

# **EVENT PERMIT**



Ordinance 17-08

# Fall Fest

**PERMIT NUMBER:** 

TMP2025-00258

Date(s) of Event:

October 24, 2025

Property Owner:

FORT MYERS COMMUNITY CHURCH IN

Applicant:

Lisa Gannon

2396897574

Description:

Trunk or Treat with games, hayrides, food, music, fire and police department at Fort

Myers Community Church on October 24, 2025, from 5:30PM until 8:00PM

Location of event:

8440 CYPRESS LAKE DR, FORT MYERS, FL 33919

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?

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

County Manager

Date



# **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Fall Fest

TMP 2025-00258







August 5, 2025

Lisa Gannon
Fort Myers Community Church
Via email to Lisa@fmcc.life

Ms. Gannon,

May this letter affirm and document our discussion that Cypress Lake United Methodist Church agrees to allow overflow parking on our property for your Fall Fest, scheduled on October 24, 2025 between 5:30 pm and 8:00 pm. Any questions or comments may be directed to me via email at <a href="mailto:ccook@cypresslakeumc.com">ccook@cypresslakeumc.com</a> or by phone at 239-482-1250.

Sincerely,

Cyndy Cook

Church Administrator



# **Event Application**

Спеск	the appropriate box(es) below:
	JXJ SPECIAL EVENT PERMIT
	USE OF COUNTY PROPERTY PERMIT
	PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	FILM PERMIT

Section 1 - General INF	ORMATION (All Permit Types)	
Title of Event / Name of Production	Fall Fest	
Date(s) of Event / Production:	October 24, 2025	
Location(s) of Event:	8400, 8440 Cypress Lake Dr, Fort Myers, FL 33919	
Name of Applicant:	Fort Myers Community Church	
Applicant Address:	8400, 8440 Cypress Lake Dr, Fort Myers, FL 33919	:
Applicant Phone Number:	239-689-7574	
Contact Person: (If different from applicant)	Lisa Gannon	
Contact Phone Number: (If different from applicant)	239-416-2408	
Email Address:	lisa@fmcc.life	
Estimated Attendance:	1,500	
Event Description: Include each activity, when activities take place, etc.	Fire Department 6-7pm, Sheriff's Office, Bounce houses, hay ride, yard gam kids activities, free hot dogs, live music, Trunk-or-Treat	es
Hours of Operation:	5:30-8:00pm	
STRAP # of Parcel:	22-45-24-L2-00001.017A; 22-45-24-L2-00001.0170	1
Owner of Premises*:	Fort Myers Community Church	

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



What is the Zoning Classification of the	premises? RM-2		
Are any temporary structures to be inst	alled for the event? 🗌 Yes 🛛 🗸 No	Гуре:	
Do you have the appropriate permits fo	or the temporary structures?	Yes	No
* For a 'Special Event' and 'Use of Coun Identified, including all parking areas.	ty Property' permit, submit a site plan wit	h all proposed facil	tles and activitles
Insurance Company Insuring the Event	: AWA Insurance		
Note: Certificate of Insurance must be submitte	d at time of application		
Surety Company Bonding this Event (N	ame and Address): n/a		
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?		Beverages be ed at this Event?
∏ Yes ∏ No	Yes 🛅 No	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.		y coverage must be tificate of insurance.
Providing Food:  Type of Food being Served: Hot dogs			
Section II - USE OF COUNTY P	ROPERTY PERMIT		
Organization Sponsoring the Event:	/a		
Section III - SALE/CONSUMP	TION OF ALCHOLIC BEVERAGES F	PERMIT	
Is alcohol being sold/consumed on Co	unty Property?	Yes 🗸	No
If Yes, then a "Lee County Alcohol Permit" is required	d, Only non-profit organizations can sell alcohol on Count	y Property,	
Non-profit certificate/registration nur (Required if alcohol is to be <u>SOLD</u> at the event)	nber: _n/a		
Please note: A permit from the State of Florida further details	Division of Alcoholic Beverages and Tobacco may	also be required; please	call (239) 344-0885 f



TV Movie or Special							- 141 - 4
	* *	ries / Pilot		TV Commer	cial		Still Photos
Public Service Announceme	ent 🔲 Indust	rial / Documentary		Other: n/a			
l any of the following be nee	eded or Include	d*?					
Street Closure				Yes		No	
Traffic / Crowd C	Control			Yes	$\Gamma$	No	
Fire or Burning				Yes		No	
Explosives or Pyr	rotechnics			☐ Yes		No	
Animals, Large o	r Small			[ Yes	[.]	No	
Construction of A	Any Kind			Yes		No	•
Large and/or Nu	merous Vehlcle	s		· Yes		No	
Helicopters, Boa	ts, etc.			☐ Yes		No	
Stunts				☐ Yes		No	
Other				[] Yes		No	•
pecial Parking Requirement	:Si						
pecial Parking Requirement	:5:						
			tles, et	c.)			
			ties, et	с.)			
Special Parking Requirement			tles, et	c.)			
City or County Services Requ	ulred: (Personne	el, equipment, facili	s on pr	oduction in F		a to t	rack the economic impa
City or County Services Requ The following information is the Industry. If exact figures	ulred: (Personne	el, equipment, facili	s on pr	oduction in F	e.		rack the economic impa
	ulred: (Personne	el, equipment, facili cal and state record le, please estimate	s on pr	roduction in Fely as possibl	e.		
City or County Services Requ The following information is the industry. If exact figures	ulred: (Personne	el, equipment, facili cal and state record le, please estimate Number in Crew:	s on pras clos	roduction in Fely as possibl	e.		



#### **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 walve, 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.

\$/13/2025

Signature of Applicant

Date

Lisa Frannon

Print Name of Witness

8 13 2025



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

Check the appropri	ate box(es) bei	low:
SPECIAL EV	ENT PERMIT	
USE OF CO	UNTY PROPERTY	PERMIT
		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM		
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P LICANT TO COMF	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	Parking for this eventure the church property & All church volunte any time to direct vests & flashlights	rent will be in authorized areas only. There will be some parking located on permission has been granted to use neighboring church parking lot for overflow. ers that are asissting with parking will not be permitted to be in the roadway at traffic & must stay in the parking lot. Volunteers should be equipped with safety   s. Signage & volunteers should be used to assist participants to/from offiste parking.
Deputies (How Many?):	Two (2) extra dut	y detail deputies will be required for security & presence throughout event area.  y detail deputy will be required for traffic control to assist in keeping traffic from press Lake Dr. If traffic control is required at exit of either parking location, rected to right turns only.
Fee for Services:	Contact LCSO De	stails Unit for further information.
Special Arrangements:	for ensuring that the church that has be	nator will be responsible for barricading off the western most church the that no vehicle traffic can gain access. Event coordinator will be responsible rehicle traffic does not have access to event area on the northern side of the the designated as extended parking on the site map through the use of trunk the parricades, and signage. If there is any amplified sound, it must adhere to the to Ordinance.
	Print Name:	P Cymmins
	Signature:	200000000000000000000000000000000000000
	Title:	Commander
	Date:	8 20 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

☐ USE OF CO	UNTY PROPERTY I	PERMIT						
TI PERMIT TO	TI PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES							
T FILM PERM	1IT							
		ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR CANT TO COMPLY WITH FOR THEIR EVENT.						
ire Guards (How Many?)	NA							
ee for Services:	NA							
lammable Vegetation:	10' clearance	from generators, stage, bouncehouse(s), tent(s), etc.						
irst Aid Equipment:	Call 911 in the	e event of an emergency.						
ire Extingulshing:	ABC fire exti	ngulsher @ stage and tents greater than 200sq ft.						
pecial Arrangements:	NA							
	Print Name:	Jackielou Mozes						
	Signature:	fmozes						
	Title:	Fire Marshal						
	Date:	8/25/2025						
		Page 17						

Page |7



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

Check the appropriate box(es) below: 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. None necessary. Treatment Facilities: None necessary. Medical Personnel: None necessary. Medical Supplies / Equipment: Applicants shall follow all CDC and FDOH directives, and the Florida Governor's Executive Safety Requirements: Orders concerning health and safety. Not applicable. Fee for Services 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 **Special Arrangements:** following link: EMS Special Detail Request Form For questions, contact our office at EMSDetail@leegov.com. Douglas B. Higgins Print Name: Douglas B. Higgins Date: 2025.08.19 16:38:26-04'00' Signature: Captain, EMS Operations Title: August 19, 2025

Date:



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

Check the appropri	ate box(es) bel	ow:					
SPECIAL EV	ENT PERMIT						
USE OF CO	UNTY PROPERTY	PERMIT					
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES					
FILM PERM	1IT						
		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.					
Ingress and Egress:	Please use all estab	lished 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	l roads.					
	Print Name:	Nathan Thoman					
	Signature:	Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2025.08,27 13:43:07 -04'00'					
	Title:	Project Manager					
	Date:	08/27/2025					



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

• •	O SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
┌ FILM PERM	MIT
	E APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIPLICANT TO COMPLY WITH FOR THEIR EVENT.
llumination:	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: 9/4/2025
	Date: 9/4/2025



# 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:
	INTY PROPERTY SELL AND CONS	PERMIT  UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
nsurance Requirements:	occurrence to pr aforementioned Certificate Must Lee County, a po and public officia with regard to ge	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
Special Arrangements:	A Certificate of Ir political subdivis	nsurance shall be submitted as evidence of the required coverage listing Lee County, a sion 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.  of insurance.
	Print Name: Signature: Title:	Mike Figueroa  This Jain  Risk Program Manager
	Date:	August 18, 2025



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/18/2025

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 CONTACT NAME: Brandon Januska AWA Insurance Agency PHONE [A/C, No, Ext]: 239-418-1100 E-MAIL ADDRESS: brandon@awainsurance.com FAX (A/C, No): 239-418-1164 13700 Six Mile Cypress Pkwy Suite#1 Ft.Myers FL 33912 INSURER(S) AFFORDING COVERAGE NAIC# INSURER A: Southern-Owners Ins Co 10190 INSURED FORTMYE-13 INSURER B: Fort Myers Community Church Inc INSURER C: 8440 Cypress Lake Dr 8400 Cypress Lake Dr INSURER D: Fort Myers FL 33919 INSURER E INSURER F :

	COVERAGES CERTIFICATE NUMBER: 1919971597 REVISION NUMBER:									
T IN	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									
1 6	CENTIFICATE MAY BE ISSUED ON 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	INSD	WVD			POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	s
A	Х	COMMERCIAL GENERAL LIABILITY			20754531		3/3/2025	3/3/2026	EACH OCCURRENCE	\$ 1,000,000
	<u> </u>	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
									MED EXP (Any one person)	\$ 10,000
	<u> </u>								PERSONAL & ADV INJURY	\$ 1,000,000
		N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000
1	X	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,000,000
<u> </u>		OTHER:							Ministers E&O	\$ 1,000,000
l	AU	romobile liability							COMBINED SINGLE LIMIT (Ea accident)	\$
		ANY AUTO							BODILY INJURY (Per person)	ş
		OWNED SCHEDULED AUTOS HIRED NON-OWNED							BODILY INJURY (Per accident)	\$
		HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	S
										\$
Α	Х	UMBRELLA LIAB X OCCUR			5375460500		3/3/2025	3/3/2026	EACH OCCURRENCE	\$ 2,000,000
		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 2,000,000
		DED X RETENTION \$ 10,000								\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY							PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A			ĺ			E.L. EACH ACCIDENT	\$
	(Mar	ndatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$
	DES	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$
L										
DESC	RIPT	TON OF OPERATIONS / LOCATIONS / VEHICL	LES (A	CORD	101, Additional Remarks Schedu	le, may be	attached if more	space is require	ed)	
incl	udes	unty, a political subdivision and Chass an automatic waiver of subrogation	ner c	rega	y of the State of Florida, its ird to general liability. The	s agents certificat	, employees, le holder is ar	and public of n additional in	fficials are automatic addit	lional insureds and ioncontributory basis
with	reg	ards to general liability.							ion on on a pinnary and i	ionocharibatory badio
			OK	08.	18.2025					
				7						
			Þ	12/cm	- Jugie					
CEI	RTIF	ICATE HOLDER				CANC	ELLATION			
									ESCRIBED POLICIES BE CA EREOF, NOTICE WILL E	
		Lee County, a political sub-	divisi	on a	nd Charter County of				Y PROVISIONS.	or Deriveren IV
		the State of Florida	~( • IUI	J, 1 U	in onaitor odurity of					
l	P.O. Box 398					AUTHOR	IZED REPRESEN	ITATIVE		

Fort Myers FL 33902

AUTHORIZĘD REPRESENTATIVE