

EVENT PERMIT



Ordinance 17-08

Run the Lakes for Cypress Lake

PERMIT NUMBER: TMP2024-00045

Date(s) of Event: February 24, 2024

Property Owner:

LEE COUNTY

Applicant:

Jeanne Kaufman

239-898-2325

Description:

5K run/walk on the trail provided in the park - Timed event

Setup 7:00AM

Race Start 9:00AM - Ends 11:30AM

Awards in reserved shelters 11:30AM - 12:00PM

Location of event:

7330 GLADIOLUS DR, FORT MYERS, FL 33908

Lakes Park

Will the event be attended by 1000 or more people?

Will the event be held on County Owned Property? Yes

Will there be alcohol consumed or sold at the event?

Will a bond be posted for this event?

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

Run the Lakes for Cypress Lakes

TMP2024-00045



Event Application

Check the appropriate box(es) below:

| ਲ਼ੑ SPECIAL EVENT PERMIT |
|---|
| 🔀 USE OF COUNTY PROPERTY PERMIT |
| PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIE |
| FILM PERMIT |
| |

| Section I - GENERAL INF | ORMATION (All Permit Types) |
|--|--|
| Title of Event / Name of Production | Run the Lakes for Cypress Lake |
| Date(s) of Event / Production: | February 24, 2024 |
| Location(s) of Event: | Lakes Regional Park (on the Course provided) |
| Name of Applicant: | Jeanne Kaufman |
| Applicant Address: | 8901 Cypress Lake Drive Fort Myers, FL 33919 |
| Applicant Phone Number: | 239-898-2325 |
| Contact Person: (If different from applicant) | |
| Contact Phone Number: (If different from applicant) | |
| Email Address: | jeannemka@leeschools.net |
| Estimated Attendance: | 190 |
| Event Description: Include each activity, when activities take place, etc. | Saturday, Feb 24 5K Run/Walk on the trail provided in the park. (This is a Timed event) Setup to begin at 7:00AM Race Start 9:00AM - Ends 11:30AM Awards to be handed out at Shelters A1 & D1 11:30 -12:00 |
| Hours of Operation: | Set up 7AM -Race 9-11:30 AM cleanup by 12:00 |
| STRAP # of Parcel: | Lakes Regional Park |
| Owner of Premises*: | Lee County Parks and Recreation |

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



| What is the Zoning Classification of the | premises? Lee County Region | onal Park |
|---|---|---|
| Are any temporary structures to be inst | alled for the event? Yes 🗓 No | Туре: |
| Do you have the appropriate permits fo | r the temporary structures? | Yes No |
| identified, including all parking areas. | ty Property' permit, submit a site plan wit | |
| 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 | Yes 🔀 No | Yes X 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: | | |
| Type of Food being Served: | | |
| Section II - USE OF COUNTY Pl Organization Sponsoring the Event: | ROPERTY PERMIT Sypress Lake Middle Schoo | ol |
| | | |
| Section III - SALE/CONSUMPT | TION OF ALCHOLIC BEVERAGES I | PERMIT |
| Is alcohol being sold/consumed on Cou | inty Property? | Yes 🔀 No |
| If Yes, then a "Lee County Alcohol Permit" is required | . Only non-profit organizations can sell alcohol on Count | y Property. |
| Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event) | nber: | |
| Please note: A permit from the State of Florida further details | Division of Alcoholic Beverages and Tobacco may | also be required; please call (239) 344-0885 for |



| pe of Production (choose all that app | oly): | | | | | |
|---|-----------------------------|---|--|------------|------------------|---------------|
| TV Movie or Special | TV Series / Pilot | | TV Commerc | ial 🦵 | Still Photos | |
| Public Service Announcement | Industrial / Documentary | 1 | Other: | | | |
| /ill any of the following be needed or | included*? | | | | | |
| Street Closure | | | Yes | X No | | |
| Traffic / Crowd Control | | | Yes | No | | |
| Fire or Burning | | | Yes | No | | |
| Explosives or Pyrotechn | ics | | Yes | No | | |
| Animals, Large or Small | | | Yes | X No | | |
| Construction of Any Kind | d | | Yes | X∷ No | | |
| Large and/or Numerous | Vehicles | | Yes | ⊠ No | | |
| Helicopters, Boats, etc. | | | T Yes | No | | |
| Stunts | | | Yes | X No | | |
| Other | | | Yes | X No | | |
| Special Parking Requirements: | | | | | | |
| | | *************************************** | | | | |
| | | | | | | |
| City or County Services Required: (P | ersonnel, equipment, facili | ties, et | c.) | | | |
| | | | * #################################### | | | . |
| | | | | | | : |
| 1 | | | | | | |
| The following information is require the industry. If exact figures are not | | | | | track the econor | nic impac |
| Number in Cast: | Number in Crew: | | Numb | er of loca | als hired: | |
| Total budget: | Estimate amount sp | oent in I | Lee County: | | | |
| Hotel room nights: | Number of shooting | g days: | | | | |
| number of rooms x numb | per of nights | | | | | |



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.

Jeanne Kaufman-Coord

Print Name of Applicant and Title

1/10/2024

Date

Witness

Witness

Witness

1/10/2024

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 EVENT PERMIT

| □ USE OF COI | JNTY PROPERTY PERMIT |
|--|---|
| F PERMIT TO | SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES |
| 厂 FILM PERM | П |
| AFTER REVIEWING THE WILL REQUIRE THE APPL | APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIO 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: | Race is to remain along the pathways and walkways within the confines of the park. Any amplified sounds must adhere to the Lee County Noise Ordinance. |
| | Print Name: Signature: Title: Commandes Date: 1434 |
| , | 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 appropri | iate box(es) bel | ow: | | |
|---|--------------------|-------------------------|--|-------------------|
| SPECIAL EV | VENT PERMIT | | | |
| , | OUNTY PROPERTY | PERMIT | | |
| FILM PERM | ИIT | | | |
| AFTER REVIEWING THE WILL REQUIRE THE APPL | | | LOW WHAT ARRANGEMENTS EVENT. | YOUR ORGANIZATION |
| Fire Guards (How Many?) | NA | | | |
| Fee for Services: | NA | | | |
| Flammable Vegetation: | NA | | | |
| First Aid Equipment: | Call 911 if needed | | | |
| Fire Extinguishing: | NA | | | |
| Special Arrangements: | NA | | | |
| | Print Name: | Nate Burley | | |
| | Signature: | Nate Burley | Digitally signed by Nate Burley Date: 2024,01.12 08:14:23 -05'00' | • |
| | Title: | Division Chief - Fire & | Life Safety | • |
| | Date: | January 12, 2024 | | |
| | | | | |



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

Check the appropriate box(es) below:

| 区: SPECIAL EVENT PERMI | ∇ | SP | ECI | AL. | Eν | /ENT | PEF | IMS |
|------------------------|----------|----|------------|-----|----|------|-----|-----|
|------------------------|----------|----|------------|-----|----|------|-----|-----|

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 fol Orders concerning people congregatir | health and safety, especia | ectives, and the Florida Gov Illy with regards to COVID-19 | ernor's Executive 9 and the number of |
| Fee for Services | Not applicable. | | į | |
| Special Arrangements: | Please call 911 in toffice at EMSDetai | | . To arrange special event c | coverage, contact our |
| | Print Name: Signature: Title: | Douglas B. Higgins TH Bup Captain, EMS Operations | Digitally signed by Captain Douglas B. Higgins Date: 2024.01,27 14;28;16 -05'00' | - - - |
| | Date: | January 27, 2024 | | |



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

| Check the appropri | iate box(es) be | low: | | | | |
|-----------------------|--|--|-------------------|--|--|--|
| SPECIAL EV | VENT PERMIT | | | | | |
| , ✓ USE OF CC | OUNTY PROPERTY | PERMIT | | | | |
| 1000 11 | | UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY | FACILITIES | | | |
| FILM PERN | ЛІТ | | | | | |
| | | | | | | |
| | | PLEASE INDICATE BELOW WHAT ARRANGEMENTS | YOUR ORGANIZATION | | | |
| WILL REQUIRE THE APP | LICANT TO COMP | PLY WITH FOR THEIR EVENT. | | | | |
| | | | | | | |
| Parking: | No event parking o | on Lee County maintained road rights-of-way. | | | | |
| | | • | | | | |
| | | | | | | |
| Ingress and Egress: | Use all established means of ingress and egress. | | | | | |
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| Special Arrangements: | None. | | | | | |
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| | Vanishing and 11. 11. 11. 11. 11. 11. 11. 11. 11. 11 | | ſ | | | |
| | | | | | | |
| | Print Name: | Nathan Thoman | | | | |
| | Signature: | Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2024.01,22 06:23:34 - 05'00' | | | | |
| | Title: | Project Manager | | | | |
| | Date: | 01/22/2024 | | | | |
| | | | | | | |
| | | | | | | |



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

| Check the appropri | ate box(es) bei | ow: |
|-----------------------|--|--|
| [] SPECIAL EV | VENT PERMIT | |
| 区 USE OF CC | OUNTY PROPERTY | PERMIT |
| <i>F</i> " | | UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES |
| [FILM PERN | ЛІТ | |
| | | |
| | | LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT, . |
| Illumination: | Event organizer mu | ust provide own lighting if needed to safely run the event. |
| | | |
| | | |
| Parking Areas: | | t 7:00am to the designated parking areas inside Lakes Park. All vehicles with the event are their event parking pass. |
| | | |
| Special Arrangements: | and first ald statior directional signs (If Race course must i Banners may be hu All trash and event | responsible for set up and break down of the race route/event signs, drink stations as. No painting or temporary markings allowed on the roads or pathways. Removable E: survey flags, wire frame signs and cones) are permitted. De cleaned and cleared by 10 am, ang at your designated Pavillons. Debris must be cleaned up and removed prior to checking out with staff, so or vehicles permitted on the pathways. |
| | | |
| | Print Name: | Colleen Via |
| | Signature: | Colleen Via |
| | Title: | County Wide Sevices Project Manager |
| | Date: | 1/12/2024 |
| | | · |
| akes - Run The | Lake for Cyp | |
| 2/24/ | 24 | Page 10 |



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

Check the appropriate box(es) below:

| Check the appropria | re novies) nei | ;UVV. |
|------------------------|---------------------------------------|---|
| ズ: SPECIAL EVE | NT PERMIT | |
| ⋉ USE OF COU | NTY PROPERTY | PERMIT |
| PERMIT TO S | SELL AND CONS | UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES |
| FILM PERMI | | |
| | | |
| | | PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT. |
| nsurance Requirements: | occurrence to pr | 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. |
| | Certificate Must | Read As: |
| | lea County a no | olitical subdivision and Charter County of the State of Florida, its agents, employees, |
| | and public offici with regard to g | als are automatic additional insureds and includes an automatic waiver of subrogation eneral liability. The certificate holder is an additional insured on a primary and basis with regards to general liability. |
| Special Arrangements: | political subdivis | nsurance shall be submitted as evidence of the required coverage listing Lee County, a sion and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as older and as an additional insured as listed above. |
| | Subject to proof | of insurance. |
| | | |
| | | |
| | • | |
| | Print Name: | Mike Figueroa |
| | Signature: | Mike from |
| | Title: | Risk Program Manager |
| | Date: | January 12, 2024 |
| | | |
| | | |



LEE COUNTY VISITOR & CONVENTION BUREAU 2201 SECOND STREET, SUITE 600 FORT MYERS, FLORIDA 33901

(239) 338-3500 Check the appropriate box(es) below: FILM PERMIT ONLY AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT. Special Arrangements: Other: Print Name: Signature: Title: Date:

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MEMBER CERTIFICATE OF INSURANCE

1/10/24

Thank you for purchasing your insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

Insured #: FL129000

NAMED INSURED MEMBER:

Cypress Lake MS PTSA Attn: Meghan Flowers or Current Officer 8901 Cypress Lake Dr Fort Myers, FL 33919

Named Insured & Mailing Address

Education Support Purchasing Group c/o AlM P.O. Box 674051 Dallas TX, 75267-4051

PRODUCER NAME

AlM Association Insurance Management, Inc, PO Box 674051 Dallas TX, 75267-4051

| Company / Coverage | Policy# | Effective Dates | Deductible | Limits of Insurance | |
|--|----------------|---------------------|------------|---|---|
| Concert Specialty Insurance Company / Commercial General Liability | GL2023AIM12350 | 10/15/23 - 10/15/24 | \$ 0 | Each Occurrence | \$1,000,000 |
| | | | | General Aggregate Products - COMP/OPS Personal & Advertising Injury Damage To Rented Premises | \$2,000,000 \$2,000,000 \$1,000,000 \$50,000 |
| Concert Specialty Insurance Company / Extended Medical | GL2023AIM12350 | 10/15/23 - 10/15/24 | \$ 0 | Medical payments-any one person | \$5,000 |

Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees and public officials are included as an Additional Insured on a primary and non contributory basis subject to a written contract or agreement.

Event: Run the Lakes 5K

Date: 2/24/24

OK 01/12/2024

Certificate Holder:

Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees and public officials PO Box 398 Fort Meyers, FL 33902 This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any, complete the above numbered policy. Copies of the Master Policies are available upon request or may be printed at www.aim-companies.com

AUTHORIZED REPRESENTATIVE

EB World



Consumer's Certificate of Exemption

DR-14 R. 01/18

Issued Pursuant to Chapter 212, Florida Statutes

| 85-8012622066C-4 | 10/31/2022 | 10/31/2027 | COUNTY GOVERNMENT |
|--------------------|----------------|-----------------|--------------------|
| Certificate Number | Effective Date | Expiration Date | Exemption Category |

This certifies that

LEE COUNTY PUBLIC SCHOOL DISTRICT 2855 COLONIAL BLVD FORT MYERS FL 33966-1012

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14 R. 01/18

- 1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
- 2. Your Consumer's Certificate of Exemption is to be used solely by your organization for your organization's customary nonprofit activities.
- Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
- 4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
- 5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
- 6. If you have questions about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

Lakes Regional Park: 5K Map (Park opens at 7:00 AM) 7330 Gladiolus Drive. Fort Myers, FL 33908 (239) 533-7575

