

# **EVENT PERMIT**



Ordinance 17-08

# Run For The Youth - Sheriff's Youth Activity League

PERMIT NUMBER: TMP2023-00079

Date(s) of Event: January 28, 2023

**Property Owner:** 

LEE COUNTY

Applicant:

JEFF EAST

239-849-7709

Description:

5K race - fundraiser for SYAL

On January 28, 2023 from 6:00AM until 10:30AM

Location of event:

7330 GLADIOLUS DR, FORT MYERS, FL 33908

**Lakes 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?

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 D

ftmpprmt\_specialevent.rpt



# **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Run For The Youth-Sheriffs Youth Activity . League

TMP2023-0079



#### **Event Application**

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT
⊠ USE OF COUNTY PROPERTY PERMIT
oxdot 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	Run for the Youth - Sheriff's Youth Activity League						
Date(s) of Event / Production:	1/28/23						
Location(s) of Event:	res Park						
Name of Applicant:	SYAL (Sheriff's Youth Activity League)						
Applicant Address:	14750 6 Mile Cypress Pkwy, Fort Myers, FL 33912						
Applicant Phone Number:	239-849-7709						
Contact Person: (If different from applicant)	Jeff East						
Contact Phone Number: (If different from applicant)							
Email Address:	jeffeast@allstate.com						
Estimated Attendance:	250 - Capped Max						
Event Description: Include each activity, when activities take place, etc.	5K Running Race - Fundraiser for SYAL						
Hours of Operation:	6am - 10:30am						
STRAP # of Parcel:	STRAP: 34 <del>-46-25-E4-0100C.017A-Folio ID: 10585359 -</del>						
Owner of Premises*:	Lee County						

<sup>\*</sup>Notarized statement from the property owner specifically consenting to the proposed use required.



### Fill out the following questions for all permit types:

further details

What is the Zoning Classification of the premises? Lee County Parks/Government Property									
Are any temporary structures to be installed for the event? Yes No Type:									
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 indentified, including all parking areas.									
Insurance Company Insuring the Event:									
Note: Certificate of Insurance must be submitted at time of application									
Surety Company Bonding this Event (Name 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	⊠ 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:	gel Factory, Sun Harvest								
Type of Food being Served: Bagels, Juice	e, Bananas, Water, Sport Drinks								
Section II - USE OF COUNTY P	ROPERTY PERMIT								
Organization Sponsoring the Event: Lee	e County Sheriff's Youth Activity League								
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	y:							
Name of Charity: Lee County - Sheriff's Y	outh Activity League								
Address of Charity: 14750 Six Mile Cypre	ss Pkwy Fort Myers, FL 33912								
Phone Number: 239-994-7721									
Non-profit certificate/registration num	ber: #26-1557408								
(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/CONSUMPT	ON OF ALCHOLIC BEVERAGES P	ERMIT							
Is alcohol being sold/consumed on Coulf Yes, then a "Lee County Alcohol Permit" is required.	nty Property? Only non-profit organizations can sell alcohol on Count	☐ Yes ☐ No y Property.							
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber:								
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									



## Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

pe of Production	(choose all that ap	pply):								
TV Movie or Sp	ecial	TV Series ,	/ Pilot		TV Comm	ercial	X S	till Photo	S	
Public Service A	nnouncement	Industrial /	Documentary		Other:					
ill any of the follo	owing be needed o	r included*?								
	et Closure				Yes	X	No			
Traff	ic / Crowd Control				∀es		No			
	or Burning				☐ Yes	,  X	No			
Explo	osives or Pyrotechr	nics			Yes		No			
Anim	nals, Large or Small				Yes		No			
Cons	truction of Any Kin	nd			Yes	•	No			
	e and/or Numerous				┌ Yes	-	No			
Helio	opters, Boats, etc.				┌ Yes		No			
Stun	ts				┌ Yes	X	No			
Othe	r				☐ Yes	X	No			
Special Parking R	aguiraments									_
	need the gate & bat	hroom to be o	ppened at 7:00an	n to all	ow for volur	nteers &	registra	int access		
City or County Se	ervices Required: (	Personnel, e	quipment, facili	ties, e	tc.)					
Lakes Park Groun	ds and Bathroom Fa	acilities								
	ormation is require exact figures are no			-			a to tra	ck the ec	onomic im	pact
Number in Cast:	0	Nu	mber in Crew: 0		Nu	ımber of	locals l	nired: 0		
Total budget:	\$5K	Est	imate amount sp	ent in	Lee County:	\$5K				
Hotel room nights	:: 0	Nu	mber of shooting	g days:		0				
	number of rooms x num	pher of nights								

#### **Applicant Agreement - Signature Required**



#### 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 permises 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.

#### **Applicant Agreement - Signature Required**



#### **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.

W Dast	allian East
Signature of Applicant	Witness
Jeff East	Allison East
Print Name of Applicant and Title	Print Name of Witness
1/8/23	1/8/23
Date	Date



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

Check the appropriate box(es) below:

F SPECIAL EV	ENT PERMIT						
🔀 USE OF CO	UNTY PROPERTY PERMIT						
F PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES					
FILM PERM							
r T							
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.					
Parking:	Parking for the be impeded.	e event will be in authorized areas only. Right of way must not					
Deputies (How Many?):	None are req	uired for this event.					
		· · · · · · · · · · · · · · · · · · ·					
ee for Services:	None						
·							
j							
pecial Arrangements:	must adhere to assist with ev	ill remain within the confines of the park. Any amplified sounds to Lee County's noise ordinance. Lee County Sheriff's Office will ent through the Explorer's Program as well as Community Support will not be required to hire Deputies for the event.					
'							
	Print Name:	Steven Brady					
	Signature:	Capt. Steve 7 Brady					
	Title:	Tactical Support Unit					
	Date:	10/12/22					



#### 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:

SPECIAL EV	VENT PERMIT			
USE OF CC	OUNTY PROPERTY	PERMIT		
FILM PERN	ИIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL			OW WHAT ARRANGEMENTS VENT.	YOUR ORGANIZATION
Fire Guards (How Many?)	NA			
Fee for Services:	NA			
Flammable Vegetation:	NA			
First Aid Equipment:	Call 911 if needed			
Fire Extinguishing:	NA			
Special Arrangements:	NA			
	Print Name:	Nate Burley		
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2023.01.03 12:54:24 -05'00'	
	Title:	Division Chief - Fire & L	ife Safety	
	Date:	January 2, 2023		



# 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						
		ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR CANT 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 toffice at EMSDetai	the event of an emergency. To arrange special event coverage, contact our l@leegov.com.					
	Print Name:	Douglas B. Higgins					
	Signature:	Douglas B. Higgins    Digitally signed by Douglas B. Higgins of the Courty Emergency Medical Services, Lea Dougly Public Staffs, until Disson Chief, Special Operations and Support Services, ereal Inchinging (Bit eggov.com, c-US)					
	Title:	Division Chief, Support Services					
	Date:	December 7, 2022					



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

Check the appropri	ate box(es) bei	'ow:					
☐ SPECIAL EV	ENT PERMIT						
□ USE OF CO	UNTY PROPERTY	PERMIT					
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES					
FILM PERM	IIT						
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.					
Parking:	No event park	ng permitted on Lee County maintained road rights-of-way.					
Ingress and Egress:	Use all established means of ingress and egress.						
Special Arrangements:	None.						
	Print Name: Signature: Title: Date:	Bryan Miller  Bryan Miller  Digitally signed by Bryan Miller Date: 2022.09.23 08:42:11 -04'00'  Senior Project Manager  September 23, 2022					



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

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 WITHIN LEE COUNTY FACILITIES
FILM PERM	11T	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Illumination:	Event organizer mu	ist provide own lighting if needed to safely run the event.
Parking Areas:		t 7:00am o the designated parking areas inside Lakes Park, All vehicles with the event are their event parking pass.
Special Arrangements:	and first ald statior directional signs (IE Race course must be Banners may be hu All trash and event	responsible for set up and break down of the race route/event signs, drink stations as. No painting or temporary markings allowed on the roads or pathways. Removable survey flags, wire frame signs and cones) are permitted. The cleaned and cleared by 10 am. The cleaned and cleared Pavilions.  In debris must be cleaned up and removed prior to checking out with staff. The corvenities permitted on the pathways.  7:00 am
	Print Name: Signature:	Collect Via
	Title:	Operations Manager
	Date:	1/5/2023
1.16.	f m	St. Com

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

Check the appropriat	e box(es) bel	low:						
▼  USE OF COUNTY PROPERTY PERMIT								
PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES								
FILM PERMIT	FILM PERMIT							
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS PLY WITH FOR THEIR EVENT.	YOUR ORGANIZATION					
Insurance Requirements:	limits of One Mill	eral liability insurance to include participant legal liability co lion Dollars (\$1,000,000) per occurrence to protect against k e relative to applicants use of aforementioned event within	oodily injury and/or					
	Certificate Must I	Read As:						
	and public officia with regard to ge	litical subdivision and Charter County of the State of Floridals are automatic additional insureds and includes an automeneral liability. The certificate holder is an additional insured basis with regards to general liability.	natic waiver of subrogation					
Special Arrangements:	political subdivis	nsurance shall be submitted as evidence of the required covion and Charter County of the State of Florida, P.O. Box 398 older and as an additional insured as listed above.						
	,							
	Print Name:	Mike Figueroa						
	Signature:	Mike Frie						
	Title:	Risk Program Manager						
	Date:	December 8, 2022						



#### **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 12/08/2022

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 t	o the	cert	ificate holder in lieu of s	ie poli uch en	cy, certain po dorsement(s	olicies may i ).	require an endorsement	. A St	atement on
PRODUCER				CONTACT Stephen Blake						
Hunt Insurance Group, LLC				PHONE (A/C, No. Ext): 850-385-3636 FAX (A/C, No):						
2075 Centre Pointe Blvd Suite 101				E-MAIL ADDRESS: stephen.blake@huntins.com						
Tal	ahassee, FL 32308				ADDICE			RDING COVERAGE		NAIC#
					INSURE	Districts	lphia Insuran			HAIO#
INSU	RED				INSURE					
Lee	County Sheriffs Youth Activities Leagu	е			INSURE			E		
147	750 Six Mile Cypress Pkwy				INSURE					
Fo	rt Myers, FL 33912-4406				INSURE					
					INSURE					
CO	VERAGES CER	TIFIC	CATE	NUMBER:	moon			REVISION NUMBER:		
TH	IS IS TO CERTIFY THAT THE POLICIES	OF	INSUF	RANCE LISTED BELOW HA	VE BEE	N ISSUED TO	THE INSURE	D NAMED ABOVE FOR TH	HE POL	ICY PERIOD
IN	DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY I	QUIF	REME	NT, TERM OR CONDITION	OF AN	Y CONTRACT	OR OTHER I	DOCUMENT WITH RESPEC	CT TO	WHICH THIS
E	CLUSIONS AND CONDITIONS OF SUCH	POLI	CIES.	LIMITS SHOWN MAY HAVE	BEEN I	REDUCED BY	S DESCRIBEI PAID CLAIMS.	D HEKEIN IS SUBJECT TO	) ALL I	THE TERMS,
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	COMMERCIAL GENERAL LIABILITY	III	W	T O E TO T TO M D E T		(IIIIIII)DDTTTTT	(mmibb) [ [ ] ]	EACH OCCURRENCE		00,000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)		00,000
								MED EXP (Any one person)	s 0	
Α		Υ		PHPK2405612		06/05/2022	06/05/2023	PERSONAL & ADV INJURY	•	00,000
1	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	s 4,000,000	
	X POLICY PRO-							PRODUCTS - COMP/OP AGG		00,000
	OTHER:							FNODOGIS - COMPIOE AGG	\$ 1,0	20,000
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (Per accident)	\$	
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
	AUTOS ONLY							(Per accident)	\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE					2		AGGREGATE	\$	
	DED RETENTION\$							NOONLONIE	s	
WORKERS COMPENSATION								PER OTH-	<u> </u>	
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?							E.L. EACH ACCIDENT	\$	
(Mandatory in NH)		N/A							\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	s	
								Accident Medical	•	0,000
Α	Participant Accident Coverage			PHPA103578		06/05/2022	06/05/2023	Accidental Death	\$25	5,000
								Aggregate Limit	\$50	00,000
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	LES (A	CORD	101, Additional Remarks Schedu	le, may b	e attached if more	e space is require	ed)		
	tificate Holder is listed as additional insu									
Cov	verage is for the Lee County Sheriff You	th A	ctivitie	s League 5K Race Januar	y 28, 2	023 at Estero	Community F	Park		
				OK 12/0	8/202	2				
				Mile	, In	fu				
					/					
CEF	RTIFICATE HOLDER				CAN	CELLATION				
ا	e County Board of County Commissione	ro						ESCRIBED POLICIES BE CA		
737957995	). Box 398	10						REOF, NOTICE WILL E YPROVISIONS.	E DEL	-IVERED IN
150,000										
10	t Myers, FL 33902				AUTHO	RIZED REPRESE	NTATIVE	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
							Ster	ohen Blake Disconsisted Blake Of Control of the Con	aphen Bala a q ou alfuntins com, ex	·US
					1			Dute: 232212.03105	125 6400	