

# **EVENT PERMIT**



Ordinance 17-08

# Spring Fair at Fenway

PERMIT NUMBER: TMP2023-01144

Date(s) of Event: November 3, 2023 until November 19,2023

Property Owner:

LEE COUNTY

Applicant:

**BRIAN SCHUMAN** 

516-369-2195

Description:

Family Fun fair including rides, games, food, attractions and entertainment November

3, 2023-November 19, 2023 from 5:00PM until 10:00PM weekdays and 1:00PM until

11:00PM weekends

Location of event:

11500 FENWAY SOUTH DR, FORT MYERS, FL 33913

**Fenway South** 

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? No

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

Yes

County Manager Date

ftmpprmt\_specialevent.rpt



# **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Spring Fair at Fenway

TMP2003-01144



#### **Event Application**

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT	
区 USE OF COUNTY PROPERTY PERMIT	
$\ \square$ PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE CO	UNTY FACILITIES
☐ FILM PERMIT	

Section I - GENERAL INF	ORMATION (All Permit Types)			
Title of Event / Name of Production	Spring Fair at Fenway South			
Date(s) of Event / Production:	November 3 - 19, 2023			
Location(s) of Event:	JetBlue Park 115500 Fenway Drive South, Ft Myers, FL 33913			
Name of Applicant:	Fair Productions, LLC			
Applicant Address:	P.O. Box 70 Old Bethpage, N.Y. 11804			
Applicant Phone Number:	516-369-2195			
Contact Person: (If different from applicant)	Brian Schuman			
Contact Phone Number: (If different from applicant)				
Email Address:	brianschuman@gmail.com			
Estimated Attendance:	500 - 2,500			
<b>Event Description:</b> Include each activity, when activities take place, etc.	Family fun fair including rides, games, food, attractions and entertainment.			
Hours of Operation:	ursdays: 5pm - 10pm, Fridays: 5 pm - 11pm, Saturdays 1pm - 11pm, Sundays 1pm - 10p			
STRAP # of Parcel:	24452502000030000			
Owner of Premises*:	NESV Real Estate			

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



What is the Zoning Classification of the premises? MPD					
Are any temporary structures to be insta	alled for the event? Yes X No	Туре:			
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 identified, including all parking areas.					
Insurance Company Insuring the Event: T.H.E. Insurance Co. / McGowan Allied Specialty Insurance Co					
Note: Certificate of Insurance must be submitted	at time of application				
Surety Company Bonding this Event (Na	me and Address): N/A				
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   X No	▼ Yes	☐ 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:	ade Shows Inc. P.O. Box 51730 Livo	nia. Mi. 48151			
Type of Food being Served: Typical Fair Food. Pop Corn, cotton candy, funnel cakes. hot dogs, cheese steaks					
Section II - USE OF COUNTY PI	ROPERTY PERMIT				
Organization Sponsoring the Event: Fa	ir Productions LLC				
Fill out this portion for applications for	Solicitation in the County Rights-of-Way	<i>!:</i>			
Name of Charity:					
Address of Charity:					
Phone Number:					
Non-profit certificate/registration number:					
(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/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT					
Is alcohol being sold/consumed on County Property?  Yes  No					
If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.					
Non-profit certificate/registration number:  (Required if alcohol is to be <u>SOLD</u> at the event)					

**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 further details



pe of Producti	on (choose all that	apply):							
TV Movie or	Special	TV Ser	ies / Pilot		TV Commer	cial		Still Photos	
Public Servic	ce Announcement	☐ Industr	ial / Documentary		Other:				
ill any of the f	ollowing be neede	d or include	d*?						
St	reet Closure				☐ Yes		No		
Tı	raffic / Crowd Cont	rol:			☐ Yes	П	No		
Fi	re or Burning				☐ Yes		No		
E	xplosives or Pyrote	chnics			☐ Yes		No		
А	nimals, Large or Sr	nall			☐ Yes		No		
С	onstruction of Any	Kind			☐ Yes		No		
La	arge and/or Nume	rous Vehicle	S		☐ Yes		No		
Н	elicopters, Boats, o	etc.			☐ Yes		No		
S	tunts				☐ Yes		No		
0	ther				☐ Yes		No		
Special Parkin	g Requirements:								
City or Count	y Services Require	d: (Personne	el, equipment, facili	ties, et	cc.)				
	If exact figures are		cal and state record e, please estimate Number in Crew:		ely as possibl	e.		rack the economics	c impact
Total budget:			Estimate amount sp	pent in	Lee County: _				
Hotel room ni	ghts:		Number of shooting	g days:					
	number of rooms v	number of pight			-				



#### **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.

Below	Johnson
Signature of Applicant	Witness
Brian Schuman / Managing Member	Patrice Golde
Print Name of Applicant and Title	Print Name of Witness
9/06/2023	9/06/2023
Date	Date



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

Check the appropriate box(es) below:

* *	UNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized parking areas only.
Deputies (How Many?):	Deputies will be required for security & presence as well as traffic control. Please contact the LCSO Details Unit.
Fee for Services:	Contact the LCSO Details Unit to set detail up and pay for detail in advance.
Special Arrangements:	All amplified sound must adhere to the Lee County noise ordinance. Deputies will be required for security & presence each day. Additional Deputies will be required for traffic control on each Saturday during the event. Should event impeded the flow of traffic on Daniels Pkwy additional traffic details may be required at the vendors expense.
	Print Name: Downing  Signature: Title: Cannader
	Date:



#### 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 appropri	ate box(es) belo	ow:		
J⊠ SPECIAL Ε\	/ENT PERMIT			
USE OF CO	UNTY PROPERTY	PERMIT		
FILM PERN	/IIT			
AFTER REVIEWING THE VILL REQUIRE THE APPL			OW WHAT ARRANGEMENTS /ENT.	YOUR ORGANIZATION
Fire Guards (How Many?)	N/A due to FD and L	.CSO presence		
Fee for Services:	Plan Review and Ins	pection Fees Paid. Stand	dby coverage invoice to be billed a	nd paid separately.
Flammable Vegetation:	Keep 10' distance fro	om any heat source and	flammable vegetation	
First Aid Equipment:	Call 911 or reach ou	t to on site medical staff		
Fire Extinguishing:		propriate extinguishers v ishers and food trucks b	which are in date with inspection. A e NFPA 96 compliant.	Ill food vendors to have
Special Årrangements:			ef Bollen. All rides, food vendors, ga ontact Inspector Reed at 239-841-9	
	Print Name:	Nate Burley		
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2023.09,22 12:23:57 -04'00'	
	Title:	Division Chief - Fire & L	ife Safety	
	Date:	September 22, 2023		



#### **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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check the appropriat						
SPECIAL EVENT PERMIT						
□ USE OF COL	□ USE OF COUNTY PROPERTY PERMIT					
☐ PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES					
FILM PERMIT						
	PPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR QUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.					
Treatment Facilities:	None necessary.					
Medical Personnel:	Medical personnel shall be required throughout operations.					

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:** 

Mr. Schuman has arranged, as he has done each year, to have South Trail Fire Department provide medical coverage during the fair operations. He is also aware that he can contact me at LCEMS should there be any questions or concerns. Please call 911 in the event of an emergency. To arrange special event coverage, contact our office at EMSDetail@leegov.com.

Douglas B. Higgins Print Name: Douglas B. Higgins Digitally sign DN: circle to Service 200 Signature: Captain, EMS Operations Title: October 17, 2023 Date:



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

Check the appropri	ate box(es) bel	ow:
SPECIAL EV	'ENT PERMIT	
<u> </u>	UNTY PROPERTY	
-		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	1111	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	No event parking is	s permitted in Lee County maintained road right of ways.
Ingress and Egress:	Please use all estab	olished means of ingress and egress.
Special Arrangements:	Shall use Lee Cour	nty Sheriff's Office for assistance with traffic control as needed.
	Print Name:	Nathan Thoman
	Signature:	Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2023,10.05 07:22:40 -04'00'
	Title:	Project Manager
	Date:	10/05/2023



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

Check the appropri	ate box(es) belo	DW:
•	UNTY PROPERTY I SELL AND CONSU	PERMIT JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, PLLICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Illumination:	All illuminations mu own temporary ligh	ust follow county ordinance and FAA regulations. Event organizer must provide their nting as needed for safety during event set up and breakdown.
Parking Areas:	site staff to ensure t	esponsible to direct patrons to the designated parking locations. Must work with on- that vehicles do not block driveways and private roadways so emergency vehicles Organizer must provide adequate staff/volunteers along with directional signage for
Special Arrangements:	control and debris of staff to designate the Participants and sp	responsible to provide adequate staff/volunteers throughout the event for litter clean up during and after the event. Work with Red Sox staff and the on-site park he debris/trash collection area during and after the event.  Rectators must disperse and leave the park area to seek safe shelter in their vehicles erts and threatening weather.
	Print Name: Signature: Title: Date:	Alise Flanjack  Abrie Flanjack  Deputy Director  September 14, 2023

Fair at Fenway Nov. 3 - 19

JetBlue Park



# 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	ow:
SPECIAL EVEI  USE OF COU  PERMIT TO S  FILM PERMIT	NTY PROPERTY ELL AND CONS	PERMIT UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
nsurance Requirements:	occurrence to preaforementioned  Certificate Must I  Lee County, a poand public official with regard to great after the process of the proces	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.  Read As:  litical subdivision and Charter County of the State of Florida, its agents, employees, als are automatic additional insureds and includes an automatic waiver of subrogation eneral liability. The certificate holder is an additional insured on a primary and basis with regards to general liability.
Special Arrangements:	political subdivis	nsurance shall be submitted as evidence of the required coverage listing Lee County, a ion and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as older and as an additional insured as listed above.
	Print Name: Signature: Title: Date:	Mike Figueroa  Mike Figueroa  Risk Program Manager  September 14, 2023



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/11/2023

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.

titions holder is an ADDITIONAL INCLIDED, the policy/ice) must be endorsed. If SURDOCATION IS WAIVED subject to

the terms and conditions of the policy, certain policies may require an el	ndorsement. A sta	tement on th	is certificate does not con	fer rights to the		
certificate holder in lieu of such endorsement(s). PRODUCER	CONTACT					
McGowan Allied Specialty Insurance	NAME: LISA CUMMINGS					
20595 Lorain Rd	PHONE FAX (A/C, No, Ext): (A/C, No): 440-333-3214					
Fairview Park OH 44126	E-MAIL ADDRESS: lcummings@mcgowanallied.com					
			DING COVERAGE	NAIC#		
License#: 973	INSURER A : T.H.E. I	nsurance Com	npany	12866		
INSURED FAIRPRO-03 Fair Production II, Inc./ Fair Productions LLC	INSURER B:					
PO Box 70	INSURER C:					
Old Bethpage NY 11747	INSURER D:					
	INSURER E:					
	INSURER F:					
COVERAGES CERTIFICATE NUMBER: 605212439			REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAINDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION	VE BEEN ISSUED TO OF ANY CONTRACT	) the insure For other [	ED NAMED ABOVE FOR THE DOCUMENT WITH RESPECT	POLICY PERIOD TO WHICH THIS		
CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORD	ED BY THE POLICIE	ES DESCRIBE	D HEREIN IS SUBJECT TO A	ALL THE TERMS,		
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE  INSR						
LTR TYPE OF INSURANCE INSD WVD POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	and the second s	LIMITS			
A X COMMERCIAL GENERAL LIABILITY CPP010331710	4/14/2023	4/14/2024	EACH OCCURRENCE \$ DAMAGE TO RENTED	1,000,000		
CLAIMS-MADE X OCCUR			PREMISES (Ea occurrence) \$	100,000		
			MED EXP (Any one person) \$	0		
				1,000,000		
GEN'L AGGREGATE LIMIT APPLIES PER:			GENERAL AGGREGATE \$	5,000,000		
X POLICY PRO- LOC				5,000,000		
OTHER:			COMBINED SINGLE LIMIT &			
A AUTOMOBILE LIABILITY CPP010331710	4/14/2023	4/14/2024	(Ea accident)			
ANY AUTO ALL OWNED SCHEDULED			BODILY INJURY (Per person) \$			
AUTOS AUTOS I I			DDODEDT// DAMAGE	1,000,000		
X HIRED AUTOS X NON-OWNED AUTOS			(Per accident)			
			\$			
UMBRELLA LIAB OCCUR			EACH OCCURRENCE \$			
EXCESS LIAB CLAIMS-MADE			AGGREGATE \$			
DED   RETENTION \$   WORKERS COMPENSATION			PER OTH- STATUTE ER			
AND EMPLOYERS' LIABILITY Y/N						
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?			E.L. EACH ACCIDENT \$			
(Mandatory in NH) If yes, describe under			E.L. DISEASE - EA EMPLOYEE \$			
DÉSCRIPTION OF OPERATIONS below			E.L. DISEASE - POLICY LIMIT \$			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedu	ule may be attached if mo	ore space is requi	red)			
Regarding General Liability: The following are named as Additional Insured with respects to the operations of the Named Insured as required by written contract						
Only Additional Insured: Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials are automatic						
additional insureds and includes an automatic waiver of subrogation with regard to general liability. The certificate holder is an additional insured on a primary						
and noncontributory basis with regards to general liability."  OK 09/14/2023						
7						
Mike Tigin _						
CERTIFICATE HOLDER CANCELLATION						
ORIGINATE HOLDER						
Long Country on a little of early division, and Charten	N DATE TH	ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE DATE THEREOF, NOTICE WILL BE DELIVERED IN THE POLICY PROVISIONS.				
Lee County , a political subdivision and Charter County of the State of Florida						
PO Box 398	AUTHORIZED REPRES	AUTHORIZED REPRESENTATIVE				
Fort Myers FL 33902	100	1200				



# Addendum to Special Event Permit Application

As a condition of obtaining a special event permit, Lee County requires each organizer submit a written Covid-19-safety plan.

The safety plan shall include the following:

•	lherence to the Centers for Disease Control guidelines, the Governor of the State of Florida's executive der. This includes specifically:		
	Practicing social distancing		
	Encouraging anyone 65 years or older to avoid large crowds		
	Anyone that is sick or experiencing symptoms of any illness to stay home		
	Crowd control		
	Disinfecting Stations		
	Appropriate Signage		
	Disinfecting and cleaning all indoor spaces that are used		
	Protocols for dealing with inclement weather (especially lightning within a 10 miles radius), heat exhaustion and dehydration that meet distancing and protective guidelines.		

Submit the outlined plan along with your Event Permit application to avoid delays in processing your permit.

