

EVENT PERMIT



Ordinance 17-08

Wittmer/Rowe Wedding

PERMIT NUMBER:

TMP2025-00112

Date(s) of Event:

April 18, 2026 from 4:00PM until 7:00PM

Property Owner:

LEE COUNTY

Applicant:

Brian Wittmer

812-527-7562

Description:

April 18, 2026. Wedding ceremony only. Set up starting at 4:00PM. Ceremony to start at

5:30PM. Tear down of the chairs at 6:30PM.

Location of event:

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

Banyan Street

Will the event be attended by 1000 or more people?

No

Will the event be held on County Owned Property?

Yes

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

Jate

ftmpprmt specialevent.rpt

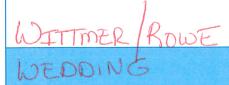


Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



TMP 2025-00112

Ing Engage Event Vergit Application

Event Application

and the appropriate box(es) below:

SPECIAL EVENT PERMIT

THE USE OF COUNTY PROPERTY PERMIT

TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

THAM PERMIT

Section 1 - GENERAL INFORMATION (All Permit Types)

Title of Event / Name of Wittmer/Rowe Wedding

Uste(s) of Event /

4/18/2026

Location(s) of Event: Banyan Street, Booa Grande, FL

Pame of Applicant: Brian Wittmer

applicant Address: 1007 Hunterallen Dr Florence KY 41042 United States

Sophrant Phone Number: (812) 527-7562

Contact Person Brian Wittmer

Contact Phone Number: (812) 527-7562

The second control of the supplication of the second control of th

email Adoress: Bowiitmer@gmail.com

(Stimated Attendance: 50

Wedding Geremony Only

Set up starting at 4PM 50 or less whith folding chairs with an itste separating than the obtains.

Ceremony to start at 5:30, tear down chairs at 6:30

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Policy 56 Operation: 6 YPM

MERR 8 of Purcel: 14-43-20-01-00005-0010

Owner of Premises*: Lon County

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Are any tentporary s	tractines to be inst	alled for the event?	1 Yes X No	Typet:	
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Constituted, including	ot' and 'Use of Count all packing areas.	ty Property ⁽ permit, [,]	aubmit a site plan wi	th all proposed face	lighet and arthoron
Party Pore Company	rinsuring the Event:	Markel America:	n Insurance Com	pany	
Nate Combicate of insu	rance must be submitted	d at tune of application		e y change e a seu en	
Firstly Company Bo	onding this Event (Na	ame and Address):		and the second seco	
	Ised as Part of This ent?	Will Food be Avail	able at this Event?		Beverages bo ed an thin Swows?
r Yes	Γ⊼ No	r Yes	X No	Yes Yes	× No
	coverage must be thicate of insurance.	if yes, products liabil included on the cert		d yes, tiquor habilis instuded on the Sec	y cayerage ittu Milos Capital pilar dividica
Name & Address o Providing Food:	f Organization				and a supplementary of the section o
Type of Food being	Served.			adas anto antigara antigara da salah s	ga ga ga an an ann an an an an an an an an an a
Section II - US	E OF COUNTY PI	ROPERTY PERMI	in the second se		
Organization Spons	soring the Event:				
	and a final				
Section III - SA	LE/CONSUMPT	ION OF ALCHOL	IC BEVERAGES P	ERMIT	
s a cohol being sold	d/consumed on Cou alcohal Permit' is required	nty Property? Only non-prote organisation	is can self all alicel on Courty	Yes X Hisporty	No
Styr, profit certifica	c \$010 at the execution				
place note: A princilly	om the State of Florida C	Oversion of Alcoholic Bava	rages and Lobarco may a	ito ne regimedi oleani.	1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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no of Production (choose all that apply):		
TV Move or Special (* 70 c	Series / Prot	TV Commercal III SYP Prints
2 Mile Service Announcement 1 Indu	strial / Documentary (**	Other:
there, of the la lowing be meded or include	ied*?	
Street Closure		the fact the Mo
Scattic / Crowd Control		m Yes Tho
for or Beening		FT Yes y T Mr
Explatives or Pyrotechnics		T Yes T No
Animals, targe or Small		f Yes f 180
Construction of Any Kind		f Yes f No
targe and/or Numerous Vehic	des	T Yes Mo
Helicopters, Boats, etc.		f" Yes T No
Stunts		(Times of No
Other		The Year of the Year
Special Parking Requirements:	y room no siy na an nasa na siya ya angan kasaya maaqaan na siyak. Taasaan kaksasaa 10 km kasa intaasa intaasa	
Section of the Sectio		
City or County Services Required: (Person	nel, equipment, facilities, (etc.)
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the following information is required for t on refusive, if exact figures are not available.	ocal and state records on the last of the please estimate as its	production in Florida to track the agency of a most of a early as operable
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PRINCIPAL VINDICIAL

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MA Har

Brian Wittmer

Frim Name of Applicant and Title

03/26/2025

Oate

Tricia Ault

thin Name of Witness

03/26/2025

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LEF COUNTY SHERIEF'S DEPARTMENT 24750 SIX WILLE CYPRESS PARKWAY FORT MYTERS, FLORIDA33912 (239) A77-2199

X SPECIAL EV	ENT PERMIT
T USE OF CO	UNTY PROPERTY PERMIT
T PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
T FILM PERM	
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
^p arking:	All parking for this event will be in authorized areas only and must not impede the normal flow of traffic
Deputies (How Many?):	Two (2) extra duty detail deputies will be required for traffic control at either and of the Banyan Street road closure to restrict all vehicle access to the area. The cost for the extra duty detail deputies will be at the event coordinator's expense
Fee for Services:	Contact Details Unit 239-477-1171 for further information.
Special Arrangements:	This approval is contingent upon event coordinator following through with the stipulation of hiring the LCSO extra duty detail deputy coverage prior to the event Once the ceremony has concluded, all items used in the roadway for the ceremon will need to be cleared as soon as possible so that the roadway may be reopened
	Print Name: P Command S Signature: Support Services Once: 3 16 12 5



FIRE DEPARTMENT

The Fire Department serving the orea 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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FTER REVIEWING THE A	PPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR QUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	
Fee for Services:	4
Flammable Vegetation:	S
First Aid Equipment:	A
Fire Extinguishing:	
Special Arrangements	Call 911 mithe event of an emergency)
	Print Name: Su Blasse. Signature: Signature: Signature: Chief Date: 3/6/2025



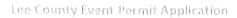
EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 2000 Main St., Suite #100 FORT MYERS, FL 33901 (239) 533-3911

Check the	appropriate	box(es) below:
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- & 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.

Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:		llow 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 office at EMSDetai	the event of an emergency. To arrange special event coverage, contact our l@leegov.com.
	Print Name: Signature: Title: Date:	B. Scott Roy Captain, EMS Operations 3-11-25





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

Check the appropri	ate box(es) bel	OW:
S SPECIAL EV	PENT PERMIT	
E USE OF CO	UNTY PROPERTY	PERMIT
F PERMIT TO	SELL AND CONS	JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
T FILM PERM	AIT	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
arking:	No event parking No vehicles shall	permitted on any portion of the Banyan St. road right of way. be parked off the pavement that would damage the Banyan Tree root system.
ngress and Egress:	Please use all es	tablished means of ingress and egress.
pecial Arrangements:	Shall use Lee Co Emergency vehic Lee County main	punty Sheriff's Office for assistance with traffic control as needed. le access and public vehicular access shall be maintained on all surrounding tained roads.
	Print Name: Signature:	Nathan Thoman Orgitally signed by Nathaniel C. Thoman One 2025 03 17 07 24 40 5 19 10
	Title:	Project Manager
	Date:	03/17/2025



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS, FLORIDA 33916 (239) 533-7275

Check the appropri	iate box(es) be	low:
F SPECIAL EV	VENT PERMIT	
K USE OF CC	UNTY PROPERTY	PERMIT
F PERMIT TO	SELL AND CONS	SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
T FILM PERM	ЛIT	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
lllumination:		must be provide by permit holder. Generators are permitted on Banyan St. Please do anything on the trees or vegetation.
Parking Areas:	Parking is permitte	ed at the Boca Grand Community Center.
Special Arrangements:	All event guest me	ust stay on county property at all times while on Banyan Street.
opecial All unigenionius		
	Print Name:	Colleen Via
	Signature:	Calleen blea
	Title:	Countywide Services Manager
	Date:	3/17/2025

Breeze Boury and St. Williams

Page 110



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

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NT PERMIT	
NTY PROPERTY	(PERMIT
ELL AND CONS	SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
per occurrence	eneral liability insurance with minimum limits of One Million Dollars (\$1,000,000) to protect against bodily injury and/or properly damage relative to applicants entioned event within Lee County.
Certificate Mus	it Read As:
employees, an	political subdivision and Charter County of the State of Florida, its agents, dipublic officials are automatic additional insureds and includes an automatic ogation with regard to general liability. The certificate holder is an additional simary and noncontributory basis with regards to general liability.
County, a politi Myers, FL 3390	Insurance shall be submitted as evidence of the required coverage listing Lee cal subdivision and Charter County of the State of Florida, P.O. Box 398, Fort 02 as the certificate holder and as an additional insured as listed above.
Oriet Manag	Miko Firmeroa
Print Name.	
Signature:	1904 from a
Title:	Risk Program Manager
	Commercial geper occurrence use of aforeme Certificate Must lee County, a employees, an waiver of subroinsured on a procession of County, a politic Myers, FL 3390 Subject to procession of County and Certificate of County, a politic Myers, FL 3390 Subject to procession of County and Certificate of County, a politic Myers, FL 3390 Subject to procession of County and Certificate of County, a politic Myers, FL 3390 Subject to procession of County and Certificate of County, a politic Myers, FL 3390 Subject to procession of County and Certificate of County, a politic Myers, FL 3390 Subject to procession of County and Certificate of County, a politic Myers, FL 3390 Subject to procession of Certificate of Cert

CERTIFICATE OF LIABILI	TY INSURANCE	ender Regist		ISSUE DATE (MM/DD/Y)	Y YY1
PRODUCER INSK Insurance Group, Inc. 1712 Magnavox Way Fort Wayne IN 46804		THIS CERTIF AND CONFE CERTIFICATE EXTEND OR BELOW, THIS	RS NO RIGHT: DOES NOT ALTER THE CERTIFICATE BETWEEN T	ED AS A MATTER OF INFORMATION OF SUPON THE CERTIFICATE HOLDER. AFFIRMATIVELY OR NEGATIVELY AMEDICATED BY THE POLITION OF INSURANCE DOES NOT CONSTITUTE HE ISSUING INSURER(S). AUTHORSTICER, AND THE CERTIFICATE HOLDER	TEMO ICIES ITE A VIZED
	ent Date: 04/18/2026		INSURERS	AFFORDING COVERAGE	
Boan Witmer 1007 Hunteralien Dr Florence, KY 41042		HONOREE(reconstruction of the contraction of the contractio	ican Insurance Gempany	
		Abigail Rowe	9		
COVERAGE THE POLICIES OF INSURANCE LISTED BE NOTWITHSTANDING ANY REQUIREMENT, CERTIFICATE MAY BE ISSUED OR MAY PE TERMS, EXCLUSIONS AND CONDITIONS OF	TERM OF CONDITION OF RTAIN, THE INSURANCE A	TO THE ABOV ANY CONTRAC FEORDED BY T	IT OR OTHER E THE POLICIES D	IRED FOR THE POLICY PERIOD INDICA DOCUMENT WITH RESPECT TO WHICH DESCRIBED HEREIN IS SUBJECT TO ALL	
INSR TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
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GARAGE LIABILITY ANY AUTO				AUTO ONLY-EA ACCIDENT OTHER THAN EA ACC AUTO ONLY AGG	
EXCESS LIABILITY OCCUR CLAIMS MADE DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND	OK 03/12/2025			AGGREGATE WC STATU OTHER	
EMPLOYERS' LIABILITY	Philips Jajo			E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT	
OTHER DESCRIPTION OF OPERATIONS/LOCA	HONSWEHICI ESIEVCI	ISIONS ADDS	D BA ENDOB	REMENT/SPECIAL PROVISIONS	
Event Type: Wedding; Wedding Couple: B If the event continues past 12:00 am at the date. Event includes set up and break do event is a wedding. Set up and Break do hours prior to the event and 24 hours after	rian Wittmer, Abigail Row he location named on the own and the scheduled re wn means decoration and the event.	e; Event Date; Declarations I hearsal or rehe I removal of de	04/18/2026, L Page, such cor earsal dinner so coration at the	ocation: Boca Grande Banyan Street, ntinuation shall be considered as the e cheduled within 48 hours of the event it event location that occurs no more that	Man of the second
The certificate holder is included as an instruction of the Named Insured.	sured under the Hosting F	a palijani kerepagai il merikli - di silih sebegai dalah dan plabba sebelik mereklik mereklik mereklik merekli	alan artikalar-silalilingan Proliteriydek Jenn-der Skoladir di Skoladirilana (M. Prossana, s. Alii.,	only in respects to claims arising out o	fiha
CERTIFICATE HOLDER Lee County a political subdivision and charter of PO Box 398 Fort Myers, FL 33902 Owner, manager or lessor of the premises wher		SHOULI CANCE WILL I PROVIS	LLED BEFORE BE DELIVERED BIONS.	THE ABOVE DESCRIBED POLICIES THE EXPIRATION DATE THEREOF, NO IN ACCORDANCE WITH THE PO	HIGE
ireld		AUTHO	Trized REPRI	ESENTATIVE	

Gilchrist Ave.

Park Ave.