



# EVENT PERMIT

Ordinance 17-08



## 'Tween Waters Inn & Marina

**PERMIT NUMBER:** TMP2025-00268

**Date(s) of Event:** Friday, November 28, 2025, from 4:00PM until 10:00PM

Property Owner: ROCHESTER RESORTS INC

Applicant: Elizabeth Schramm  
678-227-0224

Description: Christmas Tree Lighting held on 'Tween Waters property.

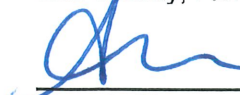
Location of event: 15951 CAPTIVA DR, CAPTIVA, FL 33924

|                                                       |     |
|-------------------------------------------------------|-----|
| Will the event be attended by 1000 or more people ?   | Yes |
| Will the event be held on County Owned Property ?     | No  |
| 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

 9/15/25  
County Manager Date



Lee County  
*Southwest Florida*

# Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

Tween waters Inn i marina  
Christmas Tree Lighting  
TMP 2025-00268

## Lee County Event Permit Application



### 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 INFORMATION (All Permit Types)                            |                                          |
|-------------------------------------------------------------------------------|------------------------------------------|
| Title of Event / Name of Production                                           | 'Tween Waters Inn & Marina               |
| Date(s) of Event / Production:                                                | Friday, November 28th, 2025              |
| Location(s) of Event:                                                         | 'Tween Waters Inn & Marina               |
| Name of Applicant:                                                            | 'Tween Waters Island Resort & Spa        |
| Applicant Address:                                                            | 15951 Captiva Drive<br>Captiva, FL 33924 |
| Applicant Phone Number:                                                       | 239-472-5161 ext. 434 / Will Oliver      |
| Contact Person:<br>(If different from applicant)                              | Elizabeth Schramm                        |
| Contact Phone Number:<br>(If different from applicant)                        | 678-227-0224                             |
| Email Address:                                                                | elizabeth@tween-waters.com               |
| Estimated Attendance:                                                         | 1000                                     |
| Event Description:<br>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.

## Lee County Event Permit Application



What is the Zoning Classification of the premises? RM2

Are any temporary structures to be installed for the event? ☐ Yes ☒ No Type: \_\_\_\_\_

Do you have the appropriate permits for the temporary structures? ☐ Yes ☐ No

\* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event: \_\_\_\_\_

Note: Certificate of Insurance must be submitted at time of application

Surety Company Bonding this Event (Name and Address): \_\_\_\_\_

Will Vehicles be Used as Part of This Event?

☐ Yes ☒ No

If yes, automobile coverage must be included on the certificate of insurance.

Will Food be Available at this Event?

☒ Yes ☐ No

If yes, products liability coverage must be included on the certificate of insurance.

Will Alcoholic Beverages be served/consumed at this Event?

☒ Yes ☐ No

If yes, liquor liability coverage must be included on the certificate of insurance.

Name & Address of Organization Providing Food:

'Tween Waters Inn & Marina

Type of Food being Served: TBD

### Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: \_\_\_\_\_

### Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property?

Yes ☐ No ☐

If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number:

(Required if alcohol is to be **SOLD** at the event)

Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details

## Lee County Event Permit Application



Type of Production (choose all that apply):

|                                                      |                                                   |                                                                 |                                       |
|------------------------------------------------------|---------------------------------------------------|-----------------------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> TV Movie or Special         | <input type="checkbox"/> TV Series / Pilot        | <input type="checkbox"/> TV Commercial                          | <input type="checkbox"/> Still Photos |
| <input type="checkbox"/> Public Service Announcement | <input type="checkbox"/> Industrial / Documentary | <input checked="" type="checkbox"/> Other: <u>Tree lighting</u> |                                       |

Will any of the following be needed or included\*?

|                                |                                         |                                        |
|--------------------------------|-----------------------------------------|----------------------------------------|
| Street Closure                 | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Traffic / Crowd Control        | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Fire or Burning                | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Explosives or Pyrotechnics     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Animals, Large or Small        | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Construction of Any Kind       | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Large and/or Numerous Vehicles | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Helicopters, Boats, etc.       | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Stunts                         | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Other                          | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |

\* For any marked Yes, provide further details below:

Fireworks at end of tree lighting; fireworks permit to be handled by pyrotechnics company

Special Parking Requirements:

At Chadwick Square

City or County Services Required: (Personnel, equipment, facilities, etc.)

N/A

The following information is required for local and state records on production in Florida to track the economic impact of the industry. If exact figures are not available, please estimate as closely as possible.

|                                                                               |                                            |                               |
|-------------------------------------------------------------------------------|--------------------------------------------|-------------------------------|
| Number in Cast: _____                                                         | Number in Crew: _____                      | Number of locals hired: _____ |
| Total budget: _____                                                           | Estimate amount spent in Lee County: _____ |                               |
| Hotel room nights: _____<br><small>number of rooms x number of nights</small> | Number of shooting days: _____             |                               |



## **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.

## Lee County Event Permit Application



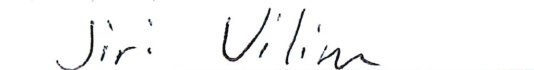
### SECTION V - AGREEMENT

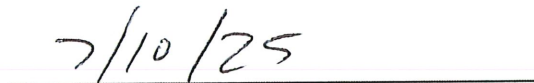
The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee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

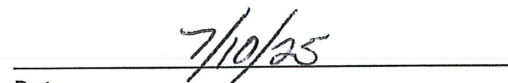
  
\_\_\_\_\_  
Signature of Applicant

  
\_\_\_\_\_  
Print Name of Applicant and Title

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Witness

  
\_\_\_\_\_  
Print Name of Witness

  
\_\_\_\_\_  
Date

Lee County Event Permit Application



LEE COUNTY SHERIFF'S DEPARTMENT  
14750 SIX MILE CYPRESS PARKWAY  
FORT MYERS, FLORIDA 33912  
(239) 477-1199

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
☐ 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.

2025 Tween Waters Tree Lighting

Parking:

All parking must be in authorized areas only & must not impede the right-of-way. There will be some street parking offered, but LCSO request that Captiva Dr not be used. Off-site parking & shuttle service will be offered at Castaways. Permit to use parking will be sought through City of Sanibel.

Deputies (How Many?):

Four (4) extra duty detail deputies will be required for traffic control & security & presence & will be done so at the event organizers expense.

Fee for Services:

Contact Details Unit 239-477-1171 for further information.

Special Arrangements:

Alcohol will be available for sale and consumption through the normal course of business. Tree lighting event will be open to the public & will take place throughout the Tween Waters property. A permit for the scheduled pyrotechnics will be sought out by the contracted company and will be handled separate from the special event permit application.

Print Name:

D. Cummins

Signature:

*[Handwritten Signature]*

Title:

Support Services

Date:

7 21 25

Lee County Event Permit Application



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 EVENT PERMIT

☐ 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.

Fire Guards (How Many?)

(1) FIRE ENGINE  
(1) UTV W/FIRE PUMP

Fee for Services:

\$ 0.00

Flammable Vegetation:

- DUNE GRASS (SEA OATS)

First Aid Equipment:

- ADVANCED LIFE SUPPORT W/PARAMEDICS

Fire Extinguishing:

- FIRE ENGINE  
- UTV W/FIRE PUMP

Special Arrangements:

- PRE - EVENT INSPECTIONS  
- STAND-BY UNITS

Print Name:

SHAWN KILGORE

Signature:

Shawn Kilgore

Title:

DEPUTY CHIEF

Date:

8/8/2025

## Lee County Event Permit Application

**EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY****2000 Main St., Suite #100****FORT MYERS, FL 33901****(239) 533-3911***Check the appropriate box(es) below:*

- ☒ SPECIAL EVENT PERMIT  
☐ 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 follow all CDC and FDOH directives, and the Florida Governor's Executive Orders concerning health and safety.

Fee for Services

Not applicable.

Special Arrangements:

Please call 911 in the event of an emergency. To arrange special event coverage, contact our office at EMSDetail@leegov.com.

Print Name: Douglas B. Higgins

Signature:

Douglas B. Higgins

Digitally signed by Douglas B. Higgins  
Date: 2025.07.13 17:11:42 -04'00'

Title:

Captain, EMS Operations

Date:

July 13, 2025

Lee County Event Permit Application



DEPARTMENT OF TRANSPORTATION  
1500 MONROE STREET  
FORT MYERS, FL 33901  
(239) 533-8580

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
☐ 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.

Parking:

No event parking is permitted in Lee County maintained road right of ways.

Ingress and Egress:

Please use all established 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: 2025.07.30 07:57:38 -04'00'

Title: Project Manager

Date: 07/30/2025

Lee County Event Permit Application



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

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
☐ 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.

Illumination:

NA

Parking Areas:

NA

Special Arrangements:

NA - Event is not on Parks and Recreation property and will not affect county park operations or programs.

Print Name: Trever Snearley

Signature:

Title: County Wide Services Manager

Date: 7/11/2025

NOT ON PARK PROP. - TWEEN WATERS CHRISTMAS  
TREE LIGHTING  
11/28/2025

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT  
COUNTY ADMINISTRATION BUILDING - 4<sup>TH</sup> FLOOR  
2115 SECOND STREET  
FORT MYERS, FLORIDA 33901  
(239) 533-2221

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT  
☐ 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.

Insurance 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 Read As:

Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials are automatic additional insureds and includes an automatic waiver of subrogation with regard to general liability. The certificate holder is an additional insured on a primary and noncontributory basis with regards to general liability.

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:

Title:

Risk Program Manager

Date:

July 28, 2025



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/10/2025

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).

|                                                                                                                                     |  |                                                                                                                                                                                                                                                                  |  |
|-------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>PRODUCER</b><br>Brown & Brown Insurance Services, Inc.<br>9617 Gulf Research Ln<br>Suite 202<br>Ft. Myers FL 33912               |  | <b>CONTACT NAME:</b> Stephanie Wilkinson<br><b>PHONE (A/C, No, Ext):</b> (239) 261-3000<br><b>FAX (A/C, No):</b> (239) 261-8265<br><b>E-MAIL ADDRESS:</b> Stephanie.Wilkinson@bbrown.com                                                                         |  |
| <b>INSURED</b><br>Sanibel Captiva Beach Resorts, LLC<br>Tween Waters Island Resort & Spa<br>P.O. Box 249<br>Captiva Island FL 33924 |  | <b>INSURER(S) AFFORDING COVERAGE</b><br><b>INSURER A:</b> StarStone Specialty Insurance Company<br><b>INSURER B:</b> FFVA Mutual Insurance Co.<br><b>INSURER C:</b> AGCS Marine Insurance Company<br><b>INSURER D:</b><br><b>INSURER E:</b><br><b>INSURER F:</b> |  |
|                                                                                                                                     |  | <b>NAIC #</b><br>10385                                                                                                                                                                                                                                           |  |

## COVERAGES

**CERTIFICATE NUMBER:** Tween Waters 25-26

**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.

| INSR LTR | TYPE OF INSURANCE                                                                                                                                                                                                                                                                                                          | ADDL INSD | SUBR WVD | POLICY NUMBER    | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                                                                                                                                                                                                                         |
|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|------------------|-------------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC<br>OTHER: | Y         |          | P0100000076002   | 07/01/2025              | 07/01/2026              | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 500<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>\$ |
|          | <input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input type="checkbox"/> HIRED AUTOS ONLY<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS ONLY                                                                                                   |           |          |                  |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$                                                                                          |
|          | <input type="checkbox"/> UMBRELLA LIAB<br><input type="checkbox"/> EXCESS LIAB<br>DED RETENTION \$                                                                                                                                                                                                                         |           |          |                  |                         |                         | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$                                                                                                                                                                                                       |
|          | <input checked="" type="checkbox"/> <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below<br>Y/N <input checked="" type="checkbox"/> N                                             |           |          |                  |                         |                         | PER STATUTE <input checked="" type="checkbox"/> OTH-ER <input type="checkbox"/><br>E.L. EACH ACCIDENT \$ 500,000<br>E.L. DISEASE - EA EMPLOYEE \$ 500,000<br>E.L. DISEASE - POLICY LIMIT \$ 500,000                                            |
| C        | Leased or Rented Equipment                                                                                                                                                                                                                                                                                                 |           |          | MXI9307982423398 | 09/10/2024              | 09/10/2025              | Leased or Rented \$40,000                                                                                                                                                                                                                      |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Location: 15951 Captiva Dr., Captiva, FL  
Regarding events held at the above location, Lee County Board of County Commissioners is named as an Additional Insured when required by a written contract or agreement.

OK 07.28.2025

## CERTIFICATE HOLDER

## CANCELLATION

|                                                                                        |                                                                                                                                                                                                     |
|----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Lee County Board of County Commissioners<br>1500 Monroe St.<br><br>Fort Myers FL 33901 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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#### Accommodations

- 1 Fritet Deck
- 2 Covered Parking
- 3 Canoe & Kayak Club
- 4 Wakefield Room
- 5 Ding Darling Room
- 6 Guest Laundry
- 7 Outdoor Grills

#### Guest Cottages, Suites & Rooms

- 8 Guest Cottages 100-120
- 9 Arca Guest Suites
- 10 Gumbo Limbo Guest Suites
- 11 Coconut Guest Suites
- 12 Mangrove Guest Suites
- 13 Sea Grape Guest Rooms
- 14 Palmetto Guest Rooms

#### Dining & Bars

- 15 Old Captiva House
- 16 The Shipyard
- 17 2nd Level Crow's Nest Steakhouse
- 18 Captiva Crust
- 19 Oasis Pool Bar
- 20 Hideaway Pool Bar
- 21 Captiva Coffee House

#### Recreation & Amenities

- 22 2nd Level Fitness Center & Spa
- 23 2nd Level Tennis & Pickleball
- 24 Oasis Pool
- 25 Serenity Pool
- 26 Private Tween Waters Beach
- 27 Parasailing & Jet Ski Rental
- 28 Adventure Sea Kayak Rental
- 29 Marina & Pelican Roost Ship Store
- 30 Captiva Watersports

#### R RESTROOMS

