

EVENT PERMIT



Ordinance 17-08

Hurricane Heroes All-Star Concert

PERMIT NUMBER: TMP2023-01068

Date(s) of Event: October 7, 2023

Property Owner:

LEE COUNTY

Applicant:

Tracy Bettermann

2395337670

Description:

Charity Concert on October 7, 2023 at Century Link Sports Complex from 4:00PM

until 10:00PM

Location of event:

14100 BEN C PRATT SIX MILE CYPRESS PKWY, FORT MYERS, FL 33912

Century Link Sports Complex

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? Sold and Consumed

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

Lee County, Florida

County Manager Date

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Hurricane Heroes All-Star Concert



Event Application

Check the appropriate box(es) below:

×	SPECIAL EVENT PERMIT
,	USE OF COUNTY PROPERTY PERMIT
Distriction of the least of the	PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
DESCRIPTION	FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)			
Title of Event / Name of Production	Hurricane Heroes All-Star Concert			
Date(s) of Event / Production:	0/7/2023			
Location(s) of Event:	Hammond Stadium			
Name of Applicant:	Kaufy Baseball			
Applicant Address:	14400 6 Mile Cypress Fort Myers FL 33914			
Applicant Phone Number:	239-768-4210			
Contact Person: (If different from applicant)	Tracy Bettermann/Judd Loveland			
Contact Phone Number: (If different from applicant)	239-533-7670			
Email Address:	tbettermann@mightymussels.com/jloveland@mightymussels.com			
Estimated Attendance:	8000			
Event Description: Include each activity, when activities take place, etc.	Charity Concert			
Hours of Operation:	4pm-lopm			
STRAP # of Parcel:				
Owner of Premises*:	Lee County			

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



What is the Zoning Classification of t	he premises?		
Are any temporary structures to be in	nstalled for the event? Γ Yes $\overline{\times}$ No	Гуре:	, society and soci
Do you have the appropriate permits	for the temporary structures?	├ Yes x	No
* For a 'Special Event' and 'Use of Co identified, including all parking areas	unty Property' permit, submit a site plan wit	h all proposed faci	lities and activities
Insurance Company Insuring the Eve	nt: Hays Companies	A. K1. A. W1.	
Note: Certificate of Insurance must be submi	tted at time of application		
Surety Company Bonding this Event	(Name and Address):		Annual Prints
Will Vehicles be Used as Part of Th Event?	is Will Food be Available at this Event?		c Beverages be ned at this Event?
┌─ Yes	🔀 Yes 🥛 No	∫ X Yes	┌ 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.		ity coverage must be rtificate of insurance.
Name & Address of Organization Providing Food:	Summertime Concess	sions	
	park/Concessions food		
Section II - USE OF COUNTY	PROPERTY PERMIT		
Organization Sponsoring the Event:	Charity Pros		
	IPTION OF ALCHOLIC BEVERAGES		
Is alcohol being sold/consumed on	County Property? Jired. Only non-profit organizations can sell alcohol on Count		(No
Non-profit certificate/registration (Required if alcohol is to be <u>SOLD</u> at the event)	number:		Wood) and opposit
Please note: A permit from the State of Flo	rida Division of Alcoholic Beverages and Tobacco may	also be required; pleas	ie caii (239) 344-0885 for

further details



pe of Production (cl	noose all that	t app	oly):						
TV Movie or Speci	al	-	TV Series / Pilot	Participa of	TV C	ommerc	ial	X	Still Photos
Public Service Ann	ouncement	Г	Industrial / Documentary	X	Oth	er: <u>Vide</u>)	~A************************************	
/ill any of the follow	ing be neede	d or	included*?						
Street (Closure				Personer.	Yes	区	No	
Traffic	/ Crowd Con	trol			X	Yes	in the second	No	
Fire or	Burning				Ballinore.	Yes	区	No	
Explosi	ves or Pyrote	echni	ics		-	Yes	区	No	
Animal	s, Large or Sr	mall			Predition in	Yes	X	No	
Constr	uction of Any	/ Kind	b			Yes	X	No	
Large a	ınd/or Nume	rous	Vehicles			Yes	X	No	
Helico	oters, Boats,	etc.			M Circonose n	Yes	X	No	
Stunts					and the second s	Yes	X	No	
Other					Γ	Yes	X	No	
Special Parking Rec	nuirements:	yeersaasseninei tiisii				Distriction of the Control of the Co		anna ann deiricean deireoire	
grapheness and green reserves and a selection of the contract	quirements.	OND WASHINGTON OF		raid selection of the section of the section	us contrato interestente entre		dgudmedersvi	nis description	ness sammen villa er i mildet signife til styrst sinn glatterer, men och elmer tilhedi hatt hatt fill til 1000 fill 1900.
Name of the second seco									
NO PRINCIPAL									
City or County Ser	vices Require	ed: (P	Personnel, equipment, facil	ities, e	tc.)	opponingspecial control and accompany of the control of the contro		www.condidate99000	
LCSO and Sou	ıthtrail. Alr	eady	in contact with Judd L	_ovela	and.				
to cape and the ca									
		- سال ، سـ	ed for local and state record	te on n	rodu	rtion in F	larid	la to '	track the economic imp
the industry. If exa	mation is re- ict figures ar	quire e not	available, please estimate	as clos	sely a	s possible	e.		
Number in Cast:			Number in Crew:		n. 14 44 ann ann an Aireann an Airean	Num	ber o	of loca	als hired:
Total budget:			Estimate amount s	pent in	Lee C	ounty:	the security of the second	sun consumment de déla	n de la comunicación de la confesión de la compresenta de la compresión de la compresión de la compresión de l
Hotel room nights:			Number of shootir	ng days	:	erson	34.00mm; 200 mm.	macan makan kalifolik (hili	
i	number of rooms	x num	ber of nights						



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.

AM AM Signature of Applicant	May Bull Withess
Judd Loveland/General Manager	Tracy Bettermann
Print Name of Applicant and Title	Print Name of Witness
8/1/2023	8/1/2023
Date	Date



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

Check the approprio	ite box(es) below:
V	UNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	All parking must be in authorized areas. There will be LCSO deputies as well as parking attendants on site to assist guests with getting in and out of the parking lot safely and efficiently to minimize any traffic back-ups.
Deputies (How Many?):	LCSO will staff extra duty details for traffic control as well as security and presence. There will be an Incident Commander and detail supervisors scheduled to oversee event. LCSO will work in conjunction with Suncoast Security and ball park staff to maintain public safety.
Fee for Services:	Contact LCSO Details Unit for further information.
Special Arrangements:	Promoter/vendor will be responsible for monitoring all amplified sound throughout the entire even to ensure that it does not exceed the decibel levels set forth by Lee County Noise Ordinance Chapter 24 1/4.
	Print Name: P. Cummins Signature: Support Services Date: 9:7:23
	Application of the state of the



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	YENT PERMIT			
USE OF CO	UNTY PROPERTY P	ERMIT		
FILM PERM	nit			
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE	EASE INDICATE BELO WITH FOR THEIR EV	W WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Fire Guards (How Many?)	20 copies of crowd m	anagers requires. Due to nanager certification fror ailed to nburley@southt	private security and LCSO on sce in security company. Please provid ailfire.ord	ne for event, I will accept de copies of valid
Fee for Services:	Plan review and inspi for required FD stand		act Assistant Chief Bollen for fees	and staffing requirements
Flammable Vegetation:	NA	geography and any graviers and annual and geography (SEA) and the state of the state of the SEA (SEA) and the state of the		
First Aid Equipment:	STFD and LCEMS to h	nave crews on stand by f	or event as discussed during pre p	planning meetings
Fire Extinguishing:	Stage area to have re	equired extinguishers on	site	
Special Arrangements:	must occur no less th	ich Reed at 239-841-912 han 4 hours prior to ever quired for the event.	3 for stage and on field seating ins nt opening to public. Please conta	pection. This inspection act Assistant Chief Bollen t
	Print Name:	Nate Burley		505
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2023,09.05 09:20:08 -04'00'	
	Title:	Division Chief - Fire & L	ife Safety	gan.
	Date:	September 5, 2023		proces



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

Check the appropriate box(es) below:

- □ 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.

ORGANIZATION WILL KE	QUINE THE AFFLICA	AMI TO COMMENT ANTIMITOR COMMENT AND ADMINISTRATION OF THE PROPERTY OF THE PRO		
Treatment Facilities:	The first aid room/tr	reatment room will be manned with LCEMS and/or STFD personnel.		
Medical Personnel:	Two ambulances w/ LCEMS crews and an EMS Supervisor will be required to be on site. This will be provided at your expense by LCEMS, in addition to requirements that South Trail Fire and Rescue has set forth.			
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	Applicants shall foll Orders concerning people congregatin	low all CDC and FDOH directives, and the Florida Governor's Executive health and safety, especially with regards to COVID-19 and the number of g at the event.		
Fee for Services	ALS Ambulance wit EMS Supervisor: \$4	th crew: \$100/hr plus 1/2 hr set-up and 1/2 hr demobilization x (2 Crews) 40.00/hr plus 1/2 hr set-up and 1/2 hr demobilization x (1 Supervisor)		
Special Arrangements:	emergency It is st	communications plan that will be set up by on-site personnel in the event of an tipulated that medical coverage requirements by LCEMS are subject to change, ge their coverage or should any other part of the plan change.		
	Print Name: Signature: Title:	Douglas B. Higgins Douglas Court Enterparty Medical Douglas B. Higgins Douglas B. H		
	Date:	August 22, 2023		



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

Check the appropri	ate box(es) bel	ow:	
SPECIAL EV	ENT PERMIT		
	UNTY PROPERTY		
PERMIT TO	SELL AND CONS	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES	
FILM PERM	IT		
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P ICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZAT LY WITH FOR THEIR EVENT.	10
Parking:	No event parking is	permitted in Lee County maintained road right of ways.	accessarial field of
Ingress and Egress:	Please use all estab	lished means of ingress and egress.	
Special Arrangements:	Please use Lee Cou	unty Sheriff's office for assistance with traffic control.	
	•		
	Print Name:	Nathaniel Thoman	
	Signature:	Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2023.08.07 07:27:32-04'00'	
	Title:	Project Manager	
	Date:	08/07/2023	



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

	ENT PERMIT UNTY PROPERTY P SELL AND CONSU				
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, PL LICANT TO COMPL	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.			
Illumination:	Event organizer will provide special stage lighting. Stadium lights will be used for safety lighting.				
Parking Areas:	Work with the on-site parks staff to ensure event is set up to provide the safety of the patrons entering the parking and stadium facility. Event organizer must provide adequate staff and traffic control devices to ensure patrons move in and out of the event area safely.				
Special Arrangements:	Event organizer will security measures u	coordinate with the on-site parks staff to ensure event area has proper safety and nder control and that the event area is cleaned of all trash and debris before leaving			
	Print Name:	Alise Flanjack			
	Signature:	Hise Flaguet			
	Title:	Deputy Director			
	Date:	8/7/2023			
Hurricane Heroes Conce	rt	*			

Hurricane Heroes Concert 10/7/2023 4pm - 10pm LC Sports Complex



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

Check the appropriat	e box(es) belo	ow:
SPECIAL EVE	NT PERMIT	
USE OF COU	NTY PROPERTY	PERMIT
PERMIT TO S	ELL AND CONSU	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	Γ	
AFTER REVIEWING THE A	APPLICATION, P CANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Insurance Requirements:	occurrence to pro	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County.
	Certificate Must F	Read As:
	and public official	litical subdivision and Charter County of the State of Florida, its agents, employees, als are automatic additional insureds and includes an automatic waiver of subrogation eneral liability. The certificate holder is an additional insured on a primary and basis with regards to general liability.
Special Arrangements:	political subdivis	nsurance shall be submitted as evidence of the required coverage listing Lee County, a ion and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as alder and as an additional insured as listed above.
	Subject to proof	of insurance.
	Print Name:	Mike Figueroa
	Signature:	May Jour -
	Title:	Risk Program Manager

August 7, 2023

Date:



CERTIFICATE OF LIABILITY INSURANCE

DATE (NIMIOD/YYYY)

07/24/2023 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(lee) 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). CONTACT Malkou Lor or Kathy Beatly PHONE MG, No. Extl: (AIC, No): (612) 373-2720 (612) 333-3323 Hays Companies, Inc. maikou.lor@bbrown.com 80 South 8th Street ADDRESS: Sulta 700 NAIG# INBURER(8) AFFORDING COVERAGE MN 66402 Arch Insurance Company Minneapolls INSURER A: 10700 INSURED RetailFirst Insurance Company DIBURER B: Kaufy Baseball LLC dba Mighty Mussels MSURER C: 14400 Stx Mile Cypress Plavy MOURER D: INSURER E : FL 33912 Ft Wivers DISTRIBUTER F : 2023-2024 REVISION NUMBER: COVERAGES **CERTIFICATE 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. POUCYEFF POUGYERP STREET, SQUARE, LIMITE TYPE OF INSURANCE POLICYNUMBER TH 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Es construrce) COMMERCIAL GENERAL LIABILITY 1,000,000 CLAIMS-MADE X OCCUR 1,000 Participant Legal Liability MED EXP (Any one person) 1,000,000 01/08/2023 01/08/2024 SSCGI 0022302 Y A PERSONAL & ADV INJURY 5,000,000 **GENERAL AGGREGATE** GENILAGGREGATE LIMIT APPLIES PER: 5,000,000 PRODUCTS - COMP/OP AGG POLICY Participant Legal Lieb. \$ 1,000,000 OTHER: COMBINED SINGLE LIMIT (Es accident) s 1,000,000 AUTOMOBILE LEADELTY BODILY INJURY (Per purson) ANYAUTO OVINED AUTOS ONLY **SCHEDULED** SSAUTT0017702 01/08/2023 01/08/2024 BODILY INJURY (Per aggident) 8 A AUTOS PROPERTY DAMAGE (Per accident) HON-OWNED HIRED AUTOB ONLY S AUTOS ONLY 6,000,000 UMBRELLALIAS EACH OCCURRENCE OCCUR 6,000,000 01/08/2024 SSFXS0018602 01/08/2023 EXCERS LIAB AGGREGATE A CLAIMS-MADE RETENTION \$ DED WORKERS COMPENSATION AND EMPLOYERS LIABILITY X STATUTE 1,000,000 E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandalory in MH) 08/15/2024 52081271 08/15/2023 Y B NI/A 1,000,000 E.L. DIBEASE - EA EMPLOYEE 1,000,000 f yes, describe under DESCRIPTION OF OPERATIONS below EL DISEASE - POLICY LIMIT Liquor Liability 01/08/2023 01/08/2024 9SLIQ0015102 A DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 181, Additional Remarks Schedule, may be attached if more epace in taquired) Lee County, a political aubdivision and Charter County of the State of Fiorida P.O. Box 398 Fort Myers, Florida 33902 and Minnesota Twins Beseball 14400 Str Mile Cypress Parkway Fort Myers FL 33912 are certificate holders. Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials are additional insureds as respects the general liability policy where required by written contract, subject to the policy terms and conditions. Walver of subrogation applies in favor of the additional insureds as respects the general diability policy where required by written contract, subject to the policy terms and conditions. OK 08/07/2023 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. , a political subdivision and Charter County of the State of Florida AUTHORIZED REPRESENTATIVE PO Box 398 FL 33902 Fort Myers

Tracy Bettermann

From:

Pigott, Tamara < TPigott@leegov.com>

Sent:

Friday, August 11, 2023 1:53 PM

To:

Tracy Bettermann

Cc:

Judd Loveland; Dotson, Miriam

Subject:

RE: Mighty Mussels Special event Permit for 10.7.2023

Attachments:

Lee County Special Events Permit Request 8.4.2023.pdf

Tracy,

Based on your response, there would be no requirement for a VCB to sign off for a film permit.

Thank you,

Tamara Pigott, CDME, CPM, CGSP

Executive Director



Lee County Visitor & Convention Bureau

2201 Second Street, Suite 600 Fort Myers, Florida 33901-3086 Office: 239-338-3500

Toll Free: 800-237-6444 Direct: 239-533-6715 Cell: 239-850-2117

The Fort Myers area in Southwest Florida includes: Sanibel Island, Captiva Island, Fort Myers Beach, Fort Myers, Bonita Springs, Estero, Cape Coral, Pine Island, Matlacha, Boca Grande & Outer Islands, North Fort Myers, Alva, Buckingham, and Lehigh Acres.

From: Tracy Bettermann <tbettermann@mightymussels.com>

Sent: Friday, August 4, 2023 12:33 PM
To: Pigott, Tamara <TPigott@leegov.com>

Cc: Judd Loveland <jloveland@mightymussels.com>; Dotson, Miriam <MDotson@leegov.com>

Subject: [EXTERNAL] RE: Mighty Mussels Special event Permit for 10.7.2023

Tamara,

Any filming/photography will be general concert filming/photography that the band/promoter may use in their marketing. There is no filming/photography for tv/commercial production or resale to the best of my knowledge.

Thank you,



Lee County Parks & Recreation 3410 Palm Beach Blvd. Fort Myers, FL. 33916 Phone: (239) 533-7275

Invoice Number:	graphical data Media Med
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This permit entitles holder to exclusive use of the following facilities during the hour and date shown below. This permit also serves as a bill. All reservations must be paid for in advance. A nonrefundable ten-dollar (\$10.00) cancellation fee will be applied to facility rental transfers or cancellations received at least 72 hours prior to the facility rental date. Any cancellation made less than 72 hours prior to the facility rental date will not be entitled to any refund. Exceptions to this policy will be made at the discretion of the Parks and Recreation administration staff based on circumstances surrounding the cancellation.

Date issued: 7-10-2023

Name: Mighty Mi	Type of Activity: Concert						
Address: 14100 S	Organization/Team:						
City/State/Zip:	Phone Number: 239-768-4210						
And the second second section of the second		Times					
Date: 10-6-2023 S	et Up Day- Flooring as late as possible	From:	8am		Ta: 8pm		
Date: 10-7	-2023 Concert-follow sound ordinance	From:	7am		То:	midnight	
Name of Facilit	Bldg. / Field #: Stadium and parking lots and softball fields						
Other Commen	ts: 10-8-2023 will be tear down. Need to have	everything off the	field by noor	n. Work y	vith County st	aff to make sure everything run	
Hours:		Rate:			Total Fee:	Any damages will be charged	
Approved by:	R.K.Blasingim Ti	tle: Manager		Date:	7-10-2023		

Event Waiver/Release of Liability Form

In consideration of the opportunities afforded me and/or my group by this Event Form, I, the undersigned Applicant, freely agree to and make the following contractual representations and agreements:

- 1. WAIVER AND RELEASE. I, the Applicant, do hereby knowingly, freely, and voluntarily assume all risk and liability for any damage or injury that may result from my and/or my group's use of the County facility and/or my or any person's participation in this Event, identified herein during the time period I and/or my group are using the County facility and/or participating in this Event, and further agree to release, waive, discharge, and covenant not sue Lee County, its officers, agents, employees, and volunteers (all for the purposes herein referred to as "Releasees") from any and all liability or claims that may be sustained by me or any member of my group, participants, and spectators, directly or indirectly in connection with, or arising out of, my group's use of the County facility or participation in this Event as described herein, whether caused in whole or in part by the negligence of Lee County or the Releasees.
- 2. INDEMNIFICATION. I, 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, participation in any event 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 the Event, or arising during such term from any act of negligence of the Applicant, members of Applicant's group, any



Lee County Parks & Recreation 3410 Palm Beach Blvd, Fort Myers, FL. 33916 Phone: (239) 533-7275

Invoice	Number:
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participant in this Event, any spectator, Applicant's agent, contractors, or employees, or arising from any accident, injury or damage whatsoever, however caused, to any person or persons, or to any property or any person, persons, corporation or corporations, occurring during the Event 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.

- 3. INSURANCE. The Applicant, at its sole expense, agrees to procure and maintain in force during the entire time of the Event, general liability insurance in the amounts determined by Lee County Risk Management to protect against damages from negligence, gross negligence willful and wanton acts or other claims arising from the 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 named insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property.
- 4. PARTICIPANT'S GENERAL LIABILITY INSURANCE COVERAGE. APPLICANT WILL CONFIRM GENERAL LIABILITY COVERAGE INCLUDES COVERAGE FOR PARTICIPANTS AND SPECTATORS. This Participant's general liability coverage will be primary before Lee County's self-insured liability or any insurance procured by Lee County. The insurance may not be canceled during the time 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 of the Applicant.

I agree that I have read this form, fully understand its terms, and understand that I, or anyone who may claim to have rights on my behalf, have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend to be a complete and unconditional release of any and all liability to the greatest extent allowed by law and agree that, if any portion of this contract is held to be invalid, the balance notwithstanding shall continue in full legal force and effect.

John Martin	(My Millery
APPLICANT'S NAME	SIGNATURE OF APPLICANT
	July 12, 2023
FORM OF I.D. PRESENTED	DATE

ALCOHOLIC BEVERAGES ARE NOT ALLOWED IN PARKS OR FACILITIES



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/24/2023

	inna H. W.		102 61 111 111						-42020	
THIS CERTIFICATE IS ISSUED AS A MAT CERTIFICATE DOES NOT AFFIRMATIVE BELOW. THIS CERTIFICATE OF INSURA REPRESENTATIVE OR PRODUCER, AND	LY OF INCE THE	DOE CER	SATIVELY AMEND, EXTENI S NOT CONSTITUTE A CO TIFICATE HOLDER.	D OR AL NTRACT	BETWEEN	THE ISSUIN	G INSURER(S), AUTHOR	IZED		
IMPORTANT: If the certificate holder is a If SUBROGATION IS WAIVED, subject to this certificate does not confer rights to	the to	ems	and conditions of the poli	icy, certa	in policies	DITIONAL INS may require a	SURED provisions or be o an endorsement. A state	engorse mønt o	;a. n	
	tne c	erunc	tate noticel in neu of such	CONTACT NAME:	Maikou Lo	or Kathy Beat	tv		and the state of t	
PRODUCER				PHONE	(612) 33			(612) 37	/3-2720	
Hays Companies, Inc.			<u></u>	PHONE (612) 333-3323 FAX (A/C, No): (612) 373-2720 (A/C, No): maikou.lor@bbrown.com						
80 South 8th Street					ADDRESO					
Suite 700					INSURER(S) AFFORDING COVERAGE NEURED A . Arch Insurance Company					
					INDURERA.					
Manage Page 1					INSURER B: RetailFirst Insurance Company 1					
Kaufy Baseball LLC dba Mighty	Muss	els		INSURER C:						
14400 Six Mile Cypress Pkwy			}	INSURER I						
			h	INSURER	E:					
Ft Myers				INSURER	INSURER F:					
COVERAGES CER	TIFIC	ATE I	NUMBER: 2023-2024				REVISION NUMBER:	ΛN.		
THIS IS TO CERTIFY THAT THE POLICIES OF INDICATED. NOTWITHSTANDING ANY REQUI CERTIFICATE MAY BE ISSUED OR MAY PERTIEXCLUSIONS AND CONDITIONS OF SUCH PO	REME	NT, TE 45 INS	ERM OR CONDITION OF ANY C SURANCE AFFORDED BY THE	POLICIES REDUCE	S DESCRIBED D BY PAID CL	HEREIN IS SU AIMS.				
INSR LTR TYPE OF INSURANCE	TADDL	SUBR WVD	POLICY NUMBER	(1	MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		2000	
COMMERCIAL GENERAL LIABILITY	T						EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000		
CLAIMS-MADE X OCCUR	1						PREMISES (Ea occurrence)	\$ 1,000,000		
➤ Participant Legal Liability							MED EXP (Any one person)	\$ 1,000		
A	Υ	Y	SSCGL0022302	1	01/08/2023	01/08/2024	PERSONAL & ADV INJURY	\$ 1,000,000		
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 5,000,000		
PRO-							PRODUCTS - COMP/OP AGG	\$ 5,000	3,000	
J 7 50.07 L 30.01 L 30.01							Participant Legal Liab.	\$ 1,000		
OTHER: AUTOMOBILE LIABILITY	1						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000),000	
ANY AUTO								\$		
A OWNED SCHEDULED	1		SSAUT0017702	1	01/08/2023	01/08/2024	BODILY INJURY (Per accident)	t) \$		
HIRED NON-OWNED		1					PROPERTY DAMAGE (Per accident)	\$		
AUTOS ONLY AUTOS ONLY		1					1) 31 33 33 33 33 33 33 33 33 33 33 33 33	\$		
WUMBRELLA LIAB X OCCUR	+	 					EACH OCCURRENCE	s 6,000	0,000	
			SSFXS0016602		01/08/2023	01/08/2024	AGGREGATE	s 6,000,000		
A EXCESS LIAB CLAIMS-MADE	4		00170001002				ACONLONIE	\$		
DED RETENTION \$	-	 					➤ PER STATUTE ER	<u> </u>		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N				1				s 1,00	0,000	
B ANY PROPRIETOR/PARTNER/EXECUTIVE Y	и/а		52061271		06/15/2023	06/15/2024	E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE	4 000 000		
(Mandatory In NH) If yes, describe under	'	1					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000		
DESCRIPTION OF OPERATIONS below		<u> </u>					E.L. DISEASE - POLICY LIMIT	\$.		
A Liquor Liability			SSLIQ0015102		01/08/2023	01/08/2024				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD	101, Additional Remarks Schedule,	, may be att	ached if more s	pace is required)				
Lee County a political subdivision and Charter	Coun	ty of t	he State of Florida P.O. Box 3	198 Fort M	yers, Florida	33902 and Mir	nnesota Twins Baseball 1440	10		
Six Mile Cypress Parkway Fort Myers FL 3391	2 are	entitic	cate noiders.							
Lee County, a political subdivision and Charter the general liability policy where required by w additional insureds as respects the general lial								ts		
CERTIFICATE HOLDER		percusarios e		CANCI	ELLATION			A CALL TO A STREET OF THE STREET		
, a political subdivision and Charter County of the State of Florida					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
PO Box 398					AUTHORIZED REPRESENTATIVE					
Fort Myers FL 33902										
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HURRICANE HEROES CONCERT









Public Entrance



Service & Delivery Vehicles Only

HURRICANE HEROES CONCERT









