

EVENT PERMIT



Ordinance 17-08

Wedding of Ricardo and Lucia

PERMIT NUMBER:

TMP2023-01264

Date(s) of Event:

January 5, 2024 from 4:00PM until 6:00PM

January 6, 2024 from 9:00AM until 12:00AM

Property Owner:

LEE COUNTY

Applicant:

Yahira Gomez-Santiago

239-405-0201

Description:

Starting on Friday, January 5, 2024 from 4:00PM until 6:00PM, the center will be

decorated and set up for the wedding. Then on Saturday January 6, 2024 from 9:00AM until 3:00PM, the center will be set up for additional decorations and instruments. The

reception will be happening on January 6, 2024 from 3:00PM until 12:00AM.

Location of event:

11831 BAYSHORE RD, NORTH FORT MYERS, FL 33917

Lee Civic, Center Complex

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 Manage

Date

ftmpprmt specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Wedding of Ricardo and Lucia

TMP2023-01264



Event Application

Check the appropriate box(es) below:

- F SPECIAL EVENT PERMIT
- ☑ USE OF COUNTY PROPERTY PERMIT
- FILM PERMIT

| Section I - GENERAL INF | ORMATION (All Permit Types) |
|--|---|
| Title of Event / Name of Production | Wedding of Ricardo and Lucia |
| Date(s) of Event / Production: | January 5th, 2024 to January 6th, 2024 |
| Location(s) of Event: | Lee Civic Center Complex, 11831 Bayshore Rd, North Fort Myers, FL, 33917 |
| Name of Applicant: | Yahira Gomez-Santiago |
| Applicant Address: | 11344 Sunray Dr, Bonita Springs, FL, 34135 |
| Applicant Phone Number: | (239) 405-0201 |
| Contact Person: (If different from applicant) | |
| Contact Phone Number: (If different from applicant) | |
| Email Address: | Yahirags@outlook.com |
| Estimated Attendance: | 650 |
| Event Description: Include each activity, when activities take place, etc. | Friday, January 5th from 4 pm to 6 pm, the center will be decorated and set up for the wedding. From 9 am to 3 pm on Saturday, January 6th, the center will be set up even more, items such as instruments, food, and beverages will be brought from sem to 12 am two reception will or the median. |
| Hours of Operation: | Friday, January 5th from 4 pm to 6 pm and Saturday, Janua |
| STRAP # of Parcel: | 244 325 000 000 70000 |
| Owner of Premises*: | Lee County |

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



| What is the Zoning Classific | ation of the premise | s? Comm | unity Facili | ties | |
|--|----------------------------|-------------------|-------------------------------------|--------------------------|--|
| Are any temporary structure | es to be installed for | the event? | Yes 🗵 No | Type: | |
| Do you have the appropriate | e permits for the ten | nporary struct | ures? | ☐ Yes ☐ | ⊼ No |
| * For a 'Special Event' and 'Uidentified, including all park | ing areas. | | | | |
| Insurance Company Insurin | g the Event: East | Main Str | eet Insurar | ice Services | s, Inc. |
| Note: Certificate of Insurance mus | st be submitted at time o | f application | | | |
| Surety Company Bonding th | nis Event (Name and | Address): | | | |
| Will Vehicles be Used as P Event? | art of This Will Fo | ood be Availat | le at this Event? | | lic Beverages be med at this Event? |
| ∟ Yes ▷ N | lo | ▼ Yes | ☐ No | ▼ Yes | L No |
| If yes, automobile coverage included on the certificate of | . , ,, | | coverage must be cate of insurance. | , , , | certificate of Insurance. |
| Name & Address of Organi Providing Food: Type of Food being Served | Serre | ed at to | in certher | | me, which will b |
| Section II - USE OF Co | OUNTY PROPER | TY PERMIT | | | |
| Organization Sponsoring th | e Event: | | | to the second seconds | |
| Section III - SALE/CO | ONSUMPTION O | F ALCHOLIC | C BEVERAGES | PERMIT | |
| Is alcohol being sold/consu | | • | can sell alcohol on Cou | Y Yes | KNo |
| Non-profit certificate/regis (Required if alcohol is to be <u>SOLD</u> at | | | | | |
| Please note: A permit from the S | tate of Florida Division o | f Alcoholic Bever | iges and Tobacco ma | y also be required; plea | se call (239) 344-0885 for |

further details



| e of Prod | duction (choose | all that app | oly): | | | | | | | | |
|------------|--|--------------|--|--|-----------------|--|-------|----|----------|------|-----------|
| TV Mov | ie or Special | Г | TV Series | / Pilot | | TV Comme | rcial | Γ | Still Ph | otos | |
| Public S | ervice Announce | ment [| Industrial | / Documentary | Г | Other: | | | - | | |
| l any of t | the following be | needed or | included* | ? | | | | | | | |
| | Street Closure | 2 | | | | ☐ Yes | 区 | No | | | |
| | Traffic / Crow | d Control | | | | ┌ Yes | × | No | | | |
| | Fire or Burnin | ıg | and the second s | | | ☐ Yes | X | No | | | |
| | Explosives or | Pyrotechn | ics | | | ┌ Yes | X | No | | | |
| | Animals, Larg | e or Small | | | | ☐ Yes | × | No | | | |
| | Construction | of Any Kin | d | | | ☐ Yes | × | No | | | |
| | Large and/or | Numerous | Vehicles | | | ┌ Yes | 区 | No | | | |
| | Helicopters, I | Boats, etc. | | | | ☐ Yes | X | No | | | |
| | Stunts | | | | | ☐ Yes | X | No | | | |
| | Other | | | | | ┌ Yes | X | No | | | |
| For any | | | | | | | | | | | |
| For any | arking Requirem | ents: | | | | | | | | | |
| Special P | | | | | lities, e | tc.) | | | | | |
| Special P | arking Requirem | equired: (f | Personnel, | equipment, faci | ds on p | roduction ir sely as possi | DIC. | | | | omic impa |
| Special P | arking Requirem county Services R wing informatio stry. If exact figu | equired: (f | Personnel, ed for local t available, | equipment, faci and state recor please estimate Number in Crew: | ds on p | roduction ir ely as possi Nu | DIC. | | track th | | omic imp |
| City or C | ounty Services Rowing informationstry. If exact figurances in Cast: | equired: (f | Personnel, ed for local t available, | equipment, faci and state recor please estimate | ds on peas clos | roduction ir sely as possi Nu Lee County: | DIC. | | | | omic 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.

| Signature of Applicant | Lucia Santiago Ramos Witness |
|-----------------------------------|------------------------------|
| Yahira Gomez-Santiago | Lucia Santiago |
| Print Name of Applicant and Title | Print Name of Witness |
| 10/30/2023 | 10/30/2023 |
| Date | Date |



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

F PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

IX USE OF COUNTY PROPERTY PERMIT

| FILM PERM | Т | | |
|-----------------------|--|---|--|
| | | EASE INDICATE BELOW WHAT ARRANGEMENTS YOU Y WITH FOR THEIR EVENT. | UR ORGANIZATION |
| Parking: | Parking for event v impeded. | will be in authorized areas only & right-of-way must not be | |
| Deputies (How Many?): | 2 Deputies for secu | curity & presence around event area. | |
| Fee for Services: | Contact LCSO Det | etails Unit | |
| Special Arrangements: | but rather will resp for checking ID's. I at this private ever be hired at the eve Sheriff's Office will | Sheriff's Office will not be posted inside the facility where a pond in if there is an issue. The Lee County Sheriff's Office Event coordinator will assume all responsibility for alcohol the County Parks & Recreation has stipulated that an ent organizers expense as part of the rental agreement and I determine how the event should be staffed. The Lee Couthe venue for public safety. All amplified sounds must adherent should be staffed. | e is not responsible that is being served extra duty detail mus d the Lee County unty Sheriff's Office |
| | Print Name: Signature: | P. Cummins | |
| | Title: | Commandel | |
| | Date: | 11 16 23 | |
| | and the state of t | Page 6 | |



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 EVENT PERMIT

□ USE OF COUNTY PROPERTY PERMIT

| □ PERMIT TO □ FILM PERM | SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES | |
|----------------------------|---|--|
| AFTER REVIEWING THE A | PPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR UIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. | |
| Fire Guards (How Many?) | None | |
| Fee for Services: | None | |
| Flammable Vegetation: | Not Permited | |
| First Aid Equipment: | N/A | |
| Fire Extinguishing: | On Site | |
| Special Arrangements: | None | |
| , | Print Name: William Underwood Signature: Fire Chief Date: 11/02/2023 | |



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

| | Check the | appropriate | boxles |) below |
|--|-----------|-------------|--------|---------|
|--|-----------|-------------|--------|---------|

- □ 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.

| Treatment Facilities: | None necessary. | | | |
|----------------------------------|---|--|--|--|
| Medical Personnel: | None necessary. | | | |
| Medical Supplies / Equipment: | None necessary. | | | |
| Safety Requirements: | Applicants shall foll concerning health congregating at the | and safety, especially with | ectives, and the Florida Gove regards to COVID-19 and th | ernor's Executive Orders e number of people |
| Fee for Services | Not applicable. | | | |
| Special Arrangements: | Please call 911 in t office at EMSDetail | he event of an emergency. l@leegov.com. | To arrange special event or | overage, contact our |
| | Print Name: | Douglas B. Higgins | | |
| | Signature: | 77-Blip | Digitally signed by Captain Douglas B. Higgins Date: 2023.11.13 12:55:52 -05'00' | |
| | Title: | Captain, EMS Operations | | |
| | Date: | November 13, 2023 | | |



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

| Check the appropri | ate box(es) bel | '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 | 1IT | |
| | | LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY 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 Coun | ty Sheriff's Office for assistance with traffic control as needed. |
| | Emergency vehicle maintained roads. | access and public vehicular access shall be maintained on all surrounding Lee Count |
| | | |
| | | |
| | Print Name: | Nathan Thoman |
| | Signature: | Nathaniel C. Thoman Date: 2023.11.17 09:04:09 - 05'00' |
| | Title: | Project Manager |
| | Date: | 11/17/2023 |
| | | |



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

| Check the appropri | ate box(es) belo | ow: |
|---|---|---|
| ☐ SPECIAL EV | ENT PERMIT | |
| □ USE OF CO | UNTY PROPERTY | PERMIT |
| | SELE-AND CONSU | JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES |
| FILM PERM | IIT | |
| AFTER REVIEWING THE WILL REQUIRE THE APP | APPLICATION, P LICANT TO COMP | LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT. |
| Illumination: | The event organize | r will need to provide supplemental safety and security lightning. |
| Parking Areas: | Road. The event or | se the designated parking areas located through the main entrance off of Bayshore ganizer must work with onsite staff to ensure vehicles do not block driveways and so emergency vehicles have clear access. |
| Special Arrangements: | litter control and d staff to designate t contained within ti | er is responsible for providing adequate staff/volunteers throughout the event for ebris clean up during and after the event. The event organizer must work with onsite he collection areas for debris/trash during and after the event. Alcohol must be he main Civic Center building. Additionally, the event organizer must adhere to all not the signed agreement |
| | Print Name: | Colleen Via |
| | Signature: | Calleen Via |
| | Title: | Operation Manager |
| | Date: | 11/14/2023 |
| | - Richardo 11p12024 | z Lucia tredding Page 10 |



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

| Check the appropriate | e box(es) belo | ow: |
|--|--|--|
| ☐ SPECIAL EVEN | IT PERMIT | |
| ☑ USE OF COUN | ITY PROPERTY | PERMIT |
| ▼ PERMIT TO SE ■ Continue To the second seco | LL AND CONSU | JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES |
| FILM PERMIT | | |
| AFTER REVIEWING THE AI | PPLICATION, P ANT TO COMP | LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT. |
| | | |
| i de la companya de | occurrence to pro | 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. |
| - 0 | (\$1,000,000) per (| Liquor Liability insurance will be required with minimum limits of One Million Dollars occurrence. Should Host Liquor Liability coverage be afford under the Commercial policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate. |
| Special Arrangements: | A Certificate of In | orusance shall be such that the |
| | the certificate ho subrogation with | isurance shall be submitted as evidence of the required coverage listing Lee County, of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as lder and as an automatic additional insureds and includes an automatic waiver of a regard to general liability. The certificate holder is an additional insured on a primantory basis with regards to general liability. |
| | Subject to proof | of insurance. |
| | | |
| | Print Name: | Mike Figueroa |
| | Signature: | This foir- |
| | Title: | Risk Program Manager |
| | Print Name: Signature: | Mike Figueroa This Join — |

November 13, 2023

Date:



CERTIFICATE OF LIABILITY INSURANCE

10/30/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFTIRMATIVELY 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(les) must have ADDITIONAL INSURED provisions or be endorsed. It subprings to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate those not confer rights to the certificate holder in Reu of such endorsement(s).

Friction of the policy of the

| DO D- 1200 | | ADDMESS: MICHIGA | | | | | |
|---|--|--|--|---|--|--|--|
| PO Pox 1799 | | | MENTS AFFORDING COVERAGE | NA)C / | | | |
| Grace Valley | CA 95945 | POSUMEN AT EVANSION | Insurance Company | 35378 | | | |
| Limina | | PASUMER B: | | - | | | |
| Yahira Gornaz-Sanliago | | PISUPER C: | | | | | |
| Lucia Santiago A Ricardo Gomez | | PYSUMER D: | | | | | |
| 11344 Surray Dr | | PENMER E: | | | | | |
| Bonita Springs | FL 34135 | PISUMEN F: | | | | | |
| | ATE NUMBER: | | REVISION NUMBER: | | | | |
| THIS IS TO CERTIFY THAT THE POUCIES OF IP INDICATED MOTWITHSTANDING ANY REQUIR CERTIFICATE MAY BE ISSUED OF MAY PERTAD CLUSIONS AND CONDITIONS OF SUCH POLICE. | EMENT, TERM OR CONDITION AIN, THE INSURANCE AFFORDI JES. LIMITS SHOWN MAY HAVE | OF ANY CONTRACT OF BY THE POLICIES BEEN REDUCED BY PA | OR OTHER DOCUMENT WITH RESPECT TO AL DESCRIBED HEREIN IS SUBJECT TO AL AID CLAIMS. | O WHICH THIS | | | |
| LTR TYPE OF PIELMANCE NSD | | POUCY EFF | POUCY EXP | | | | |
| DANCEMEN X DOWN | | | EACH OCCUMPENCE 1 | 1,000,000 | | | |
| X Host Unior Liability | | | | 5,000 | | | |
| A Retail Liquor Liability Y | Y 3DS5474-M3447545 | 01/05/2024 0 | 11/07/2024 PERSONAL & ADV PAURY 8 | 1,000,000 | | | |
| CEM ACCRECATE LIMIT MYLIES PER | | 12.01 AM | 12.01 AM GENERAL AGGREGATE S | 2,000,000 | | | |
| X rougy Too | | | PRODUCTS - COMPIOP AGG 3 | 2,000,000 | | | |
| DIVER | | | Deductible 8 | 1,000 | | | |
| AUTOWORLE LIAMANTY | | | COMBINED SPICE LIMI 8 | | | | |
| ANY AUTO | | | BOOILY BLAUTY (For porton) 3 | | | | |
| OWNED SOEDULED AUTOS | 1 | | BODILY INJURY (Per accessor) \$ | | | | |
| MONOWNED | | | PROPERTY DAMAGE 8 | | | | |
| AUTOS D'AV AUTOS D'AY | | | 3 | | | | |
| United OCCUPY | | | EACH OCCURRENCE 3 | | | | |
| EXCESS LIAB CLANGS MADE | | | AGGREGATE S | | | | |
| | | | 3 | | | | |
| DED RETENTION | | | STATUTE LER | THE REAL PROPERTY OF THE PARTY | | | |
| AND EMPLOYERS LIABILITY Y/N | | | EL EADIACCIDENT S | *************************************** | | | |
| DYTICEN CLUBER DICLIDED? | | | EL DISEASE - EA ENTLOYEE S | | | | |
| Fym. Ometic union | | | | | | | |
| DESCRIPTION OF DETRATIONS below | | | EL DISEASE - POLICY LIMIT 8 | | | | |
| | | | | | | | |
| DESCRIPTION OF DEPARTIONS / VENEUES (ACORD 181, Additional Remarks Schedule, may be stacked 8 more space in required) Certificate holder insted below is named as additional insured per attached MEGL 2217 0.19, Attendance; 650, Event Type; Wedding, Waiver of Subrogation applies per attached CG 20 01 24.13, Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials are automatic additional insureds. The certificate holder is an additional insured OK 11/13/2023 This Lee Lee County of the State of Florida, its agents, employees, and public officials are automatic additional insureds. The certificate holder is an additional insured. | | | | | | | |
| | | | | | | | |
| CERTIFICATE HOLDER | | CANCELLATION | The state of the s | | | | |
| Lee County a political subdivision and Charter County of the | | THE EXPIRATION ACCORDANCE WITH | HE ABOYE DESCRIBED POLICIES DE CAN DATE THEREOF, NOTICE WILL DE NITHE POLICY PROYISIONS. | | | | |
| State of Florida | | AUTHORIZED REPRESENT | TATIVE / 11 14 | | | | |
| P.O. Box 398 | | | Will Maddingo | | | | |
| | | I | 1/1/11 110200 | | | | |

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ACORD 25 (2016/03)

Fort Myors

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FL 33902





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 a political subdivision and Charter County of the State of Florida P.O. Box 398 Fort Myers, FL 33902 |
| |
| |
| |

- 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.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

(1) The additional insured is a Named Insured under such other insurance; and

(2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured. POLICY NUMBER: 3DS5474-M3447545

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

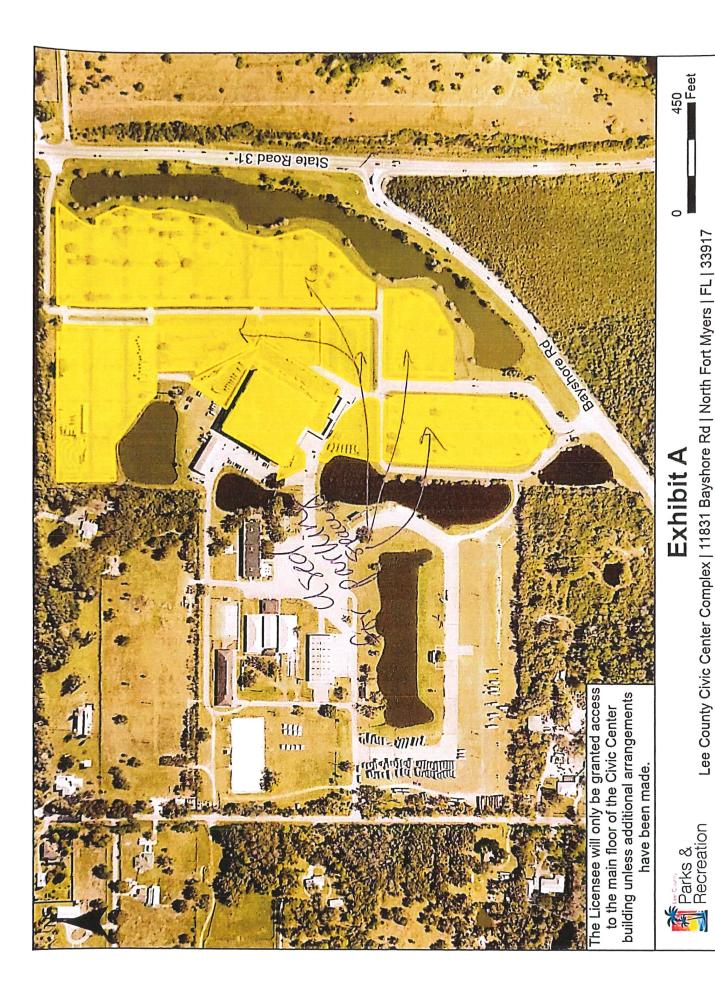
COMMERCIAL GENERAL LIABILITY COVERAGE PART ELECTRONIC DATA LIABILITY COVERAGE PART LIQUOR LIABILITY COVERAGE PART POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART RAILROAD PROTECTIVE LIABILITY COVERAGE PART UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

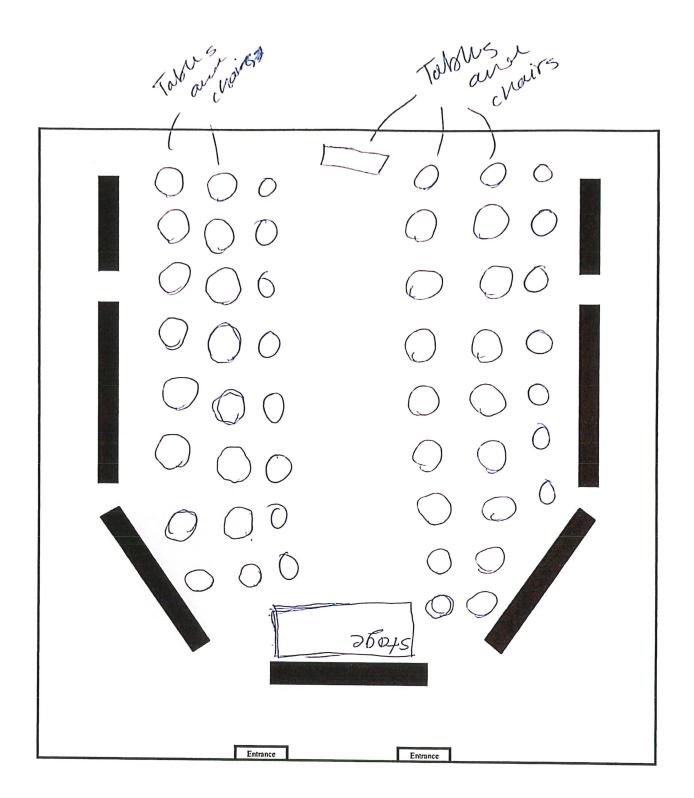
SCHEDULE

| Name Of Person(s) Or Organization(s): |
|--|
| Lee County |
| a political subdivision and Charter County of the |
| State of Florida |
| P.O. Box 398 |
| Fort Myers, FL 33902 |
| |
| |
| |
| |
| |
| |
| |
| |
| Information required to complete this Cabadula, if yet shows above will be shown in the Danlandian |
| Information required to complete this Schedule, if not shown above, will be shown in the Declarations. |

The following is added to Paragraph 8. Transfer Of Rights Of Recovery Against Others To Us of Section IV – Conditions:

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.





^{**}The shaded black rectangles are the folded in bleachers. The use of the bleachers and/or catwalk are prohibited for all events.**

Schroeder, Brianna

From:

Yahira Gomez Santiago < Yahirags@outlook.com>

Sent:

Tuesday, December 5, 2023 12:17 PM

To:

OccsZoning

Subject:

RE: Event Application Submission

Categories:

Green category

Caution: This email originated from an external source. Be cautious of attachments and links, and do not provide login information. Report suspicious activity to the Service Desk: servicedesk@leegov.com or 533-HELP.

Hello,

The Event Description is supposed to state as follows:

Friday, January 5th from 4 pm to 6 pm the center will be decorated and set up for the wedding. From 9 am to 3 pm on Saturday, January 6th, the center will be set up even more items such as instruments, food, beverages will be brought. From 3 pm to 12 am the reception will occur.

The reception is for January 6th, from 3 pm to 12 am. We will be present before that from 9 am to 3 pm.

Thank you for your help!

From, Yahira Gomez-Santiago (239) 405-0201 Yahirags@outlook.com

From: OccsZoning

Sent: Tuesday, December 5, 2023 11:24 AM

To: <u>Yahira Gomez Santiago</u> Cc: Jenkins-Owen, Sharon

Subject: RE: Event Application Submission

Hello,

Thank you, I have adjusted this on the packet.

As I was getting the packet ready to send out, I had just noticed a portion of the information for Hours of Operation has been cut off. When you have a chance, to ensure County Admin has all of the correct information, can you please verify what it is supposed to be?

Also, can you verify that the reception is from 3pm-12am?

Sent from my T-Mobile 5G Device

Get Outlook for Android

From: OccsZoning < OccsZoning@leegov.com > Sent: Tuesday, December 5, 2023 6:46:31 AM

To: Yahira Gomez Santiago < Yahirags@outlook.com> Cc: Jenkins-Owen, Sharon <SJenkins-Owen@leegov.com>

Subject: RE: Event Application Submission

Good morning,

We have received the Special Event Packet, can you please verify if you selling and consuming the alcohol, serving and consuming or both? Both of them were marked and I just wanted to verify if this is correct prior to sending this to County Admin for their sign off.

Thank you,



Brianna Schroeder Customer Service Specialist, Regulatory Review

Department of Community Development

1500 Monroe St, Fort Myers, FL 33901

office: (239) 533-8329

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

Connect With Us On Social Media









From: Yahira Gomez Santiago < Yahirags@outlook.com>

Sent: Monday, December 4, 2023 9:26 PM To: OccsZoning < OccsZoning@leegov.com > Subject: Event Application Submission

Caution: This email originated from an external source. Be cautious of attachments and links, and do not provide login information. Report suspicious activity to the Service Desk: servicedesk@leegov.com or 533-HELP.

Good Evening Lee Zoning Department,

I am submitting a completed event application for an event that will be taking place on January 6th, 2024 at the Lee Civic Center. Please let me know if I need to do or submit any other information in addition to the information provided in the application. Thank you.

From, Yahira Gomez-Santiago (239) 405-0201