

EVENT PERMIT



Ordinance 17-08

75th Anniversary of Boca Grande Health Clinic Foundation Party

PERMIT NUMBER: TMP2022-00231

Date(s) of Event: November 1, 2022

Property Owner:

LEE COUNTY ROW

Applicant:

YULIY FEDORYSHYN

941-964-0099

Description:

Street Party with food, beverages and music, open to the public November 1, 2022

with road closure from 4:00PM until 7:00PM

Location of event:

111 ROW PARK AVE

Right of Way 3rd St and W Railroad Ave

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? Sold and 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

ounty Manager Date

ftmpprmt specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

75th Anniversary of Boca Grande Health Clinic Foundation Party

TMP2022-00231



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 INF	ORMATION (All Permit Types)							
Title of Event / Name of Production	h Anniversary of Boca Grande Health Clinic Foundation Party							
Date(s) of Event / Production:	November 1, 2022							
Location(s) of Event:	d Street between Park Ave. and W. Railroad Ave., Boca Grande FL, 33921							
Name of Applicant:	Boca Grande Health Clinic Foundation, Inc.							
Applicant Address:	30 Park Ave, PO Box 2340, Boca Grande, FL 33921							
Applicant Phone Number:	(941) 964-0099							
Contact Person: (If different from applicant)	Yuliy Fedoryshyn							
Contact Phone Number: (If different from applicant)								
Email Address:	yuliy@bghcfoundation.com							
Estimated Attendance:	300							
Event Description: Include each activity, when activities take place, etc.	Street party with food, beverages, and music, open to the public. Only requesting the road closure for the time of the event. Between 4:00 PM to 7:00 PM							
Hours of Operation:	4:00 PM to 7:00 PM							
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 of the $$	premises? DOT Right of Way	/					
Are any temporary structures to be installed for the event? Yes No Type:							
Do you have the appropriate permits for	r the temporary structures?	Yes	x No				
identified, including all parking areas.	y Property' permit, submit a site plan wit Evanston Insurance Con						
Surety Company Bonding this Event (Na							
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?		pholic Beverages be nsumed at this Event?				
☐ Yes	⊠ Yes	▼ Ye	es 🔲 No				
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.		liability coverage must be he certificate of insurance.				
Name & Address of Organization Providing Food: Local Restaurants							
Type of Food being Served: Tacos and Sliders							
Section II - USE OF COUNTY PF	ROPERTY PERMIT						
Organization Sponsoring the Event: B	oca Grande Health Clinic F	oundation	, Inc.				
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES P	PERMIT					
Is alcohol being sold/consumed on Cou		X Yes	No				
	Only non-profit organizations can sell alcohol on County	y Property.					
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	^{ber:} 57-1160149						
Please note: A permit from the State of Florida I further details	Division of Alcoholic Beverages and Tobacco may a	also be required; p	olease call (239) 344-0885 for				



pe of Produc	tion (choose all that	t apply):						
TV Movie o	r Special	☐ TV Se	eries / Pilot		TV Comme	rcial	Still Photos	
Public Servi	ice Announcement	☐ Indust	trial / Documentary		Other:			
ill any of the	following be neede	d or include	ed*?					
S	Street Closure				☐ Yes		No	
7	Traffic / Crowd Cont	trol			☐ Yes		No	
F	Fire or Burning				☐ Yes		No	
E	Explosives or Pyrote	chnics			☐ Yes		No	
A	Animals, Large or Small						No	
(Construction of Any	Kind			☐ Yes		No	
1	arge and/or Nume	rous Vehicle	es		☐ Yes		No	
ŀ	Helicopters, Boats, 6	etc.			☐ Yes		No	
9	Stunts				☐ Yes		No	
(Other				☐ Yes		No	
pecial Parkii	ng Requirements:							
City or Count	ty Services Required	d. /Dorconn	al aquinment facili	tion of	c)			
City of Court	ty Services Required	a. (Fersonin	ei, equipinent, iacii	ties, et	C.,			
0 0 00	g information is req	uired for lo	cal and state record	s on pr	oduction in I	lorida	a to track the econo	
The following				15				nic impa
	If exact figures are			as clos	ely as possibl	e.		mic impa
he industry.	If exact figures are			as clos			· locals hired:	mic impa
the industry. Number in Ca	If exact figures are		le, please estimate		Num		locals hired:	mic impa
	If exact figures are		le, please estimate Number in Crew:	pent in I	Num		locals hired:	mic impa



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.

Guliy Fedoryshyn Signature of Applicant	Cannon J. Wenzel Witness
Yuliy Fedoryshyn	Cannon Wenzel
Print Name of Applicant and Title	Print Name of Witness
7/27/2022	7/27/2022
Date	Date



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

Check the appropria	ite box(es) belo	ow:
	ENT PERMIT	
7 \	JNTY PROPERTY I	
•		IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
j Film Permi	I I	
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Parking:	Parking in autimpeded.	horized areas only. Roadway and/or Right of Way should not be
Deputies (How Many?):	2 deputies rec	guired for road closure.
Fee for Services:	Contact Detai	I Unit
Special Arrangements:	All alcohol mu sounds must a	ast remain within the confines of the event area. Any amplied adhere to the Lee County Noise Ordinance.
•	Print Name: Signature:	Captain S. Brady Capt Steven 7 Brady Charles Reposit and Dataile
	Title:	Special Events, Permit and Details
	Date:	8-9-22



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

Title:

Date:

∫∑ USE OF CC	OUNTY PROPERT	Y PERMIT
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	*1	None
Fee for Services:		
,		None
Flammable Vegetation:		the state of the s
		None
First Aid Equipment:		
1		None
Fire Extinguishing:		
		None
Special Arrangements:		
		In case of emergency - Dial 911
	Print Name:	C.W. Blosser
	Signaturos	1 11

Fire Chief

03/11/2020

Teeter, Pamela

From:

Swiger, Melissa

Sent:

Thursday, March 24, 2022 9:35 AM

To:

Teeter, Pamela

Subject:

FW: [EXTERNAL] RE: Special Events

Categories:

Important

Pam,

Please see the email below as confirmation from the Boca Fire Department for Alcohol approval. Will this email be sufficient for future approvals that do not have the check box? There may be a few that have been recently submitted without the check box.



Melissa Swiger | Customer Service Specialist

Department of Community Development

1500 Monroe St, Fort Myers, FL 33901

office: (239) 533-8329

email: mswiger@leegov.com web: www.leegov.com/dcd

Connect With Us On Social Media









From: nancybocafire@comcast.net < nancybocafire@comcast.net >

Sent: Wednesday, March 23, 2022 4:11 PM To: Swiger, Melissa <MSwiger@leegov.com> Subject: [EXTERNAL] RE: Special Events

Good afternoon Melissa,

Please be advised that this email is to serve as a blanket notification that whether or not the 'Permit to Sell and Consume Alcoholic Beverages' form was included in any and all of the Lee County Special Event applications that have been completed/signed off by the Boca Grande Fire Dept, Boca Grande Fire Department has always considered alcohol consumption/sales within/on Lee County facilities when signing the application.

Regards, Nancy

Administrative Assistant

Boca Grande Fire Dept

From: Swiger, Melissa < MSwiger@leegov.com> Sent: Wednesday, March 23, 2022 12:27 PM

To: nancybocafire@comcast.net; Higgins, Douglas < DHiggins@leegov.com>

Subject: Special Events



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

Check the appropria	te box(es) belov	v:							
☐ SPECIAL EV	ENT PERMIT								
□ USE OF CO	UNTY PROPERTY P	ERMIT							
□ PERMIT TO	SELL AND CONSU	ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES							
FILM PERM	IIT								
	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR CANT TO COMPLY WITH FOR THEIR EVENT.							
Treatment Facilities:	None necessary.								
Medical Personnel:	None necessary	None necessary.							
Medical Supplies / Equipment:	None necessary.								
Safety Requirements:	Executive Orde	follow all CDC and FDOH directives, and the Florida Governor's rs concerning health and safety, especially with regards to the number of people congregating at the event.							
Fee for Services	Not applicable.								
Special Arrangements:		in the event of an emergency. To arrange special event act our office at EMSDetail@leegov.com.							
	Print Name:	Douglas B. Higgins							
	Signature:	Douglas B. Higgins Superate County Engine County Engine Vision Superate County Engine							
	Title:	Division Chief, Support Services							
	Date:	August 4, 2022							



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

£	'ENT PERMIT UNTY PROPERTY SELL AND CONS	PERMIT	RAGES WITHIN LEE COUNT	Y FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL			W WHAT ARRANGEMENTS	S YOUR ORGANIZATION
Parking:	No parking on on C	County maintained roads w	here parking is prohibited.	
Ingress and Egress:	Use all established	means of ingress and egre	os.	
Special Arrangements:	signs shall be erect advance Road Clos closure at West Ra need to be suitable event continues af	ed at both ends of the bloc ed Ahead sign should be p ilroad as this approach has e for nighttime applications ter sunset. Maintain emerg	vith traffic control as needed. Back with closures at the intersection aced for westbound 3rd Street no Stop control. Barricades and as stipulated in FDOT Design Sency vehicle access at all times on of the Lee County Sheriff's O	ons. At a minimum an approaching the road I traffic control devices tandards Index102-600, if during the road closure.
	Print Name:	Bryan Miller		_
	Signature:	Bryan Miller	Digitally signed by Bryan Miller Date: 2022.07.29 07:35:03 -04'00'	-
	Title:	Senior Project Manager		-
	Date:	July 29, 2022		



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

Check the appropi	riate box(es) be	elow:
SPECIAL E	VENT PERMIT	
☑ USE OF CO	OUNTY PROPERT	Y PERMIT
PERMIT TO	o sell and con	SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PER	MIT	
AFTER REVIEWING THE WILL REQUIRE THE API	E APPLICATION, PLICANT TO COM	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT,
Illumination:	N/A	
Parking Areas:	N/A	
0 111		
Special Arrangements:	N/A - Event is not programs.	on Parks and Recreation property and will not affect county park operations or
	Print Name:	Cofleen Via
	Signature:	Colle the
	Title:	Operations Manager
	Date:	8/2/2022
		•
Boca - not on Parks	propers	
BOCA - not on Parks Heath-Clinic Pa	~12-2	Page 10
11/1/22		



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

Check the appropriat	te box(es) below:
	NT PERMIT
	NTY PROPERTY PERMIT
•	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	
J TILIVIT LIXIVII	
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT 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.
	alorementioned event within Lee county.
	In addition, Host Liquor Liability insurance will be required with minimum limits of One Million Dollars (\$1,000,000) per occurrence. Should Host Liquor Liability coverage be afford under the Commercial General Liability policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.
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.
	additional insured.
	Subject to proof of insurance.
	Print Name: Mike Figueroa
	Signature: And This

Risk Program Manager

July 28, 2022

Title:

Date:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/27/2022

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(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).

th	is certificate does not confer rights to	o tne	cen	incate holder in hell of St		OT				
PRODUCER				CONTACT Will Maddux						
East Main Street Insurance Services, Inc.				PHONE (A/C, No, Ext): (530) 477-6521 FAX (A/C, No):						
Will Maddux				E-MAIL ADDRESS: info@theeventhelper.com						
PO Box 1298									NAIC#	
Gra	ass Valley			CA 95945	INSURF	RA: Evansto				35378
INSU	RED				INSURE					
	Boca Grande Health Clinic Fo	ound	ation.	Inc	INSURE					
	Cannon Wenzel	o arra								
	280 Park Ave.				INSURE					
	Boca Grande			FL 33921	INSURE					
001		TIFIC	NA TE		INSURE	RF:		DEVICION NUMBER.		
	VERAGES CER HIS IS TO CERTIFY THAT THE POLICIES			NUMBER:	/C DCC	N ICCLIED TO		REVISION NUMBER:	E DOI	ICV DEDIOD
IN	DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY RE CCLUSIONS AND CONDITIONS OF SUCH	QUIF	REMEI	NT, TERM OR CONDITION THE INSURANCE AFFORDI	OF AN' ED BY	Y CONTRACT THE POLICIE	OR OTHER I	DOCUMENT WITH RESPECT	T TO I	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
	COMMERCIAL GENERAL LIABILITY								\$ 1,00	00,000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	s 100	,000
	Host Liquor Liability								\$ 5,00	00
Α	Retail Liquor Liability	Υ	N	3DS5473-M2309127		11/01/2022	11/02/2022		s 1,00	00,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					12:01 AM	12:01 AM		\$ 2,00	00,000
	POLICY PRO- JECT LOC									00,000
	OTHER:								\$ 1,00	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$	
	ANY AUTO							(Ea accident)	\$	
	OWNED SCHEDULED								\$	
	AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE	\$ \$	
	AUTOS ONLY AUTOS ONLY							(Per accident)	s s	
	UMBRELLA LIAB OCCUR									
	H H 0000K								\$	
	EXCESS LIAB CLAIMS-MADE								\$	
	DED RETENTION \$ WORKERS COMPENSATION								\$	
	AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$	
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT :	\$	
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICE	-					e space is require	ed)		
	ficate holder listed below is named as a									
Atter	ndance: 300, Event Type: Anniversary P	arty -	Оре			arge.				
				OK 07/28/2	022					
This figure										
CE	RTIFICATE HOLDER				CAN	CELLATION				
					THE	EXPIRATION	DATE THE	ESCRIBED POLICIES BE CA REOF, NOTICE WILL BI Y PROVISIONS.		
	Lee County Board of County	Com	missi	oners	AUTHO	RIZED REPRESE	NTATIVE / .	1/ 1/		
	2120 Main St.						[]/;	1 Maddwp		
FL 33901			Will L. Corecents							



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 Additional Insured Person(s) Or Organization(s):
Lee County Board of County Commissioners 2120 Main St. Fort Myers, FL 33901

- 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
 - 2. 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
- 2. 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.



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

Check the appropriate box(es) below:	
☐ FILM PERMIT	TONLY
AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.	
Special Arrangements:	
Other:	
	Print Name:
	Signature:
	Title:
	Date: