operations or programs.	
		-
	Print Name: Colleen Via	
	Signature: Celler Use	
	Title: Operations Manager	
	Date: 2/24/2022	
Notion courty	opah	
ECHO Event	-3/9/22 -3/12/22 Page 10	_



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

Check the appropria	te box(es) be	elow:
SPECIAL EVE	NT PERMIT	
USE OF COL	INTY PROPERT	Y PERMIT
PERMIT TO S	SELL AND CON	SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI		
AFTER REVIEWING THE A	APPLICATION, CANT TO COM	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Insurance Requirements:	occurrence to p	neral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per rotect against bodily injury and/or property damage relative to applicants use of devent within Lee County.
Special Arrangements:	additional insure	
	Subject to proof	of insurance.
	Print Name:	Mike Figueroa
	Signature:	This Jigin -
	Title:	Risk Program Manager

Febraury 24, 2022

Date:

ACORDO

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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 REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

REPRESENTATIVE OR PRODUCER,	ND T	HE	E DOES NOT CONSTITU'	TE A C	ONTRACT	BETWEEN	THE ISSUING INSURE	R(S), AI	JTHORIZED					
IMPORTANT: If the certificate holder If SUBROGATION IS WAIVED, subject	is an	AD	DITIONAL INSURED, the	policy(i	es) must ha	ve ADDITIO								
this certificate does not confer rights	to the	e cer	tificate holder in lieu of si	HOIT CITE	or sementing	s).		II. A SI	atement on					
Brown & Brown Of Florida, Inc. 1421 Pine Ridge Road Suite 200 Naples FL 34109					CONTACT NAME:									
					PHONE (A/C, No, Ext); 239-262-5143 FAX (A/C, No):									
					E-MAIL ADDRESS: Certs@bbswfla.com									
						***************************************	ADDING COVERAGE		NAIC#					
					INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Indemnily Insurance Company									
INSURED 16020 ECHO, Inc. 17391 Durrance Road North Fort Myers FL 33917					INSURER B: ACE Fire Underwriters Insurance Company									
					INSURER C: Scottsdale Insurance Company									
					INSURER D:									
					INSURER E:									
				INSURER F:					3,1-11					
COVERAGES CEF	TIFIC	CATI	E NUMBER: 1196073807				DE1//01014 1111-1-							
THIS IS TO CERTIFY THAT THE POLICIES	OFI	MICH	DANIOE LIOTED BELLEVILLE	VE REEN	ISSUED TO	THE INCHES	REVISION NUMBER:							
EXCLUSIONS AND CONDITIONS OF SUCH	PERT. POLIC	AIN, CIES.	THE INSURANCE AFFORDE LIMITS SHOWN MAY HAVE	ED BY T	HE POLICIE	S DESCRIBE	DOCUMENT WITH RESPE D HEREIN IS SUBJECT T	HE POLI CT TO V O ALL T	ICY PERIOD NHICH THIS THE TERMS,					
TYPE OF INSURANCE	ADDL	SUBH	Company of the Compan		POLICY EFF MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	100	Te						
A X COMMERCIAL GENERAL LIABILITY	Y	Y	PHPK2339819		12/12/2021	12/12/2022		T	000					
CLAIMS-MADE X OCCUR					,		DAMAGE TO RENTED \$ 1,000		· · · · · · · · · · · · · · · · · · ·					
						1.12	PREMISES (Ea occurrence)	\$ 100,00						
							MED EXP (Any one person)	\$5,000						
GEN'L AGGREGATE LIMIT APPLIES PER:				1			PERSONAL & ADV INJURY	\$ 1,000,						
POLICY PRO- JECT LOC				1			GENERAL AGGREGATE	1	000/1000000					
OTHER:							PRODUCTS - COMP/OP AGG	\$3,000,	.000					
A AUTOMOBILE LIABILITY			PHPK2339819		12/12/2021	10/10/2022	COMBINED SINGLE LIMIT	\$						
X ANY AUTO				_	12/12/2021	12/12/2022	COMBINED SINGLE LIMIT (Ea accident)							
OWNED SCHEDULED AUTOS ONLY			2 1	*	- 1		BODILY INJURY (Per person) \$							
HIRED NON-OWNED AUTOS ONLY	. 1						BODILY INJURY (Per accident)	-						
AUTOS ONLY					- 4		PROPERTY DAMAGE (Per accident)	S						
C X UMBRELLALIAB X OCCUR			XBS0153915		40400004			\$						
EXCESS LIAB CLAIMS-MADE			VD00199919		12/12/2021	12/12/2022	EACH OCCURRENCE	\$ 10,000), <mark>000</mark>					
DED RETENTIONS							AGGREGATE	\$ 10,000	0,000					
WORKERS COMPENSATION								\$	_					
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNED/EVECUTIVE Y/N							STATUTE OTH-	PER OTH- STATUTE ER						
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	S						
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE	\$						
B Directors & Officers	-	\dashv	NEDEL EAGONES (ASS.)				E.L. DISEASE - POLICY LIMIT	\$						
			NFPFLF146215812004		12/12/2021	12/12/2022		2,000,0	000					
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ESCRIPTION OF OPERATIONS IL CONTIONS IL CONTIONS														
ESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL Certificate Holder is included as Additional I Lee County Board of County Commissioner	ES (AC	ORD	101, Additional Remarks Schedule,	, may be a	tached if more	space is require	d)							
ee County Board of County Commissioner	s is in	clude	ed as Additional Insured with	h respec	ge per polic	cy form.	erage per policy form							
						Liability Cov	erage her holicy form.							
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ERTIFICATE HOLDER CANCE						NCELLATION								
				SHOUL	D ANY OF TH	HE ABOVE DE	SCRIBED POLICIES BE CA	NCELLE	D REFORE					
					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				
					Knoten Kozlan									
									_					===

