

EVENT PERMIT



Ordinance 17-08

Surfers for Autism

PERMIT NUMBER:

TMP2024-00220

Date(s) of Event:

October 19, 2024

Property Owner:

LEE COUNTY

Applicant:

Moose Brown

772-341-5199

Description:

Beach event for children and adults with special needs

Location of event:

950 ESTERO BLVD, FORT MYERS BEACH, FL 33931

Lynn Hall Memorial 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?

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

ftmpprmt specialevent.rpt

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Surfers for Autism

TMP2024-00220



Event Application

Check the appropriate box(es) below:

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

	10th Appriol Cirriors for Autism Cart Many Durant Court				
Title of Event / Name of Production	10th Annual Surfers for Autism Fort Myers Beach Event				
Date(s) of Event / Production:	October 19, 2024				
Location(s) of Event:	Lynn Hall Beach 199 BOS Pd Fort Myers 950 EStero Blud				
Name of Applicant:	Surfers For Autism, II				
Applicant Address:	1820 NE Jensen Beach Blvd, #501, Jensen Beach, Florida 34957				
Applicant Phone Number:	772-341-5199				
Contact Person: (If different from applicant)	Moose Brown, CEO				
Contact Phone Number: (If different from applicant)					
Email Address:	Stephanie@surfeersfor autism.org				
Estimated Attendance:	800-1000				
Event Description: Include each activity, when activities take place, etc.	Beach Event for Children and Adults with Special Needs.				
	The second secon				
Hours of Operation:	7am-5pm				
STRAP # of Parcel:	24-46-23-43-00023-0000				
Owner of Premises*:	1				

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



What is the Zoning Classification of	the premises?			
Are any temporary structures to be i	nstalled for the event? T Yes 💢 No	Type:		
Do you have the appropriate permits	s for the temporary structures?	Yes No		
* For a 'Special Event' and 'Use of Co identified, including all parking areas	ounty Property' permit, submit a site plan w 6.	ith all proposed facilities and activities		
Insurance Company Insuring the Eve	ent:			
Note: Certificate of Insurance must be subm	itted at time of application	and the state of t		
Surety Company Bonding this Event	(Name and Address):			
Will Vehicles be Used as Part of Th Event?	will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?		
下 Yes 反 No	Yes D No	Yes D 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	PROPERTY PERMIT			
Organization Sponsoring the Event:	Surfers for Autism, II			
	an ann a sao an	and the second seco		
Section III - SALE/CONSUM	IPTION OF ALCHOLIC BEVERAGES	PERMIT		
Is alcohol being sold/consumed on of If Yes, then a "Lee County Alcohol Permit" is requ	County Property? Ilred. Only non-profit organizations can sell alcohol on Cou	Yes X No		
Non-profit certificate/registration r (Required if alcohol is to be <u>SOLD</u> at the event)	number:			
Please note: A permit from the State of Flor further details	rida Division of Alcoholic Beverages and Tobacco ma	y also be required; please call (239) 344-0885 for		



ype of Production (choose all that apply):	Courts of Philips	govern	71.0		guitane	call objects	
· ·	ieries / Pilot	<u></u>	TV Commerc				
Public Service Announcement [Indus	strial / Documentary	ļ	Other:		CONTRACTOR OF THE PERSON NAMED IN		
Vill any of the following be needed or includ	led*?						
Street Closure			T Yes	X	No		
Traffic / Crowd Control			Yes	X	No		
Fire or Burning			[Yes	X	No		
Explosives or Pyrotechnics			T Yes	X	No		
Animals, Large or Small			Yes	X	No		
Construction of Any Kind	••		Yes	X	No		
Large and/or Numerous Vehic	les		Yes	区	No		
Helicopters, Boats, etc.			☐ Yes	区	No		
Stunts			Yes	X	No		
Other			Yes	X	No		
Special Parking Requirements:	ass Productives and Productives and Productives and Advanced Advan	Smither the Company	+ De T CONTROL S CONTROL S DE CO		Spirate and Spirate combine	akananan pirininga menandikan pada di Silahan panganan mengupan di mengungan pangah bi	and the second s
City or County Services Required: (Personn	nel, equipment, faciliti	es, etc					
The following information is required for to the industry. If exact figures are not available	ble, please estimate a	on pros	ely as possible	•			c Impact
Number in Cast:	Number In Crew:		Numb	er of	locals	hired:	
Total budget:	Estimate amount spo	ent in l	ee County:		of Draught Artificiates an		elinenty or the last to end with the end of
Hotel room nights:	Number of shooting	days:					
number of rooms x number of nig	ghts		- Control of the Cont				



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

Mitness

Moose Brown

Print Name of Applicant and Title

O2/14/2024

O2/14/2024



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

- TX SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- JT 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.

Parking:	Parking for event will be in authorized areas only & right-of-ways must not be impeded. Paid and public parking lots should be used.	10
Deputies (How Many?):	None are required for this event.	io.
Fee for Services:	None	ar.
Special Arrangements:	All participants must use all established means of ingress & egress as well as sidewalks and paths to get to & from the event. Event will provide experienced open water Lifeguards, Water Watchers and Beach Marshals for the event. LCSO Marine Unit will utilize on duty manpower to attend event. All amplified sounds must adhere to the Town of Ft Myers Beach noise ordinance.	₽,
	Print Name: Dannins Signature: Commander Date: 3 50 24	



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:

SPECIAL EV	/ENT PERMIT
☐ USE OF CO	UNTY PROPERTY PERMIT
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERN	
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR QUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	N/A
Fee for Services:	Invoice Sent.
	······································
Flammable Vegetation:	None Permitted.
First Aid Equipment:	N/A
Fire Extinguishing:	A minimum of one (1) 2A:10BC fire extinguisher shall be available on site. Shall have a current State of Florida Inspection tag, from a licensed contractor.
	current state of Florida hispection tag, from a needsed contractor.
Special Arrangements:	None: No cooking indicated, No setup of Tents indicated, No Stage, No Power Indicated. None are permitted unless a revision is provided to the approved documents.
	Tvoice are permitted unless a revision is provided to the approved documents.
	territoria de la companya de la com La companya de la co
	Print Name: Jennifer Campbell
	Signature: Jennifer Campbell
	Title: Fire Official
	Date: 06/18/2024

10th Annual Surfers for Autism - Lynn Hall Beach - FMB - 10-19-24

Lee County Event Permit Application



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

Check th	he appropri	ate box((es) bei	low:
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SPECIAL EVENT PERMIT

USE OF COUNTY PROPERTY PERMIT

FILM PERMIT

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

See Special Arrange			
	ments below.		
See Special Arrange			
oce opecial Allunga	ments below.		
See Special Arrange	ments below.		
See Special Arranger	nents below.		<u> </u>
EMS defers to Fort M their response distric	yers Beach Fire District for spe tt. Their department can be co	ecifying EMS coverage for this intacted at (239) 590-4200.	event, as it falls within
Print Name:	Douglas B. Higgins		
Signature:	Douglas B. Higgins	Digitally signed by Douglas B. Higgins Date: 2024.02.14 13:29:43 -05'00'	
Title:	Captain, EMS Operations		
Date:	February 14, 2024		
	See Special Arranger EMS defers to Fort M their response distric Print Name: Signature: Title:	Print Name: Douglas B. Higgins Signature: Douglas B. Higgins Title: Captain, EMS Operations	See Special Arrangements below. EMS defers to Fort Myers Beach Fire District for specifying EMS coverage for this their response district. Their department can be contacted at (239) 590-4200. Print Name: Douglas B. Higgins Signature: Douglas B. Higgins Object 2024.02.14 13:29:43-0500 Title: Captain, EMS Operations



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

Check the appropri	ate box(es) be	low:		
SPECIAL EV	ENT PERMIT			
·	UNTY PROPERTY			
		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNT	Y FACILITIES	
FILM PERM				
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, F	PLEASE INDICATE BELOW WHAT ARRANGEMENTS PLY WITH FOR THEIR EVENT.	YOUR ORGANIZATION	
Parking:	No event parking i	s permitted in Lee County maintained road right of ways.	ESSCHARTSSANSSSCHUSTERNSCHUSTERNSCHÜTERNSCHARTSSANSENSCHUSSENSEN HERSCHUSSENSEN HERSCHUSSENSEN HERSCHUSSENSEN	
	Production of the control of the con		hay day and he was a short of the control of the co	
Ingress and Egress:	Please use all estat	ollshed means of ingress and egress.		
Special Arrangements:	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: 2024.02.19 07:35:12-05'00'		
	Title:	Project Manager		
	Date:	02/19/2024		



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

Check the appropri	ate box(es) bel	'ow:		
SPECIAL EV	'ENT PERMIT			
USE OF CO	UNTY PROPERTY	PERMIT		
F PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES		
┌ FILM PERM	1IT			
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.		
Illumination:	Lighting is not perr	mitted between dusk and dawn during Turtle Season as per DEP regulations.		
Parking Areas:	Paid parking at our Beach Parks is available on a first come, first serve basis. No RV's or oversized vehicles are permitted in the Beach parking areas.			
Special Arrangements:	Vessels are not permitted within designated swimming areas.			
		ectators must disperse and leave the beach park area to seek safe shelter during hreatening weather.		
	·			
	Print Name:	Colleen Via		
	Signature:	Collee Cha		
	Title:	County Wide Services Manager		
	Date:	4/1/2024		

Lynn Hall - Eurhers for Cutism



LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR

		2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221
Check the appropria	te box(es) be	low:
	NT PERMIT	
USE OF COU	INTY PROPERTY	PERMIT
PERMIT TO	SELL AND CONS	SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI	Т	
AFTER REVIEWING THE A	APPLICATION, I CANT TO COMI	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Insurance Requirements:	occurrence to pi	eral flability 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 offici with regard to g	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 sion and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as solder and as an additional insured as listed above.
	Subject to proof	of insurance.
	Print Name:	Mike Figueroa
	Signature:	This frim-
	Title:	Risk Program Manager
	Date:	February 28, 2024

ACORD	•

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/28/2024 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(6), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate helder is an ADDITIONAL INSURED, the policy(les) 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). HANE: Susan Cagen PRODUCES JMG Insurance Corp HOUR BOTH 203-838-5554 (Arc. No): 203-857-7848 P.O. Box 700 Norwalk CT 06852 (NSURER(S) APPORDING COVERAGE NAIC # INSURER A: Vantapro Specialty Insurance Company 44788 HISURED INSURER B: United States Fire Insurance Company 21113 Surfers for Autism II, Inc. 1820 NE Jensen Beach Blvd #501 INBURER C : Jensen Beach FL 34957 INSURER D : MEURER E : INSURER F: **COVERAGES CERTIFICATE NUMBER: 1684466613 REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBL NSD WVD POLICY PRO POLICY DO TYPE OF INSURANCE POLICY NUMBER X COMMERCIAL GENERAL LIABILITY 5077-0433-02 2/15/2024 2HB/2028 \$ 1,000,000 EACH OCCURRENCE CLAIMS-MADE X OCCUR DAMAGE TO RENTED PREMISES (Es courte \$ 300,000 \$ 5,000 MED EXP (Any one person) PERSONAL & ADV INJURY \$1,000,000 GENL AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE 8 3,000,000 X POLICY POLICY LOC PRODUCTS - COMP/OP AGG \$ 1,000,000 OTHER: SEMBRIED BINGLE LIMIT AUTOMOBILE LIABILITY 8 OTUA YIIA BODILY (NJURY (Per person) OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY BODILY INJURY (Per socident) PROPERTY DAMAGE \$ UMBRELLA LIAB OCCLIR EACH OCCURRENCE ENCERRO LIAD CLAIMB-MADE AGGREGATE DED RETENTIONS WORKERS COMPENSATION AND EMPLOYERS LIABILITY STATUTE ANYFROPRIETOR/PARTNER/EX OFFICER/AGMSER EXCLUDED? (Nantatory in NH) ECUTIVE E.L. EACH ACCIDENT HIA ELL DISEASE - EA EMPLOYEE yos, describe under DESCRIPTION OF OPERATIONS below EL. DISEABE - POLICY LIMIT Accident Medical US1392980-03 2/15/2024 2/18/2028 Max Medical Acc Death/Dismember DESCRIPTION OF OPERATIONS / LOCATIONS / VENICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space to required)

Lee County Board of County Commissioners is named as additional insured only with respect to the acts of the Named insured and only with respect to the Operations of the Insured during the coverage period. OK 02/28/2024 CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lee County Board of County Commissioners 2115 2nd Street Ft Myers, FL 33901 AUTHORIZED REPRESENTATIVE John O. Forlino