

EVENT PERMIT



Ordinance 17-08

Boca Grande Art Center/Art and Photography Shows

PERMIT NUMBER: TMP2023-00035

Date(s) of Event: Various dates From January 9,2023 until April 21, 2023

from 10:00am until 7:00pm

Property Owner:

LEE COUNTY

Applicant:

JOY STROTHER

941-964-1700

Description:

Art/Photography meeting/shows with cocktail reception starting January 9,2023 and

running various dates until April 21,2023 from 10:00 am until 7:00pm.

Location of event: 131 1ST ST W, BOCA GRANDE, FL 33921

Dishong-Bowen Community House/Boca Grande Community 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?

To Be Consumed

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

ftmpprmt specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



Event Application

Check the appropriate box(es) below:

- F SPECIAL EVENT PERMIT
- □ USE OF COUNTY PROPERTY PERMIT
- F PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Title of Event / Name of Production	Boca Grande Art Center
Date(s) of Event / Production:	01/09/2023, 01/9/2023, 02/09/2023, 02/16/2023, 02/23/2023, 03/03/2023 03/16/2023, 03/30/2023, 04/21/2023
Location(s) of Event:	Dishong-Bowen Community House / Dishong Bowen House
Name of Applicant:	Joy Strother
Applicant Address:	236 Banyan Street Boca Grande, FL 33921
Applicant Phone Number:	941-964-1700
Contact Person: (If different from applicant)	n/a
Contact Phone Number: (If different from applicant)	n/a
Email Address:	joy@bocagrandeartcenter.org
Estimated Attendance:	200
Event Description: Include each activity, when activities take place, etc.	Art/Photography meetings/shows with cocktail reception
Hours of Operation:	10 am-7:00 pm
STRAP # of Parcel:	144320010000500100
Owner of Premises*:	Lee County Government

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



What is the Zoning Classification of	the premises? Public Facility	
Are any temporary structures to be	installed for the event? Yes 😿 No	Type:
Do you have the appropriate permit	s for the temporary structures?	⊤ Yes x No
* For a 'Special Event' and 'Use of Co identified, including all parking areas	ounty Property' permit, submit a site plan w 5.	ith all proposed facilities and activities
Insurance Company Insuring the Eve Note: Certificate of Insurance must be subm	ent: Italiano Insurance Servi	ces, Inc.
Surety Company Bonding this Event		
Will Vehicles be Used as Part of Th Event?	is Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
⊤ Yes	🔀 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:	N/A	
Type of Food being Served: Hors	s d'oeuvers	
Section II - USE OF COUNTY	PROPERTY PERMIT	
Organization Sponsoring the Event:	Boca Grande Art Center	
Section III - SALE/CONSUM	PTION OF ALCHOLIC BEVERAGES F	PERMIT
Is alcohol being sold/consumed on C	ounty Property?	× Yes × No
If Yes, then a "Lee County Alcohol Permit" is require	red. Only non-profit organizations can sell alcohol on Count	Property.
Non-profit certificate/registration nu (Required if alcohol is to be <u>SOLD</u> at the event)	ımber:	
Please note: A permit from the State of Florid further details	da Division of Alcoholic Beverages and Tobacco may a	lso be required; please call (239) 344-0885 for



ype of Production (choose all t TV Movie or Special	TV Series / Pilot	TV Comme	orcial	CHILI Disease
Public Service Announceme	· · · · · · · · · · · · · · · · · · ·			Still Photos
	,,	Other:		
ill any of the following be nee	ded or included*?			
Street Closure		Yes		No
Traffic / Crowd Co	ontrol	Yes	Γ	No
Fire or Burning		┌ Yes		No
Explosives or Pyro		Yes		No
Animals, Large or		┌─ Yes	Γ	No
Construction of A		☐ Yes		No
Large and/or Nun		┌ Yes	-	No
Helicopters, Boats	s, etc.	☐ Yes	厂	No
Stunts		┌ Yes	Г	No
Other		┌ Yes	Г	No
For any marked Yes, provide	further details below:			
For any marked Yes, provide Special Parking Requirements: City or County Services Requir		etc.)		*
Special Parking Requirements: City or County Services Requir The following information is re the industry. If exact figures ar		production in F sely as possibl	e.	o track the economic impac
Special Parking Requirements: City or County Services Requir	ed: (Personnel, equipment, facilities, e quired for local and state records on p e not available, please estimate as clo	production in F sely as possibl Num	e.	



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.

morner knowledge.	
Signature of Applicant	Witness Witness
Joy Strother	Tonya Joherty
Print Name of Applicant and Title	Print Name of Witness
12.1.22	12.1.22
Date	Date



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

Check the appropri	ate box(es) be	low:
J SPECIAL EV	/ENT PERMIT	
▼ USE OF CC	UNTY PROPERTY	PERMIT
		SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERN	1IT	
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, I	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	Parking in aut	thorized areas only.
	l	
Deputies (How Many?):	None	
	[
Fee for Services:	None	
Special Arrangements:		
opecial Arrangements:	Alcoholic bevo	erages must remain within the confines of the event. Any amplified adhere to Lee County noise ordinances.
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	Dulint M	
		Steven Brady
	Signature:	Capt Steven Broky
	Title:	Tactical Support Unit
	Date:	12/7/22



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 appropr	iate box(e	es) below:					
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USE OF CC	0.000		ΛIT				
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ORGANIZATION WILL RE	QUIRE THE	APPLIÇANT	то сом	PLY WITH	FOR THEIR E	VENT.	ni en
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Fire Guards (How Many?):	0	•••		.•			
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Fee for Services:	0.					1500	
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First Aid Equipment:				:	• •		
and Equipment.							
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Fire Extinguishing:							
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Special Arrangements:	:	:			•		•••••
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	Please di	al 911 in an	emerge	ency.			
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	Print N	lame: C.	W. BI	osser	•		

Fire Chief 12/05/2022

C.W. Blosser

Signature: •

Title:



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

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.

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Treatment Facilities:	None necessary.			•					
Medical Personnel:	None necessary.			• •	٠	•		•	•
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Medical Supplies / Equipment:	None necessary.					:			
Safety Requirements:	Applicants shall foll Orders concerning people congregatin	nealth and	safety, esp	l directives ecially with	, and the regards	Florida C to COVID	Governor's 0-19 and t	Execution in the number 1	ve er of
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Fee for Services	Not applicable.			,			•		: /•
		77.79	•						
Special Arrangements:	Please call 911 in the office at EMSDetail(ne event of @leegov.co	an emergei	ncy. To₊arı	range sp	ecial ever	nt coverag	e, conta	ct our
	0					: *			•
	Print Name:	Douglas B.	Higgins	٠.,*		• •			
	Signature:	Douglas	B. Higg	ins Dytally signed DN cn-Dougla Services, Les C Operations and Dute: 2023 C11	by Douglas B. Higgins is B. Higgins, on-Lee Co. Dounly Public Safety, ou I Support Services, ema 03 16 15 44-05:00	only Emergency Medical Durison Chief, Special Udhiggers Bleegov com,	e+U5 .		
	Title:	Division Ch	ief, Suppor	t Services					
	Date:	January 3, 2	2023		. ;		. .		



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

Check the appropri	ate box(es) be	elow:		•••			
SPECIAL EV	VENT PERMIT	•					
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FILM PERN	ΛIT		,			. TAGILITIES	
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AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, P	LEASE INDIC	ATE BELOW	WHAT ARRA	NGEMENTS Y	OUR ORGAN	IZATION
Parking:			• •	•			•
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Ingress and Egress:				· · · ·			· · · · · ·
	Use all establ	ished mear	ns of ingres	s and egres	s.		
Special Arrangements:			•				•
•							
	None.						
	Print Name:	Bryan I	Milelr	* · · · · · · · · · · · · · · · · · · ·			
	Signature:	Bryan	Miller	Digitally signed Date: 2022.12.0	by Bryan Miller 2 06:49:35 -05'00'		
	Title:	Senior	Project I		· · · ·		
	Date:	Decem	her 2, 20	122			



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

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Check the approp	priate box(es) Ł	elow:					<i>:</i>		•	
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	COUNTY PROPER	TY PERMIT			•				• •	
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Parking Areas:	Parking in design	nated areas only	/.				•			
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Special Arrangements	Permit holder mu	ist follow all gui	Idelines (ınder orc	linance 1	8-12 (sell	ing and c	onsumpt	ion of alco	ohol). All
	alcohol must stay Boca Grande Con	waami ule des	ionateo :	area cusci	record by	the Parks	and Recr	eation;su	pervisor a	it the
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	Print Name:	Colleen Via				•				
	Signature:	Colleen	Vic	<u> </u>						
	Title:	Operations M	anager		•		,			
	Date:	12/6/2022		•	,			•		
									*	

Boca - DIShME House used by Art Leajure 1/9, 2/9, 2/16, 2/23, 3/3, 3/16, 3/30, 4/21/23 Page 10



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

Check the appropria	ite box(es) be	elow:						
· SPECIAL EVI	ENT PERMIT						¥	• • •
USE OF COL	JNTY PROPERT	Y PERMIT	* 4	•				
PERMIT TO			HOLIC BEV	ERAGES WI	THIN I FI	F COUNTY	· / ΕΔCILITIES	
FILM PERMI	T ,				······································		TACILITIES	
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AFTER REVIEWING THE	APPLICATION,	PLEASE INC	DICATE BELO	OW WHAT	ARRANG	GEMENTS	YOUR OR	GANIZATIO
WILL REQUIRE THE APPLI	CAMT TO COM	PLY WITH F	OR THEIR EV	VENT.				
nsurance Requirements:	Commercial ger	neral liability i	insurance with	n minimum l	imits of O	ne Million C	Collars (\$1.00	0.000) bor
	loccurrence to b	rotect agains	t bodily injury	and/or prop	erty dama	age relative	to applicant	s use of
	aforementioned	event within	Lee County.	• • •		•		
	In addition, Hos	t Liquor Liabi	lity insurance	will be requi	red with n	ninimum lir	nits of One N	Aillion Dollars
	. [(\$1,000,000) pei	occurrence.	Should Host L	iquor Liabili-	ty coverac	re be afford	under the C	ommercial
	General Liability	policy, minin	num acceptat	le limits will	be Two N	lillion Dolla	rs (\$2,000,00	0) aggregate
						5.6		* * ***
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pecial Arrangements:	A C . 16				•	. :		<u> </u>
pecial Arrangements.	A Certificate of I	nsurance shal	l be submitte	d as evidenc	e of the re	quired cov	erage listing	Lee County,
	political subdivi	oluer and as a	in automatic a	idditional ins	sureds and	l includes a	n automatic	waiver of
	Isaniogation wit	n regard to ge	eneral liability	. The certifica	ate holder	is an additi	ional insured	on a primary
	and noncontribu	itory basis wi	th regards to	general liabil	lity.		4	
	Subject to proof	of insurance.			•			
				: :	•		×	
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•				, c., .	•			
	Print Name:	Mike Figuer	oa					
	Print Name: Signature:	Mike Figuer	oa		· · · · · · · · · · · · · · · · · · ·	· · · · ·		
		Mike Figuer	oa Jain —					
		Mike Figuer Mike Risk Program	Fran -					
	Signature:	This	fair —					



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

Check the appropriate box(es) below:

FILM PERMI	T ONLY
AFTER REVIEWING THE AF WILL REQUIRE THE APPLIC	PPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Special Arrangements:	
Other:	
	Print Name:
	Signature: Title:
	Date:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/30/2022

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 THE COVERAGE AFFORDED BY THE POLICIES

REPRESENTATIVE OR PRODUCER,	AND	THE	E DOES NOT CERTIFICATE	CONSTITUTION OF THE CONSTI	JTE A	CONTRACT	BETWEEN	THE ISSUING	INSURER	(S), AU	THORIZED
IMPORTANT: If the certificate hold If SUBROGATION IS WAIVED, subjuthis certificate does not confer rights	er is	an A	DDITIONAL IN	SURED, the	policy	(ies) must h blicy, certain	ave ADDITIC	NAL INSURED y require an en	provision dorsemen	ns or be	endorsed,
PRODUCER			· ·	iii iieu oi si	CONT	dorsement(s	·).	•			<u>:</u> ·
Italiano Insurance Services, Inc.				•					1 640		
PO Box 1406 Boca Grande, FL 33921	٠,				(A/C, N	o, Ext); (941)	964-0400		(A/C, No):	(941) 9	64-0595
					ADDRE			rance.com		· ,	
		:	•			. IN	SURER(S) AFFO	RDING COVERAGE			· NAIC#
INSURED .			·		INSURI	ERA: Twin C	ity Fire Ins	urance Co	,		29459
					INSUR	•		•			
Boca Grande Art Center In	C				INSUR	ERC:	*				
Boca Grande, FL 33921		•		٠.	INSURE	ERD:					
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COVERAGES CFI					INSURE	RF:	•				
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OTHER:							•	PRODUCTS - COM	P/QP AGG	\$	2,000,000
AUTOMOBILE LIABILITY	H-	-				•				\$.	
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OWNED AUTOS ONLY SCHEDULED		1					•	BODILY INJURY (P	er person)	s	
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DED RETENTIONS		_							1	s .	
WORKERS COMPENSATION AND EMPLOYERS LIABILITY Y/N	-		· ·					PER STATUTE.	OTH-		• •
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	NIA							E.L. EACH ACCIDE			
If yes, describe under DESCRIPTION OF OPERATIONS below	1 :							E.L. DISEASE - EA		\$	• •
DESCRIPTION OF OPERATIONS below		•			•			E.L. DISEASE - POI			
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DESCRIPTION OF OPERATIONS / LOOATIONS / VEHIC he above listed certificate holder has beer neetings/art shows on 1/9/23, 1/19/23, 2/9/2	LES (/ nam 3, 2/1	ed as 6/23,	101, Additional Re additional ins 2/23/23, 3/3/23,	Ç. 10.20, 0.0.	JIZO, 41.	21125. 1105(1	space is require listed Gener iquor include	al Liability policed.	y for the n	nember	
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CERTIFICATE HOLDER					CANC	ELLATION				•	
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Lee County Board of County P O Box 398 Fort Myers, FL 33902	Con	nmiss	ioners	٠	ACCC	PRDANCE WIT	H THE POLICY	SCRIBED POLIC REOF, NOTICE PROVISIONS.	IES BE CAN	OELLE DELIV	D BEFORE . VERED IN .
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CORD 25 (2016/03)					1 3		٠٠٠٠ .		• • •		