

EVENT PERMIT



Ordinance 17-08

Tween Waters Island Resort Tree Lighting

PERMIT NUMBER:

TMP2024-00250

Date(s) of Event:

Friday November 29, 2024

Property Owner:

ROCHESTER RESORTS INC

Applicant:

Michele Berger

239-472-5161 X

Description:

Christmas Tree Lighting.

Friday November 29, 2024 from 4:00PM-10:00PM

Location of event:

15951 CAPTIVA DR, CAPTIVA, FL 33924

15951 Captiva Drive

Will the event be attended by 1000 or more people?

Will the event be held on County Owned Property?

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

No

No

) Date

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

TWEEN WATERS ISLAND RESORT

TMP2024-00250



Event Application

Check the appropriate box(es) below	Спеск tпе	арр	ropriate	box(es)	pei	ow:
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SPECIAL EVENT PERMIT
USE OF COUNTY PROPERTY PERMIT
PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT

I ILIVI F LIVIVII				
Section I - GENERAL INFORMATION (All Permit Types)				
Title of Event / Name of Production	'Tween Waters Island Resort Tree Lighting			
Date(s) of Event / Production:	Friday, November 29th, 2024			
Location(s) of Event:	'Tween Waters Island Resort & Spa			
Name of Applicant:	'Tween Waters Island Resort & Spa			
Applicant Address:	15951 Captiva Drive Captiva, FL 33924			
Applicant Phone Number:	239-472-5161 ex.434			
Contact Person: (If different from applicant)	Michele Berger			
Contact Phone Number: (If different from applicant)	239-839-9057			
Email Address:	michele@sancapbeachresorts.com			
Estimated Attendance:	500			
Event Description: Include each activity, when activities take place, etc.	Christmas tree lighting			
Hours of Operation:	4:00pm-10:00pm			
STRAP # of Parcel:				
Owner of Premises*:				

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



What is the Zoning Classification of the	premises? KIVI2	
Are any temporary structures to be insta	alled for the event? Yes X No	Туре:
Do you have the appropriate permits fo	r the temporary structures?	Yes No
* For a 'Special Event' and 'Use of Count identified, including all parking areas.	ry Property' permit, submit a site plan wit	h 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	nme 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
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: TBD	Tween Waters Resort &	Spa
Section II - USE OF COUNTY PF Organization Sponsoring the Event:	ROPERTY PERMIT	
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being sold/consumed on Cou	nty Property?	Van
	Only non-profit organizations can sell alcohol on County	Yes No 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 I further details	Division of Alcoholic Beverages and Tobacco may a	lso be required; please call (239) 344-0885 for



TV Movie or Spe	cial	TV Series / Pilot		TV Comme	rcial		till Photos	
Public Service Ar	nouncement	☐ Industrial / Documenta	ry 🔀	Other: Tre	e Lighti	ng		
ill any of the follov	ving he neede	d or included*?				grant and an all and a state of the state of		
. •	Closure	d of medded ;		☐ Yes	X	No		
	: / Crowd Cont	rol		Yes		No		
the request in pide three below				Yes	and the second second	No	substitution of the state of th	
and the state of the state of	Fire or Burning Explosives or Pyrotechnics					No		
	ils, Large or Sn					No	POSICIAN CONTRACTOR	
	ruction of Any			Yes		No		
	and/or Numer			Yes	CHICAGO CONTRACTOR OF	No		
	pters, Boats, e			Yes	-	No		
Stunts		And the second s		Yes		No		
Other				Yes	The state of the s	No		
Fireworks at er	nd of tree lig	hting						
Special Parking Re Want to park o	quirements:	hting · Chadwick Square & on	Wiles [or. and Cha	pin Ln	at Cl	napel by th	e
Special Parking Re	quirements:		Wiles [Or. and Cha	pin Ln	at Cl	napel by th	е
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Special Parking Re Want to park of Sea. City or County Ser N/A The following info	quirements: n street near vices Required	Chadwick Square & on I: (Personnel, equipment, fac uired for local and state reco	ords on p	tc.) roduction in sely as possib	Florida	to tra	ck the econo	
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Special Parking Re Want to park of Sea. City or County Ser N/A The following info the industry. If exa	quirements: n street near vices Required	Chadwick Square & on I: (Personnel, equipment, fac- uired for local and state recond available, please estimate Number in Crew	ords on pose as close	roduction in sely as possib Nun Lee County:	Florida le.	to tra	ck the econo	



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.

mo, ner medber	
mi	JAA.
Signature of Applicant	Witness
Michele Berger 6m	In Wilim
Print Name of Applicant and Title	Print Name of Witness
7/3/24	7/3/2024
Date	Date



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

F PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION

Check th	e	approp	oriate	box(es)	below:
ī×	-	SPECIAL	EVENT	PERMIT	

FILM PERMIT

USE OF COUNTY PROPERTY PERMIT

WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:	Parking for event will be in authorized areas only & right-of-way must not be impeded.
ا -(?Deputies (How Many	4 deputies for traffic control as well as security and presence as needed throughout the event area.
Fee for Services:	Contact LCSO Details Unit
Special Arrangements:	Alcohol will be served as it normally is at the venue and will remain on premises.
	Print Name: P. Commins
	Signature:
	Title: <u>Commander</u> Date: 7/9 24
	Date: 7 /9 34



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:

☐ USE OF CO	VENT PERMIT OUNTY PROPERTY PERMIT OUNTY SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES OUNTY FACILITIES
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR QUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	4
Fee for Services:	SEPERATE FEE FOR FIREWORKS
Flammable Vegetation:	DUNE GRASS.
First Aid Equipment:	ADVANCED LIFE SUPPORT ENGINE CO. EINT'S+ PARAMEDIC'S AVAILABLE.
Fire Extinguishing:	FIRE ENGINOE
Special Arrangements:	Print Name: SHAWN KILGORE
	Signature: Shower Hilly au Title: LIEUTENANT (CAPTIVA FIRE) Date: 7/31/24



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

Check the appropriate box(es) below

X	SPECIAL EVENT PERMIT
-	LICE OF COLINITY DRODERTY

□ USE OF COUNTY PROPERTY PERMIT

Title:

Date:

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 fo Orders concerning	llow all CDC and FDOH directives, and the Florida Governor's Executive health and safety.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in office at EMSDetail	the event of an emergency. To arrange special event coverage, contact our il@leegov.com.
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins Digitally signed by Douglas B. Higgins Date: 2024.08.06 13:16:24 -04'00'

Captain, EMS Operations

August 6, 2024



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

Check the appropri	ate box(es) bel	low:			
SPECIAL E	/ENT PERMIT				
USE OF CO	UNTY PROPERTY	PERMIT			
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES			
FILM PERM	/IT				
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY 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:	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: 2024,07.09 10:06:38 -04'00'			
	Title:	Project Manager			
	Date:	07/09/2024			



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

Check the appropri	ate box(es) belo	ow:
<mark> </mark> SPECIAL EV	ENT PERMIT	
USE OF CO	UNTY PROPERTY	PERMIT
PERMIT TO	SELL AND CONSU	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	11T	
, .		
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, PILICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Illumination:	N/A	
	J	
Parking Areas:	N/A	
]	
Special Arrangements:	N/A - Event is not o	n Parks and Rec property and will not affect county park operations or programs.
	·	
	Print Name:	Colleen Via
	Signature:	Collen Via
	Title:	Countywide Services Manager
	Date:	7/9/24

Not on PK. Propa & - Tueen waters Island Report Thee highting 11/29/2024 Page 10



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/16/2024

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).

this certificate does not comer rights to	tile c	CILIII	tate noider in ned or such					
PRODUCER				CONTACT Stephanie Wilkinson				
Brown & Brown Insurance Services, Inc.				PHONE (A/C, No, Ext): (239) 274-1430 FAX (A/C, No): (239) 278-5306				
6611 Orion Drive, Suite 201				E-MAIL Stephanie.Wilkinson@bbrown.com				
				ADDICE		SURER(S) A FEOR	RDING COVERAGE	NAIC#
Ft. Myers			FL 33912	INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: StarStone Specialty Insurance Company				IVAIO#
INSURED				INSURER B: Auto-Owners Insurance Company				18988
Sanibel Captiva Beach Resorts	LLC			INSURER C: ACE Property & Casualty Insurance Company				
Rochester Resort, Inc.				NOOKEKO.			10385	
P.O. Box 249				INSURER D.				
Captiva Island FL 33924			INSURER E : INSURER F :					
	TIFIC	ΔTF I	NUMBER: 24-25 COI	INSUKL	IXI'.		REVISION NUMBER:	
				ISSUED	TO THE INSUR			
CERTIFICATE MAY BE ISSUED OR MAY PERT. EXCLUSIONS AND CONDITIONS OF SUCH PO	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.							
INSR LTR TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
COMMERCIAL GENERAL LIABILITY					,	•	LACITOCCONNENCE \$	000,000
CLAIMS-MADE OCCUR							DAMAGE TO RENTED \$ 1,0	000,000
							MED EXP (Any one person) \$ 50	0
A -	Y		P0100000076001		07/01/2024	07/01/2025		000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$ 2,0	000,000
POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG \$ 2,0	000,000
OTHER:								000,000
AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident) \$ 1,0	000,000
ANY AUTO							BODILY INJURY (Per person) \$	
B OWNED SCHEDULED AUTOS ONLY AUTOS			4382520401		10/04/2023	10/04/2024	BODILY INJURY (Per accident) \$	
HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident) \$	
I I I Nove of the last of the							\$	
✓ UMBRELLA LIAB ✓ OCCUR							EACH OCCURRENCE \$ 14	5,000,000
C EXCESS LIAB CLAIMS-MADE			PUMB-24-A-G73933584		06/29/2024	06/29/2025		5,000,000
DED RETENTION \$ 0	1						\$	
WORKERS COMPENSATION							➤ PER OTH-ER	
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFICER/MEMBER EXCLUDED? (Mandatory in NH)			WC8400798118-2024A	01/01/2024	01/01/2024	01/01/2025	E.L. EACH ACCIDENT \$ 50	0,000
			VVC6400796116-2024A					0,000
If yes, describe under DESCRIPTION OF OPERATIONS below							0,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (AC	ORD 1	01, Additional Remarks Schedule,	may be a	ttached if more s	pace is required)		
Location: 15951 Captiva Dr., Captiva, FL								
Regarding events held at the above location, Locontract or agreement.	ee Cou	inty B	oardof County Commissioner	rs is nan	ned as an Addi	tional Insured v	when required by a written	
contract of agreement.			OK 07/19/2024					
			his ti					
me figure								
CERTIFICATE HOLDER				CANC	ELLATION			
Lee County Board of County Commissioners 1500 Monroe St.			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
1000 Monitoe ot.			AUTHORIZED REPRESENTATIVE					
Fort Myers			FL 33901				all	



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

Check the appropriat	e box(es) bel	ow:			
J⊠ SPECIAL EVE	NT PERMIT				
☐ USE OF COU	NTY PROPERTY	PERMIT			
PERMIT TO S	ELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	/ FACILITIES		
FILM PERMIT	Г				
		LEASE INDICATE BELOW WHAT ARRANGEMENTS LY WITH FOR THEIR EVENT.	S YOUR ORGANIZATION		
nsurance Requirements:	Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.				
	Certificate Must F	Read As:			
	and public officia with regard to ge	litical subdivision and Charter County of the State of Floridals are automatic additional insureds and includes an automeneral liability. The certificate holder is an additional insured basis with regards to general liability.	natic waiver of subrogation		
Special Arrangements:	A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County, a political subdivision and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured as listed above. Subject to proof of insurance.				
	Print Name:	Mike Figueroa			
	Signature:	This Join -			
	Title:	Risk Program Manager			
	Date:	July 19, 2024			