

## **EVENT PERMIT**



Ordinance 17-08

## Paranormal Cirque III

**PERMIT NUMBER:** 

TMP2023-01280

Date(s) of Event:

January 11, 2024 from 6:00PM until 10:30PM

January 12, 2024 from 6:00PM until 10:30PM

January 13, 2024 from 12:00PM until 10:30PM

January 14, 2024 from 12:00PM until 10:30PM

January 15, 2024 from 6:00PM until 10:30PM

Property Owner:

LEE COUNTY

Applicant:

Manuel Rebeccchi

941-539-3596

Description:

Temporary Acrobatic Theatrical Cirque Show under a tent. A total of two tents; Tent 1 is for the 42ftx110ft Entrance Tent and Tent 2 is for the Main 131ft Round tent. There will be

no animals, rides, alcohol, open fires, pyro, street closures, and parades.

Location of event:

11500 FENWAY SOUTH DR, FORT MYERS, FL 33913

JetBlue 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

Date

ftmpprmt\_specialevent.rpt



## **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Paranormal Cirque III



#### **Event Application**

## Check the appropriate box(es) below:

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

Section I - GENERAL INI	ORMATION (All Permit Types)				
Title of Event / Name of Production	Paranormal Cirque III				
Date(s) of Event / Production:	Jan 11 - Jan 15, 2024				
Location(s) of Event:	Jet Blue Park - 11500 Fenway Park South Dr. Fort Myers, FL 33913				
Name of Applicant:	Cirque Entertainment VI, LLC / Manuel Rebecchi				
Applicant Address:	2903 9th St W. Bradenton, FL 34205				
Applicant Phone Number:	941-539-3596				
Contact Person: (If different from applicant)	Same as applicant				
Contact Phone Number: (If different from applicant)	Same as applicant				
Email Address:	rosa@cirqueitalia.com				
Estimated Attendance:	300 per show				
Event Description: Include each activity, when activities take place, etc.	Temporary Acrobatic Theatrical Cirque Show under a tent Set up of 2 Tents for an event on the parking lot - (Paranormal Cirque III) Tent #1 - Entrance Tent 42ft X 110ft / Tent #2 - Main Tent 131ft Round No Animals, No Rides, No Alcohol, No Open Fires, No Pyro, No Street Closures, No Parades.				
Hours of Operation:	Thu & Fri 6pm to 10:30pm Sat & Sun Noon to 10:30 pm  **(See Schedule Attached)**				
STRAP # of Parcel:					
Owner of Premises*:	Boston Red Socks / NESV Florida Real Estate				

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

#### Fort Myers, FL

When: January 11<sup>th</sup> – 15<sup>th</sup>, 2024

Where: 11500 Fenway South Drive, Fort Myers, FL 33913

At: JetBlue Park

- Under the stunning White & Black Top Tent
- Jan. 11 Thursday: 7:30pm
- Jan. 12 Friday: 7:30pm
- Jan. 13 Saturday: 6:30pm & 9:30pm
- Jan. 14 Sunday: 5:30pm & 8:30pm
- Jan. 15 Monday: 7:30pm (MLK Day)



What is the Zoning Classification of th	e premises? Commercial			
Are any temporary structures to be in:	stalled for the event? VYes No	Type: 2 Tents		
Do you have the appropriate permits f	or the temporary structures?	▼ Yes   No		
* For a 'Special Event' and 'Use of Couldentified, including all parking areas.	nty Property' permit, submit a site plan wi	th all proposed facilities and activities		
Insurance Company Insuring the Even	t:			
Note: Certificate of Insurance must be submitt	ed at time of application			
Surety Company Bonding this Event (N	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 ☐ No		
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:	We are the only vendor at the event, we ha refreshments. ( We serve mostly l	ave 2 concessionTrailers. Where we sell Pre - Packaged Store Bought Items )		
Type of Food being Served: Popcorn Bottled V	, Cotton Candy, Sno Cones, Slushes, Hotd Vater, Bottled Soda, Lemonade.	logs, Nachos w/ cheese,		
Section II - USE OF COUNTY P  Organization Sponsoring the Event:	ROPERTY PERMIT rque Entertainment VI, LLC / Manue	el Rebecchi / Paranormal Cirque III		
Section III - SALE/CONSUMP	TION OF ALCHOLIC BEVERAGES F	PERMIT		
Is alcohol being sold/consumed on Co				
	d. Only non-profit organizations can sell alcohol on County	Yes No		
Non-profit certificate/registration nur (Required if alcohol is to be <u>SOLD</u> at the event)		o Alcohol, No Open Fires, No Pyro,		
Please note: A permit from the State of Florida further details	Division of Alcoholic Beverages and Tobacco may a			



Тур	e of Production (choose all tl	ıat ap	ply):						
	TV Movie or Special	Г	TV Series / Pilot	T	TV	Commerc	ial	Still Photos	
Γ	Public Service Announcemen	nt [	Industrial / Documentary	V		**Cir	cus	Event - Temporary 4 da al Cirque Show under a	ly Acrobation tent**
Wil	l any of the following be need	ded or	included*?						
	Street Closure				Г	Yes	V	No	
	Traffic / Crowd Co	ntrol			,	Yes	V	No	
	Fire or Burning					Yes	V	No	
	Explosives or Pyro	techn	ics		, 	Yes	V	No	
	Animals, Large or	Small			_	Yes	1.7	No	
	Construction of A	ny Kin	d**Set up of 2 Tents for the	event*	V	Yes	<u></u>	No	
	Large and/or Num	erous	Vehicles	Ovoine	F	Yes	V	No	
	Helicopters, Boats	, etc.			Г	Yes	V	No	
	Stunts				Г	Yes	V	No	
	Other				V	Yes	Г	No	
	Set up of 2 Tents for Th Temporary Acrobatic Th  Decial Parking Requirements:	eatrio			***************************************				
Γ	-		Andreas and an analysis of the second			Mai India di Santa Aliana	*********		And the Design
	N/A								
Ċ	ity or County Services Requir	ed: (P	ersonnel, equipment, facilit	ies. etc	.)				
100.000	N/A	Military and a second			- ,	and the second second second	uinternania.		Della Agrica
TI th	ne following information is re ne industry. If exact figures an	quire e not	d for local and state records available, please estimate a	on pro	duct ly as	tion in Flo possible.	rida	to track the economic	impact of
N	lumber in Cast:		Number in Crew:			Numbe	er of	locals hired:	
7	otal budget:	4	Estimate amount spe	ent in Le	ee Co	ounty:		N/A	
Н	otel room nights:	_	Number of shooting	days:					
	number of rooms	x numb	er of nighte			-	<del></del>		



#### 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

vvitnes

Manuel Rebedchi / Owner

Print Name of Applicant and Title

Print Name of Witness

11/28/2023

Date

11/28/2023

Date



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

Check the appropria	ite box(es) below:
	JNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking for event will be in authorized areas only & right-of-way must not be impeded.
Deputies (How Many?):	None are required for this event.
Fee for Services:	None are required for this event.
Special Arrangements:	Any amplified sounds must adhere to Lee County noise ordinances. According to the permit application no alcohol will be served.
	Print Name: P. Commins  Signature: Commins  Title: Commander

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.

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SPECIAL EVENT PERMIT

▼ USE OF COUNTY PROPERTY PERMIT

FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

THE ALL	ICANT TO COMPL	WITH FOR THEIR E	EVENT.	
Fire Guards (How Many?)	AT LEAST 2 PER SHC	W		and the second of the second o
Fee for Services:	\$450.00 PAID		and the second s	
Flammable Vegetation:	NA			
First Aid Equipment:	CALL 911 IF NEEDEC	)		
Fire Extinguishing:	ALL EXTINGUISHERS	MUST BE MOUNTED PI	ROPERLY AND HAVE CURRENT INSI	PECTION TAG.
Special Arrangements:	LATER THAN 3PM TH	HE DAY THE SHOW OPE	23 TO SCHEDULE INSPECTION. THI NS (JAN. 11) BUT PREFER IT OCCUF DNE FROM SHOW MUST ACCOMPA	RONE DAY PRIOR TO DAY
	Print Name:	Nate Burley		_
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2023.12.01 14:52:58 -05'00'	_
	Title:	Division Chief - Fire &	Life Safety	_
	Date:	12/01/2023		



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

Check	the	appropriate	box	es,	bel	ow:
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- 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	QUIRE THE APPLIC	ANT TO COMPLY WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	Applicants shall fol Orders concerning people congregatir	low all CDC and FDOH directives, and the Florida Governor's Executive health and safety, especially with regards to COVID-19 and the number of ag at the event.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in t office at EMSDetai	he 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 Date: 2023.12.06 11:28:28 -05'00'
	Title:	Captain, EMS Operations
	Date	December 6, 2023



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

Check the appropriate be	ox(es) below:
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SPECIAL EVENT PERMIT

☐ USE OF CO	UNTY PROPERTY	PERMIT
FILM PERM		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, F LICANT TO COMF	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 estab	olished means of ingress and egress.
Special Arrangements:		nty Sheriff's Office for assistance with traffic control as needed.  e access and public vehicular access shall be maintained on all surrounding Lee d roads.
	Print Name:	Nathan Thoman
	Signature:	Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2023.11.30 07:08:52 -05'00'
	Title:	Project Manager
	Date:	11/30/2023



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

	UNTY PROPERTY PERMIT  SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES  MIT
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Illumination:	All illuminations must follow county ordinance and FAA regulations. Event organizer must provide their own temporary lighting as needed for safety during event set up and breakdown.
Parking Areas:	Event organizer is responsible to direct patrons to the designated parking locations. Must work with on- site staff to ensure that vehicles do not block driveways and private roadways so emergency vehicles have clear access. Organizer must provide adequate staff/volunteers along with directional signage for the event.
Special Arrangements:	Event organizer is responsible to provide adequate staff/volunteers throughout the event for litter control and debris clean up during and after the event. Work with Red Sox staff and the on-site park staff to designate the debris/trash collection area during and after the event.  Participants and spectators must disperse and leave the park area to seek safe shelter in their vehicles during lightning alerts and threatening weather.
	Print Name: Alise Flanjack  Signature: Alse Flanjack  Title: Deputy Director  Date: 12/8/2023



#### LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4<sup>TH</sup> FLOOR **2115 SECOND STREET** FORT MYERS, FLORIDA 33901 (239) 533-2221

Check the	appropriate	box(es	) below:
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oneek the appropria	te box(es) below.
	NT PERMIT
□ USE OF COU	NTY PROPERTY PERMIT
F PERMIT TO S	ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	
AFTER REVUENDED THE	
WILL REQUIRE THE APPLIA	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
WILL REGOINE THE AIT EN	CANT TO COMPLE WITH FOR THEIR EVENT.
Insurance Requirements:	Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.
	Certificate Must Read As:
	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.
Special Arrangements:	A Certificate of Insurance shall be submitted as evidence of the very inches.

Special

of Insurance shall be submitted as evidence of the required coverage listing Lee County, a political subdivision and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured as listed above.

Subject to proof of insurance.

Print Name:	Mike Figueroa
Signature:	The frime
Title:	Risk Program Manager
Date:	December 1, 2023

RMALKOWSKI

ACORD

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/1/2023

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). CONTACT Rolanda Malkowski Kaliff Insurance PHONE (A/C, No, Ext): (210) 829-7634 FAX (A/C, No): 2009 N.W. Military Hwy San Antonio, TX 78213 E-MAIL ADDRESS: rolanda@kaliff.com **INSURER(S) AFFORDING COVERAGE** NAIC # INSURER A: Everest National Insurance Company 10120 INSURED INSURER B: Cirque Show & Equipment, LLC Cirque Entertainment VI, LLC INSURER C: Paranormal III 2903 Ninth Street W INSURER D: Bradenton, FL 34205 INSURER E: INSURER F: **COVERAGES CERTIFICATE NUMBER:** REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER Α Χ COMMERCIAL GENERAL LIABILITY 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE X OCCUR SI8ML03177-231 300,000 9/30/2023 9/30/2024 \$ Excluded MED EXP (Any one person) 1,000,000 PERSONAL & ADV INJURY 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE X PRO-JECT 1,000,000 POLICY PRODUCTS - COMP/OP AGG OTHER: COMBINED SINGLE LIMIT (Ea accident) 1,000,000 AUTOMOBILE LIABILITY ANY AUTO SI8ML03177-231 9/30/2023 9/30/2024 BODILY INJURY (Per person) \$ SCHEDULED AUTOS OWNED AUTOS ONLY BODILY INJURY (Per accident)
PROPERTY DAMAGE
(Per accident) HIRED AUTOS ONLY NON-OWNED AUTOS ONLY UMBRELLA LIAB OCCUR EACH OCCURRENCE **EXCESS LIAB** CLAIMS-MADE AGGREGATE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY PER STATUTE ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
ADDITIONAL INSURED AS RESPECTS TO INSURED'S OPERATIONS AS CONTRACTUALLY OBLIGATED: 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. Event Dates: January 7 - 16, 2024 (dates include load in & load out) OK 12/01/2023 CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lee County, a political subdivision and Charter County of the State of Florida P.O. Box 398 **AUTHORIZED REPRESENTATIVE** Fort Myers, FL 33902

#### **Additional Named Insureds**

#### Other Named Insureds

Alcatraz

Doing Business As

Cirque Entertainment II, LLC

Additional Named Insured

Cirque Entertainment III, LLC

Limited Liability Company, Additional Named Insured

Cirque Entertainment IIII, LLC

Additional Named Insured

Cirque Entertainment, LLC

Additional Named Insured

Cirque Italia

Doing Business As

Cirque Italia, LLC

Paranormal Cirque

Doing Business As

Cirque Entertainment V, LLC

Paranormal Cirque II

Cirque Entertainment VI, LLC

Paranormal Cirque III

OFAPPINF (02/2007)

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