

EVENT PERMIT



Ordinance 17-08

Best Buddies SWFL Friendship Walk

PERMIT NUMBER:

TMP2024-00114

Date(s) of Event:

April 26, 2024 setup and April 27, 2024 event

Property Owner:

LEE COUNTY

Applicant:

Pamela Conner

239-275-2510

Description:

Annual Friendship Walk and Celebration for individual with Intellectual and

Developmental Disabilities (IDD). 2nd annual at this location. on April 26, 2024 setup

and April 27, 2024 event from 9:00AM until 12:00PM

Location of event:

9200 CORKSCREW PALMS BLVD, ESTERO, FL 33928

Estero Community 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

Dale

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Best Buddies SWFL Friendship. Walk



Event Application

Check the appropriate box(es) below:

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

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Best Buddies SWFL Friendship Walk
Date(s) of Event / Production:	4/26/2024 for set up and 4/27/2024 9-12pm for event
Location(s) of Event:	Estero Community Park 9200 Corkscrew Palms Blvd. Estero, FL 33928
Name of Applicant:	Pamela Conner
Applicant Address:	5237 Summerlin Commons Blvd. Ste 105 Fort Myers, FL 33907
Applicant Phone Number:	239-275-2510
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	pamelaconner@bestbuddies.org
Estimated Attendance:	250
Event Description: Include each activity, when activities take place, etc.	Annual Friendship Walk and Celebration for Individuals with Intellectual and Developmental Disabilities(IDD). 2nd annual at the location.
Hours of Operation:	9am-12pm
STRAP # of Parcel:	34-46-25-E4-0100C.017A 10616993
Owner of Premises*:	Lee County

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



What is the Zoning Classification of the	premises? Public Park	
Are any temporary structures to be insta	alled for the event? X Yes No	Type: Tents smaller than 10X10 -no stakes to be used.
Do you have the appropriate permits for	r the temporary structures?	Yes X No
* For a 'Special Event' and 'Use of Count identified, including all parking areas.	ry Property' permit, submit a site plan wi	th all proposed facilities and activities
Insurance Company Insuring the Event:		
Note: Certificate of Insurance must be submitted	at time of application	
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 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.
Providing Food:	endor TBD	bars, water
,,		
Section II - USE OF COUNTY PR	ROPERTY PERMIT	
Organization Sponsoring the Event: B	est Buddies Internatior	nal
Section III - SALE/CONSUMPT	TION OF ALCHOLIC BEVERAGES I	PERMIT
Is alcohol being sold/consumed on Cou	nty 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)	ber: 	
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



TV Movie or Special	TV Series / Pilot		Commerc	cial		Still Photo	os	
Public Service Announcemen	nt Industrial / Documentary		ther:					
l any of the following be need	ded or included*?							
Street Closure		Г	Yes		No			
Traffic / Crowd Co	ontrol		Yes		No			
Fire or Burning		Γ	Yes		No			
Explosives or Pyro	technics	Γ	Yes		No			
Animals, Large or	Small	Γ	Yes		No			
Construction of A	ny Kind	Γ	Yes		No			
Large and/or Num	nerous Vehicles	Γ	Yes		No			
Helicopters, Boats	s, etc.	Γ	Yes		No			
Stunts		Γ	Yes		No			
Other		Г	Yes	Г	No			
Special Parking Requirements		ies, etc.)						
Special Parking Requirements	:	ies, etc.)						
* For any marked Yes, provide Special Parking Requirements City or County Services Requi	:	ies, etc.)						
Special Parking Requirements	:	ies, etc.)						
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Special Parking Requirements City or County Services Requirements The following information is rethe industry. If exact figures a	red: (Personnel, equipment, facilit equired for local and state records re not available, please estimate a	s on produ	as possible Numl	٠.			onomic	: imp
Special Parking Requirements City or County Services Requirements The following information is rethe industry. If exact figures a Number in Cast:	red: (Personnel, equipment, facilit equired for local and state records re not available, please estimate a Number in Crew:	on produ s closely ent in Lee	as possible Numl	٠.			onomic	: imp



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

Date

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.

Paper Signature of Applicant

Pamela Conner

Print Name of Applicant and Title

Vincent Borello

Print Name of Witness

11/14/2024

Date

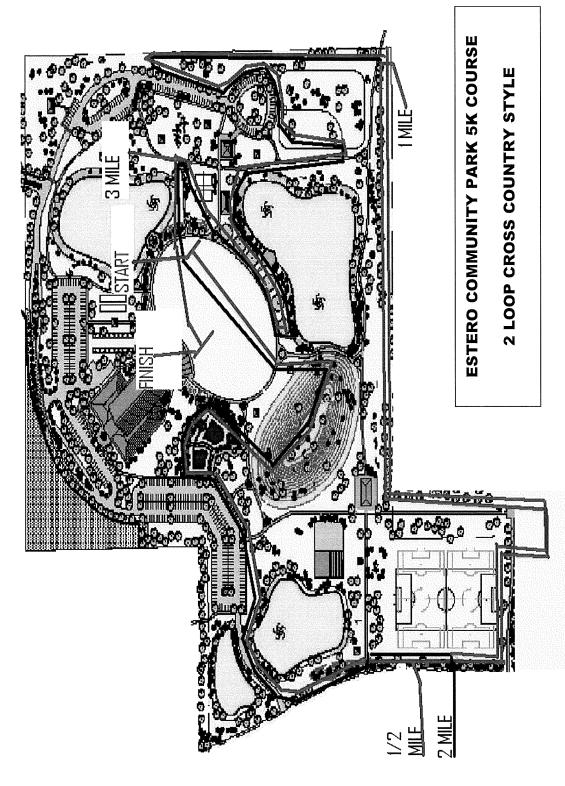


ESTERO COMMUNITY PARK

9200 Corkscrew Palms Blvd. Estero, Florida 33928







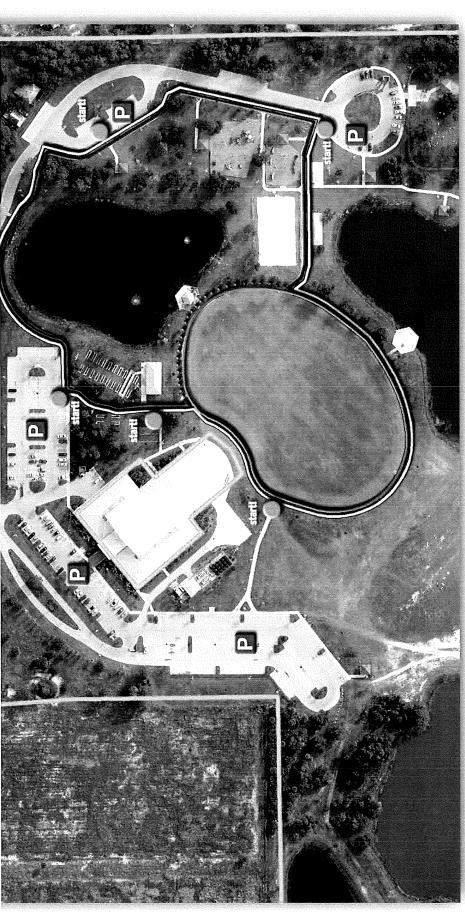
"Lee County Parks/Asemention...The Matural Place To Play" WWW.LEEPARKS.ORG

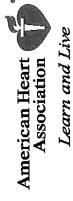


ESTERO COMMUNITY PARK 9200 Corkscrew Palms Blvd.

Estero, Florida 33928 239-948-0415







Red Trail = Loop 0.25 mile Lake Trail = Loop 0.4 mile Yellow Trail = 1/2 mills



0 125 250

Feet

500

"Lee County Parks@ascreation...The Natural Place To Play" WWW.LEEPARKS.ORG



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	hox(es)	helow	

TX USE OF COUNTY PROPERTY PERMIT

F SPECIAL EVENT PERMIT

FILM PERM	ПП
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT 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.
Fee for Services:	None
Special Arrangements:	Walk route will remain within the confines of the park. Any amplified sounds must adhere to Lee County's noise ordinance.
	Print Name: P. Cummins Signature: Commande: Date: (2) (4) 27



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) below:
X SPECIAL EV	
USE OF CC	DUNTY PROPERTY PERMIT NIT
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	N/A
Fee for Services:	N/A
Flammable Vegetation:	N/A
First Aid Equipment:	Call 911 for Emergencies
Fire Extinguishing:	Call 911 for Emergencies
Special Arrangements:	Best Buddies SWFL Friendship Walk April 27, 2024
	Print Name: Scott Danielson Signature:



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	
SE OF CO	UNTY PROPERTY P	ERMIT
PERMIT TO	SELL AND CONSUI	ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IT	
		ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ANT 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 ng at the event.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in t office at EMSDetail	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 12:38:02 -05'00'
	Title:	Captain, EMS Operations
	Date:	December 6, 2023



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

спеск тпе арргоргі	ate box(es) bei	OW:
☐ SPECIAL EV	/ENT PERMIT	
6 7.4	UNTY PROPERTY	
		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERN	11T	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY 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.
	<u></u>	
Special Arrangements:	Shall use Lee Cour	nty Sheriff's Office for assistance with traffic control as needed.
	Emergency vehicle County maintained	access and public vehicular access shall be maintained on all surrounding Lee droads.
	Print Name:	Nathan Thoman
	Signature:	Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2023.11.28 06:44:03 -05'00'
	Title:	Project Manager
	Date:	11/28/2023



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS, FLORIDA 33916 (239) 533-7275

Check the appropri	ate box(es) bel	ow:		
┌ SPECIAL E\	/ENT PERMIT			
⊠ USE OF CC	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONS	JME ALCOHOLIC BEVERAGES	WITHIN LEE COUNT	Y FACILITIES
┌ FILM PERN	ЛІТ			
		LEASE INDICATE BELOW WHA	T ARRANGEMENTS	S YOUR ORGANIZATION
Illumination:	Event organizer w	ll need to provide additional lightir	ıg if needed.	
Parking Areas:	be permitted onto between the Rec C	se the designated parking areas wit the central lawn area. Organizers m enter and the Chiller area, but then t the commerce area off Corkscrew,	nay drop off event supp must remove vehicles	plies via the service road s. For authorization to use
Special Arrangements:	responsible to orde signs are not perm Park gates open at	s open 7 am - 9 pm		
	Rec Center at 239-	533-1470		
	l			
	Print Name:	Colleen Via		
	Signature:	Collen tha		manual.
	Title:	Operations Manager		_
	Date:	11/28/2023		_
Estero - Best B	addies walk			
1120 - 1/27/0	every.	O- 1		



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

Check	the	appropriate	: box(e	s) below:
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check the appropriat	22 20%(20) 22%	
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	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIONLY WITH FOR THEIR EVENT.
Insurance 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 I	Read As:
	and public officia with regard to ge	litical 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	isurance 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 Ilder and as an additional insured as listed above.
	Subject to proof	of insurance.
	Print Name:	Mike Figueroa
	Signature:	This from -
	Title:	Risk Program Manager
	Date:	November 22, 2023



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/16/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	and the decision of the state o				CONTACT NAME: Barry Zimberg							
Mark Edward Partners LLC					PHONE (212) 355-5005 FAX (A/C, No): (212) 813-8085							
505 Park Ave.					E-MAIL bjz@mepinsurance.com ADDRESS:							
					INSURER(S) AFFORDING COVERAGE NAIC					NAIC#		
New York				NY 10022	INSURER A: AmGUARD Insurance Company 42390							
INSURED							INSURER B:					
	Best Buddies International, Inc.				INSURE	RC:						
	100 Southeast Second Street				INSURE	RD:						
	Suite 2200			_,	INSURE	RE:						
	Miami			FL 33131	INSURE	RF:						
COVERAG				NUMBER: CL236291244				REVISION NUMBER:				
INDICATE CERTIFIC EXCLUSI	O CERTIFY THAT THE POLICIES OF II ED. NOTWITHSTANDING ANY REQUIR CATE MAY BE ISSUED OR MAY PERTA ONS AND CONDITIONS OF SUCH PO	REME JN, TH LICIES	NT, TE HE INS S. LIM	ERM OR CONDITION OF ANY SURANCE AFFORDED BY THE	CONTRA E POLICI	ACT OR OTHER IES DESCRIBEI CED BY PAID CL	R DOCUMENT V D HEREIN IS SU LAIMS.	WITH RESPECT TO WHICH TI	HIS			
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S			
×c	OMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	Ψ	0,000		
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,00	0,000		
								MED EXP (Any one person)	\$ 5,00			
^]_				C1GP404668		06/30/2023	06/30/2024	PERSONAL & ADV INJURY	Ψ	0,000		
GEN'L	AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	Ψ .	0,000		
P P	OLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	Ψ .	0,000		
	OTHER:							COMBINED SINGLE LIMIT	\$			
	MOBILE LIABILITY							(Ea accident)	\$			
l L	NY AUTO SCHEDULED							BODILY INJURY (Per person)	\$			
A	UTOS ONLY AUTOS NON-OWNED							BODILY INJURY (Per accident) PROPERTY DAMAGE	\$			
	UTOS ONLY AUTOS ONLY							(Per accident)	\$ s			
	IMBRELLA LIAB COCUR								·			
ļ	CCCOR							EACH OCCURRENCE	\$			
l 	CLAIMS-MADE							AGGREGATE	\$			
	DED RETENTION \$ ERS COMPENSATION							PER OTH- STATUTE ER	\$			
	MPLOYERS' LIABILITY ROPRIETOR/PARTNER/EXECUTIVE							STATUTE ER E.L. EACH ACCIDENT	\$			
OFFICE	ER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA EMPLOYEE	\$			
If yes, d	lescribe under IPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$			
DLOOK	TION OF OF ENATIONS BEIOW							E.E. DIOLAGE - I GEIGI EINIT	Ψ			
	N OF OPERATIONS / LOCATIONS / VEHICLE Buddies Friendship Walk on April 26-2			01, Additional Remarks Schedule,	may be a	ttached if more s	pace is required)					
Lee Count	y, a political subdivision and Charter (Count	v of th	e State of Florida, its agents	employe	ees, and nublic	officials are a	utomatic additional insureds				
and include	es an automatic waiver of subrogatior	with										
noncontribu	utory basis with regards to general lia	bility.		OK 11/22/202	23							
				1. 1								
				Mike For	<u> </u>	-		****				
CERTIFIC	ATE HOLDER				CANC	ELLATION						
								SCRIBED POLICIES BE CAN F, NOTICE WILL BE DELIVER		D BEFORE		
	Lee County, a political subdivision	n and	d Chai	ter				PROVISIONS.				
	County of the State of Florida											
	P.O. Box 398				AUTHO	RIZED REPRESE		~				
	Fort Myers			FL 33902		,	Mark &	dward Partners LL	C			
Track courses, the first												

