

EVENT PERMIT



Ordinance 17-08

United Sates Open Baseball / Fantasy Camp

PERMIT NUMBER:

TMP2024-00002

Date(s) of Event:

January 21, 2024 until January 27, 2024

Property Owner:

CITY OF FORT MYERS

Applicant:

Jay Harris

000000000

Description:

Playing baseball from 9:00AM until 4:00PM and will be setting up at 8:00AM

Location of event:

4301 EDISON AVE, FORT MYERS, FL 33916

Player Development 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?

Sold and 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 Manager

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

United States Open Baseball | Fantasy Camp



Event Application

Check the appropriate box(es) below:

F SPECIAL EVENT PERMIT

USE OF COUNTY PROPERTY PERMIT

PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	UNITED STATES CHEN BASEBOLL FANTOS & COMO
Date(s) of Event / Production:	United States Open Baseball Fortosa Compo San 21-26, 2024
Location(s) of Event:	Player Dove apment Center
Name of Applicant:	Jay Harris
Applicant Address:	1729 YORK Ro, Sute 210, Lotham He, MD 21093
Applicant Phone Number:	
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	Joya hapreuspanutus, con
Estimated Attendance:	120 pap/9
Event Description: Include each activity, when activities take place, etc.	Joya harruppanutens, Can 120 peop 19 ploy bossesoul from 9 Am 42m
Hours of Operation:	8 Am 4 PM
STRAP # of Parcel:	
Owner of Premises*:	

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

Schroeder, Brianna

From:

OccsZoning

Sent:

Monday, December 18, 2023 1:23 PM

To:

Adorno, Nicholas; misterjayharris@gmail.com

Cc:

Jenkins-Owen, Sharon

Subject:

RE: Lee Co. App

Hello Nicholas,

Thank you for confirming the dates and providing the packet. The only thing we are missing is the signed Liability Insurance from Risk Management.

I have reached out to Mike from Risk Management in regards to this and as soon as he gets back to us, we will send this out for County Admins 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: Adorno, Nicholas <NAdorno@leegov.com> Sent: Monday, December 18, 2023 10:11 AM

To: OccsZoning < OccsZoning@leegov.com>; misterjayharris@gmail.com

Cc: Jenkins-Owen, Sharon <SJenkins-Owen@leegov.com>

Subject: RE: Lee Co. App

Good Morning,

I reached out to Jay this morning but was unable to get in touch with him. However, I can tell you that the dates for this event are January 21, 2024 – January 27, 2024. Also, I have attached his full special event application in this email, page 11 is the approval signed by Mike Figueroa and the final page is the actual liability insurance.

Let me know if there is anything else you need from him.

Thank you!



What is the Zoning Classification of the	ne premises?	
Are any temporary structures to be in	stalled for the event? Yes No	Туре:
Do you have the appropriate permits		⊤Yes
* For a 'Special Event' and 'Use of Cou identified, including all parking areas.	inty Property' permit, submit a site plan w	th all proposed facilities and activities
Insurance Company Insuring the Even	ot:	
Note: Certificate of Insurance must be submitted	ted at time of application	
Surety Company Bonding this Event (Name and Address):	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
┌ Yes ┌ No	┌ 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:	JAY HARRIS ENTERPS	ROSE /NC
Type of Food being Served:	SAY MARRIS ENTERPY ON THENTAL BREAKEAST AND	s LUNCH
Section II - USE OF COUNTY P Organization Sponsoring the Event:	ROPERTY PERMIT	
s alcohol being sold/consumed on Cou f Yes, then a "Lee County Alcohol Permit" is required Non-profit certificate/registration num Required if alcohol is to be <u>SOLD</u> at the event)	. Only non-profit organizations can sell alcohol on County	Yes No Property.
riease note: A permit from the State of Florida I urther details	Division of Alcoholic Beverages and Tobacco may al	so be required; please call (239) 344-0885 for



Type of Production (choose all that apply):		
TV Movie or Special TV Se	eries / Pilot	TV Commercial Still Photos
☐ Public Service Announcement ☐ Indust	trial / Documentary	Other:
Will any of the following be needed or include	ed*?	
Street Closure		☐ Yes No
Traffic / Crowd Control		☐ Yes ☐ No
Fire or Burning		☐ Yes ➡ No
Explosives or Pyrotechnics		√ Yes ເ≧ No
Animals, Large or Small		Yes No
Construction of Any Kind		√ Yes No
Large and/or Numerous Vehicle	25	☐ Yes ☐ No
Helicopters, Boats, etc.		☐ Yes ☐ No
Stunts		Yes No
Other		┌ Yes │ No
* For any marked Yes, provide further details		
Special Parking Requirements:		
City or County Services Required: (Personne	l, equipment, facilities, etc.)	
The following information is required for locathe industry. If exact figures are not available	al and state records on prod e, please estimate as closely	uction in Florida to track the economic impact of as possible.
Number in Cast:	Number in Crew:	Number of locals hired:
Total budget:	Estimate amount spent in Lee	County:
Hotel room nights:	Number of shooting days:	



Type of Production (choose all that apply):					
TV Movie or Special TV	/ Series / Pilot	Г	TV Commercial	☐ Still Photos	
Public Service Announcement Ind	lustrial / Documentary	Γ	Other:		
Will any of the following be needed or inclu	nqeq*5				
Street Closure			☐ Yes □	No	
Traffic / Crowd Control				r No √ No	
Fire or Burning			10	√ No	
Explosives or Pyrotechnics				√ No	
Animals, Large or Small				7 No	
Construction of Any Kind			☐ Yes ☐		
Large and/or Numerous Vehi	cles			· No	
Helicopters, Boats, etc.				No	
Stunts			Yes	No No	
Other			「 Yes ┌	No	
* For any marked Yes, provide further deta			, , , , ,	,,,	
Special Parking Requirements:					
City or County Services Required: (Person	nel, equipment, facilitie	s, etc.)			
The following information is required for lot the industry. If exact figures are not availal	ocal and state records o	n n===d		a to track the economic impac	t of
Number in Cast:	Number in Crew:			· locals hired:	
Total budget:	Estimate amount spent	in Lee			
Hotel room nights:	Number of shooting da				
number of rooms x number of nigh		, = -	-		



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.

Jay Harns.	DWQVI
Signature of Applicant	Witness
Print Name of Applicant and Title	Print Name of Witness
10/17/23 Date	10-17-23 Date



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

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

Check	the appropriate box(es) below:

FILM PERMIT

▼ USE OF COUNTY PROPERTY PERMIT

WILL REQUIRE THE APP	E APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLICANT 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 are required for this event.
Special Arrangements:	Beer only consumption in the locker room during established times. Alcohol must not leave the confines of the locker room. Consumption will be monitored by the event staff who will be responsible for ensuring anyone consuming alcohol is of legal age and is not overserved.
	Print Name: Aumanias Signature: Commandes Title: Commandes
	Date: 10 19 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 appropriate box(es) helow:

 we appropriate box(e3) below.
SPECIAL EVENT PERMIT
S USE OF COUNTY PROPERTY PERMIT
SPERMIT TO SHELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FII M PERMIT

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

Fire Guards (How Many?)	NA
Fee for Services:	NA
Flammable Vegetation:	10/14
First Aid Equipment:	NA
Fire Extinguishing:	when using grill for cooking, ensure a Minimum 2A-103C Fire Extinguisher is Present and Entlish Protected To Present accidental contact by Attendeds
Special Arrangements:	Grill also needs to be a minimum of 10 Just Som any building or other types of exposures.
	Print Name: Charlopher Muluey Signature: Charlopher Dome, dage
	Title: Assistant Fire Monthalt Date: 10-18-2023



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

Check the appropriate box(es) below:

- F 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.

Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	Applicants shall for Orders concerning people congregation	llow 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 office at EMSDeta	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 agried by Diviglas B. Higgins: On on Douglas B. Higgins On on Douglas B. Higgins On on Douglas B. Higgins Div. on Douglas B. Higgins Di
	Title:	Captain, EMS Operations
	Date:	October 17, 2023



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

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

Check the	appropriate i	box(es) below:
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SPECIAL EVENT PERMIT

□ USE OF COUNTY PROPERTY PERMIT

ЛIT		
E APPLICATION, I LICANT TO COMI	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZ PLY WITH FOR THEIR EVENT.	ATION
No event parking	is permitted in Lee County maintained road right of ways.	-
Please use all esta	blished means of ingress and egress.	
Emergency vehicle	e access and public vehicular access shall be maintained on all surrounding Lee	
Print Name:	Nathan Thoman	
Signature:	Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2023.10.24 10:52:22 -04'00'	
Title:	Project Manager	
Date:	10/24/2023	
	APPLICATION, I LICANT TO COMI No event parking i Please use all esta Shall use Lee Cour Emergency vehicle County maintained Print Name: Signature: Title:	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZ LICANT TO COMPLY WITH FOR THEIR EVENT. No event parking is permitted in Lee County maintained road right of ways. Please use all established means of ingress and egress. Shall use Lee County Sheriff's Office for assistance with traffic control as needed. Emergency vehicle access and public vehicular access shall be maintained on all surrounding Lee County maintained roads. Print Name: Nathan Thoman Signature: Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2023.10.24 10:52:22-04/00' Title: Project Manager



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

Check the appropr	iate box(es) b	elow:					
☐ SPECIAL E	VENT PERMIT						
·	OUNTY PROPERT	'Y PERMIT					
		ISUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES					
FILM PERN		THE COUNTY ACIDITIES					
AFTER REVIEWING THE WILL REQUIRE THE APP	E APPLICATION, PLICANT TO COM	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION IPLY WITH FOR THEIR EVENT.					
Illumination:	N/A - Daytime event						
Parking Areas:	N/A						
Special Arrangements:	The consumption	of alcohol is restricted to the confiner of the Locker Dearway and Loc					
, and an arrangements.	The consumption of alcohol is restricted to the confines of the Locker Room area at the Player Development Complex. Alcohol is not permitted on the Patio, Bleacher areas or Dugouts. Event organizer must be present to ensure that players consuming alcohol remain in the Locker Room area.						
	Participants and spectators must disperse and leave the park area to seek safe shelter in their vehicles						
	during lightning a	elerts and threatening weather.					
	•						
	Print Name:	Alise Flanjack					
	Signature:	Abré Flanjeck					
	Title:	Deputy Director					
	Date:	10/27/2023					

US Open Baseball Fantasy Camp Jan 20 - 28, 2024 8 am - 4 pm Player Development Complex

Page 10



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

Check the appropriat	te box(es) bel	low:					
SPECIAL EVE	NT PERMIT						
⋉ USE OF COU	NTY PROPERTY	PERMIT					
PERMIT TO S	ELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	/ FACILITIES				
FILM PERMIT	Г						
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS PLY WITH FOR THEIR EVENT.	YOUR ORGANIZATION				
Insurance Requirements:	Commercial general liability insurance to include participant legal liability coverage 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 I	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 subrogati 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:	nsurance shall be submitted as evidence of the required covion and Charter County of the State of Florida, P.O. Box 398 Ilder and as an additional insured as listed above.						
	Subject to proof of insurance.						
	,						
	Print Name:	Mike Figueroa					
	Signature:	This foir-					
	Title:	Risk Program Manager					
	Date:	October 24, 2023					



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/21/2024

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 be endorsed. If SUBROGATION IS WAIVED, subject to

	e terms and conditions of the policy e certificate holder in lieu of such end	, cei	tain p	policies may require an er					
PRODUCER				· /	CONTACT NAME:				
	SportsInsurance.com				PHONE 4 000 000 4700 FAX				
				E-	(A/C, No, Ext): 1-000-009-4703 (A/C No):				
P.O. Box 1155,					ADDRESS: info@sportsinsurance.com PRODUCER				
	Lake Placid, NY, 12946			Ci	CUSTOMERID :				
					INSURER(S) AFFORDING COVERAGE			NAIC#	_
INSUF				IN	ISURER A: Texa	16543	_		
	Jay Harris Enterprises Inc.			IN	INSURER B:				
	1729 York Rd., Suite 210			IN	INSURER C:				
	Lutherville, MD, 21093			IN	ISURER D:				
	Edition villo, IVID, 21000			IN	ISURER E :				
				IN	ISURER F:				
COVI	ERAGES CERT	IFIC	ATE N	NUMBER: A-SP-SI-23-10-0	5-288314		REVISION NUMBE	R:	
cor	IS IS TO CERTIFY THAT THE POLICIES OF INSURANCE I NOTION OF ANY CONTRACT OR OTHER DOCUMENT WITH E TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLIC	RESE	PECT TO	WHICH THIS CERTIFICATE MAY BE ISSU	ED OR MAY PERT				
INSR I TR			SUBR W/D		POLICY EFF (MMDDYYYY)	POLICY EXP (MM/DDYYYY)	LIM	TO	-
	GENERAL LIABILITY			POLICY NUMBER		,	EACH OCCURRENCE	\$ 1,000,000.00	_
A -	X COMMERICAL GENERAL LIABILITY	Υ	N	BESGLPTNV011301_170012_02	01/21/2024	01/27/2024	DAMAGE TO PREMISES RENTED (Any one premises)	\$ 300,000.00	
	CLAIMS-MADE X OCCUR						MED EXP (any one person)	\$ 5,000.00	
	X INCLUDES ATHLETIC PARTICIPANTS						PERSONAL & ADV INJURY	\$ 1,000,000.00	
-							GENERAL AGGREGATE	\$ 3,000,000.00	
	GENERAL AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$ 2,000,000.00	
	X POLICY PROJECT LOC							\$	
	ANY AUTO HIRED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$	
	ALL OWNED NON-OWNED AUTO:			0			BODILY INJURY (Per person)	\$	
							BODILY INJURY (Per accident)	\$	
	SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
	UMBRELLA LIAB OCCUR			4			EACH OCCURRENCE	•	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
	DEDUCTIBLE						//OONLO/ITE	\$	
F	RETENTION \$	000		5				\$	
	WORKERS COMPENSATION						WC STATU- OTH- TORY LIMITS ER		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR PARTINER REXECUTIVE OFFICER MEMBER EXCLUDED? (Mandatory in N-I) If yes, describe under	N/A					E.L. EACH ACCIDENT	\$	
	SPECIAL PROVISIONS below						E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	
	OTHER Abuse/Molestation	Υ	N	BESGLPTNV011301_170012_02	01/21/2024	01/27/2024	Each Occurrence: \$ 25,000.00	Aggregate: \$ 50,000.00	
	SCRIPTION OF OPERATIONS / LOCATIONS / VEH								
Liability Policy Deductible: \$ 1000.00 per each bodily injury or property damage claim. ISO Occurrence form CG 00 04 01 13 and company's specific forms. Coverage for Participant Legal Liability requires that every participant signs a waiver/release. The certificate holder is named as Additional Insured with respect to negligent acts or (continued on next page)									
CED.	CERTIFICATE HOLDER CANCELLATION								
CER	TIFICATE HULDEK				CANCELLA	ATION		***************************************	

Lee County Board of County Commissioners

PO Box 398

Fort Myers, FL, 33902

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Mark Di Perno

OK 10/24/2023