

EVENT PERMIT



Ordinance 17-08

Boca Grande Area Chamber of Commerce Art Show "Art on Park"

PERMIT NUMBER:

TMP2024-00049

Date(s) of Event:

February 24, 2024 from 10:00AM until 6:00PM

February 25, 2024 from 10:00AM until 6:00PM

Property Owner:

LEE COUNTY

Applicant:

GARY CROSS

941-964-0568

Description:

Local artists selling their art work downtown. Local vendors will be selling food on

merchandise.

Location of event:

131 - 135 1ST ST W, BOCA GRANDE, FL 33921

Boca Grande Park and Community Center

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

Boca Grande Area Chamber of Commece Art Show "Art on Park"

TMP2024-00049



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	Boca Grande Area Chamber of Commerce Art Show "Art on Park"
Date(s) of Event / Production:	02/24-02/25/202 <mark>\$4</mark>
Location(s) of Event:	5th Street to 3rd St and 4th street from E railroad Ave to Gilcrest Ave
Name of Applicant:	Gary Cross
Applicant Address:	471 Park Ave (PO Box 704) Boca Grande, FL 33921
Applicant Phone Number:	941-964-0568
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	info@bocagrandechamber.com
Estimated Attendance:	500-800
Event Description: Include each activity, when activities take place, etc.	Local artists selling there art work downtown. Local vendors will be selling food or merchandise.
Hours of Operation:	art show from 10am-6pm Road will be closed both days
STRAP # of Parcel:	14-43-20-01-00005.0010
Owner of Premises*:	Lee County BoCC

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



What is the Zoning Classificati	on of the premises? Coul	nty Right of	Way	
Are any temporary structures	to be installed for the event?	⊤ Yes 🗵 No	Туре:	
Do you have the appropriate p	permits for the temporary stru	ictures?	┌ Yes ┌	No
* For a 'Special Event' and 'Us identified, including all parking	e of County Property' permit, g areas.	submit a site plan wi	th all proposed facil	lities and activities
Insurance Company Insuring	the Event: Italiano Ins	surance		
Note: Certificate of Insurance must	pe submitted at time of application			
Surety Company Bonding this	Event (Name and Address):			
Will Vehicles be Used as Par Event?	t of This Will Food be Avai	lable at this Event?		Beverages be ed at this Event?
├ Yes x No	▼ Yes	☐ No	☐ Yes	▼ No
If yes, automobile coverage m included on the certificate of in:	//	ility coverage must be tificate of insurance.		ty coverage must be rtificate of insurance.
Name & Address of Organiza Providing Food:	tion 			
Type of Food being Served:				
Section II - USE OF CO	UNTY PROPERTY PERM	IT		
Organization Sponsoring the	Boca Grande	e Area Char	mber of Co	mmerce
Section III - SALE/CON	ISUMPTION OF ALCHO	LIC BEVERAGES	PERMIT	
Is alcohol being sold/consum	ed on County Property?		Yes	No
If Yes, then a "Lee County Alcohol Permi	t" is required. Only non-profit organizati	ons can sell alcohol on Coun	ty Property.	
Non-profit certificate/registr (Required if alcohol is to be <u>SOLD</u> at the				
Please note: A permit from the Stat further details	e of Florida Division of Alcoholic Bev	erages and Tobacco may	also be required; please	e call (239) 344-0885 for



TV Movie o				es / Pilot		TVC	Comme	rciai		Still Ph	otos	
Public Serv	vice Announcement	1	Industri	al / Documentary		Oth	er:					
ll any of the	following be neede	ed or	included	*?								
	Street Closure					X	Yes	Γ	No			
	Traffic / Crowd Con	trol				Γ	Yes	Г	No			
	Fire or Burning					Γ	Yes	Г	No			
	Explosives or Pyrote	echni	ics			Г	Yes	Г	No			
	Animals, Large or S	mall				Г	Yes	Г	No			
	Construction of Any	y Kind	d			Γ	Yes	Г	No			
	Large and/or Nume		Vehicles			Γ	Yes	Г	No			
	Helicopters, Boats,	etc.					Yes	Γ	No			
	Stunts						Yes	Г	No			
	Other						Yes	Г	No			
For any ma	irked Yes, provide fi	urthe	er details	below:								
	irked Yes, provide fo	urthe	er details	below:								
Special Park					ities, et	c.)						
Special Park City or Cour The followin he industry	ing Requirements: nty Services Require ng information is rec . If exact figures are	quire	ersonnel, d for loca available	, equipment, facil	ds on pr	oduc	possib	le.		rack the	econon	nic impa
Special Park City or Cour	ing Requirements: nty Services Require ig information is rec . If exact figures are	quire	ersonnel, d for loca available	, equipment, facil al and state record r, please estimate	ds on pr as clos	oduc ely as	possib Nur	le.			econon	nic impa



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted premises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.



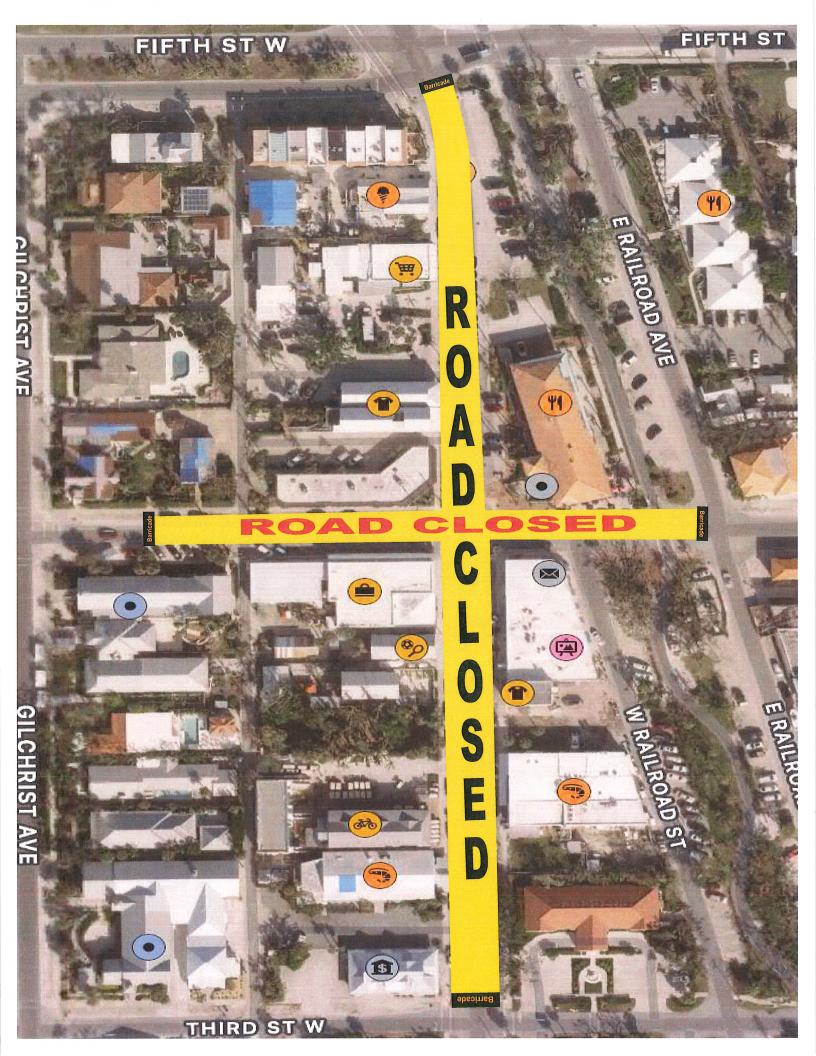
SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

Signature of Applicant	Witness
Gary Cross	Kenny Heiman
Print Name of Applicant and Title	Print Name of Witness
1/16/2024	1/16/2024
Date	Date





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

Check the appropriate box(es) below:

☐ SPECIAL EV	ENT PERMIT
IX USE OF CO	UNTY PROPERTY PERMIT
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IT
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
WILL RECOINE THE AFFE	ICANT TO COMPET 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:	
TEE IOI SEIVICES.	None
Special Arrangements:	Vendor will be providing barricades and signage for road closures. According to the permit application no alcohol will be served during the event. All amplified sounds must adhere to the
	application no alcohol will be served during the event. All amplified sounds must adhere to the Lee County Noise Ordinance.
	Print Name: L. Cummins
	Signature:
	Title:
	- Market Care
	Date: 12534



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.

	Jos author injuring and the District Mc	40.
Check the appropriate box(es)	below:	

F SPECIAL EVENT PERMIT

FILM PERMIT

IX USE OF COUNTY PROPERTY PERMIT

WILL REQUIRE THE APPLI	CANT TO COMP	Please indicate below what arrangements your organizatio Ly with for their event.
Fire Guards (How Many?)	······································	None
Fee for Services:		None
Flammable Vegetation:		None
First Aid Equipment:		
	professorano e e e e e e e e e e e e e e e e e e e	None
Fire Extinguishing:		
The state of the s		None
Special Arrangements:	MAY V Michigal Advanta	In case of emergency - Dial 911
	Print Name:	C.W. Blosser
	Signature:	CAL
	Title:	Fire Chief
	Date:	1/16/2024



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

Check the appropria	te box(es) belov	v:
☐ SPECIAL EV	ENT PERMIT	
USE OF CO	UNTY PROPERTY P	ERMIT
▼ PERMIT TO	SELL AND CONSU	ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IIT	
		ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR CANT TO COMPLY WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:		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 ng at the event.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in toffice at EMSDetai	the event of an emergency. To arrange special event coverage, contact our l@leegov.com.
	Print Name:	Douglas B. Higgins
	Signature:	Digitally signed by Captain Douglas B. Higgins Date: 2024.01.27 14:06:06 -05'00'
	Title:	Captain, EMS Operations
	Date:	January 27, 2024



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

Check the appropri	ate box(es) be	low:							
☐ SPECIAL E\	SPECIAL EVENT PERMIT								
,	UNTY PROPERTY								
-		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNT	Y FACILITIES						
☐ FILM PERM	711.1								
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS PLY WITH FOR THEIR EVENT.	S YOUR ORGANIZATION						
Parking:		areas. No event parking permitted on Lee County maintain d impact safe passage of all road users and emergency veh							
Ingress and Egress:	Use all established	means of ingress and egress.							
Special Arrangements:		nty Sheriff's Office for assistance with traffic control as need access and public vehicular access shall be maintained on I roads.							
	Print Name: Signature: Title: Date:	Nathan Thoman Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2024.01.22 06:41:59 -05'00' Project Manager							
	Date.	01/22/24							



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

Check the approp	priate box(es) bei	low;
SPECIAL	. EVENT PERMIT	
for a *	COUNTY PROPERTY	PERMIT
* . *		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PE	RMIT	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Illumination:	N/A	·
Parking Areas:	N/A	
Special Arrangement	s: N/A - Event is not o	on Parks and Rec property and will not affect county park operations or programs.
	Dulat Name	
	Print Name:	1
	Signature:	Calleer Via
	Title:	County Wide Services Project Manager
	Date:	1/16/2024
-		de And Shaker Page 10
2/24	1-2/25/2024	1 ago 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) be	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 PERMI	Γ	
		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:
	and public official with regard to ge	olitical subdivision and Charter County of the State of Florida, its agents, employees, 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 ion 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. of insurance.
	Print Name:	Mike Figueroa
	Signature:	This Ligin _
	Title:	Risk Program Manager
	Date:	February 1, 2024

KTORRES

ACORD°

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/31/2024

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 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).

PRODUCER					CONTA NAME:	СТ						
	ano Insurance Services, Inc.					o, Ext): (941) S	64-0400		FAX	(941) 9	964-0595	
	3ox 1406 a Grande, FL 33921				E-MAIL ADDRESS: boca@italianoinsurance.com							
					ADDRE						NAIC#	
					INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : Mt. Vernon Fire Ins. Co							
INSU	DED.											
11130					INSURE							
	Boca Grande Chamber Of C P O Box 704	omm	erce	(INSURE	RC:						
	Boca Grande, FL 33921				INSURE	R D :						
	2000 0.0				INSURE	RE:						
					INSURE	RF:						
				E NUMBER:				REVISION NUI				
IN CI	IIS IS TO CERTIFY THAT THE POLICIE DICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	EQU PER	REMI TAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFORM	N OF A DED BY	NY CONTRAI THE POLIC	CT OR OTHER IES DESCRIB	R DOCUMENT WI	TH RESPE	CT TO	WHICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF	POLICY EXP (MM/DD/YYYY)		LIMIT	'S		
Α	X COMMERCIAL GENERAL LIABILITY					(MINI/DD/1111)	(MINIODITITI)	EACH OCCURREN		\$	1,000,000	
	CLAIMS-MADE X OCCUR	Х		NBP2550369L		10/13/2023	10/13/2024	DAMAGE TO RENT PREMISES (Ea occ		\$	100,000	
								MED EXP (Any one	person)	\$	5,000	
								PERSONAL & ADV	INJURY	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:					1		GENERAL AGGRE	GATE	\$	2,000,000	
	POLICY PRO- LOC							PRODUCTS - COM	P/OP AGG	\$		
	OTHER:									\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLI (Ea accident)	E LIMIT	\$		
	ANY AUTO							BODILY INJURY (P	er person)	\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (P		\$		
	HIRED NON-OWNED AUTOS ONLY				_			PROPERTY DAMA (Per accident)	GE	\$		
	AUTOS ONLY AUTOS ONLY							(Per accident)				
	UMBRELLA LIAB OCCUR									\$		
	EXCESS LIAB CLAIMS-MADE							EACH OCCURREN	CE	\$		
								AGGREGATE		\$		
	DED RETENTION \$							PER	OTH-	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDE	NT	\$		
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA	EMPLOYEE	\$		
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - PO	LICY LIMIT	\$		
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI ficate holder has been named as additi	LES (ACORI insui) 101, Additional Remarks Schedu red with regards to 2/24/2 {	ile, may b & 2/25/2	e attached if mor 4 Art Show.	e space is requir	ed)				
				OK 02/01/2	2024							
				7.	1							
				Mike	- Fro	gin						
CEI	RTIFICATE HOLDER				CANC	ELLATION					1	
Lee County a political subdivision & Charter County of The State of Florida P O Box 398					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
	Fort Myers, FL 33902				AUTHORIZED REPRESENTATIVE							