

# **EVENT PERMIT**



Ordinance 17-08

# Kyrazis/Almand Wedding

**PERMIT NUMBER:** 

TMP2024-00259

Date(s) of Event:

May 10, 2025 from 3:30PM-6:30PM.

Property Owner:

LEE COUNTY

Applicant:

Wiiliam Almand

678-209-5121

Description:

30 minute wedding ceremony on Banyan Street on Saturday May 10, 2025 from

3:30PM-6:30PM.

Location of event:

131 - 135 1ST ST W, BOCA GRANDE, FL 33921

131/135 1ST ST W

Will the event be attended by 1000 or more people?

No

Will the event be held on County Owned Property?

No

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

Date



# **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

KYRAZIS ALMAND WEODING

mp2024-60259



# **Event Application**

Check the	appropriate	box(es)	below:
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□ USE OF COUNTY PROPERTY PERMIT

PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Kyrazis / Almand Wedding
Date(s) of Event / Production:	May 10, 2025
Location(s) of Event:	Banyan Street, Boca Grande FL 33921
Name of Applicant:	William M. Almand
Applicant Address:	3451 Spears Rd. Madison, GA 30650
Applicant Phone Number:	678-209-5121
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	wmalmand@gmail.com
Estimated Attendance:	140
<b>Event Description:</b> Include each activity, when activities take place, etc.	30 minute wedding ceremony taking place on Banyan street with chairs facing Gilchrist Avenue
Hours of Operation:	3:30 to 6:30pm ET (ceremony 5:30 to 6:00pm)
STRAP # of Parcel:	14-43-20-01-00005.0010
Owner of Premises*:	Lee County

<sup>\*</sup>Notarized statement from the property owner specifically consenting to the proposed use required.



What is the Zoning Classification of the p	oremises? DOT Right of W	ay
Are any temporary structures to be insta	lled for the event? \(\bar{Yes}\) \(\overline{\times}\) No	Type: n/a
Do you have the appropriate permits for	the temporary structures?	Yes No
* For a 'Special Event' and 'Use of County identified, including all parking areas.	/ Property' permit, submit a site plan wi	ith all proposed facilities and activities
Insurance Company Insuring the Event:	Houston Casualty Cor	npany
Note: Certificate of Insurance must be submitted	at time of application	
Surety Company Bonding this Event (Na	me and Address): n/a	
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   X No	☐ Yes	├ Yes
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:	/a	
Type of Food being Served: $n/a$		
Section II - USE OF COUNTY PR	OPERTY PERMIT	
Organization Sponsoring the Event: S	loane Kyrazis & Matt A	Almand
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES	PERMIT
Is alcohol being sold/consumed on Cou	nty Property?	Yes No
If Yes, then a "Lee County Alcohol Permit" is required.	Only non-profit organizations can sell alcohol on Cour	nty Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	n/a_	
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



	TV Commercial Still Photos
Public Service Announcement  Industrial / Document	tary Other:
any of the following be needed or included*?	
Street Closure	☐ Yes ☐ No
Traffic / Crowd Control	☐ Yes ☐ No
Fire or Burning	Yes No
Explosives or Pyrotechnics	Yes No
Animals, Large or Small	☐ Yes ☐ No
Construction of Any Kind	☐ Yes ☐ No
Large and/or Numerous Vehicles	☐ Yes ☐ No
Helicopters, Boats, etc.	Yes No
Stunts	☐ Yes ☐ No
Other	Yes No
pecial Parking Requirements:	
	facilities, etc.)
	facilities, etc.)
Special Parking Requirements:  City or County Services Required: (Personnel, equipment, f	facilities, etc.)
City or County Services Required: (Personnel, equipment, f	cords on production in Florida to track the economic imp
	cords on production in Florida to track the economic imparte as closely as possible.
City or County Services Required: (Personnel, equipment, f  The following information is required for local and state receive industry. If exact figures are not available, please estiments.  Number in Cast:  Number in Cre	cords on production in Florida to track the economic imparte as closely as possible.

Page | 3



#### **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**

Date

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.

Signature of Applicant

Witness

Date

W. Matt Almand Sloane Kyrazis

Print Name of Applicant and Title Print Name of Witness

5/26/24 5/26/24

A COUNTY OF A COUN



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

Check the appropri	ite box(es) below:
F SPECIAL EV	ENT PERMIT
⋉ USE OF CO	UNTY PROPERTY PERMIT
PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IT
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking for event will be in authorized areas only.
Deputies (How Many?):	Two deputies for road closure, traffic control and security on Banyan Street between Park Ave and Gilchrist while wedding takes place.
Fee for Services:	Contact LCSO Details Unit
Special Arrangements:	Each end of Banyan Street must be blocked in order to provide safety and security to participants. All chairs, tables and other items used for the event must be removed from the roadway as soon as possible in order to reopen Banyan Street.
	Print Name: Commins Signature: Commander
	Date: 5 39 34



#### 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.

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

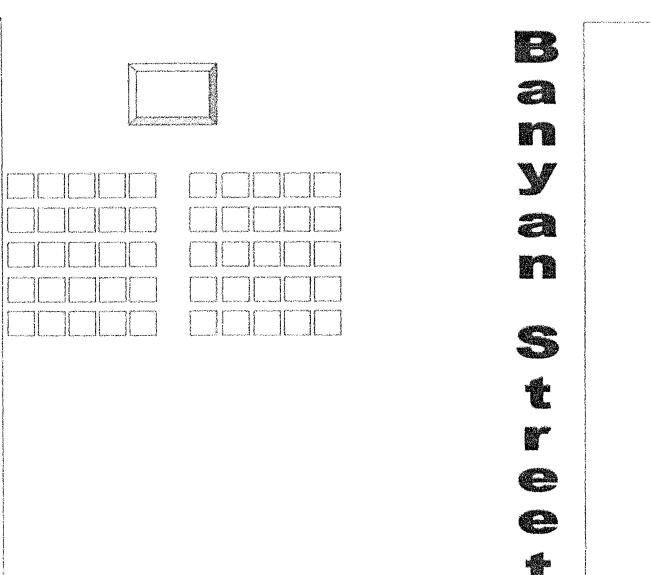
Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

▼ USE OF COUNTY PROPERTY PERMIT

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	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR QUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	2 Fire Guards @ 4 hours
Fee for Services:	\$60.00/hr per Guard Total \$480.00
Flammable Vegetation:	NA
First Aid Equipment:	NA
Fire Extinguishing:	NA
Special Arrangements:	In Case of an Emergency Dial 911
	Print Name: C.W. Blosser  Signature: Fire Chief  Date: 5/29/2024

# Gilchrist Ave.



CHAIRS =

Park Ave.



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

Check the	appro	priate	box(es	s) below:
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- 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.

ORGANIZATION WILL RE	QUIRE THE APPLIC	ANT TO COMPLY WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	Applicants shall fol Orders concerning	low all CDC and FDOH directives, and the Florida Governor's Executive health and safety.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in toffice at EMSDetai	the event of an emergency. To arrange special event coverage, contact our l@leegov.com.
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins Digitally signed by Douglas B. Higgins Date: 2024.05.28 16:46:11 -04'00'

Captain, EMS Operations

May 28, 2024

Title:

Date:



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

Check the appropri	ate box(es) be	low:		
┌─ SPECIAL EV	'ENT PERMIT			
•	UNTY PROPERTY	PERMIT		
• •		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES		
FILM PERM				
* *				
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.		
Parking:		areas. Dermitted on any portion of the Banyan St. road right of way. Be parked off the pavement that would damage the Banyan Tree root system.		
Ingress and Egress:	Use all established	means of ingress and egress.		
Special Arrangements:		aty Sheriff's Office for assistance with traffic control as needed. e access and public vehicular access shall be maintained on all surrounding Lee d roads.		
	Print Name: Signature:	Nathan Thoman  Nathaniel C. Thoman  Digitally signed by Nathaniel C. Thoman  Date: 2024 06 10 0052308 - 04/00!		
	Title:	Project Manager		
Date: 06/10/2024				



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

Check the appropri	ate box(es) bel	ow:
☐ SPECIAL EV	ENT PERMIT	
ズ  USE OF CO	UNTY PROPERTY	PERMIT
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
T FILM PERN	ЛІТ	
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Illumination:		must be provide by permit holder. Generators are permitted on Banyan St. Please do anything on the trees or vegetation.
Parking Areas:	[B. 11	d at the Boca Grand Community Center.
Consid American	All propt great me	ist stay on county property at all times while on Banyan Street.
Special Arrangements:	An event guest me	is a stay on county property at an times will early an acreet.
	Print Name:	Colleen Via
		Alla II
	Signature:	Culle Wa
	Title:	Countywide Services Manager
	Date:	7/3/2024

Banyan St. My - Kyrazis/Almand Wedding-



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

		,			
Check the appropria	te box(es) be	low:			
SPECIAL EVE	NT PERMIT				
□ USE OF COU	NTY PROPERTY	PERMIT			
PERMIT TO S	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES			
FILM PERMI	Τ				
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY 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.				
	Certificate Must	Read As:			
	and public official with regard to g	olitical 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 nion and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as older and as an additional insured as listed above.			
	Subject to proof	of insurance.			
	Print Name:	Mike Figueroa			
	Signature:	Mike from			
	Title:	Risk Program Manager			

June 6, 2024

Date:



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/26/2024

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).

TOTAL TOTAL TOTAL TOTAL OF CAUCIT	on a or o o morn (o).				
PRODUCER		CONTACT NAME:	Eventsured Customer Service		
Foresite Sports, Inc.		PHONE (A/C, No. Ex	tt): 888-882-5902	FAX (A/C, No):	
DBA: Eventsured		E-MAIL ADDRESS:	info@eventsured.com		
3553 West Chester Pike #418			INSURER(S) AFFORDING COVERAGE		NAIC#
Newtown Square, PA 19073		INSURER A	: Houston Casualty Company		42374
INSURED		INSURER B	:		
		INSURER C	:		
William Almand		INSURER D	:		
3451 Spears Rd.		INSURER E	:		
Madison, GA 30650		INSURER F	:		
COVERAGES	CERTIFICATE NUMBER: TM353411		DEVISION NU	MDED.	

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 INSR	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
A	GENERAL LIABILITY  COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
	CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence) MED EXP (Any one person)	\$ 100,000 \$ 5,000
	X	Υ	Υ	H23SE00155/TM353411	05/10/2025 12:01AM	05/11/2025 2:01AM	PERSONAL & ADV INJURY	\$ 1,000,000
					12.01AW	2.01AW	GENERAL AGGREGATE	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:  POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 1,000,000
-	AUTOMOBILE LIABILITY						DEDUCTIBLE  COMBINED SINGLE LIMIT	\$ 0
1.							(Ea accident)	\$
	ANY AUTO ALL OWNED SCHEDULED						BODILY INJURY (Per person)	\$
1	AUTOS AUTOS						BODILY INJURY (Per accident)	\$
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
<u> </u>	DED RETENTION\$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N						WC STATU- OTH- TORY LIMITS ER	
I ANY PROPRIETOR/PARTNER/EXECUTIVE		N/A					E.L. EACH ACCIDENT	\$
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$
ļ	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 Wedding (Čeremony and/or Reception) to be held on 05/10/2025 - 05/10/2025 with 140 attendees at Banyan Street, Boca Grande, FL P.O. Box 398 Fort Myers, FL 33902. Additional Insureds include: Banyan Street, Boca Grande, FL P.O. Box 398 Fort Myers, FL 33902; Lee County, a political subdivision and Charter County of the State of Florida PO Box 398 Fort Myers, FL 33902 (WOS & PNC selected).

CERTIFICATE HOLDER	CANCELLATIO

Lee County, a political subdivision and Charter County of the State of Florida

PO Box 398

Fort Myers, FL 33902

OK 06/06/2024

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