APPLICANT'S CERTIFICATION

The applicant agrees to abide by the provisions of the county/municipalities codes pertaining to film, video, television, web/internet, still, live or other forms of media and entertainment production. In addition, the applicant agrees to restore location production sites to the condition existing immediately prior to production. This permit is to be in possession of the production company at all times while on location and must be presented upon demand by any county/municipalities authorized agent. The person whose signature appears below certifies that he/she is an authorized agent of the applicant and is duly authorized on the applicant's behalf to execute this application.

INDEMNIFICATION

The applicant indemnifies and holds harmless the county/municipalities in which activities are conducted, its officers and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or resulting from the acts or omissions of applicant, its contractors, subcontractors, their employees, agents or servants, during the filming and all activities associated therewith for which this application is filed, including the use of any county/municipality owned real or personal property.

INSURANCE CERTIFICATE

Applicant shall procure and maintain, during the term of this Agreement, Commercial General Liability, with limits of not less than \$1,000,000 each occurrence (\$5,000,000 if any stunt work or explosives are utilized) including but not limited to bodily injury, property damage, contractual, products and completed operations. Commercial Auto Rability with limits of not less than \$500,000 combined single limit (\$5,000,000 if vehicles are involved in stunt work). Sarasota County Government and/or the appropriate municipalities shall be named as additional insured, as their interest may appear.

Applicant shall provide Proof that the Applicant carries workers' compensation insurance for the Applicant's employees and/or volunteers as required by the laws of the state where the Applicant is domiciled, or in the alternative, proof of exemption from such requirement if applicable. An affidavit attesting to the exemption from the workers' compensation insurance requirement is acceptable.

APPLICANT/COMPANY NAME (printed) Entertainment One Reality Productions	DATE 3/22/17
AUTHORIZED REPRESENTATIVE OF APPLICANT NAME (printed) Bobby Aguilar	
REPRESENATIVE TITLE Production Manager	•
AUTHORIZED REPRESENTATIVE OF APPLICANT (signature)	
AUTHORIZATION FOR PERMIT APPROVAL FOR FILM OFFICE	E ONLY
POLICE/SHERIFF'S DEPT.	DATE
FIRE DEPT.	DATE
RISK MANAGEMENT	DATE
TRAFFIC & ENGINEERING	DATE
PARKS/RECREATION DEPT. four fig.	_ DATE 4/5/17
PARKING/METERS DEPT:	DATE
CODE ENFORCEMENT	DATE
COUNTY/MUNICIPALITY DESIGNEE ALSO COUNTY/MUNICIPALITY DESIGNEE	DATE 4/4/17
OTHER DEPT./DIV. On behalf of Jeff Maultat	y DATE
REQUIRED april 15,001	7
REQUIRED april 15, 201	