

# Event Permit



**Event Name:**

Greek Fest

**Applicant:**

Jen-Hope Belis

**Contact:**

239-481-2099

**Location:**

8210 Cypress Lake Dr. Fort Myers 33919

**Valid only for the Following date(s):**

February 20, 2015 thru February 22, 2015

**Valid only for the Following time(s):**

Fri & Sat 11:00 am - 11:00 pm; Sun 12:00 pm - 5:00 pm

**Permit Number**

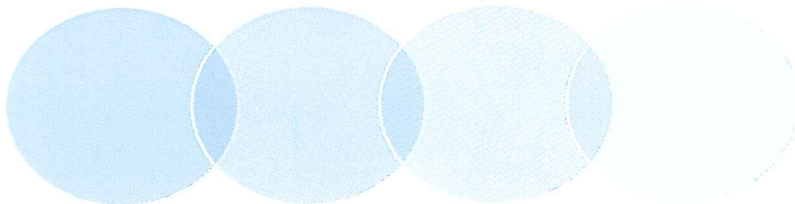
TMP2015-00032

## Permit Type

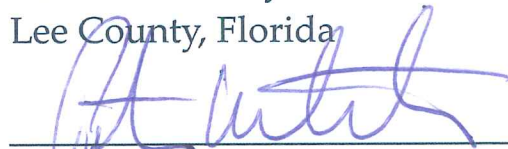
- Special Event
- Use of County Property
- Sell & Consume Alcohol
- Consume Alcohol only
- Film Permit

## 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.
- This permit is to be readily available for inspection during the entire event.
- County-issued alcohol permits: Alcoholic beverages must not be sold/consumed 1½ hours prior to the conclusion of the event & vacating the facility.



Board of County Commissioners  
Lee County, Florida

  
County Manager

2-5-15  
Date



### 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)

<b>Title of Event / Name of Production</b>	Greek Fest
<b>Date(s) of Event / Production:</b>	February 20 -22, 2015
<b>Location(s) of Event:</b>	Annunciation Greek Orthodox Church
<b>Name of Applicant:</b>	Jen-Hope Belis
<b>Applicant Address:</b>	8210 Cypress Lake Drive Ft Myers, FL 33919
<b>Applicant Phone Number:</b>	239-481-2099
<b>Contact Person:</b> (If different from applicant)	Jen-Hope Belis
<b>Contact Phone Number:</b> (If different from applicant)	239-699-1489
<b>Email Address:</b>	greekfestfortmyers@gmail.com
<b>Estimated Attendance:</b>	10,000-15,000 over 3 days
<b>Event Description:</b> Include each activity, when activities take place, etc.	Greek Fest is a 3-day festival filled with delicious food, folk dance performances, live music, church tours and carnival rides. This is a fundraiser for the church and all events take place on the grounds at Annunciation Greek Orthodox Church
<b>Hours of Operation:</b>	Friday & Saturday 11am-11pm and Sunday 12pm-5pm
<b>STRAP # of Parcel:</b>	22-45-24-00 0001.018A
<b>Owner of Premises*:</b>	Annunciation Greek Orthodox Church

\*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? 4 commercial

Are any temporary structures to be installed for the event? [X] Yes [ ] No Type: Tents

Do you have the appropriate permits for the temporary structures? [X] 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: Stewart & Sons

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

Surety Company Bonding this Event (Name and Address):

Table with 3 columns: 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? Each column contains checkboxes for Yes/No and a note about insurance coverage.

Name & Address of Organization Providing Food: Annunciation Greek Orthodox Church

Type of Food being Served: Greek Cuisine -- gyros, souvlaki, pastichio, moussaka, baklava, lamb, etc.

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event:

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:

(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

**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.

Jen-Hope Belis  
Signature of Applicant

\_\_\_\_\_  
Witness

Jen-Hope Belis, Greek Fest  
Print Name of Applicant and Title

\_\_\_\_\_  
Print Name of Witness

1-26-15  
Date

\_\_\_\_\_  
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:

Parking in authorized parking areas only.

Deputies (How Many?):

20 February: Two (2) deputies 1500-1900/Three (3) deputies 1900-2400/One (1) Supervisor 1900-0100  
21 February: One (1) deputy 1100-1500/Two (2) deputies 1500-1900/Three deputies (3) 1900-2400/  
One (1) Supervisor 1900-0100  
22 February: One (1) deputy 1100-1500/One (1) deputy 1500-1900/One (1) deputy 1900-2300

Fee for Services:

Special Arrangements:

Deputies will not collect or assist with the collection of money. Deputies are present for traffic and public safety purposes only. Alcohol will only be served in designated areas.

Print Name: Capt. Scott Lucia

Signature: *Capt. Scott H. Lucia*

Title: Detail Unit Commander

Date: 13 January 2015

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?)	N/A
Fee for Services:	0
Flammable Vegetation:	NOT WITHIN 10' OF ANY STRUCTURE (NFPA 101; 11.11.4.1)
First Aid Equipment:	
Fire Extinguishing:	FIRE EXTINGUISHERS NOT PLACED LESS THAN 75' FROM ONE ANOTHER (NFPA 101; 11.11.5) NO SMOKING WITHIN TENTS (NFPA 101; 11.11.4.2)
Special Arrangements:	ALL ELECTRICAL INSTALLATIONS SHALL COMPLY WITH NEC 70 ARTICLE 590 TEMPORARY INSTALLATIONS

Print Name: JACKIELOU KIPP

Signature: 

Title: FIRE INSPECTOR

Date: 01/12/2015

Lee County Event Permit Application



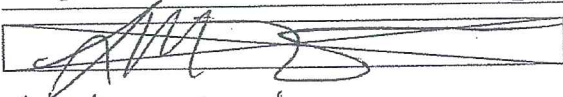
EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY  
14752 SIX MILE CYPRESS PARKWAY  
FORT MYERS, FL 33912  
(239) 533-3911

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.

Treatment Facilities:	NA
Medical Personnel:	NA
Medical Supplies / Equipment:	NA
Safety Requirements:	NA
Fee for Services	A. billed at time of service
Special Arrangements:	call 9-1-1 as needed for emergencies

Print Name: SCOTT M TRIPLE  
Signature:   
Title: Deputy Director  
Date: 1/22/15

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

Parking:

No Parking on or within ten feet of Lee County maintained road rights-of-way.

Ingress and Egress:

Use all established means of ingress and egress.

Special Arrangements:

Use Lee County Sheriffs Office for assistance with traffic control as needed to maintain safe traffic flows onto and from the site and at adjacent traffic signals affected by peak event traffic.

Print Name: Bryan Miller

Signature: Bryan D. Miller

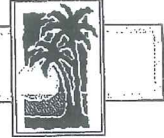
Digitally signed by Bryan D. Miller  
DN: cn=Bryan D. Miller, o=FLCDOT, ou=Traffic, email=millerm@leegov.com,  
c=US  
Date: 2015.01.22 10:08:00 -05'00'

Title: Senior Project Manager

Date: January 22, 2015



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
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- FILM PERMIT

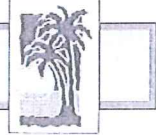
AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Illumination:	Event does not affect Lee County Parks and Recreation facilities or operations
Parking Areas:	Event does not affect Lee County Parks and Recreation facilities or operations
Special Arrangements:	

Print Name: Alise Flanjack  
Signature: *Alise Flanjack*  
Title: Parks and Recreation Manager  
Date: 1/21/15

*Greek Fest  
2/20 - 2/22*

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

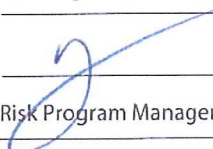
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AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Insurance Requirements: 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.

Special Arrangements: A certificate of insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured.

Print Name: Mike Figueroa  
Signature:   
Title: Risk Program Manager  
Date: January 14, 2015



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/09/2015

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 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> Stewart & Sons Insurance, Inc.  P.O. Box 60029 Fort Myers FL 33906		<b>CONTACT NAME:</b> PHONE A/C, No. Ext): 239-936-8844 FAX A/C, No): 239-275-4446 E-MAIL ADDRESS: Info@stewartandsonsinsurance.com															
<b>INSURED</b> Annunciation of the Virgin Mary Greek Orthodox Church 8210 Cypress Lake Drive Fort Myers FL 33919		<table border="1"> <tr> <th>INSURER(S) AFFORING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: The Cincinnati Insurance Company</td> <td>10677</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>		INSURER(S) AFFORING COVERAGE	NAIC #	INSURER A: The Cincinnati Insurance Company	10677	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER B:																	
INSURER C:																	
INSURER D:																	
INSURER E:																	
INSURER F:																	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

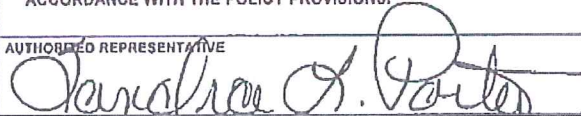
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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	ADDITIONAL INSURER	SUBROGATION	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Hired & NonOwned Auto GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJ. <input type="checkbox"/> LOC	Y		CAP5228293	08/17/14	08/17/15	EACH OCCURRENCE	\$ 1000000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500000
							MED EXP (Any one person)	\$ 5000
							PERSONAL & ADV INJURY	\$ 1000000
							GENERAL AGGREGATE	\$ 2000000
							PRODUCTS - COMP/OP AGG	\$ 2000000
								\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ 0			CAP5228293	08/17/14	08/17/15	EACH OCCURRENCE	\$ 3000000
							AGGREGATE	\$ 3000000
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> N/A (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATUTORY LIMITS	OTH: ER
							E L. EACH ACCIDENT	\$
							E L. DISEASE - EA EMPLOYEE	\$
							E L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Greek Festival 2/20, 2/21 & 2/22/2015

*on MP 01/14/15*

<b>CERTIFICATE HOLDER</b> Lee County Board of County Commissioners  P.O. Box 398 Fort Myers FL 33902		<b>CANCELLATION</b> 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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# ANNUNCIATION GREEK ORTHODOX CHURCH

January 10, 2015

To Whom It May Concern:

The Annunciation Greek Orthodox Church will use the premises for the annual Greek Festival during February 20, 21 & 22, 2015. The following is the list of dates and times.

<u>DAY</u>	<u>DATE</u>	<u>TIME</u>
Friday	February 20, 2015	11:00 am to 11:00 pm
Saturday	February 21, 2015	11:00 am to 11:00 pm
Sunday	February 22, 2015	12:00 pm to 5:00 pm

Rev. Fr. Dean Nastos  
Proistamenos Signature

Jan. 9, 2015  
Date

[Signature]  
Witness

Jan. 12, 2015  
Date

State of FL

County of Lee

The Foregoing was ( ) Sworn to and Subscribed OR (✓) acknowledged before me this 9th

Day of January, 2015, by Fr. Dean Nastos who is (✓) personally known to me OR ( )

Produced \_\_\_\_\_ as identification.

Letha M. Smith - Walsh  
Notary Public

Commission Expires 12/2/18



REV. FR. DEAN NASTOS, Proistamenos

8210 Cypress Lake Drive, Fort Myers, Florida 33919-5116  
Telephone: (239) 481.2099 Fax: (239) 481.0504  
Parish E-mail: officeagoc@gmail.com Website: www.annunciation.fl.goarch.org

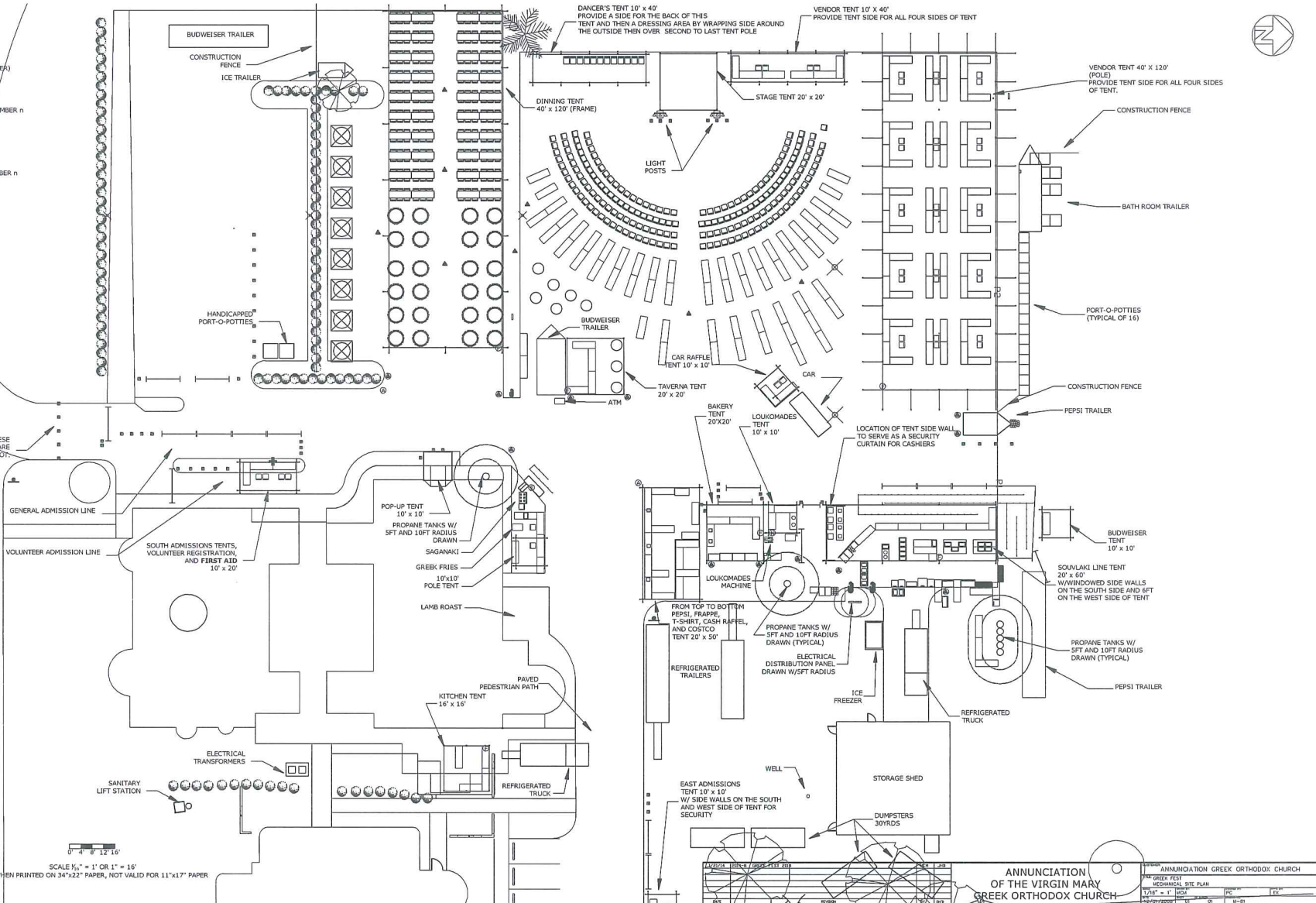




### LEGEND

- ⊙ A-FRAME SIGN
- ⊕ FIRE EXTINGUISHER
- ⊖ FIRE EXTINGUISHER TYPE-K (SILVER)
- ⊕ FIRST AID KIT
- ⊖ FRENCH BARRICADE
- ⊕ HAND WASH STATION
- ⊖ POTABLE WATER CONNECTION NUMBER n
- ⊕ STANCHION
- ⊖ TELEPHONE JACK
- ⊕ TRAFFIC CONE
- ⊖ TRASH CAN W/TRAY HOLDER
- ⊕ TRASH CAN
- ⊖ WASTE WATER CONNECTION NUMBER n

NOTE THE INTENT OF THESE BARRICADES IS THAT THEY ARE INSTALLED AT THE BAPTIST LOT.



SCALE 1/4" = 1' OR 1" = 16'  
 ONLY WHEN PRINTED ON 34"x22" PAPER, NOT VALID FOR 11"x17" PAPER

ANNUNCIATION OF THE VIRGIN MARY  
 GREEK ORTHODOX CHURCH

ANNUNCIATION GREEK ORTHODOX CHURCH  
 GREEK FEST  
 MECHANICAL SITE PLAN  
 DATE: 11/11/2014  
 DRAWN BY: [Name]  
 CHECKED BY: [Name]