

### **EVENT PERMIT**



Ordinance 17-08

### 2024 Ft Myers RV Show

**PERMIT NUMBER:** 

TMP2024-00016

Date(s) of Event:

January 25, 2024 - January 28, 2024

**Property Owner:** 

LEE COUNTY

Applicant:

Tammy Lull 813-741-0488

Description:

RV show with 9 dealers participating

Location of event:

11500 FENWAY SOUTH DR, FORT MYERS, FL 33913

JetBlue Park

Will the event be attended by 1000 or more people?

Yes

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

Pate

ftmpprmt\_specialevent.rpt



## **Event Application**

**Special Event** 

Use of County Property

Alcohol within Lee County Facilities

Film, Video & Photography

2024 Ft Myers RV Show

TMP2024-00016



### **Event Application**

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT
USE OF COUNTY PROPERTY PERMIT
$\hfill \square$ 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	2024 Ft Myers RV Show
Date(s) of Event / Production:	Jan 25th to Jan 28th , 2024
Location(s) of Event:	Jet Blue Park
Name of Applicant:	Florida RV Trade Assocaiation
Applicant Address:	10510 Gibsonton Dr Riverview , FL 33578
Applicant Phone Number:	813-741-0488
Contact Person: (If different from applicant)	Tammy Lull
Contact Phone Number: (If different from applicant)	
Email Address:	tammyL@frvta.org
Estimated Attendance:	12,500
<b>Event Description:</b> Include each activity, when activities take place, etc.	RV Show with 9 dealers participating
Hours of Operation:	Thurs - Sat 10am to 5 pm Sun 10 am to 4 pm
STRAP # of Parcel:	24-45-25-02-00006.0000
Owner of Premises*:	Jet Blue Park

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



What is the Zoning Classification of the	premises? Government / Re	ecreational Use
Are any temporary structures to be inst	alled for the event? 🗵 Yes 🗀 No	Type: <b>Tents</b>
Do you have the appropriate permits fo	r the temporary structures?	Yes No
* For a 'Special Event' and 'Use of Coundidentified, including all parking areas.  Insurance Company Insuring the Event:	ty Property' permit, submit a site plan wit	h all proposed facilities and activities
Note: Certificate of Insurance must be submitted		
Surety Company Bonding this Event (Na	ame 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:	Aramark	·
Type of Food being Served: Will b	e decided by Aramar	·k
Section II - USE OF COUNTY P	ROPERTY PERMIT	
Organization Sponsoring the Event:	lorida RV Trade Associ	ation
Section III - SALE/CONSUMPT	TION OF ALCHOLIC BEVERAGES P	PERMIT
Is alcohol being sold/consumed on Cou		× Yes No
	. Only non-profit organizations can sell alcohol on County	Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	nper:	
<b>Please note:</b> A permit from the State of Florida further details	Division of Alcoholic Beverages and Tobacco may a	lso be required; please call (239) 344-0885 for



pe of Produ	uction (choose all tha	t apply)	<b>:</b>				
TV Movie	or Special	ГТ	TV Series / Pilot	Г	TV Commer	rcial $ egthansim$	Still Photos
Public Ser	rvice Announcement	☐ In	ndustrial / Documentary	×	Other: RV	Show	
/ill any of th	e following be neede	d or inc	cluded*?				
	Street Closure				☐ Yes	▼ No	
	Traffic / Crowd Con	rol			Yes	⋉ No	
	Fire or Burning				┌ Yes	▼ No	
	Explosives or Pyrote	chnics			☐ Yes	⊠ No	
	Animals, Large or Si	nall			☐ Yes	⋉ No	
	Construction of Any	Kind			▼ Yes	┌ No	
	Large and/or Nume	rous Ve	hicles		▼ Yes	┌ No	
	Helicopters, Boats,	etc.			☐ Yes	ĭ No	
	Stunts				Yes	▼ No	
	Other				☐ Yes	▼ No	
Special Par	king Requirements:						
City or Cou	ınty Services Require	d: (Pers	sonnel, equipment, faciliti	ies, et	c.)		
The following	ing information is roo	uirad fa	or local and state records	00.00	aduation in [	Tlorido to t	regal, the accompanie improve t
			ailable, please estimate a				rack the economic impact c
Number in (	Cast:		Number in Crew:		Num	ber of loca	ls hired:
Total budge	et:		Estimate amount spe	ent in l	ee County:		
Hotel room	nights:		Number of shooting	days:	4	4 days	8
	number of rooms x	number o	of nights		_	J	



### **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.

his/her knowledge.	
The	Tally Llanga
Signature of Applicant	Witness 🖔
TAMMY LUI Regional Show Cor. Print Name of Applicant and Title	Patty Flanagan
Print Name of Applicant and Litre	Print Name of Witness 🗸
11-14-23	Wovember 14,2023
Date	Date /



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

Check the appropriate box(es) below:

F SPECIAL EV	ENT PERMIT
□ USE OF CO	UNTY PROPERTY PERMIT
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IΤ
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking for the event will be in authorized areas only. Right of way must not be impeded.
Deputies (How Many?):	None are required for this event.
Conservation	
Fee for Services:	None
e constant	TAOTIE
· 9	
Special Arrangements:	According to the vendor, alcohol will not be sold or consumed during the event. Traffic for the event should not impede the regular flow of traffic.
enemoty-temperature and the second se	Traine is the event chedia not impede the regular now of traine.
HE CONTROL OF THE CON	
GARCHARICA	
	Print Name: P. Commins
	Signature:
	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.

Check the appropriate box(es) below:

-	OUNTY PROPERTY	PERMIT		
FILM PERM  AFTER REVIEWING THE  WILL REQUIRE THE APPL	APPLICATION, PL		OW WHAT ARRANGEMENTS VENT.	YOUR ORGANIZATION
Fire Guards (How Many?)	N/A			
Fee for Services:	ALL FEES PAID			
Flammable Vegetation:	NO RUNNING EXHA	UST WITHIN 10' OF FLA	MMABLE VEGETATION	
First Aid Equipment:	CALL 911 IF NEEDED	)		
Fire Extinguishing:	TENTS TO HAVE APP	PRORIATE EXTINGUISHE	RS WITHIN INSPECTION DATE	
Special Arrangements:	1		OR TENT INSPECTION NO CLOSER T TO BE ABLE TO BE UTILIZED.	HAN 2 HRS FROM START
	Print Name:	Nate Burley		
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2024.01.10 14:31:32 -05'00'	_
	Title:	Division Chief - Fire & I	ife Safety	
	Date:	Jan. 10, 2024		



# 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.

Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:		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 at the event.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in t office at EMSDetai	the 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 12:21:56 -05'00'
	Title:	Captain, EMS Operations
	Date:	December 6, 2023



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

Check the appropri	ate box(es) bel	low:
· ·	UNTY PROPERTY SELL AND CONS	PERMIT UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION OLY 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:		nty Sheriff's Office for assistance with traffic control as needed.  access and public vehicular access shall be maintained on all surrounding Lee d roads.
	Print Name: Signature:	Nathan Thoman  Nathaniel C. Thoman  Digitally signed by Nathaniel C. Thoman Date: 2023.11.28 06:48:08 -05'00'
	Title: Date:	Project Manager  11/28/2023



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

Check the appropriate box(es) bei	ow:
SPECIAL EVENT PERMIT	

⊠ USE OF CO	UNTY PROPERTY PERMIT
▼ PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	ılT
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION
WILL REQUIRE THE APP	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 or may use the parking/field lights 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: A signature

2024 Ft. Myers RV Show Jan 25 -27, 2024 10am - 5pm Jan 28th 10 am - 4 pm JetBlue Park **Deputy Director** 

Title:

Date:



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

Check the appropriat	e box(es) bel	ow:	
	NTY PROPERTY ELL AND CONS	PERMIT UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	FACILITIES
		LEASE INDICATE BELOW WHAT ARRANGEMENTS LY WITH FOR THEIR EVENT.	YOUR ORGANIZATION
nsurance Requirements:	occurrence to pri aforementioned Certificate Must I Lee County, a po and public officia with regard to ge	eral liability insurance with minimum limits of One Million Dotect against bodily injury and/or property damage relative event within Lee County.  Read As:  litical subdivision and Charter County of the State of Florida als are automatic additional insureds and includes an automeneral liability. The certificate holder is an additional insured basis with regards to general liability.	to applicants use of  i, its agents, employees, iatic waiver of subrogation
Special Arrangements:	political subdivis	nsurance shall be submitted as evidence of the required covion and Charter County of the State of Florida, P.O. Box 398, older and as an additional insured as listed above.  of insurance.	
	Print Name: Signature: Title:	Mike Figueroa  Mike Figueroa  Risk Program Manager  November 20, 2023	

**RMALKOWSKI** 

### **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 11/6/2023

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	JBROGATION IS WAIVED, subject certificate does not confer rights to	the	certi	ficate holder in lieu of su	ich end	iorsement(s).			. A	statement on		
PRODUC					CONTACT Rolanda Malkowski							
Kaliff Insurance 2009 N.W. Military Hwy						PHONE (A/C, No, Ext): (210) 829-7634 FAX (A/C, No):						
San An	tonio, TX 78213				E-MAIL ADDRESS: rolanda@kaliff.com							
								RDING COVERAGE		NAIC#		
					INSURE	12866						
INSURED					INSURER B:							
	Florida RV Trade Associatio	n, Ind	С.		INSURE							
	10510 Gibsonton Drive Riverview, FL 33569				INSURE							
					INSURER E :							
COVERAGES CERTIFICATE NUMBER:						INSURER F:						
COVERAGES CERTIFICATE NUMBER:  THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELO						FEN ISSUED 1		REVISION NUMBER:	HE P	OLICY PERIOD		
INDIC	CATED. NOTWITHSTANDING ANY R	EQUI	REME	ENT, TERM OR CONDITION	N OF A	ANY CONTRAC	CT OR OTHER	R DOCUMENT WITH RESPE	CT T	O WHICH THIS		
EXCL	TIFICATE MAY BE ISSUED OR MAY USIONS AND CONDITIONS OF SUCH	POLIC POLIC	I AIN, CIES.	THE INSURANCE AFFOR	DED BY	Y THE POLICI REDUCED BY I	IES DESCRIB PAID CLAIMS.	ED HEREIN IS SUBJECT T	O AL	L THE TERMS,		
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	s	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
AX								EACH OCCURRENCE	\$	1,000,000		
	CLAIMS-MADE X OCCUR			CPP 0107712 03		10/3/2023	10/3/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	500,000		
								MED EXP (Any one person)	\$	5,000		
								PERSONAL & ADV INJURY	\$	1,000,000		
	EN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	3,000,000		
Х	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ \$	1,000,000		
AL	JTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$			
	ANY AUTO							BODILY INJURY (Per person)	\$			
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$			
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$			
									\$			
_	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$			
-	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$			
W	DED RETENTION \$	_						PER OTH-	\$			
AN	ORKERS COMPENSATION ID EMPLOYERS' LIABILITY  Y DROUBLETOR (DARTHER EXECUTIVE)							PER OTH- STATUTE ER				
OF (M:	Y PROPRIETOR/PARTNER/EXECUTIVE FICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$			
l lf v	es, describe under SCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE  E.L. DISEASE - POLICY LIMIT				
100	SOM TION OF OFERNATIONS DEIDW							E.L. DISEASE - PULICY LIMIT	3	-		
DESCRI	PTION OF OPERATIONS / LOCATIONS / VEHICONAL INSURED AS RESPECTS TO I	LES (	ACORE	101, Additional Remarks Schedu	ule, may b	be attached if mor	re space is requi	red)		1		
ADDITION En	ONAL INSURED AS RESPECTS TO I gland Sports Ventures LLC; Fenway	NSUF Sno	RED'S	OPERATIONS AS CONTI	RACTU	ALLY OBLIGA	ATED: Boston	n Red Sox Baseball Club	Limit	ed Partnership;		
Commi	ssioners, each Officer, Director, officer						(Vilua i	251410, 220, 266 000	arrey I	sound or county		
	2024 Ft. Myers RV Show .ocation: JetBlue Park 11500 Fenway	v Sou	ıth Dr	ive. Ft. Myers. Ft. 33913								
Set-Up	Dates: January 22 - January 24, 202	4	01	, i i. inyolo, i L. 00313								
	Dates: January 25 - January 28, 2024 Dwn: January 29, 2024											
L	IFICATE HOLDER				CAN	CELLATION				***************************************		
			OK	11/20/2023	1					-13/		
JetBlue Park								ESCRIBED POLICIES BE C				
					ACC	CORDANCE W	N DATE TH	HEREOF, NOTICE WILL CY PROVISIONS.	BE I	DELIVERED IN		
11500 Fenway South Drive Fort Myers, FL 33913			(7)									
FOIL MYEIS, FL 33913					AUTHORIZED REPRESENTATIVE							

ACORD

mitchell H Taliff

### **RMALKOWSKI**

ACORD

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٠.	no certificate does not comer rights to	o circ		noute notice in neu or su	on end	or sement(s)	•						
PRO	DUCER				CONTAC NAME:	ਾ 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								
						W. 1998 149 15 1999 1999	surer(s) AFFOR nsurance C				NAIC#		
			12866										
INSU	JRED	INSURER B:											
Florida RV Trade Association, Inc. 10510 Gibsonton Drive Riverview, FL 33569						INSURER C:							
						INSURER D:							
						INSURER E :							
		INSURER F:											
CO	VERAGES CER	TIF	TFICATE NUMBER:				REVISION NUMBER:						
1N	HIS IS TO CERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQU PER	IREME TAIN,	ENT, TERM OR CONDITIOI THE INSURANCE AFFORI	N OF A DED BY	NY CONTRA 7 THE POLIC	CT OR OTHER IES DESCRIB	R DOCUMENT W ED HEREIN IS	ITH RESPE	CT TO	O WHICH THIS		
INSR LTR TYPE OF INSURANCE			ADDL SUBR INSD WVD POLICY NUMBER			POLICY EFF POLICY EXP (MM/DD/YYYY) LIMITS							
A	X COMMERCIAL GENERAL LIABILITY	.,,,,,,,				\	(AIIII)	EACH OCCURRE		\$	1,000,000		
	CLAIMS-MADE X OCCUR			CPP 0107712 03		10/3/2023	10/3/2024	DAMAGE TO REN PREMISES (Ea ou		\$	500,000		
								MED EXP (Any or			5,000		
								PERSONAL & AD	•	\$	1,000,000		
	OFNIII A CORPORATE LIMIT A PRILIFO PER			*							3,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:  X POLICY PRO- JECT LOC							GENERAL AGGR		\$	1,000,000		
								PRODUCTS - CO	MP/OP AGG	\$	.,,,,,,,,		
	OTHER:							COMBINED SING	LE LIMIT	\$			
	AUTOMOBILE LIABILITY							(Ea accident)		\$			
	ANY AUTO OWNED SCHEDULED							BODILY INJURY	(Per person)	\$			
	AUTOS ONLY AUTOS							BODILY INJURY	Per accident)	\$			
	HIRED AUTOS ONLY							PROPERTY DAM (Per accident)	AGE	\$			
						6				\$			
	UMBRELLA LIAB OCCUR							EACH OCCURRE	NCE	\$			
	EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$			
	DED RETENTION \$									\$			
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER				
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCID	ENT	\$			
			•					E.L. DISEASE - E	A EMPLOYEE	\$			
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - P	OLICY LIMIT	\$			
								5					
ADI new Con Eve Eve Set- Sho	CERPTION OF OPERATIONS / LOCATIONS / VEHIC DITIONAL INSURED AS RESPECTS TO I FENGLAND SERVICE PER SERV	NSU Spo cials y Sou 4	RED'S orts G , repr	S OPERATIONS AS CONTF roup, LLC; N.E.S.V. II, LLC esentatives, agents and en	RACTU/ ; N.E.S.	ALLY OBLIG/ .V. IV, LLC; N	ATED: Bostor	າ Red Sox Bas					
CF	RTIFICATE HOLDER				CANO	CELLATION							
CE	KIIFICATE HULDEK	CANC	JELLA HUN		1								
JetBlue Park 11500 Fenway South Drive Fort Myers, FL 33913					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
	i oit myers, FL 33913	AUTHORIZED REPRESENTATIVE											



# 2024 Ft Myers RV Show January 25 - 28, 2024

Map is NOT to scale As of 11/2/23





