

EVENT PERMIT



Ordinance 17-08

Fort Myers Balloon Glow and Laser Show

PERMIT NUMBER:

TMP2025-00176

Date(s) of Event:

May 22, 2025 through May 24, 2025

Property Owner:

LEE COUNTY

Applicant:

Brad Broome 7069362510

Description:

Hot Air Balloon and laser show with a kids zoned and food vendors from 5;00PM until

11:00PM at Lee County Civic Center

Location of event:

11831 BAYSHORE RD, NORTH FORT MYERS, FL 33917

Lee County Civic Center

Will the event be attended by 1000 or more people?

Yes

Will the event be held on County Owned Property?

Yes

Will there be alcohol consumed or sold at the event?

No

Will a bond be posted for this event?

No

Permit Conditions:

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

Board of County Commissioners Lee County, Florida

Lee County, Florida

County Manager

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Fort Myers Balloon Glow and Laser Show

TMP2025-00174



Event Application

Check the appropriate box(es) below:

X	SPECIAL EVENT PERMIT
X	USE OF COUNTY PROPERTY PERMIT
П	PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
П	FILM PERMIT

Section I - GENERAL INFORMATION (All Permit Types)					
Title of Event / Name of Production Fort Myers Balloon Glow and Laser Show					
Date(s) of Event / Production:	Set-up May 22nd 9AM-6PM. Event dates May 23-24, 2025 5PM-11PM				
Location(s) of Event:					
Name of Applicant:	Brad Broome				
Applicant Address:	59 Wylan Terrace, Summerville, GA 30747				
Applicant Phone Number:	706-936-2510				
Contact Person: (If different from applicant)					
Contact Phone Number: (If different from applicant)					
Email Address:	brad@balloonshows.com				
Estimated Attendance:	3500 per day				
Event Description: Include each activity, when activities take place, etc.	Gates open at 5pm & should be completed by 11pm. During the event, we will have retail, food and snack vendors. A kids zone will be available as well with bounce houses. Our balloon glow & laser show starts at 9pm and will last for 45 minutes.				
Hours of Operation:	5pm-11pm				
STRAP # of Parcel:					
Owner of Premises*:	Lee County Civic Center				

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



What is the Zoning Classification of the	premises?	×
Are any temporary structures to be insta	alled for the event? X Yes No	Type: Fence and tents
Do you have the appropriate permits for	r the temporary structures?	Yes No
identified, including all parking areas.	ty Property' permit, submit a site plan wi	
Insurance Company Insuring the Event:	RPS. Have to wait upon submissi	on of COI for our balloon pilots. N
Note: Certificate of Insurance must be submitted	at time of application	
Surety Company Bonding this Event (Na	ame and Address):	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
☐ Yes No	▼ Yes	☐ 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.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food:	ocal food vendors	
Type of Food being Served: Fair style	food	
Section II - USE OF COUNTY PI	ROPERTY PERMIT	
Organization Sponsoring the Event: Ho	ot Air Balloon Management	
Section III - SALE/CONSUMPT	TION OF ALCHOLIC BEVERAGES	PERMIT
Is alcohol being sold/consumed on Cou		Yes X No
	. Only non-profit organizations can sell alcohol on Coun	ty Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> 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



pe of Production	(choose all that app	oly):					
TV Movie or Sp	pecial	TV Series / Pilot		TV Commer	cial		Still Photos
Public Service	Announcement \Box	Industrial / Documentary		Other:			
ill anv of the foll	owing be needed or	included*?					
•	et Closure			☐ Yes	X	No	
Traf	fic / Crowd Control			▼ Yes	Г	No	
Fire	or Burning			☐ Yes	X	No	
Expl	losives or Pyrotechn	ics		☐ Yes	X	No	
Anir	mals, Large or Small			☐ Yes	X	No	
Con	struction of Any Kin	d		☐ Yes	区	No	
Larg	ge and/or Numerous	Vehicles		☐ Yes	X	No	2
Heli	copters, Boats, etc.			☐ Yes	X	No	
Stur	nts			☐ Yes	X	No	
Oth	er			☐ Yes	X	No	
Special Parking I	Requirements:						
None. We ha	ve our parking te	am					
 City or County S	Services Required: (P	ersonnel, equipment, facili	ties, et	c.)			
Paramedics							
the industry. If e		d for local and state record available, please estimate a Number in Crew:		ely as possibl	e.		rack the economic impact o
Number in Cast:							
Total budget:	\$120,000	Estimate amount sp	ent in l	ee County: \$	80,0	00	
Hotel room night	s: 25x4	Number of shooting	g days:	2	day	eve	nt
3	number of rooms x number	par of pights		-			



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 th	at any and all information is accurate to the best of
his/her knowledge.	
Bul Bu	
Signature of Applicant	Witness
Brad Broome / Chief of Operations	Jeremy Kwaterski CEO
Print Name of Applicant and Title	Print Name of Witness
January 7, 2025	1/15/25
Date	Date



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

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<i>p</i> .	JNTY PROPERTY I	PERMIT IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IT	
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Parking:	Parking for event	will be on site in authorized areas & right-of-way must not be impeded.
Deputies (How Many?):	1 Supervisor, 4 s	ecurity deputies and 2 traffic deputies will be required each day.
Fee for Services:	Vendor will need	to contact LCSO Details Unit to arrange and pay for extra duty detail deputies.
Special Arrangements:	Event coordinato entrance. Event v According to the All amplified sou	r is responsible for barricades/cones to set bounderies around the event area. r will be responsible for securing and placing a minimum of one light plant at the will only be utilizing the main entrance for ingress & egress. permit application no alcohol will be served at the event. nds must adhere the the Lee County Noise Ordinance. uties will remain onsite as long as the event is open to the public.
	Print Name:	? Commins
	Signature:	04/1
	Title:	Commander
	Date:	5 19 25



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

- □ INTERIOR INTERIOR
- ▼ 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?)	2 EMT/FF mus	t be on site during the event hours at \$50 per hour per EMT
Fee for Services:		nspection fee for Fire Life-safety and access. All food vendors/carts e inspected prior to opening
Flammable Vegetation:	Not permitte	d
First Aid Equipment:	on-site	
Fire Extinguishing:	on-site	
Special Arrangements:	\$50 per EMT	required to have 2 EMT/FF on duty during open hours for a fee of per hour, and food vendors/trucks will be inspected prior to opening 100 Permit/Inspection fee)
	Print Name: Signature: Title:	William Underwood Fire Chief
	Date:	05/07/2025

 $V_{\rm eff}$



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:	LCEMS and Public Safety will require a staffed ambulance provide emergency medical coverage on-site throughout the event. This has been prearranged with LCEMS and the applicant.				
Medical Supplies / Equipment:	EMS will provide a	cart (no-charge) and all eq	uipment and supplies.		
Safety Requirements: Applicants shall follow all CDC and FDOH directives, and the Florida Governor's Executive Orders concerning health and safety.				rnor's Executive	
One staffed ambulance will be invoiced at \$100.00/hour, plus one additional hour each day for set-up and take down.					
Special Arrangements:	office at EMSDetail	Meegov.com. This approv	To arrange special event co ral is on condition and with th redical coverage arrangemen	e understanding that	
	Print Name:	Douglas B. Higgins			
	Signature:	77 - B. Up-	Digitally signed by Captain Douglas B. Higgins Date: 2025.05.08 15:29:26 -04'00'		
	Title:	Captain, EMS Operations			

May 08, 2025

Date:



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

Check the appropri	ate box(es) bel	ow:
E and	UNTY PROPERTY SELL AND CONS	PERMIT JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Parking:	No event parking is	permitted in Lee County maintained road right of ways.
ngress and Egress:	Please use all estab	llished means of ingress and egress.
Special Arrangements:	Shall use Lee Coun Emergency vehicle County maintained	ity Sheriff's Office for assistance with traffic control as needed. access and public vehicular access shall be maintained on all surrounding Lee I roads.
	Drint Name	Nathan Thoman
		Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2025.02.07 13:07:48-05'00'
	Signature:	
	Title:	Project Manager
	Date:	02/07/2025



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

Check the appropri	ate box(es) below:				
⊠ SPECIAL E\	/ENT PERMIT				
IX USE OF CC	DUNTY PROPERTY PERMIT				
PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES				
FILM PERM	ит				
	E APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.				
III I	The second security lighting as pooled				
Illumination:	The event organizer is responsible for providing additional safety and security lighting, as needed.				
- 11	The second secon				
Parking Areas:	All vehicles must park in the designated areas accessible through the main entrance on Bayshore Road. The event organizer is responsible for ensuring that no vehicles block driveways or roadways,				
	maintaining clear access for emergency vehicles. Vendors must park in the area specified on the event map.				
Charles Arrangements	The event organizer is responsible for providing adequate staff or volunteers throughout the event to				
Special Arrangements:	manage litter control and ensure debris is removed during and after the event. Coordination with on-site staff is required to establish designated trash and debris collection areas.				
	Additionally, the event organizer must comply with all terms stated in the signed agreement and adhere				
	to Lee County Ordinances No. 93-15 (noise) and 18-12 (as amended).				
	Print Name: Trever Snearley				
	Signature:				
	Title: Countywide Service Manager				
	Date: May 21, 2025				

(IVIL CENTER - FM BALLOON AND LAZER SHOW SETUP - 5/22/2025 Page 10

EVENT - 5/23 - 5/24/2025



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	DW:
SPECIAL EVEN USE OF COUN PERMIT TO SI FILM PERMIT	NTY PROPERTY ELL AND CONSU	PERMIT JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	PPLICATION, P CANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
nsurance Requirements: Special Arrangements:	occurrence to pro aforementioned of Certificate Must F Lee County, a pol and public officia with regard to ge noncontributory A Certificate of In	litical subdivision and Charter County of the State of Florida, its agents, employees, its 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. Issurance shall be submitted as evidence of the required coverage listing Lee County, it ion and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as Ider and as an additional insured as listed above.
	Print Name: Signature:	Mike Figueroa
	Title:	Risk Program Manager
	Date:	



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

Check the appropriat	e box(es) bel	ow:	
SPECIAL EVEL USE OF COU PERMIT TO S FILM PERMIT	NTY PROPERTY ELL AND CONSI	PERMIT JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	' FACILITIES
AFTER REVIEWING THE AWILL REQUIRE THE APPLIC	PPLICATION, P CANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS LY WITH FOR THEIR EVENT.	YOUR ORGANIZATION
nsurance Requirements:	per occurrence t	eral liability insurance with minimum limits of One Millio o protect against bodily injury and/or property damage ed event within Lee County.	n Dollars (\$1,000,000) relative to applicants use
	employees, and waiver of subroo	Read As: Ditical subdivision and Charter County of the State of F public officials are automatic additional insureds and in ation with regard to general liability. The certificate hole nary and noncontributory basis with regards to general	cludes an automatic der is an additional
Special Arrangements:	County, a politic	nsurance shall be submitted as evidence of the require al subdivision and Charter County of the State of Florid 2 as the certificate holder and as an additional insured a of insurance.	a, P.O. Box 398, Fort
	Print Name:	Mike Figueroa	
	Signature:	Mike Join-	
	Title:	Risk Program Manager May 7, 2025	T v
	Date:	May 7, 2025	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/05/2025

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.

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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). **Eventsured Customer Service** PRODUCER PHONE (AIC, No, Ext): 888-882-5902 E-MAIL ADDRESS: info@eventsured Foresite Sports, Inc. info@eventsured.com **DBA: Eventsured** NAIC# 3553 West Chester Pike #418 INSURER(S) AFFORDING COVERAGE INSURER A: Houston Casualty Company 42374 Newtown Square, PA 19073 INSURED INSURER B: HABM Inc. INSURER C: Jeremy Kwaterski INSURER D 313 Ridgeview Dr. INSURER E Summerville, GA 30747 INSURER F **REVISION NUMBER: CERTIFICATE NUMBER: TM431551** COVERAGES THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP LIMITS TYPE OF INSURANCE **POLICY NUMBER** 1,000,000 GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) 100,000 X COMMERCIAL GENERAL LIABILITY 1,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) 1,000,000 Y H24SE00172/TM431551 05/22/2025 05/25/2025 PERSONAL & ADV INJURY Y 12:01AM 2:01AM 1,000,000 GENERAL AGGREGATE 1,000,000 PRODUCTS - COMP/OP AGG GEN'L AGGREGATE LIMIT APPLIES PER: DEDUCTIBLE X POLICY PRO-COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY BODILY INJURY (Per person) ANY AUTO ALL OWNED AUTOS SCHEDULED. **BODILY INJURY (Per accident)** AUTOS NON-OWNED AUTOS PROPERTY DAMAGE HIRED AUTOS **UMBRELLA LIAB EACH OCCURRENCE** OCCUR **EXCESS LIAB** AGGREGATE CLAIMS-MADE \$ RETENTION \$ DED WORKERS COMPENSATION WC STATU-TORY LIMITS AND EMPLOYERS' LIABILITY E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) NIA E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Additional Insureds must be venue managers or municipalities and are added with respect to our insureds operations only. Waiver of Subrogation (WOS) and Primary & Non-Contributory (PNC) wording applies only when coverage is purchased by the insured, required by written contract and as indicated below. This coverage is with respect to the Festival to be held on 05/22/2025 - 05/24/2025 with 600 attendees at Southwest Florida Lee County Fairgrounds 11831 Bayshore Rd. North Fort Myers, FL 33917. Additional Insureds include: Southwest Florida Lee County Fairgrounds 11831 Bayshore Rd. North Fort Myers, FL 33917; 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. (WOS & PNC selected). CANCELLATION CERTIFICATE HOLDER OK 05.07.2025 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lee County, a political subdivision and Charter County of the state of Florida PO Box 398 Fort Myers AUTHORIZED REPRESENTATIVE Florida 33902

ACORD 25 (2010/05)

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