



EVENT PERMIT

Ordinance 17-08



StoneCrab Fest

PERMIT NUMBER: TMP2025-00243

Date(s) of Event: November 9, 2025

Property Owner: SES GROUP PACKWOOD PINE ISLAND

Applicant: Cynthia Welch
239-283-0888

Description: Fund raiser, music, food, alcohol and vendors November 9, 2025 from 11:00AM until 6:00PM at 9940 & 9920 Stringfellow Rd

Location of event: 9940 STRINGFELLOW RD, SAINT JAMES CITY, FL 33956

Will the event be attended by 1000 or more people ?	Yes
Will the event be held on County Owned Property ?	No
Will there be alcohol consumed or sold at the event ?	Sold and Consumed
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


County Manager

8/28/25
Date



Lee County
Southwest Florida

Event Application

Special Event

Use of
County
Property

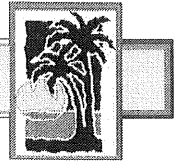
Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

Stone Crab Fest

TMP2025-00243

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	StoneCrab Fest
Date(s) of Event / Production:	November 9, 2025
Location(s) of Event:	9940 & 9920 Stringfellow Rd, St.James City, FL 33956
Name of Applicant:	Greater Pine Island Chamber of Commerce
Applicant Address:	10530 Stringfellow Rd, Unit 3 Bokeelia, FL 33922
Applicant Phone Number:	239-283-0888
Contact Person: (If different from applicant)	Cynthia Welch
Contact Phone Number: (If different from applicant)	
Email Address:	Info@PinelandChamber.org
Estimated Attendance:	1500
Event Description: Include each activity, when activities take place, etc.	Fund raiser, Live Music, Sale of Stone Crab, Food and Alcohol beverages, Crafts/ Business vendors
Hours of Operation:	11 to 6
STRAP # of Parcel:	33-44-22-00-00008-0030 & 33-44-22-00008-0050
Owner of Premises*:	SES Group Packwood Intermediary & Robert C Jones Family Trust

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

Lee County Event Permit Application



What is the Zoning Classification of the premises? C-1A

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: Lloyds Syndicate 2623

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

Surety Company Bonding this Event (Name and Address): _____

<p>Will Vehicles be Used as Part of This Event?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, automobile coverage must be included on the certificate of insurance.</p>	<p>Will Food be Available at this Event?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, products liability coverage must be included on the certificate of insurance.</p>	<p>Will Alcoholic Beverages be served/consumed at this Event?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, liquor liability coverage must be included on the certificate of insurance.</p>
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Name & Address of Organization Providing Food: Blue Dog Restaurant, Island Crab Co, Jug Creek marina

Type of Food being Served: Stonecrab, burgers, hot dogs,

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: GPICC, not on County property

Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property? Yes ☒ No

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

Non-profit certificate/registration number:
(Required if alcohol is to be **SOLD** at the event)

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

Lee County Event Permit Application



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.

Cynthia Welch
Signature of Applicant

ECG
Witness

CYNTHIA Welch, Admin
Print Name of Applicant and Title

Ellen C. Gatten
Print Name of Witness

8/5/2025
Date

8/5/25
Date

SES Group Miami Springs, Ltd
Oba Pine Island Shopping Center
P.O. Box 463
Sanibel FL 33957

March 31, 2025

To Whom It May Concern:

This letter serves to notify Lee County Building and Permitting Services that the Greater Pine Island Chamber of Commerce has been given permission to use our property, including the sale of alcohol provided the appropriate licenses and insurance are obtained, at the Pine Island Shopping Center, aka the Winn Dixie Plaza, on Stringfellow Rd, St. James City, FL 33956 for the StoneCrab Festival on November 9, 2025.

Said properties include the following three parcels:

Strap: 33-44-22-00-00008-0060, located at 9830 - 9872 Stringfellow Road, St. James City, FL 33956, the owner is SES Group - Miami Springs, Ltd. and

Strap: 33-44-22-00-00008-0030, located at 9940 Stringfellow Road, St. James City, FL 33956, the owner is SES Group Packwood Intermediary and

Strap: 33-44-22-00-00008-0050, located at 9920 Stringfellow Road, St. James City, FL 33956, the owner is Robert C Jones Family Trust

It is agreed and understood by all parties that all permitting requirements, including sanitary facilities, public liability insurance of \$1,000,000/ \$2,000,000 with an umbrella up to \$5,000,000, and site plans will be the responsibility of the Greater Pine Island Chamber of Commerce. Further it is agreed and understood that the Greater Pine Island Chamber of Commerce will list the property owners, M Rice Realty, LLC and all tenants as named insured on the liability policy for this event.

For Property Owner

[Signature]
Signature
Melissa Rice
Printed Name
Partner
Title

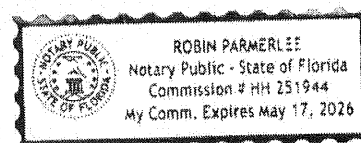
For the Greater Pine Island Chamber of Commerce

[Signature]
Signature
DAVID CONNER
Printed Name
PRESIDENT
Title

(Print, Type or Stamp Commissioned Name of Notary Public)

Personally Known ☒ OR Produced Identification ☐


Type of I.D. Produced

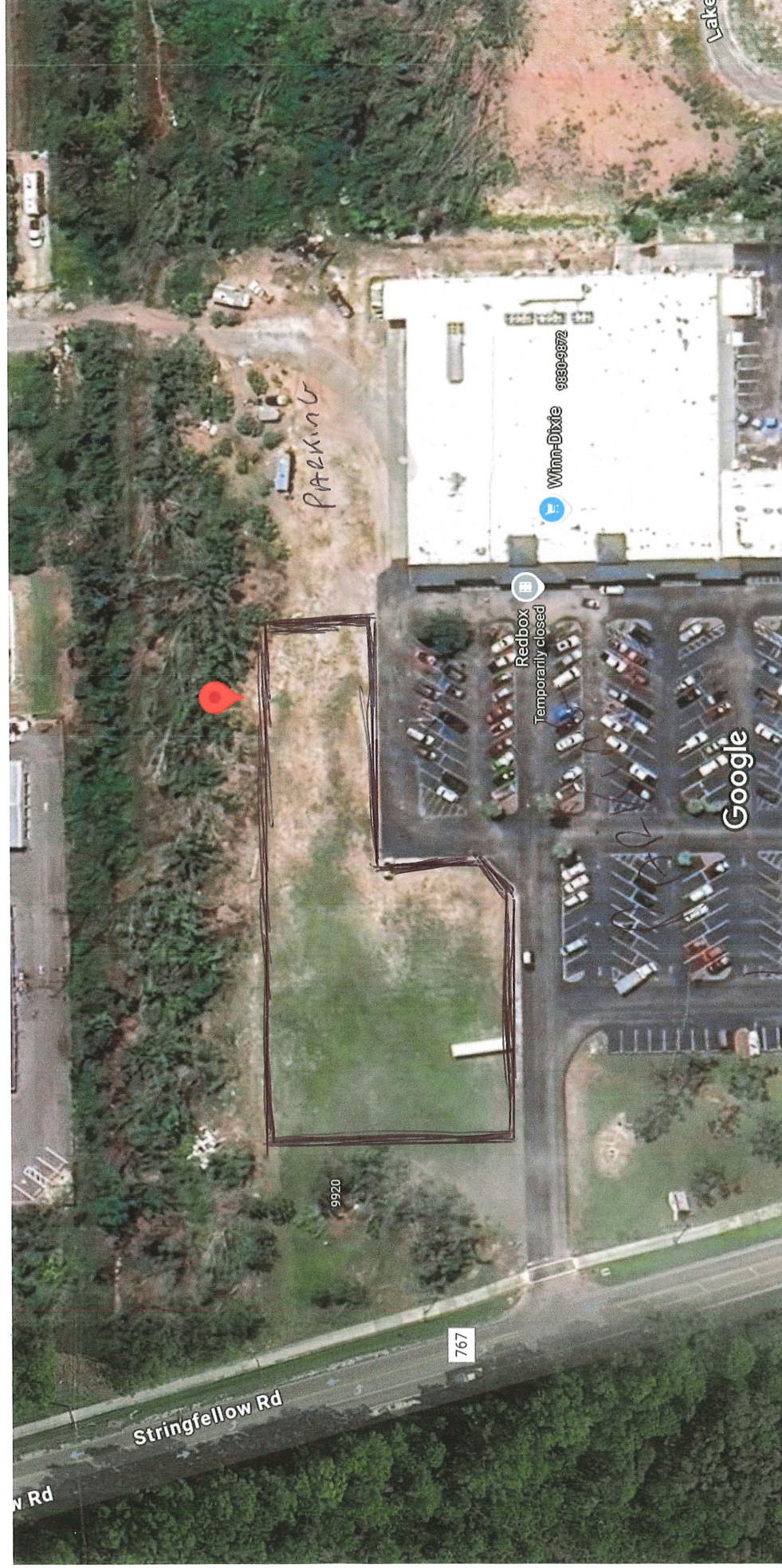


9940 Stringfellow Rd

StoneCrab Fest, November 9, 2025



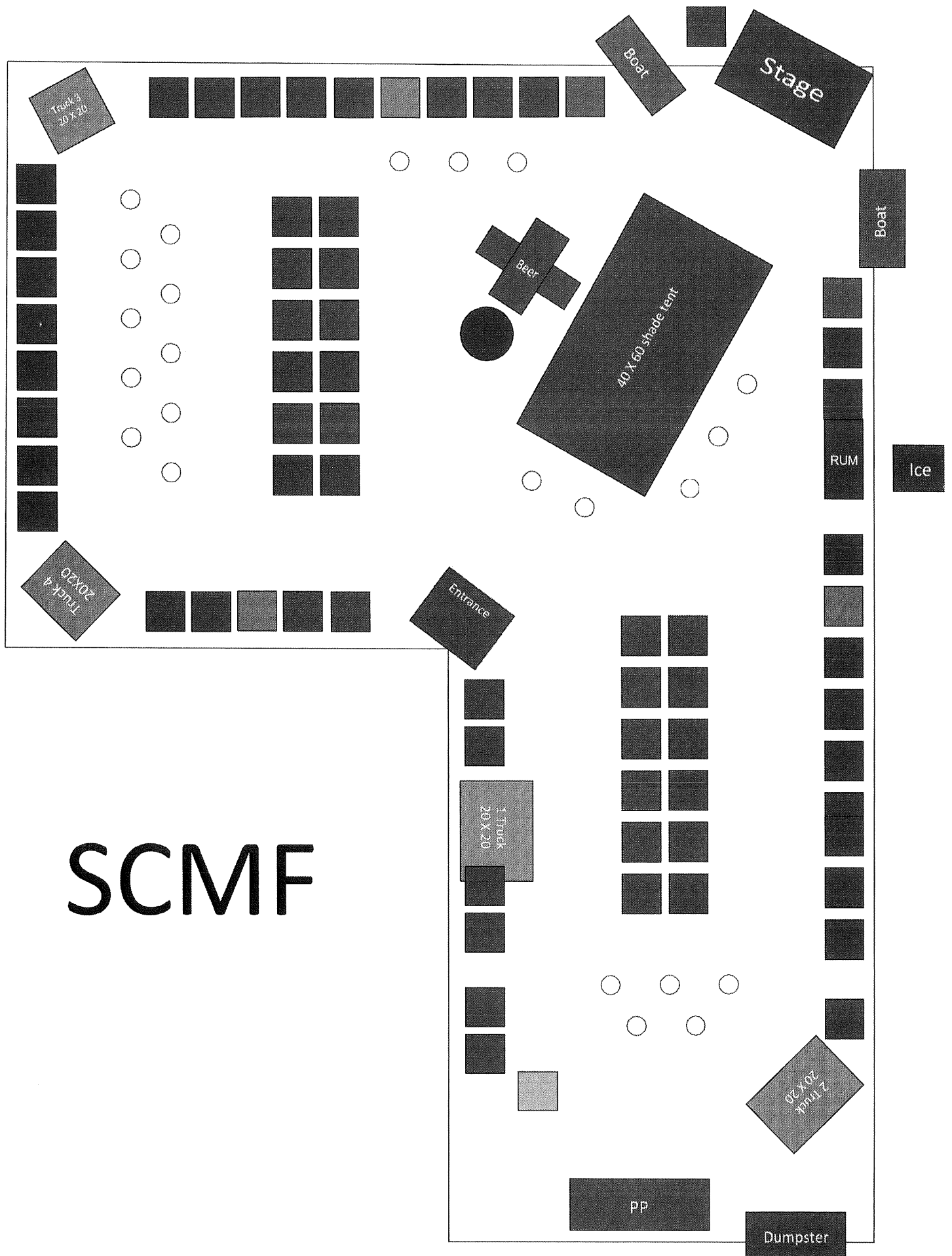
 Fenced Area
1



Imagery ©2025 Airbus, Maxar Technologies, Map data ©2025 Google 100 ft

more parking.

SCMF



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:

Parking in authorized areas only. Right-of-way should not be blocked.

Deputies (How Many?):

2 deputies for security and presence throughout the event area and 1 deputy to assist with traffic control at entrance on Stringfellow Rd.

Fee for Services:

Contact LCSO Details Unit

Special Arrangements:

Event should not impede the normal flow of traffic in any way. If it has been found to, vendor may be responsible for hiring an additional deputy for traffic control. Any amplified sounds should adhere to the Lee County Noise Ordinance. Vendor will be responsible for securing and placing barricades and cones at all points of access surrounding the event. Any alcohol must remain within the confines of the event area.

Print Name:

SCOTT GRIFFITH

Signature:

[Handwritten Signature]

Title:

Captain

Date:

8/11/25

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:

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Fire Guards (How Many?)

Fee for Services:

Flammable Vegetation:

First Aid Equipment:

The Fire department will provide one apparatus with staff to provide EMS/ Rescue services.

Fire Extinguishing:

Fire extinguishers will be required for any tent exceeding 10 x 10 size.

Special Arrangements:

Print Name: Courtney Mimbs

Signature:

Courtney Mimbs

Title:

Fire Inspector

Date:

08/05/2025

Lee County Event Permit Application



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY

2000 Main St., Suite #100

FORT MYERS, FL 33901

(239) 533-3911

Check the appropriate box(es) below:

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AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Treatment Facilities:

None necessary.

Medical Personnel:

None necessary.

Medical Supplies /
Equipment:

None necessary.

Safety Requirements:

Applicants shall follow all CDC and FDOH directives, and the Florida Governor's Executive Orders concerning health and safety.

Fee for Services

Not applicable.

Special Arrangements:

Please call 911 in the event of an emergency. To arrange special event emergency medical coverage (ambulance, cart, etc) or EMS participation, please fill out and submit the form at the following link: EMS Special Detail Request Form
For questions, contact our office at EMSDetail@leegov.com.

Print Name: Douglas B. Higgins

Signature: Douglas B. Higgins

Digitally signed by Douglas B. Higgins
Date: 2025.08.18 11:46:06 -04'00'

Title: Captain, EMS Operations

Date: August 18, 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:

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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: 2025.08.05 12:52:53 -04'00'

Title: Project Manager

Date: 08/05/2025

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:

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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: 8/5/2025

Not on Park Prop. STONE CRAB FEST
(11/9/2025)

Lee County Event Permit Application



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


Check the appropriate box(es) below:

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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 6, 2025



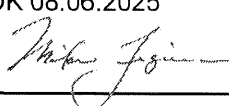
CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/05/2025

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.

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).

PRODUCER Robertson Ryan & Associates, Inc. ADRI WUTKOWSKI 7251 W Lake Mead Blvd #300 Las Vegas NV 89128	CONTACT NAME: ADRI WUTKOWSKI	
	PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: awutkowski@robertsonryan.com	
INSURED Greater Pine Island Chamber of Commerce c/o Cynthia Welch PO Box 325 Matlacha FL 33993	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Lloyds Syndicate 2623	AA-1128623
	INSURER B: Lloyds Syndicate 623	AA-1126623
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES		CERTIFICATE NUMBER:		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	Y	N	EH-771325-L4818966	11/07/2025 12:01 AM	11/10/2025 12:01 AM	EACH OCCURRENCE \$ 2,000,000
	<input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES \$ 100,000
	Host Liquor Liability						MED EXP (Any one person) \$ 5,000
	Retail Liquor Liability						PERSONAL & ADV INJURY \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 5,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PRODUCTS - COM/OP AGG \$ 2,000,000
	OTHER:						Deductible \$ 1,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	ANY AUTO						BODILY INJURY (Per person) \$
	OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	DED \$ RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N		N/A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
		1					
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)							
Certificate holder listed below is named as additional insured per attached CG 20 28 04 13. Attendance: 1500, Event Type: Country Festivals and Fairs - No Rides. Policy includes a 36 month Extended Reporting Period. Damage to Premises Rented (Other than Fire) included in the Each Occurrence Limit shown above.							
OK 08.06.2025 							

CERTIFICATE HOLDER Lee County, A Political Subdivision and Charter County of the State of Florida, its agents, employees and public officials 2115 Second St Fort Myers FL 33901	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 ADRI WUTKOWSKI
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

Schedule

Name of Additional Insured Person(s) or Organization(s):

Lee County, A Political Subdivision and
Charter County of the State of Florida,
its agents, employees and public
officials
2115 Second St
Fort Myers, FL 33901

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

- A. SECTION II - WHO IS AN INSURED** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury," "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. in the performance of your ongoing operations; or
2. in connection with your premises owned by or rented to you.

However:

1. the insurance afforded to such additional insured only applies to the extent permitted by law; and
2. if coverage provided to the Additional Insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

- B. With respect to the insurance afforded to these Additional Insureds, the following is added to SECTION III - LIMITS OF INSURANCE:**

If coverage provided to the Additional Insured is required by a contract or agreement, the most we will pay on behalf of the Additional Insured is the amount of insurance:

1. required by the contract or agreement; or
2. available under the applicable Limits of Insurance shown in the Declarations;
whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.