



# EVENT PERMIT

Ordinance 17-08



## South Seas Captiva Island Triathlon

**PERMIT NUMBER:** TMP2025-00279

**Date(s) of Event:** September 28, 2025

**Property Owner:** WS SSIR OWNER LLC

**Applicant:** Brian Huether  
954-647-1383

**Description:** Triathlon event to take place on September 28, 2025 from 7:00AM until 11:30AM utilizing South Seas Resort and Captiva Dr.

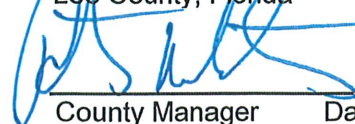
**Location of event:** 5600 SOUTH SEAS PLANTATION RD, CAPTIVA, FL 33924

Will the event be attended by 1000 or more people ?	No
Will the event be held on County Owned Property ?	Yes
Will there be alcohol consumed or sold at the event ?	No
Will a bond be posted for this event ?	No

**Permit Conditions:**

- \* Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- \* The premises is to be left in the same condition as it was prior to the event.
- \* The permit is to be readily available for inspection during the entire event.
- \* If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners  
Lee County, Florida

 9-22-25  
County Manager Date



Lee County  
*Southwest Florida*

# Event Application

Special Event

Use of  
County  
Property

Alcohol  
within Lee  
County  
Facilities

Film, Video  
&  
Photography

*South Seas Captiva Island Triathlon*

*TMP2025-00279*

## 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	South Seas Captiva Island Triathlon
Date(s) of Event / Production:	Sunday, September 28, 2025
Location(s) of Event:	South Seas Resort - 5400 Planatation Road, Captiva, FL 33924
Name of Applicant:	W.B. Events, LLC d/b/a Game On Race Events
Applicant Address:	1095 Military Trail, Unit # 9204, Jupiter, FL 33468
Applicant Phone Number:	(561) 768-7889
Contact Person: (If different from applicant)	Brian Huether (Race Director)
Contact Phone Number: (If different from applicant)	(954) 647-1383
Email Address:	Brian@GameOnRaceEvents.com
Estimated Attendance:	350
Event Description: Include each activity, when activities take place, etc.	September 28, 2025 Super Sprint Triathlon 7:10am - 200 yd swim, 5 mile bike, 1.5 mile run Sprint Triathlon at 7:30am - .25 mile swim, 10 mile bike, 3.1 mile run
Hours of Operation:	Sept. 28th triathlon = 7:10am - 11:30am
STRAP # of Parcel:	
Owner of Premises*:	South Seas Resort

\*Notarized statement from the property owner specifically consenting to the proposed use required.



## Lee County Event Permit Application



**Fill out the following questions for all permit types:**

What is the Zoning Classification of the premises? \_\_\_\_\_

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: Vaaler Insurance, A Marsh & McLennan Agency LLC Company

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

Surety Company Bonding this Event (Name and Address): Accredited Surety and Casualty Company Inc.

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 South Seas Resort  
Providing Food: \_\_\_\_\_

Type of Food being Served: Post race food = bananas, Oranges, etc.

### Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Game On Race Events

**Fill out this portion for applications for Solicitation in the County Rights-of-Way:**

Name of Charity: \_\_\_\_\_

Address of Charity: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Non-profit certificate/registration number: \_\_\_\_\_

(Proof of registration with the Dept. of Agriculture & Consumer Services \$496.405 or proof the organization is exempt from this requirement. \$316.2045)

### 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: N/A

(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



### Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Type of Production (choose all that apply):

☐ TV Movie or Special      ☐ TV Series / Pilot      ☐ TV Commercial      ☐ Still Photos  
☐ Public Service Announcement      ☐ Industrial / Documentary      ☒ Other: Sporting Event

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

Street Closure	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Traffic / Crowd Control	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Fire or Burning	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Explosives or Pyrotechnics	<input type="checkbox"/> Yes	<input checked="" 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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Stunts	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

Lee County Sheriff's Office for road closure and traffic control.  
Lee County Sheriff's Office marine unit.

Special Parking Requirements:

All parking will take place at South Seas.

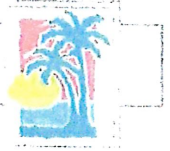
City or County Services Required: (Personnel, equipment, facilities, etc.)

Lee County Sheriff's Office  
Lee County Fire Rescue  
Lee County lifeguards

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:	<u>350</u>	Number in Crew:	<u>35</u>	Number of locals hired:	<u>25</u>
Total budget:	<u>\$35,000</u>	Estimate amount spent in Lee County:	<u>\$20,000</u>		
Hotel room nights:	<u>500</u>	Number of shooting days:	<u>2</u>		
<small>number of rooms x number of nights</small>					

## **Applicant Agreement - Signature Required**



### **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.



Applicant Agreement - Signature Required



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.

Brian Huether - Game On Race Events  
Signature of Applicant

Meschelle J. Huether  
Witness

Brian Huether - Owner/Race Director  
Print Name of Applicant and Title

Meschelle J. Huether  
Print Name of Witness

8/5/2025  
Date

8/5/2025  
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.

Parking:

All parking for event will be in authorized areas only & will not impede the normal flow of traffic. Participants & spectators should be directed to parking by event volunteers.

Deputies (How Many?):

One (1) Incident Commander, One (1) Traffic Supervisor, 12 traffic deputies will be required for traffic control along run/bicycle portions of the event. A request for Community Service Unit volunteers has been made, but they are not considered a guaranteed asset & additional extra duty detail deputies may be required should they not be available. Extra duty Marine Unit detail deputies & vessels will be required for swim portion of the event. All required extra duty detail deputies will be paid at the event coordinator's expense.

Fee for Services:

Contact LCSO Details Unit for further information.

Special Arrangements:

Event coordinator will be responsible for notifying residents & businesses of event & road closures prior to event. Event coordinator will be responsible for equipment required for maintenance of traffic to include the use of cones, barricades, message boards as well as their placement throughout the course.

Print Name:

P. Cummins

Signature:

[Handwritten Signature]

Title:

Support Services

Date:

8 25 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  
☐ 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?)

12

Fee for Services:

Yes

Flammable Vegetation:

N/A

First Aid Equipment:

ALS Non-Transport

Fire Extinguishing:

E181 from Station

Special Arrangements:

See IAP

Print Name: Jeff Pawul

Signature:

Title: Fire Chief

Date: 09/16/25



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:	Bike Team x 1, Cart Team x 1 (6:45 AM until 11:30 per application + 1 hour (setup))
Medical Supplies / Equipment:	Equipment and supplies with assigned resources. None other 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	Bike Team x 1 (\$80.00/hr/team), Cart Team x 1 (\$80.00/hr/cart) We will have an on-duty supervisor (no charge) in addition to the regular ambulance (no charge) at the Captiva Station Hours are: 6:45 AM until 11:30 per application + 1 hour for setup/take down - invoiced after event
Special Arrangements:	Please call 911 in the event of an emergency or utilize the event radios to notify command. This plan is subject to change as we meet with your team in the lead up to the event. Approval of the Event Permit Application is contingent upon a continued safety focus and arrangement of medical coverage as above.

Print Name: Douglas B. Higgins

Signature: Douglas B. Higgins Digitally signed by Douglas B. Higgins  
 Date: 2025.07.27 19:07:47 -04'00'

Title: Captain, EMS Operations

Date: July 27, 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: 2025.09.15 10:12:40 -04'00'

Title: Project Manager

Date: 09/15/2025

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: Countywide Services Manager

Date: 9/10/2025

VOT ON Park Prop - CAPTIVA TRIATHLON  
(9/28/2025)

## 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  
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☐ 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:	<p>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.</p> <p>Certificate Must Read As:</p> <p>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.</p>
Special Arrangements:	<p>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.</p> <p>Subject to proof of insurance.</p>

Print Name: Mike Figueroa

Signature:

Title:

Risk Program Manager

Date:

August 20, 2025





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/24/2025

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> Vaaler Insurance, A Marsh & McLennan Agency LLC Company 2701 S Columbia Rd Grand Forks ND 58201	<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext):</b> 701-775-3131 <b>E-MAIL ADDRESS:</b> USATRequests@MarshMMA.com <b>FAX (A/C, No):</b> 701-775-4020
<b>INSURED</b> USA Triathlon of Colorado As Per The Named Insured Extension Schedule: 5825 Delmonico Drive Colorado Springs CO 80919	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Accredited Surety and Casualty Company Inc <b>INSURER B:</b> United States Fire Insurance Company <b>INSURER C:</b> Allianz Global Risks US Insurance Company <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
USATRIA-01	<b>NAIC #</b> 26379 21113 35300

**COVERAGES****CERTIFICATE NUMBER:** 1552793529**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"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Participant LL <input checked="" type="checkbox"/> Desig. Event Cap GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: Event			1-RSL-CO-17-01538664-00	1/1/2025	1/1/2026	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 2,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Desig. Event Cap \$ 20,000,000
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			1-RSL-CO-17-01538664-00	1/1/2025	1/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Hired & Non-Owned \$ 2,000,000
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			1-RSL-CO-17-01538665-00	1/1/2025	1/1/2026	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Participant Accident			US1929940	1/1/2025	1/1/2026	Accident Medical 25,000
C	Excess Liability			24ABHX0236	1/1/2025	1/1/2026	Occ/Agg 2,000,000
A	Liquor Liability			1-RSL-CO-17-01538664-00	1/1/2025	1/1/2026	Occ/Agg 2M/4M

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

USA Triathlon of Colorado; USA Triathlon (USAT); USA Triathlon (Ironman); USA Triathlon Foundation  
USAT Race Directors, Event Owners, Regions, Clubs, Official Sponsors, Committee Members, Race Officials, Volunteers, Lifeguards and Race Participants, Severally as Their Interests may appear in the business of USAT, Functioning on behalf of the named insured or performing in a "sanctioned or Approved Event"

The Certificate Holder is included as Additional Insured under General Liability and a Waiver of Subrogation under General Liability applies in favor of the Certificate Holder for work performed by the named insured for the referenced job and/or contract or agreement as required by written contract. The General Liability insurance evidenced by this certificate shall be primary and non-contributory to any other insurance of the certificate holder.

Sexual Abuse or Molestation: Each Incident \$2,000,000 Aggregate \$4,000,000  
See Attached...

**CERTIFICATE HOLDER**

OK 08.20.2025

Lee County Board of County Commissioners  
PO Box 398  
Fort Myers FL 33902

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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## ADDITIONAL REMARKS SCHEDULE

AGENCY Vaaler Insurance, A Marsh & McLennan Agency LLC Company		NAMED INSURED USA Triathlon of Colorado As Per The Named Insured Extension Schedule: 5825 Delmonico Drive Colorado Springs CO 80919
POLICY NUMBER		
CARRIER	NAIC CODE	EFFECTIVE DATE:

### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
 FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

Host Liquor Liability: \$2,000,000  
 Game On! Captiva Island Triathlon | 2025-09-28 | 2025-09-28 | Captiva, FL 33924

U.S. Department of  
Homeland Security

United States  
Coast Guard



Commander  
United States Coast Guard  
Sector St. Petersburg

1101 Channelside Drive  
Tampa, FL 33602  
Staff Symbol: spw  
Phone: (813) 918-7270

16750  
August 27, 2025

Brian Huether  
1095 Military Trail, Unit #9204  
Jupiter, FL 33468

Dear Mr. Huether,

I have received your Application for Approval of Marine Event, Form CG-4423, dated August 27, 2025, in which you requested approval for the Captiva Island Triathlon occurring on September 28, 2025. I have reviewed your application and determined that the proposed event does not require a Coast Guard Marine Event Permit, as outlined in 33 CFR Part 100, in that the event does not introduce any extra or unusual hazards that would jeopardize the safety of human life on the navigable waters of the U.S. **For this reason, a Coast Guard Permit for Marine Event, Form CG-4424, is not required.**

You are reminded that, while no Coast Guard permit is required, you must comply with all existing Federal, State, and local laws and other requirements that may impact your ability to hold your event as proposed. You should take appropriate action to ensure compliance with all such requirements prior to holding your event. Although no Coast Guard permit will be issued at this time, it is your responsibility to contact this office if there are any changes to the event, including the number of participants and/or expected spectators, location, or any other significant changes that may necessitate reconsideration as to whether a permit is required.

I sincerely appreciate your proactive effort in bringing this marine event to my attention. Because of the dynamic nature of the waterway, boating, and maritime activities, the Coast Guard carefully considers the totality of the risks associated with each event on a case-by-case basis when determining whether a permit is needed. Although a Coast Guard Permit for Marine Event, Form CG-4424, is not required for this occasion, you should continue to submit an Application for Approval of Marine Event, Form CG-4423, for this, and any similar events, you may sponsor in the future.

Furthermore, nothing in this determination is intended to restrict the Coast Guard's ability to take action authorized under the Ports and Waterways Safety Act, the Magnusson Act, or other authorities to ensure the safety of vessels and waterfront facilities, and the protection of the navigable waters and the resources therein. Such actions could include promulgation of Regulated Navigation Areas or Limited Access Areas, broadcasting safety notices or disseminating safety flyers, or other actions taken under the authorities granted to the United States Coast Guard.

The decision that your proposed event does not require a Coast Guard permit in no way implies that the event is without risk or deemed completely safe, nor does it imply that the Coast Guard has "approved" the event. As the event sponsor, you are still responsible for the overall safety of the event and obtaining any appropriate permits from other Federal, State, or local authorities.



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If you have any questions, please contact the Coast Guard Sector St. Petersburg Waterways Management Division at (813) 918-7270 or email at [D07-SMB-Tampa-WWM@uscg.mil](mailto:D07-SMB-Tampa-WWM@uscg.mil).

Sincerely,

A handwritten signature in blue ink, appearing to read "R.S. Junod", with a long horizontal flourish extending to the right.

R.S. Junod  
Lieutenant Commander, U.S. Coast Guard  
Waterways Management Division Chief  
By direction

Copy: Officer in Charge, Coast Guard Station Fort Myers Beach





South Seas  
CAPTIVA ISLAND  
TRIATHLON

2025

# South Seas Captiva Island Triathlon

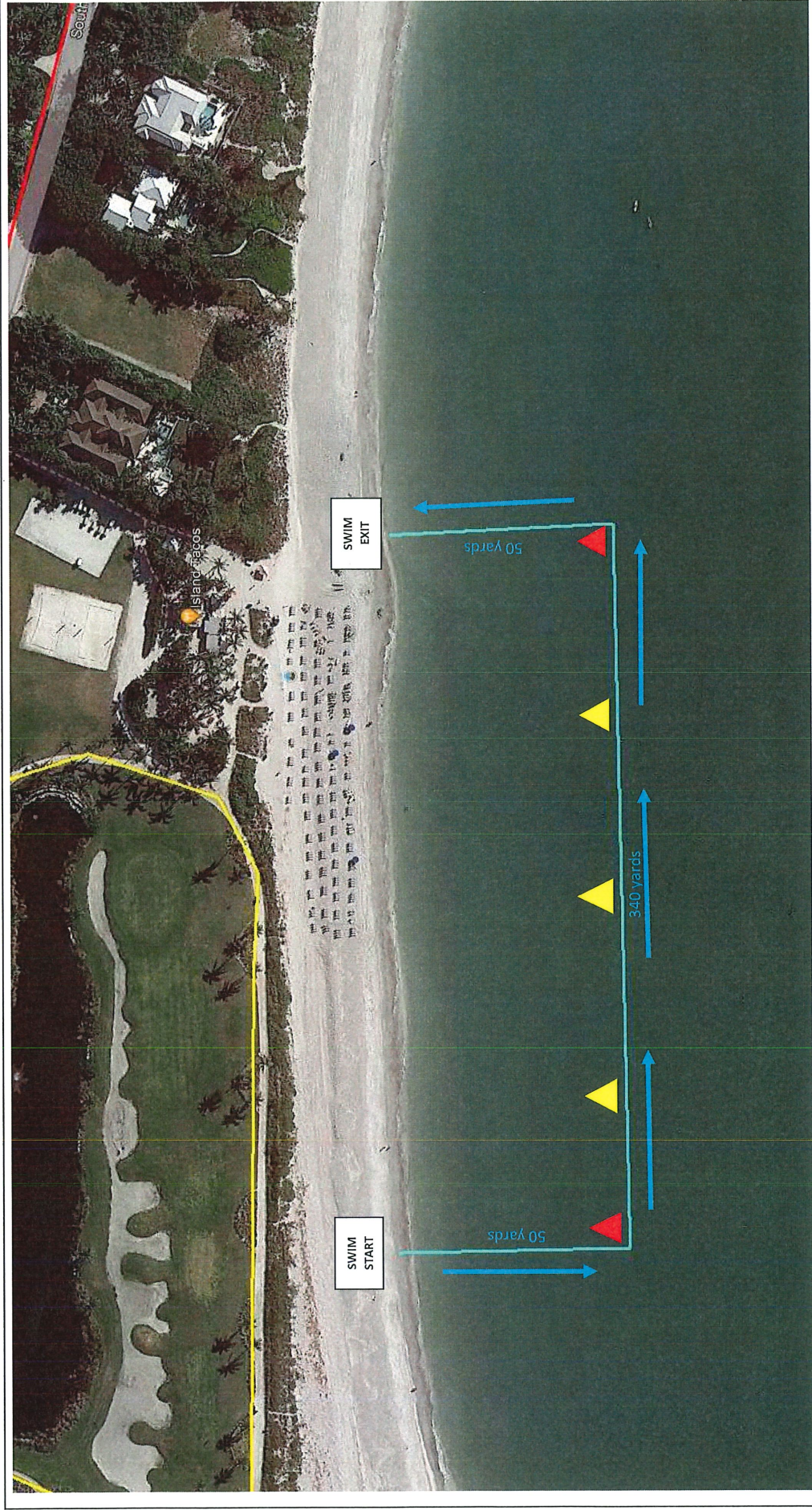
## September 28, 2025 – Run Course



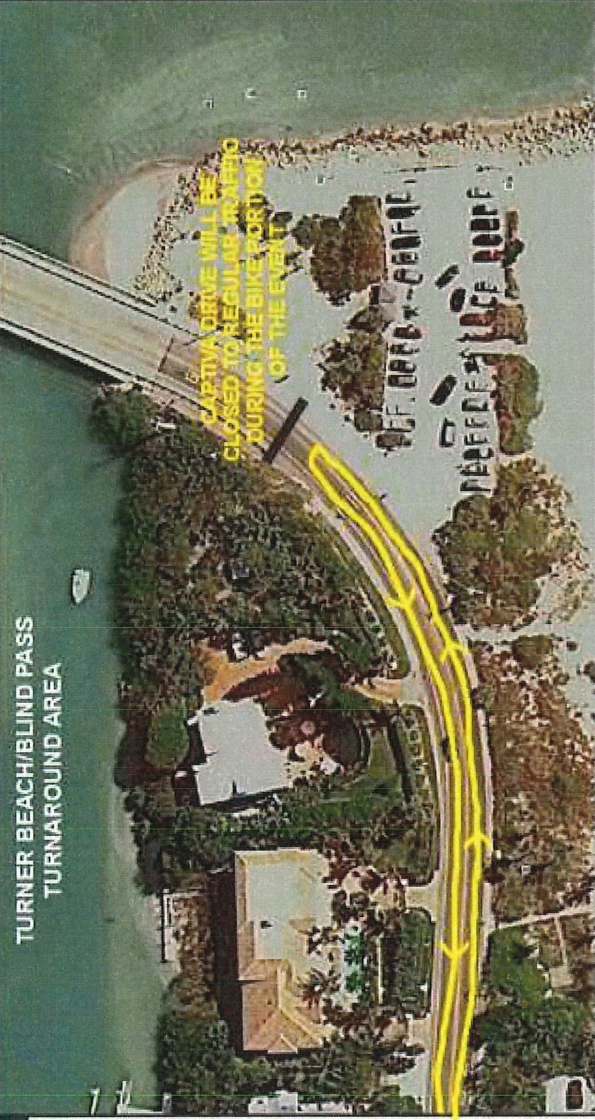


## South Seas Captiva Island Triathlon September 28, 2025 – Swim Course

Super Sprint = 200 yards, Sprint = 440 yards (.25 miles)







**BIKE  
COURSE  
10 MILES**