

EVENT PERMIT



Ordinance 17-08

Jingle Jog 5K and Santa Strut

PERMIT NUMBER:

TMP2023-01230

Date(s) of Event:

December 17, 2023 from 7:00AM until 11:00AM

Property Owner:

LEE COUNTY

Applicant:

Jacob Davis

407-214-5595

Description:

5k run and a 1 mile walk taking place around the sidewalks of Lakes Regional Park.

There will be music and announcements before and after the race and awards given to

the top finishers.

Location of event:

7330 GLADIOLUS DR, FORT MYERS, FL 33908

Lakes Regional Park

Will the event be attended by 1000 or more people?

Will the event be held on County Owned Property?

Yes

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

Lee County, Florida

unty Manager [

Date

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Jingle Jog 5k and Santa Strut



Event Application

леск	tne appropriate box(es) below:
	SPECIAL EVENT PERMIT
	IN USE OF COUNTY PROPERTY PERMIT IN USE OF COUNTY PROPERTY PERMIT
	$\ \ \square$ PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	FILM PERMIT

Section I - GENERAL INFORMATION (All Permit Types)						
Jingle Jog 5K & Santa Strut						
12/17/2023						
Lakes Regional park						
Southern Timing, LLC on behalf of Beasley Media						
Applicant Address: 8131 Vineland Ave, #322 Orlando, FL 32821						
407-214-5595						
Jacob Davis						
jacob@southerntimingfl.com						
250						
5K run and a 1 mile walk taking place around the sidewalks of Lakes Regional Park. There will be music and announcements before and after the race and awards given to the top finishers.						
0700 - 1100						
Lee County Parks and Recreation						

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



What is the Zoning Classification of the	premises? County Park	
Are any temporary structures to be insta	alled for the event? Yes X No	Туре:
Do you have the appropriate permits fo	r the temporary structures?	Yes No
identified, including all parking areas.	ry Property' permit, submit a site plan wit	th all proposed facilities and activities
Insurance Company Insuring the Event:	CoverWallet, Inc.	
Note: Certificate of Insurance must be submitted	at time of application	
Surety Company Bonding this Event (Na	me 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	☐ 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:		
Section II - USE OF COUNTY PR	ROPERTY PERMIT	
Organization Sponsoring the Event: B	easley Media Group, Inc E	Benefitting Golisano Child
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES F	PERMIT
Is alcohol being sold/consumed on Cou	<i>,</i> , ,	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: 	
Please note: A permit from the State of Floridal further details	Division of Alcoholic Beverages and Tobacco may a	also be required; please call (239) 344-0885 for



pe of Product	tion (choose all th	at apply):							
TV Movie o	r Special	TV Se	ries / Pilot		TV Comme	rcial	Still F	hotos	
Public Servi	ice Announcemen	t 🗌 Indust	rial / Documentary		Other:				
/ill any of the	following be need	ed or include	d*?						
S	Street Closure				☐ Yes	П	No		
7	Traffic / Crowd Co	ntrol			☐ Yes		No		
F	Fire or Burning				☐ Yes	П	No		
E	Explosives or Pyro	technics			☐ Yes		No		
A	Animals, Large or S	Small			☐ Yes		No		
(Construction of Ar	ıy Kind			Yes		No		
L	_arge and/or Num	erous Vehicle	S		☐ Yes		No		
ŀ	Helicopters, Boats	, etc.			☐ Yes	Г	No		
5	Stunts				☐ Yes	Г	No		
(Other				☐ Yes	П	No		
Special Parki	ng Requirements:								
City or Coun	ty Services Requir	ed: (Personne	el, equipment, facilit	ies, et	c.)				
		-			-				
			cal and state records e, please estimate a				a to track th	ne econon	nic impact
Number in Ca	st:		Number in Crew:		Nun	nber of	locals hired	:	
Total budget:			Estimate amount sp	ent in I	 Lee County:			•	
Hotel room ni	ights:		Number of shooting	days:	_				
	number of rooms	x number of night	S		_				



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.

Jacob B. Davis

Jacob B. Davis - Owner

Print Name of Applicant and Title

10/24/2023

Date

Danny Hepburn

Print Name of Witness

10/24/2023

Date



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

Check the appropri	ate box(es) below:
·	UNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only, Right of ways should not be impeded.
Deputies (How Many?):	None are required for this event.
Fee for Services:	None .
Special Arrangements:	Race is to remain along the pathways and walkways within the confines of the park. Any amplified sounds must adhere the the Lee County Noise Ordinance.
	Print Name: Signature: Signature:
	Title: Commandes
	Date: 10 - 27 - 23



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) bel	ow:		
┌─ SPECIAL E\	ENT PERMIT			
∪SE OF CO	UNTY PROPERTY	PERMIT		
FILM PERM	11T			
AFTER REVIEWING THE WILL REQUIRE THE APPL			LOW WHAT ARRANGEMENTS EVENT.	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: 2023.11.14 13:48:44 - 05'00'	_
	Title:	Division Chief - Fire &	Life Safety	-
	Date:	November 14th, 2023		_



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.

ORGANIZATION WILL RE	QUIKE THE APPLIC	CANT TO COMPLY WITH FO	OR THEIR EVENT.				
Treatment Facilities:	None necessary.						
Medical Personnel:	None necessary.		-				
Medical Supplies / Equipment:							
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 to office at EMSDetail	the event of an emergency. l@leegov.com.	To arrange special event c	overage, contact our			
	Print Name: Signature: Title:	Douglas B. Higgins The Bup- Captain, EMS Operations	Digitally signed by Captain Douglas 8. Higgins Dato: 2023.11.13 10:54.02 -05'00'				
	Date:	November 13, 2023					



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

Check the appropri	ate box(es) be	low:
SPECIAL EV	ENT PERMIT	
⋉ USE OF CO	UNTY PROPERTY	PERMIT
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	11T	
AFTED DEVIENAMANC THE	ADDUCATION	DIFACE INDICATE DELONG WILLAT ADDANICEMENTS VOLID ODGÁNIZATION
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	No event parking i	s permitted in Lee County maintained road right of ways.
Ingress and Egress:	Please use all esta	blished means of ingress and egress.
Special Arrangements:	Shall use Lee Cour	nty Sheriff's Office for assistance with traffic control as needed.
		e access and public vehicular access shall be maintained on all surrounding Lee
	County maintained	d roads.
	Print Name:	Nathan Thoman
	Signature:	Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2023.11.08 11:43:33 - 05'00'
	Title:	Project Manager
	Date:	11/08/2023



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

Cneck the appropri	ate pox(es) pei	OW:					
SPECIAL EV	ZENT PERMIT						
IXI USE OF CC	OF COUNTY PROPERTY PERMIT						
PERMIT TO	IIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES						
FILM PERM	ЛІТ						
		•					
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.					
Illumination:	Event organizer mu	ust provide own lighting if needed to safely run the event.					
Parking Areas:		: 7:00am o the designated parking areas inside Lakes Park, All vehicles with the event are their event parking pass.					
Special Arrangements:	and first aid station directional signs (IE Race course must b Banners may be hu All trash and event	esponsible for set up and break down of the race route/event signs, drink stations is. No painting or temporary markings allowed on the roads or pathways. Removable is survey flags, wire frame signs and cones) are permitted, be cleaned and cleared by 10 am. Ing at your designated Pavilions. Indebris must be cleaned up and removed prior to checking out with staff, or vehicles permitted on the pathways. 7:00 am					
	, , , , , , , , , , , , , , , , , , , ,						
	Print Name:	Colleen Via					
	Signature:	allerbia					
	Title:	Operations Manager					
	Date:	11/9/2023					
Lakes - Jinsle Ji 12/17/23	8 FK						
14/17/23		r ago ru					



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

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 							
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YELY WITH FOR THEIR EVENT.	YOUR ORGANIZATION				
Insurance Requirements:	occurrence to pro aforementioned Certificate Must F	eral liability insurance with minimum limits of One Million Do otect against bodily injury and/or property damage relative to event within Lee County. Read As:	o applicants use of				
Special Arrangements:	with regard to ge noncontributory	als are automatic additional insureds and includes an automa eneral liability. The certificate holder is an additional insured of basis with regards to general liability. Surance shall be submitted as evidence of the required cover	on a primary and				
	political subdivis	ion and Charter County of the State of Florida, P.O. Box 398, F Ider and as an additional insured as listed above.					
	Print Name:	Mike Figueroa					
	Signature:	Mike From-					
	Title:	Risk Program Manager					
	Date:	November 16, 2023					



CERTIFICATE OF LIABILITY INSURANCE

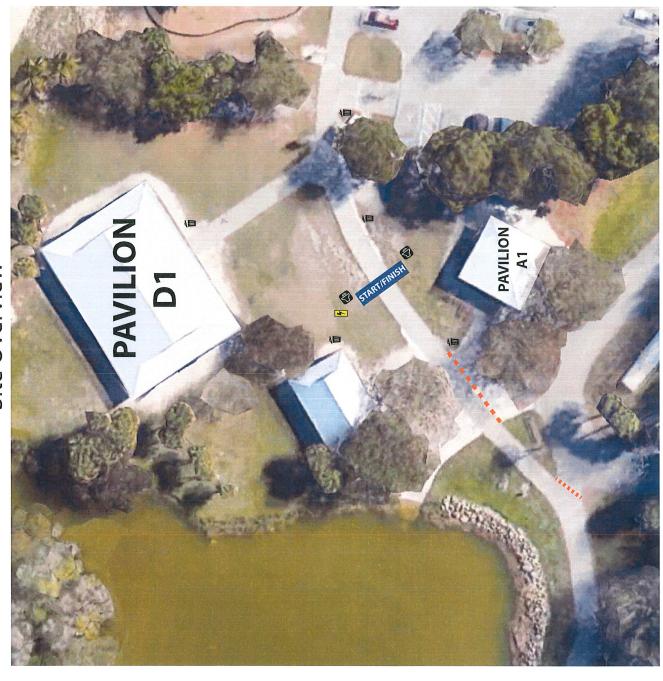
DATE (MM/DD/YYYY) 11/15/2023

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.

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	the c	ertifi	cate holder in lieu of such			, ,			
PRO	DUCER				CONTAC NAME:	CT Holly Car	ter			
Cro	ss Insurance				PHONE (007) 047 7045					
491	491 Main Street					(A/C, No, Ext): (2U/) 947-7345 (A/C, No): E-MAIL ADDRESS: holly.carter@crossagency.com				
P.O	Box 1388						SURER(S) AFFOR	DING COVERAGE		NAIC#
Ban	gor			ME 04401	INSURE	\ /:-:!+ I				20397
INSU	RED				INSURE	Const Nie	orthern Ins Co			20303
	Beasley Media Group LLC				INSURE	C-d	Ins Co			20281
	3033 Riviera Drive				INSURE					
	Suite 200									
	Naples			FL 34103	INSURE					
CO		TIEIC	ATE	NUMBER: CL233242858	INSURE	RF:		DEVICION NUMBE	-D.	
	HIS IS TO CERTIFY THAT THE POLICIES OF I			HOMBEIN		TO THE INSU		REVISION NUMBEROVE FOR THE POLICE		
IN	DICATED. NOTWITHSTANDING ANY REQUIREMENTS. ERTIFICATE MAY BE ISSUED OR MAY PERTA	REME	NT, TE	ERM OR CONDITION OF ANY	CONTRA	ACT OR OTHER	R DOCUMENT V	WITH RESPECT TO W	VHICH THIS	
E	CLUSIONS AND CONDITIONS OF SUCH PO	LICIE	S. LIM	IITS SHOWN MAY HAVE BEEN		ED BY PAID C	LAIMS.		,	
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							EACH OCCURRENCE	_{\$} 1	,000,000
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrer	nce) § 1	,000,000
	Host Liquor \$1,000,000							MED EXP (Any one pers	1	0,000
Α				3607-22-88 BOS		03/31/2023	03/31/2024	PERSONAL & ADV INJU	1	,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	2	,000,000
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OF		,000,000
	OTHER:							Employee Benefits		,000,000
	AUTOMOBILE LIABILITY							GOMBINED SINGLE LIN	MIT \$ 1	,000,000
	ANYAUTO							(Ea accident) BODILY INJURY (Per pe		
В	OWNED SCHEDULED			(23)7362-74-63		03/31/2023	03/31/2024	BODILY INJURY (Per ac		
	AUTOS ONLY AUTOS NON-OWNED			()				PROPERTY DAMAGE	\$	
	AUTOS ONLY AUTOS ONLY							(Per accident) Uninsured motorist		,000,000
-	✓ UMBRELLA LIAB ✓ OCCUR	-						EACH OCCURRENCE		0,000,000
c	H EVOCOOLIAN H OCCOR			7819-62-50		03/31/2023	03/31/2024			0,000,000
_	CLAIWS-WADE	-				00/01/2020	00/01/2021	AGGREGATE	Ψ	0,000,000
-	DED RETENTION \$ 10,000 WORKERS COMPENSATION							PER STATUTE	OTH- ER	
1	AND EMPLOYERS' LIABILITY Y / N									
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$	
1	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMP		
<u> </u>	DÉSCRIPTION OF OPERATIONS below	_	-					E.L. DISEASE - POLICY	LIMIT \$	
DES	 CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (AC	ORD 1	In Additional Remarks Schedule	may he a	ttached if more s	nace is required)			
	Jingle Jog 5k & Santa Strut. The Certificate							ract subject to the to	rme and	
	ditions of the policies listed above, including					a do required	by written conti	dot, odbject to the te	iiiio diid	
		Ok	(11	/16/2023						
			M	ke Jain-						
		•	- 10	70						
<u></u>	TITIOATE HOLDER				0					
CEI	RTIFICATE HOLDER				CANC	ELLATION				
					SHO	ULD ANY OF T	HE ABOVE DE	SCRIBED POLICIES	BE CANCEL	I ED BEFORE
					THE	EXPIRATION I	DATE THEREOF	F, NOTICE WILL BE D		
	Lee County				ACC	ORDANCE WI	TH THE POLICY	Y PROVISIONS.		
	1500 Monroe Street				A1177117	DITED D=====	NTATIVE			
					AUTHO	RIZED REPRESE	NIAIIVE			
Fort Myers FL 33901				Saral tierce						

Jingle Jog 5K & Santa Strut Site Plan Site Overview

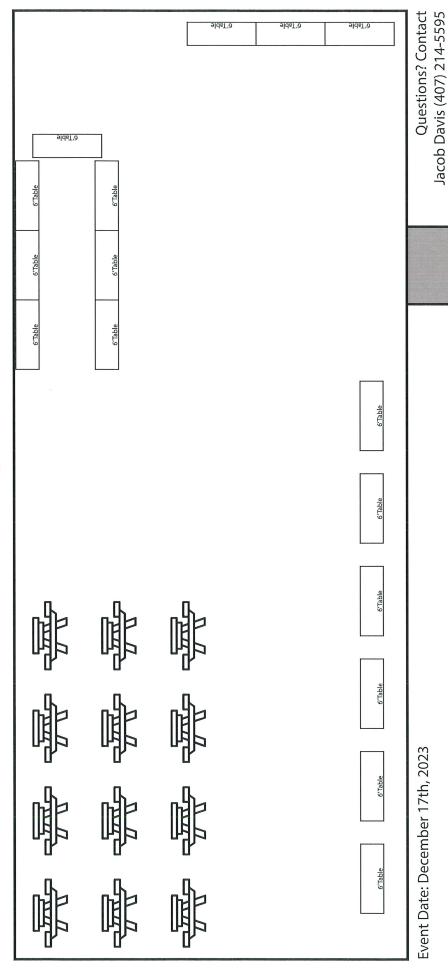


Event Date: December 17th, 2023

Questions? Contact Jacob Davis (407) 214-5595

Jingle Jog 5K & Santa Strut Site Plan Pavilion D1

120'x 50' Existing Structure



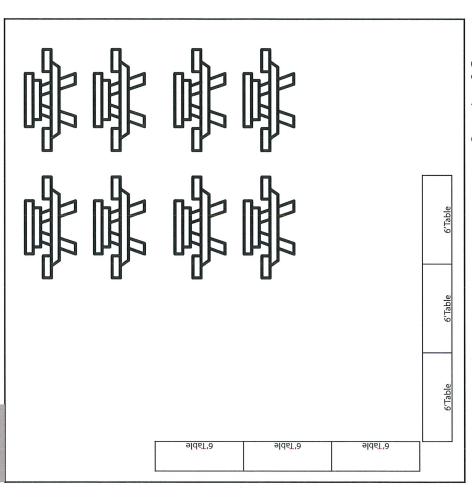
Sidewalk Entrance

Jingle Jog 5K & Santa Strut Site Plan

Sidewalk Entrance

Pavilion A1

30'x 30' Existing Structure



Event Date: December 17th, 2023

Questions? Contact Jacob Davis (407) 214-5595

Jingle Jog 5K



Santa Strut 1 Miler

