

EVENT PERMIT



Ordinance 17-08

Gateway Jingle Jog 5K

PERMIT NUMBER:

TMP2025-00350

Date(s) of Event:

December 6, 2025 from 8:00am until 11:00am

Property Owner:

RELEVANCE COMMUNITY INC

Applicant:

Ashlyn Brown

407-214-5595

Description:

5k run/walk starting and finishing at the Gateway Church. Run/walk will use the Right of

Way along Griffin Dr.

Location of event:

13241 GRIFFIN DR, FORT MYERS, FL 33913

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

)ate′

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



Event Application

Check the appropriate box(es) below:

x S	PECIAL EVENT PERMIT
Гι	JSE OF COUNTY PROPERTY PERMIT
ΓР	ERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
F	ILM PERMIT

Section I - GENERAL INFORMATION (All Permit Types)				
Title of Event / Name of Production	Gateway Jingle Jog 5K			
Date(s) of Event / Production:	12/6/2025			
Location(s) of Event:	Gateway Church - 13241 Griffin Drive, Fort Myers, FL 33913			
Name of Applicant:	Southern Timing, LLC			
Applicant Address:	8155 Vineland Ave, #322 Orlando, FL 32821			
Applicant Phone Number:	(407) 214-5595 or (407) 214-5565			
Contact Person: (If different from applicant)				
Contact Phone Number: (If different from applicant)				
Email Address:	info@southerntimingfl.com			
Estimated Attendance:	450			
Event Description: Include each activity, when activities take place, etc.	5K run/walk starting and finishing at the Gateway Church. This is a family friendly event, there will be no tents larger than 10' x 10' and no cooking or amusement rides.			
Hours of Operation:	0430 - 1100 (Race Start @ 0800)			
STRAP # of Parcel:				
Owner of Premises*:	Gateway Church			

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



What is the Zoning Classification of the	premises? Business	
Are any temporary structures to be inst	alled for the event? Yes 🗷 No	Туре:
Do you have the appropriate permits fo	r the temporary structures?	Yes No
identified, including all parking areas.	cy Property' permit, submit a site plan wit	
Note: Certificate of Insurance must be submitted		iparry iric.
Surety Company Bonding this Event (Na		
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	Yes X No	Yes X 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.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food: Type of Food being Served:		
Section II - USE OF COUNTY PR	ROPERTY PERMIT	
Organization Sponsoring the Event:	encentration to the second designation of an above second content of the second designation of t	
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES P	PERMIT
Is alcohol being sold/consumed on Cou		Yes 🗙 No
	Only non-profit organizations can sell alcohol on County	/ Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	ber:	
Please note: A permit from the State of Florida I further details	Division of Alcoholic Beverages and Tobacco may a	ulso be required; please call (239) 344-0885 for



pe of Produ	iction (choose all th	at apply):					
TV Movie	or Special	☐ TV S	eries / Pilot		TV Comme	rcial	Still Photos
Public Ser	vice Announcemen	t 🗌 Indus	trial / Documentary	×	Other: <u>5K</u>	Run/Wall	<
ill any of th	e following be need	led or includ	ed*?				
	Street Closure				⋉ Yes	☐ No	
	Traffic / Crowd Co	ntrol			⋉ Yes	☐ No)
	Fire or Burning				☐ Yes	No)
	Explosives or Pyro	technics			☐ Yes	No)
	Animals, Large or S	Small			☐ Yes	IX No)
	Construction of Ar	ny Kind			☐ Yes	IX No)
	Large and/or Num	erous Vehicl	es		Yes	⊠ No	,
	Helicopters, Boats	, etc.			☐ Yes	X No	
	Stunts				☐ Yes	IX No)
	Other				Yes	▼ No)
Special Parl	king Requirements:						
50-140-140-140-140-140-140-140-140-140-14				•	THE CONTROL OF THE PARTY OF THE		
N/a - Par	rking will be at th	e Gateway	/ Elementary Sch	ool			
City or Cou	nty Services Require	ed: (Personn	el, equipment, facilit	ies, et	c.)		
Police fo	or road closure, E	EMS for on	-site medic			1848/2002 25.000 MILD 884 NABUTUODO 126.13(0 MAG 126	
	,						
			cal and state records ble, please estimate a	-			track the economic impac
Number in (Cast:		Number in Crew:		Num	ber of loca	als hired:
Total budge	t:		– Estimate amount sp	ent in I	Lee County:		
Hotel room	nights:		 Number of shooting 	days:	_		
	number of rooms	v number of nigh	_		_		



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 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	Katie Lewis Witness
Jacob B. Davis - Owner Print Name of Applicant and Title	Katie Lewis Print Name of Witness
7/8/2025	7/8/2025
Date	Date



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

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

Check the	appropriate	box(es)	bel	ow:
-----------	-------------	------	-----	-----	-----

FILM PERMIT

USE OF COUNTY PROPERTY PERMIT

	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking for event will be in authorized areas only & right-of-way must not be impeded.
Deputies (How Many?):	2 Deputies to assist with traffic control at the start of the event.
Fee for Services:	Contact the Details Unit to set detail up and pay for detail in advance.
Special Arrangements:	Event coordinator is responsible for hiring a certified company to handle the maintenance of traffic that is required to close one lane from the church entrance to the paved pedestrian path at the start of the race. Extra duty detail deputies will be present while lane is shut down to assist with traffic control and will remain on posts until closure is reopened. Lane closure will need to be removed immediately once all participants have all cleared the roadway. All parking will be offsite at the Gateway Elementary School & all participants must use all established means of ingress & egress as well as sidewalks & paths to get to/from the event.
	Print Name: Commins Signature: Commandes Title: Commandes Date: 9 18 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 appropr	iate box(es) bel	ow:		
SPECIAL E	VENT PERMIT			
USE OF CO	OUNTY PROPERTY	PERMIT		
FILM PERM	ЛIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL			OW WHAT ARRANGEMENTS VENT.	YOUR ORGANIZATION
Fire Guards (How Many?)	N/A			
Fee for Services:	REVIEW FEES PAID			
Flammable Vegetation:	N/A			
First Aid Equipment:	CALL 911 IF NEEDED			
Fire Extinguishing:	N/A			
Special Arrangements:	N/A			
	Print Name:	Nate Burley		
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2024.12.04 12:41:52 -05'00'	
	Title:	Division Chief - Fire & I	ife Safety	
	Date:	09/08/2025		



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

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

E							
USE OF CO	UNTY PROPERTY P	ERMIT					
☐ PERMIT TO	PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES						
FILM PERM	IIT						
		ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR CANT TO COMPLY WITH FOR THEIR EVENT.					
Treatment Facilities:	None necessary.						
Medical Personnel:	None necessary.						
Medical Supplies / Equipment:	None necessary.						
Safety Requirements:	Applicants shall foll Orders concerning	low all CDC and FDOH directives, and the Florida Governor's Executive health and safety.					
Fee for Services	Not applicable.						
Special Arrangements:	coverage (ambular following link: EMS	the event of an emergency. To arrange special event emergency medical nce, cart, etc) or EMS participation, please fill out and submit the form at the Special Detail Request Form tact our office at EMSDetail@leegov.com.					
	Print Name:	Douglas B. Higgins					
	Signature:	Douglas B. Higgins Digitally signed by Douglas B. Higgins Date: 2025.09.15 11:27:12 -04'00'					
	Title:	Captain, EMS Operations					
	Date:	September 15, 2025					

Date:



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

Check the appropri	ate box(es) bel	low:
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	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:	No event parking is	s permitted in Lee County maintained road right of ways.
Ingress and Egress:	Please use all estab	plished means of ingress and egress.
Special Arrangements:		nty 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:	Nathan Thoman
	Signature:	Nathaniel C. Thoman Digitally signed by Nathaniel C. Thoman Date: 2025.07.30 08:34:10 -04'00'
	Title:	Project Manager
	Date:	07/30/2025



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

Check the appropri	ate box(es) below:
·	OUNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
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: County Wide Services Manager Date: 7/21/2025

NOT ON PARK PROP. - GATEWAY JINGLE Jog 5K 12/6/2025 Page 10



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

Check the appropriat	te box(es) bel	'ow:					
SPECIAL EVE	NT PERMIT						
USE OF COU	NTY PROPERTY	PERMIT					
PERMIT TO S	ELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES					
FILM PERMIT	Г						
		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 I	Read As:					
	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 subrogatior with regard to general liability. The certificate holder is an additional insured on a primary and noncontributory basis with regards to general liability.						
Special Arrangements:	political subdivis	nsurance shall be submitted as evidence of the required coverage listing Lee County, a ion 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.					
	Print Name:	Mike Figueroa					
	Signature:	Mike Join -					
	Title:	Risk Program Manager					
	Date:	August 6, 2025					



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/04/2025

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).

this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).											
PRODUCER		CONTACT NAME: Daria Dreher									
CoverWallet, Inc.	PHONE (A/C, No, Ext): (646) 844-9933 FAX (A/C, No):										
One Liberty Plaza,	E-MAIL ADDRESS: customer.service@coverwallet.com										
Suite 3201	INSURER(S) AFFORDING COVERAGE NAIC#						NAIC#				
New York, NY 10006	INSURER A: Hiscox Insurance Company Inc.					10200					
INSURED	INSURER B:										
Southern Timing, LLC 8155 Vineland Avenue, Suite 322	INSURER C:										
Orlando, FL, 32821	INSURER D:										
	INSURER E :										
	INSURER F:										
COVERAGES CERTIFICATE NUM	BER:				REVISION NUM	MBER:					
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 SUBR INSD WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS						
X COMMERCIAL GENERAL LIABILITY X					DAMAGE TO RENTED PREMISES (Ea occurrence) \$		\$ 1,00	00,000			
CLAIMS-MADE X OCCUR	P100.353.599.6						\$ 100,	,000			
							\$ 5,000				
A					PERSONAL & ADV INJURY \$ 1,00						
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$ 2,0		00,000				
X POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG \$ 2,00		00,000				
OTHER:							\$				
AUTOMOBILE LIABILITY	P100.353.599.6		06/26/2025	06/26/2026	COMBINED SINGLE (Ea accident)	ELIMIT	\$ 1,00	00,000			
ANY AUTO				00,20,2020	BODILY INJURY (Per person) \$						
A OWNED SCHEDULED AUTOS ONLY AUTOS ONLY					BODILY INJURY (Po		\$				
X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAC (Per accident)	3E	\$				
							\$				
UMBRELLA LIAB OCCUR					EACH OCCURRENCE	CE	\$				
EXCESS LIAB CLAIMS-MADE					AGGREGATE		\$				
DED RETENTION\$					DED	T OTH	\$				
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N					PER STATUTE	OTH- ER					
ANYPROPRIETOR/PARTNER/EXECUTIVE N / A N / A					E.L. EACH ACCIDE	NT	\$				
(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA I	EMPLOYEE					
DÉSCRIPTION OF OPERATIONS below					E.L. DISEASE - POL	LICY LIMIT	\$				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Add	ditional Remarks Schedu	le, may be	attached if more	e space is require	ed)						
	-4.4- 4b O	- l- :::4	41 11								
Certificate holder is included as additional insured with respect to the General Liability per the policy's terms and conditions.											
OK 08.06.2025											
	1		/								
Mike Jigin -											
CERTIFICATE HOLDER	CANC	ELLATION									
Lee County 1500 Monroe St. Fort Myers, FL, 33901	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									
1		1									

Margaret M. Reff

2025 Gateway Jingle Jog



