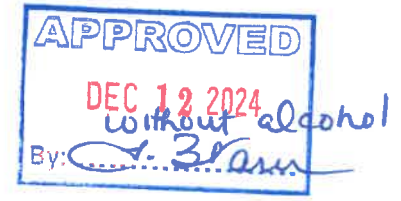




2025

AST# SWAMP#005  
App# 1341



### TEMPORARY USE & SPECIAL EVENT APPLICATION

### CITY OF LABELLE, FLORIDA

APPLICATION NUMBER: TU20 \_\_\_\_ - \_\_\_\_ (Assigned by City)  
DATE RECEIVED: 11-19-2024

**1. SPECIFIC LOCATION OF SUBJECT PROPERTY AFFECTED BY THIS APPLICATION:**

Tax Parcel I. D. #: 2-29-43-01-010-0003-001.0  
Site Address: 100 Park Ave Barron Park  
City: LaBelle State: FL Zip Code: 33935

**2. APPLICANT:** Swamp Cabbage festival  
(Person or entity conducting the use or event)

Mailing Address: 2081 PO Box  
City: LaBelle State: FL Zip Code: 33975  
Work Phone Number: 863 675 2995 Home Phone Number: N/A  
Fax number: \_\_\_\_\_ Email: Swampcabbagefestival.org@gmail.com

**3. PROPERTY OWNER:** City of LaBelle

Mailing Address: PO Box 458  
City: LaBelle State: FL Zip Code: 33975  
Work Phone Number: 863-675-2872 Home Phone Number: N/A  
Email: Acrespo@citylabelle.com

**NOTE:** The application must include all pertinent information (Name, address, phone numbers, etc.) for all owners of land affected by this application. If the space provided above is not sufficient to list all of the

owners then, the additional information must be provided on a separate sheet(s). If property is owned by the City of LaBelle, please list that as owner.

4. **APPLICANT'S REQUEST (Proposed Temporary Use/Event Information.):**

Annual Swamp Cabbage Festival (59th)

Will any roads need to be closed down for the event? Yes

Will there be alcohol served at the event? By whom? Yes - LDRC

*\*Please note, use of alcohol will need to be approved by the City Commission\**

How many people are expected to attend the event? 25,000 - 30,000

Event Date: February 21<sup>st</sup> - 23<sup>rd</sup> Requested Event Hours: 8am - 5pm

Friday Saturday Sunday

5. **THE FOLLOWING ITEMS ARE REQUIRED TO COMPLETE THE APPLICATION AND MUST BE ATTACHED: (please provide all needed information when submitting)**

6. **Completed Temporary Use Application Form (must include the following)**

\_\_\_ **Affidavit of Ownership and Agent Authorization:** The name of all parties having interest in the subject property and certification that the applicant is authorized to sign the application as owner or authorized agent.

\_\_\_ **Area Location Map:** The location of the subject property indicated on a Map or an aerial photograph. This map shall reference known major streets and geographic features with sufficient clarity as to be recognizable by the general public.

\_\_\_ **Legible Site Plan:** Drawing demonstrating right-of-way to be vacated on 8-1/2" x 11" paper with legible text showing all data pertinent to the proposed vacation, including **at least** the following:

- Date of drawing
- Scale
- North arrow
- Location of proposed uses
- Location of existing structures
- Location of access point(s) from adjacent roadways
- Location of Parking areas

\_\_\_ **Letters of No Objection:** Letters from the following agencies:

HCSO-Lt. Allen Hudson-ahudson@hendrysheriff.org/863-674-5606

Hendry County EMS-Amy Stafford-amy.stafford@hendryfla.net/863-675-5220

City of LaBelle Fire Dept.-Chief Brent Stevens-bstevens@citylabelle.com 863-675-1537

***\*Events with an expected attendance of 1,000+ people will require an Emergency Action Plan\****

\_\_\_ **Application Fee:** Check made payable to "City of LaBelle" with fee per adopted Fee Schedule.

Fee Schedule available at citylabelle.com under the "Government" tab>"Forms and Applications">"Building Permit Fee Schedule"

**APPLICANT SIGNATURE (Signed by person applying for permit)**

Dawn Hunter

Applicant Name (Print)

(Shellie)

Dawn Hunter

Applicant Signature

**This is stating that all information provided is true. To be signed by owner or authorized representative. Must be notarized.**

**AFFIDAVIT**

I, \_\_\_\_\_ certify that I am the owner or authorized representative of the property described herein, and that all answers to the questions in this application and any sketches, data or other supplementary matter attached to and made a part of this application, are honest and true to the best of my knowledge and belief.

\_\_\_\_\_ Date: \_\_\_\_\_  
Signature of owner or authorized agent

\_\_\_\_\_  
Print or type name of person signing above

\_\_\_\_\_  
Name of owner/agent entity if a corporation, L.L.C., partnership, or trust

\_\_\_\_\_  
Representative capacity of person signing Affidavit:  
President or Vice President of Corporation, Managing  
Member of L.L.C., General Partner, or Trustee

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

The foregoing instrument was sworn to (or affirmed) and subscribed before me on \_\_\_\_\_ (date) by (name of person providing oath or affirmation), who is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

**NOTARY PUBLIC STAMP/SEAL:**

\_\_\_\_\_  
**Signature of Notary Public**

\_\_\_\_\_  
**Printed Name of Notary Public**

**This is to be signed by owner of the property, if applicable. This proves that that the owner has designated the authorized agent as representative of the property.**

**AGENT AUTHORIZATION**

The undersigned to hereby swear or affirm that they are the fee simple title holders and owners of the record of property commonly known as \_\_\_\_\_  
And legally described in Exhibit A attached hereto.

We hereby designate \_\_\_\_\_ as the legal representative of the property in the course of seeking approval of this application. This representative will remain the only entity to authorize development activity until such time as anew or amended authorization is delivered to the City.

\_\_\_\_\_  
Signature of owner Date: \_\_\_\_\_

\_\_\_\_\_  
Print or type name of person signing above

\_\_\_\_\_  
Name of owner/agent entity if a corporation, L.L.C., partnership, or trust

\_\_\_\_\_  
Representative capacity of person signing Affidavit:  
President or Vice President of Corporation, Managing Member of L.L.C., General Partner, or Trustee

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

The foregoing instrument was sworn to (or affirmed) and subscribed before me on \_\_\_\_\_ (date) by (name of person providing oath or affirmation), who is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

**NOTARY PUBLIC STAMP/SEAL:**

\_\_\_\_\_  
**Signature of Notary Public**

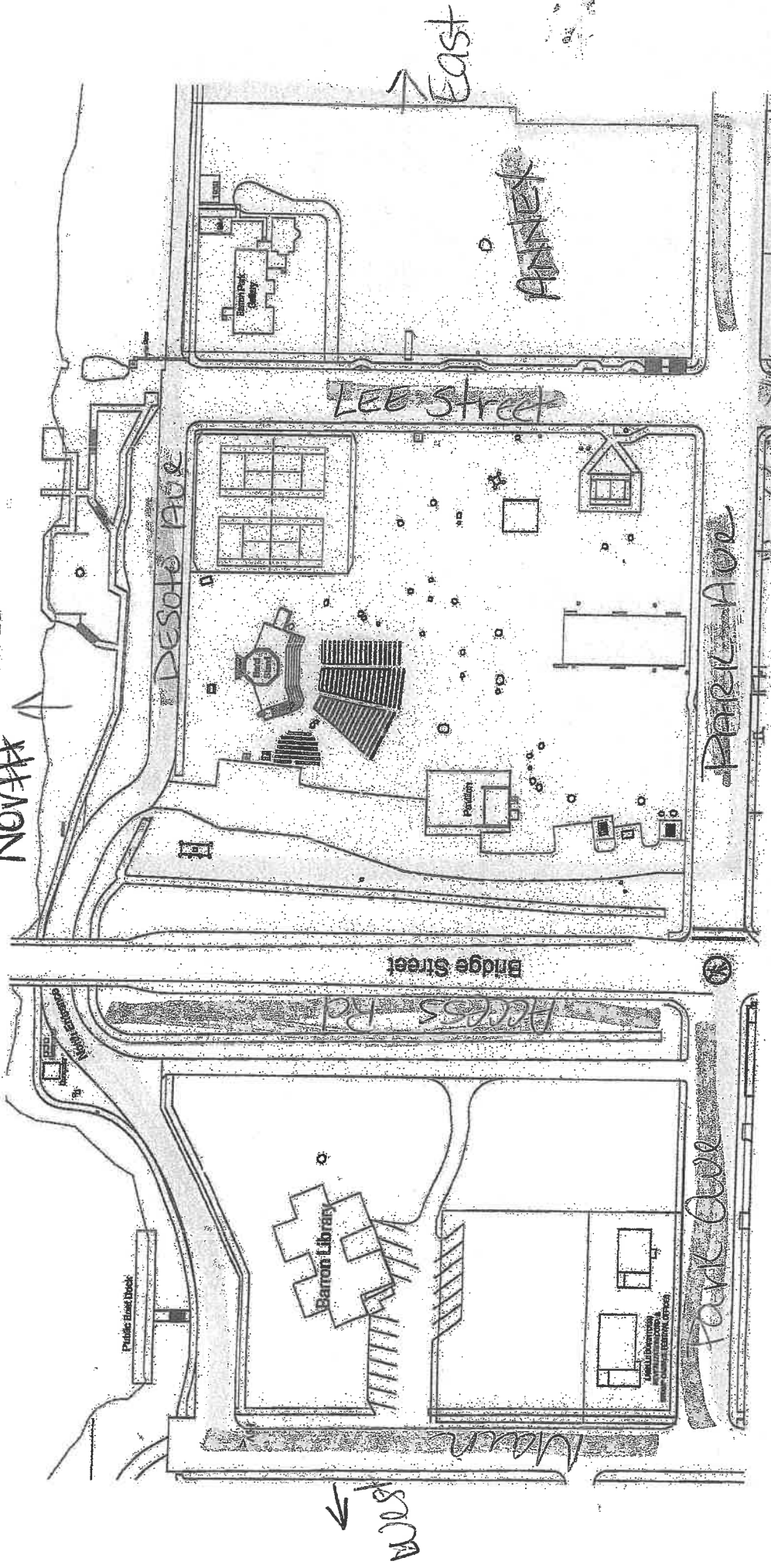
\_\_\_\_\_  
**Printed Name of Notary Public**

Highlighted Areas of Use

9/27/23, 10:27 AM

PARK LAYOUT Blank.jpg

Nov 11



South

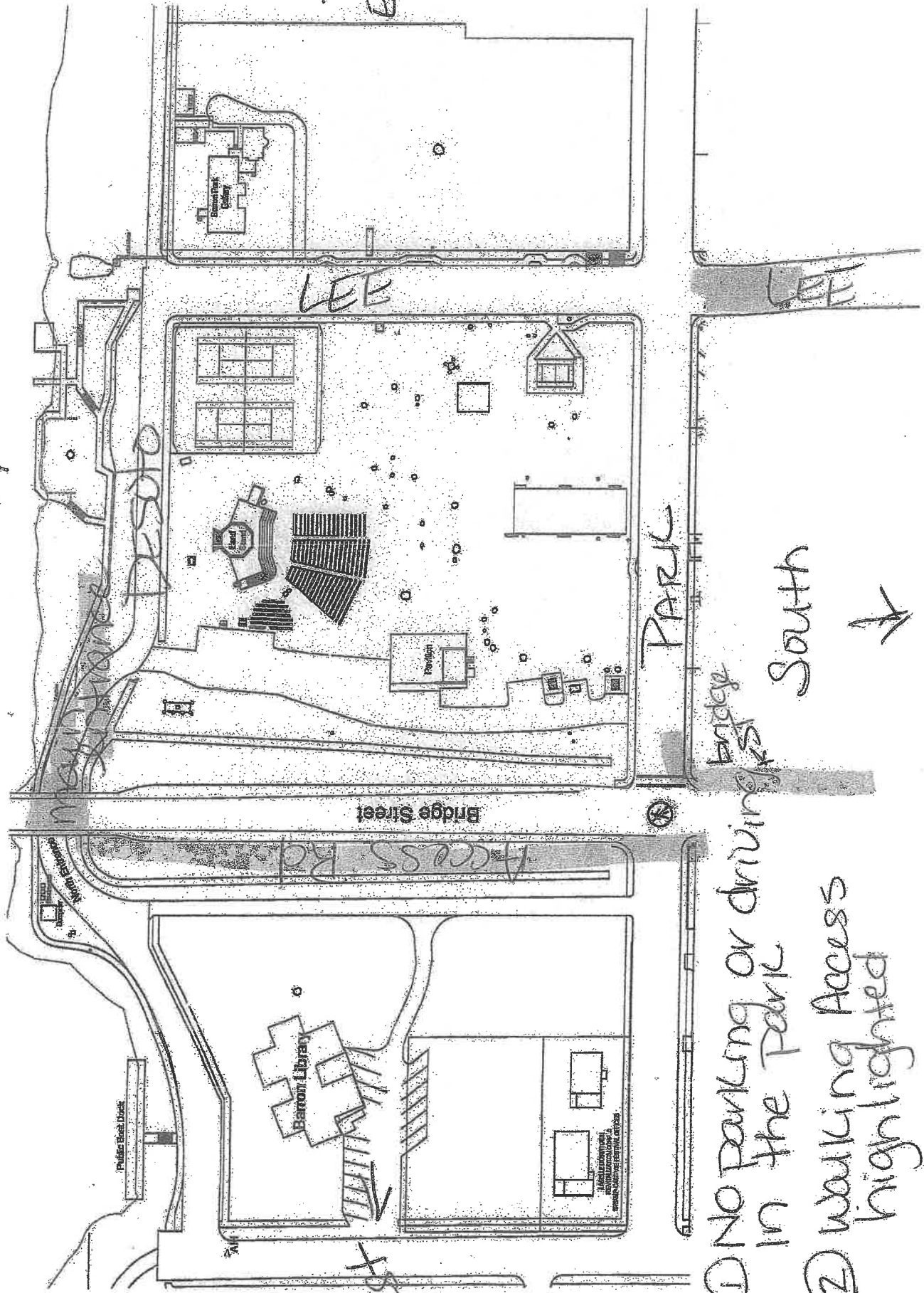
map 2

North



PARK LAYOUT blank.jpg

East



- ① No parking or driving in the Park
- ② walking Access highlighted

9/27/23, 10:27 AM

# SPECIAL EVENT

## EMERGENCY ACTION PLAN (EAP)

### I. GENERAL

This is the Emergency Action plan for the Swamp Cabbage Festival held on the last full weekend in February each year. This year 2025 to be held February 21,22,& 23 The festival is held at Barron Park on Lee St and Desoto Ave.

The parade is staged along Main St., Bronco Ct. Frasier St., Park Ave., Oklahoma Ave., Hampton Ave. and Curry St. The parade route starts at the foot of the bridge on N SR 29 and continues South, across SR 80, towards Cowboy Way.

The Fishing Tournament is located along the Caloosahatchee River, beginning and ending at the LaBelle Boat Ramp.

### II. PURPOSE PROCESS

- A. This emergency action plan predetermines actions to take before and during the "Swamp Cabbage Festival" (hereinafter referred to as the event) in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include, but are not limited to, Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

### I. ASSUMPTIONS

The possibility of an occurrence of an emergency is present at this event. The types of emergencies possible are various and could require the response of Fire & Rescue, Emergency Medical Services, and Police.

### II. BASIC PLAN

**A. EAP Event Representative**

1. The EAP event representative will be identified as the point of contact for all communications regarding the event.
  - a. PRIMARY CONTACT: **Shellie Hunter or Heath Daniels**
  - b. TELEPHONE NUMBER: 863-675-2995

**B. Emergency Notification**

1. In the event of an emergency, notification of the emergency will be through the use of 911. The caller should have the following information available to the 911 operator:
  - a. location of the emergency
  - b. nature of emergency
  - c. contact person with callback number.

**C. Severe Weather**

1. Weather Forecasts and current conditions will be monitored through National Weather Service 's Forecast Office web site at [www.weather.gov](http://www.weather.gov)
2. Before the event – if severe weather is predicted prior to the event, the EAP event representative will evaluate the conditions and determine if the event will remain scheduled. The EAP event representative or his/her designee will be identified as such and will be responsible to monitor the weather conditions before and during the event.
3. During the event – If severe weather occurs during the event, the EAP event representative or his/her designee will make notification to those attending the event that a hazardous weather condition exist and direct them to shelter
4. There are very limited provisions for sheltering participants in the events of severe weather.
5. This event will follow the 30-30 Rule for lightning. If lightning is observed and thunder is heard within 30 seconds, the event will be delayed until 30 minutes have passed since thunder was last heard.
  - a. **In the event of severe weather, the City of LaBelle or designee has the authority, above and beyond the EAP event representative, to delay and/or cancel an event**

**D. Fire**

1. A specific Hazard has been identified as an increased risk of fire at this event, or there is an increased risk of fire due to the cooking of food using propane, charcoal/wood and oil.
  - a. In certain high-risk cases, on-site Fire Department Personnel may be required. This judgment will be made by the Fire Chief.



- b. No stand-by is required as long as all cooking units have the appropriate cooking hood systems and these systems have been certified by a qualified extinguishment company.
2. All event and cooking staff will be instructed on the safe use of Portable Fire Extinguishers.
3. The use of open flame for grilling is permitted under the Fire Code when the following conditions are met:
  - a) Must have a valid fire extinguisher, 2A10BC or class K.
  - b) Each space is allowed 1 LP tank per cooking device and only one spare LP tank regardless of the number of cooking devices. All LP tanks are to be secured in an approved manner (tied, strapped, chained, etc.).
4. Should an incident occur that required the Fire Department, 911 will be utilized to request this resource. The caller should have the following information available to the 911 operator:
  - a. location of the emergency
  - b. nature of emergency
  - c. contact person with callback number.
5. **These items are to be inspected by the Fire Chief or designee prior to the start of the event.**

#### **E. Medical Emergencies**

1. As with any outdoor event, there is potential for injury to the participants. The types of injuries are various and include those that are heat related as well as traumatic injuries.
2. Should an incident occur that requires Emergency Medical Services, the on-site event representative will contact 911 to request an ambulance. The caller should have the following information available to the on-site EMS officer or 911:
  - a. location of the emergency
  - b. nature of emergency
  - c. contact person with callback number.

#### **F. Law Enforcement**

3. There will not be any on site law enforcement. Should an incident occur that requires Law Enforcement, the on-site EAP event representative will contact 911 to request this resource. The caller should have the following information available to the on-site RPD officer or 911:
  - a. location of the emergency
  - b. nature of emergency
  - c. contact person with callback number

#### **G. Emergency Vehicle Access**

1. Access for emergency Vehicle will be maintained at all times.

- a. There will be an access lane provided on both Lee St and Desoto Ave for emergency response.
  - b. Vendor trailers will be positioned so the one lane on the south end of Lee St is open and one lane on the west end of Desoto Ave is open.
  - c. Both of these lanes will be blocked off using movable barriers with a sign stating "No Parking – Fire Lane"
2. Fire lanes and fire hydrants will not be obstructed
  3. Participants and spectators will be directed to park in approved areas and not obstruct protective features, sidewalks, or public thoroughways.
  4. Parking for vendor and staff vehicles will be Barron Park, Lee St, Desoto Ave, Park Ave, and Barron Library.
  5. Parking for attendee vehicles will be Barron Park, Lee St, Desoto Ave, Park Ave, and Barron Library.
  6. **These access points are to be inspected by the Fire Chief or designee prior to the start of the event.**

**V. Contact Information**

Event Organizer	Shellie Hunter	863-675-2995
EAP Event Representative	SAA	SAA
General Emergency	Hendry County Sheriff's Department	911

**VI. Event Area Map (attached next page)**



# LaBelle Fire Department

Brent R Stevens

Fire Chief

280 South Main Street LaBelle, Florida 33935

Station 863-675-1537

[bstevens@citylabelle.com](mailto:bstevens@citylabelle.com)

November 18, 2024

To: City of LaBelle

From: Brent R Stevens, Fire Chief

Re: Swamp Cabbage Festival

To Whom It May Concern,

This letter is to inform you that the LaBelle Fire Department does not have any objections to the Swamp Cabbage Festival starting Friday, February 21st 2025 to Sunday, February 23rd 2025, using the location of South Main Street from the Barron Library North to Desoto Ave, the wharf area all the way to under the bridge on Desoto Ave, all of Park Ave East to Lee Street and all streets South of Park Ave to exclude Bridge Street but during the Swamp Cabbage Festival Parade for their annual event.

The LaBelle Fire Department understands that the event will have more than 1000 +/- people in attendance and the Swamp Cabbage Festival has provided an initial full emergency action plan with updates to follow.

Furthermore, A specific hazard has been identified as an increased risk of fire at this event, or there is an increased risk of fire due to the cooking of food using propane, charcoal/wood, and oil.

1.
  - a. In certain high-risk cases, on-site Fire Department Personnel may be required. This judgment will be made by the Fire Chief.
  - b. Stand-by and inspection are required.
    - Saturday February 22<sup>nd</sup> from 10 am to 5 pm (7 hours @ \$104 per hour) 2 firefighters
    - Sunday February 23<sup>rd</sup> from 9 am to 4 pm (7 hours @ \$104 per hour) 2 firefighters
    - Event inspection (\$100 per inspection)
    - Total: \$1,556.00
2. All event and cooking staff will be instructed on the safe use of Portable Fire Extinguishers.
3. The use of open flame for grilling is permitted under the Fire Code when the following conditions are met:
  - a. Must have a valid fire extinguisher, 2A:10BC and a class K if cooking with oils or grease is present.



# LaBelle Fire Department

Brent R Stevens

Fire Chief

280 South Main Street LaBelle, Florida 33935

Station 863-675-1537

[bstevens@citylabelle.com](mailto:bstevens@citylabelle.com)

- b. Each vendor is allowed 1 LP tank per cooking device and only one spare LP tank regardless of the number of cooking devices. All LP tanks are to be secured in an approved manner (tied, strapped, chained, etc.).
4. Should an incident occur that requires the Fire Department, 911 will be utilized to request this resource. The caller should have the following information available to the 911 operator:
- Name
  - Phone Number
  - Location of Emergency
  - Type of Emergency
  - How many patients involved in Emergency.
  - Access Availability to the Emergency

**All items are to be inspected by the Fire Chief or designee prior to the start of the event.**

If you have any further questions, please feel free to contact me.

*Chief Brent R. Stevens*

*LaBelle Fire Department*

*Office 863-675-1537*

*[bstevens@citylabelle.com](mailto:bstevens@citylabelle.com)*



# Sheriff



# Hendry County

STEVE WHIDDEN, SHERIFF

**Prepared for:**  
Swamp Cabbage Committee

**Address:**  
8 Park Avenue  
LaBelle, FL. 33935.

**Prepared by Lieutenant Allen Hudson  
Hendry County Sheriff's Office**

This document is intended to serve as confirmation of the fact that the Hendry County Sheriff's Office has no objections to the upcoming Swamp Cabbage event.

Hendry County Sheriff's Office will respond to all calls for service as needed and check on the event throughout.

I did speak with Mrs. Shellie Lowe in reference to this event and assured her the Sheriff's Office will supply adequate Law enforcement services during all events. A detail contract between the Sheriff's Office and the committee will be finalized to have law enforcement presence on site.

The event starts on 02-22-2024 and ends on 02-23-2024. The location of the event is Barron Park 1559 Desoto Avenue in Labelle Florida 33935. I have been attending the meetings leading up to this event and will be supplied a copy of the site map in case of any emergencies.

You are welcome to call me at either number below if you have and questions and or concerns.

Thank you.

A handwritten signature in black ink, appearing to read "A. Hudson".

**Lieutenant Allen Hudson  
Road Patrol District Commander  
[ahudson@hendrysheriff.org](mailto:ahudson@hendrysheriff.org)  
Office: 863-674-5606  
Cell: 863-673-1984**



## Hendry County Public Safety

PO Box 1760

LaBelle, Florida 33975-1760

Phone (863) 674-5412

Fax (863) 612-0723

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AMY STAFFORD  
OPERATIONS CHIEF  
AMY.STAFFORD@HENDRYFLA.NET

SHEILA SHELTRA  
EMS COORDINATOR  
SHEILA.SHELTRA@HENDRYFLA.NET

DR. J. TENNYSON, M.D  
MEDICAL DIRECTOR

November 5, 2024

To Whom it May Concern,

I have been contacted by the Swamp Cabbage Committee in reference to Swamp Cabbage Festival February 22 & 23, 2025. Hendry County EMS has no objection to the Festival and will provide adequate coverage as needed for the festival. If you have any questions please feel free to contact me.

Sincerely,

Amy M. Stafford  
Hendry County Public Safety  
EMS/Fire Operations Chief