

### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

## AGENDA ITEM SUMMARY

Meeting Date:	March 13, 2007			Consent Workshop	[ ] Reg [ ] Puk	jular Dic Hearing
Department:				•	-	
Submitted By:	Department of A	Airports				
Submitted For:						
22222222222222222222222222222222222222		3	_ = = = = = =			
		I. EXECUT	IVE BRI	<u>EF</u>		
		<b>V</b>				; !
Motion and T Protection (CE (PBIA).	Fitle: Staff reconders  BP) Bond for \$100	nmends motio 0,000.00 for op	<b>n to ap</b> erations	<b>prove</b> : a U. S at Palm Bea	S. Customach Interna	as and Border ational Airport
of Federal Reconditions of the CBP security seal	CBP operates an a egulations, Section unescorted access areas. The regular identification can ployer or principa LMB	on 122.182. The sto airport secution requires center and the app	nis secti irity prog ertain pe plication	ion of the regram participa ersons to app	egulation ants within ly and qua	stipulates the the identified lify for a CBP
of Federal Re requires the 0	and Justification egulations. The C County to obtain a 0.00 bond. The bo	PB has notified a \$100,000.00	the Deboond. C	partment of A Currently the	Airports th Departme	at CPB policy
3.Indemni 4.Bond Ind 5.Customs	s Bond r ID Input Record ty	l Permission L	etter			
	·		ے کہ اس بہت جے ۔۔	·		
Recommend	ed By:	Departme	/ Int Dire	ctor	2	(9(0) Date
Approved By	<b>/</b> :	MK	<u>Ju</u>		2/1	s(+)
		County Ac	dminist	rator		Date

## II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fis	cal Impact:				
Fiscal Years	20 <u>07</u>	20 <u>08</u>	20 <u>09</u>	20 <u>10</u>	20 <u>11</u>
Capital Expenditures Operating Costs	1,000	1,000	1,000	1,000	1,000
Operating Revenues Program Income (County) In-Kind Match (County) NET FISCAL IMPACT	1,000	1,000	1,000	1,000	1,000
# ADDITIONAL FTE POSITIONS (Cumulative)					
		partment	o <u>120 </u> Unit <u>1</u> 	<u>410</u> Objec	t <u>4501</u>
B. Recommended Sources on The Premium for this CBP E				year.	
C. Departmental Fiscal Revie	ew: <u>(</u> W	1 Jun			
	III. REVIEV	V COMMENT	<u>rs</u>		
A. OFMB Fiscal and/or Conti	act Developn	nent and Co	ntrol Comme	nts:	
OFMB  J(1/200)  B. Legal Sufficiency:	-07 (m/14/1	40	Contract	J - Juend Dev and Co	17 )/6/07
Assistant County Attorney  Journal To Z	re 2/20/	1	, soneour	al	
C. Other Department Review  Department Director	to ei	the en	to an	gue ment	-
Department Director	- with	e the surface constructions of the surface co	Suety Co and fer which	dial is why a	•
REVISED 9/03 ADM FORM 01 (THIS SUMMARY IS NOT TO BE US	tu be		To Bec	conside	ation.

Pursuant to Customs Directive 2110-036, Form approved by New York Customs Management Center on 10/25/2000

**BK REF** 

## DEPARTMENT OF THE TREASURY UNITED STATES CUSTOMS SERVICE

CUSTOMS USE ONLY

	BOND NUMBER¹ (Assigned by Customs)
OM'S E LY	·
	FILE REFERENCE

**CUSTOMS BOND** 19 CFR Part 1 1 3 In order to secure payment of any duty, tax or charge and compliance with law or regulation as a result of activity covered by any condition referenced below, we the below named principal(s) and surety(ies), bind ourselves to the United States in the amount or amounts, as set forth below. Execution Date SECTION I - Select Single Transaction OR Continuous Bond (not both) and fill in the applicable blank spaces. Identification of transaction secured by this bond (e.g., entry no., seizure no., etc.) Date of Transaction Transaction district & port code This bond remains in force for one year beginning with the effective date and for each succeeding annual period, or until terminated. This bond constitutes a separate bond for each period in the amounts listed below for liabilities that accrue in each period.,

The intention to terminate this bond must be conveyed within the time period and manner prescribed in the Customs Regulations. Effective Date CONTINUOUS BOND SECTION II -This bond includes the following agreements. (Check one box only, except that, 1a maybe checked independently or with 1, and 3a may be checked independently or with 3. Line out all other parts of this section that are not used.) Activity Code Activity Name and Customs Regulations in which conditions codified Activity Code Activity Name and Customs Regulations in which conditions codified Limit of Liability **2** 1 Importer or broker 100,000.00 **D**5 Public Gauger \_ \_ \_ 113.67 XXXXXXXXXX □1a Drawback Payment Refunds .-----~ 113.65 XXXXXXXXXXX Wool & Fur Products Labeling Acts Importation (Single Entry Only) □6 113.68 XXXXXXXXXXX Custodian of bonded merchandise \_\_\_\_\_\_\_\_113. (includes bonded carriers, freight forwarders, cartmen and lightermen, all classes of, warehouses, container station operators) □ 2 XXXXXXXXXXX Bill of Lading (Single Entry Only) \_ \_ \_ **口**7 XXXXXXXXXX 113.69 Detention of Copyrighted Material (Single Entry Only) □ 3 XXXXXXXXXXX □8 XXXXXXXXXXX -113.64 113.70 □ 3a Instruments of International Traffic ----- 113.66 XXXXXXXXXX **□**9 Neutrality (Single Entry Only) \_ \_ \_ 113.71 XXXXXXXXXXX **4** Court Costs for Condemned Goods (Single Entry Only) -----XXXXXXXXXXX 10 XXXXXXXXXXX SECTION III- List below all tradenames or unincorporated divisions that will be permitted to obligate this bond in the principal's name including their Customs Identification Number(s). (If more space is needed, use Section III(Continuation) on back of form.) Importer Name Importer Number **Importer Name** Total number of importer names listed in Section III: Principal and surety agree that any charge against the bond under any of the listed names is as though it was made by If the surety fails to appoint an agent under Title 6, United States Code, Section 7, surety consents to service on the Clerk of any United States District Court or the U.S. Court of International Trade, where suit is brought on this bond. That clerk is to send notice of the service to the surety at: Principal and surety agree that any charge against the bond under any of the listed names is as though it was made by the principal(s).

Principal and surety agree that they are bound to the same extent as if they executed a separate bond covering each set of conditions incorporated by reference to the Customs Regulations into this bond. Mailing Address Requested by the Surety 101 South Philips Avenue Sioux Falls, SD 57117-6703 PRINCIPAL<sup>4</sup> Name and Address Importer No<sup>3</sup> 59-600078500 Palm Beach CountyPalm Beach Inter. Airport Building 846 West Palm Beach, FL 33406 SIGNATURE SEAL (FL Corporation) PRINCIPAL<sup>4</sup> Name and Address Importer No.3 SIGNATURE SEAL Name and Address Surety No.7 913 SURETY Western Surety Company 101 South Philips Avenue Sioux Falls, SD 57117-6703 (SD Corporation) SIGNATURE SEAL JRETY<sup>4,6</sup> Name and Address Surety No.7 SIGNATURE SEAL S

Identification No.

Names

AGENTS

Names

Identification No.

SECTION III(Continua	ntion\		······································		Continuation of Bond 061220008
Importer Number	alion)	Importer Name	Importer Num	her	Importer Name
					importer Name
		SIGNED, SEALED, and DELIVERED in Name and Address of Witness for the Princip			
WITNESSES  Two witnesses are required	t to author.	The second secon	<del></del>	Name	and Address of Witness for the Surety
ticate the signature of any j signs as an individual or as however, a witness may auth signatures of both such no principals and sureties. No needed to authenticate the si	person who s a partner; nenticate the n-corporate o witness is anature of a	SIGNATURE:  Name and Address of Witness for the Princip	SIGNAT		ATURE:  and Address of Witness for the Surety
corporate official or agent w the corporation.	ho signs for	SIGNATURE:			ATURE.

#### **EXPLANATION AND FOOTNOTES**

- The Customs Bond Number is a control number assigned by Customs to the bond contract when the bond is approved by an authorized Customs official.
- For all bond coverage available and the language of the bond conditions refer to Part 113, subpart G, Customs Regulations.
- The Importer Number is the Customs identification number filed pursuant to section 24.5, Customs Regulations. When the Internal Revenue Service employer identification number is used the two-digit suffix code must be shown.
- If the principal or surety is a corporation, the name of the State in which incorporated must be shown.
- 5. See witness requirement above.

- Surety Name, if a corporation, shall be the company's name as it is spelled in this Surety Companies Annual List published in the Federal Register by the Department of the Treasury (Treasury Department Circular 570).
- Surety Number is the three-digit identification code assigned by Customs to a surety company at the time the surety company initially gives notice to Customs that the company will be writing Customs bonds.
- Surety Agent is the individual granted a Corporate Surety Power of Attorney, CF 5297, by the surety company executing the bond.
- Agent Identification Number shall be the individual's Social Security Number as shown on the Corporate Surety Power of Attorney, CF 5297, filed by the surety granting such power of attorney.

Paperwork Reduction Act Notice. The Paperwork Reduction Act of 1980 says we must tell you why we are collecting this information, how we will use it and whether you have to give it to us. We ask for this information to carry out the U.S. Customs Service laws of the United States. We need it to ensure that persons transacting business with Customs have the proper bond coverage to secure their transactions as required by law and regulation. Your response is required to enter into any transaction in which a bond is a prerequisite under the Tariff Act of 1930, as amended

Privacy Act Statement: The following notice is given pursuant to section 7(b) of the Privacy Act of 1974 (5 U.S.C. 552a). Furnishing the information on this form, including the Social Security Number is mandatory. The primary use of the Social Security Number is to verify, in the Customs Automated System, at the time an agent submits a Customs bond for approval that the individual was granted a Corporate Surety Power of Attorney by the surety company. Section 7 of Act of July 30,1947, chapter 390, 61 Stat. 646, authorizes the collection of this information.

Statement required by 5 CFR 1320.21: The estimated average burden associated with this collection of information is 0.25 hours per respondent or recordkeeper depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to U.S. Customs Service, Paper Management Branch, Washington DC 20229 or to the Office of Management and Budget, Paperwork Reduction Project (1515-0144), Washington, DC 20503

	DEPARTMENT OF THE TREASURY UNITED STATES CUSTOMS SERVICE									1.		cation of		lark ali	applica	able)	[_]	Change	e of add	proved th		
	IMPORTER ID INPUT RECORD									Chang	ter's numb	e*					Check I address Forfeitu	here If y s update ires Offi	ou also on the ice	want you Fines Pe	, nalties	
IMPOR	TER NUM	RER /F		CFR 24						-1	NOTEIf a	continuo	us bond	d is on t	ile, a bo	nd rider	r must ac	compan	y this c	hange do	ocument.	
	R.S. Numbe		11 111 01.		ai);						ו ר	00.0										
5											1	2B.Soc	iai Sed	curity	Numbe	r 	T	T	т	T	Ţ 1	
	9 -		6 0 0 0 7 8 5							0					-			-				
2C.	Custo	here if r ms-assig te reason	néd nur	nber an	d hat ap	oly.)		I have	no IRS No.			ave no cial Secu	ırity No	o.			t applie				l am not U.S. resi	
2D. C	ustoms-Ass	igned Nu	mber								7											
2 lms	ortor Nome										<u>L</u>										·····	
Palr	orter Name n Beach	Cou	ntyPa	ılm B	each	ı Inte	r. Air	port														
1—	/AKA/DBA		5. DIV.	/AKA/DI	BA Nai	me						_										
or	V AKA	DBA																				
Гуре																						
X Cor	poration	Pa	rtnership		S	ole Propri	pration Partnership Sole Proprietorship Individua						nent		Stat	te/Local	l Governi	ments	Γ	Forei	ign Gover	nmen
Buil 8. City		6		charact	er lines	s maxim	าบฑ)				9. State			0. ZIP	•							7
8. City Wes	ding 84	6 Beach			er lines	s maxim	num)					e Code FL		0. ZIP 1 <b>340</b> (	6							
8. City Wes	iding 84	Beach	ı n-U. S. 1	Only)				aximur	n; see instru	uctions)					6	· · · · · · · · · · · · · · · · · · ·						]
8. City Wes	st Palm	Beach	ı n-U. S. 1	Only)				aximur	π; see instru	uctions)					6							
8. City Wes	st Palm nuntry ISO C	Beach	ı n-U. S. 1	Only)				aximun	n; see instru	uctions)			3		6							
8. City Wes 11. Co 12. Imp	st Palm nuntry ISO C	Beach	n-U. S. d	Only) Iress <i>(2</i>				aximur	n; see instru	rctions)		FL	3	340	6							
8. City Wes 11. Co 12. Imp	st Palm ountry ISO Country ISO	Beach ode (Nor	ion Add	Only) Iress (2	32-che	aracter l	lines ma				14. Stat	FL te Code	15	3340 5. ZIP								
8. City Wes 11. Co 12. Imp	st Palm nuntry ISO Coorter Physic	Beach ode (Nor	ion Add	Only) Iress (2	32-cha	aracter I.	lines ma	me nan	ne as block 33		14. Stat	FL te Code	15	5. ZIP	a Custor							at in Bi
8. City Wes 11. Co 12. Imp 13. City 16. Cod	st Palm ountry ISO Country ISO	Beach ode (Nor cal Locat	-U.S. C	Only)  Iress (2  Inty)  ms Impo (List nu	32-cha	aracter I.	lines ma	me nan			14. Stat	FL te Code	15	5. ZIP	a Custor		orter Num					at in BI
8. City Wes 11. Co 12. Imp 13. City 16. Cod No No	st Palm porter Physi  untry ISO C	Beach ode (Nor cal Locat	-U.S. C	Only)  Iress (2  Inty)  ms Impo (List nu	32-cha	aracter I.	lines ma	me nan	ne as block 33		14. Stat	FL te Code	15	5. ZIP	a Custor							at in B
Buil  8. City Wes 11. Co  12. Imp  13. City  16. Cou	st Palm untry ISO C orter Physi	Beach rode (Nor cal Locat	-U.S. C	Only)  Iress (2  Onty)  ms Impo (List nu	32-che	nber usin	lines ma	me nan	ne as block 33		14. Stat	FL te Code	15	5. ZIP	a Custor							at in B
Buil  8. City Wes  11. Co  12. Imp  13. City  16. Coc  2. Has impo  No  c. If "Yes" to	st Palm runtry ISO C  orter Physic  orter ever bee or 17a and/or	Beach code (Nor cal Locat	-U.S. C	Only) Iress (2 Phty) ms Impo (List nu	32-cha	mber usin	lines ma	me nan	ne as block 33		14. Stat	FL te Code	15	5. ZIP	a Custor							at in Bi
Buil  8. City Wes  11. Co  12. Imp  13. City  16. Cou  No  c. If "Yes" to	st Palm  corter Physi  corter ever bee  o 17a and/or  That the Ir t if my Soci ave no IRS	Beach rode (Nor cal Locat cal Locat nassigned 17b, fist nu	-U.S. C a Custo Yes mber(s)	Only)  Iress (2  Inty)  Inty)  Inty  Inty  Inty  Interest of the second	rter Nurmber(s)	is is in y	lines ma	<u>me</u> nan	ne as block 3? Block 17c)	) 17b	14. Stat	FL te Code	15	5. ZIP	a Custor		(s) andio	or name	e(s) In		17c.)	at in B
Buil  8. City Wes 11. Co  12. Imp  13. City  16. Cou  a. Has import No c. If "Yes" to  ERTIFY. rrrect; the histoms-as:	st Palm untry ISO C corter Physic orter ever bee or 17a and/or That the lift if my Sociave no IRS signed num	Beach ode (Nor cal Locat  ode (Nor n assigned 17b, list nu	-U.S. Colla Custo  Yes mber(s)  on pres ty Num yer Nur	Only)  Iress (2  Inty)  ms Impo (List nu and/or na ented I ber is t becaus	32-cha	is is in your 18.	lines ma	me names(s) in	ne as block 33	) 17b	14. Stat	FL te Code	15	5. ZIP	a Custor	ımber(	(s) andid	(561	e(s) In	Block 1	17c.)	
Buil  8. City Wes  11. Co  12. Imp  13. City  16. Coo  a. Has impo  No  c. If "Yes" to  ERTIFY.  rrect; that cause I h stoms-as: ther a So  mber, the	orter Physical Security  That the lit if my Social security at if none of the security at its none o	Beach code (Nor cal Locat cal Locat n assigned 17b, list nu formatic al Securi Employ ber Is us y Numbe	-U.S. Con presently Number of It Is a runmber	only)  Iress (2  Inty)  ms Impo (List nu and/or na  ented I ber is t mber; th because rs is us	32-cha	is is is ny ve 18.	ng the <u>sa</u> or name	me names(s) in	ne as block 3? Block 17c)	) 17b	14. Stat	FL te Code	15	5. ZIP	a Custor	ımber(	(s) andlo	(561	e(s) In	Block 1	2001 Area C	
Buil  8. City Wes  11. Co  12. Imp  13. City  16. Coo  a. Has impo  No  c. If "Yes" to  ERTIFY.  rrect; that cause I h stoms-as: ther a Soo mber, the cause I h cause I h	orter Physical Security  That the Interest of 17a and/or 188 signed numerical Security	Beach cal Locat  Dode (Non n assigned 17b, list nu  Iformatic al Securi Employ ber Is us y Number of these and my s	-U.S. Con presently Number of It Is a number signature.	only)  Iress (2  Inty)  ms Impo (List nu and/or na  ented I ber is t nber; th because n IRS E rs is us re cons	32-cha	is is is ny ve er 20.	ng the <u>sa</u> or name	me names(s) in	ne as block 3? Block 17c)	) 17b	14. Stat	FL te Code	15	5. ZIP	a Custor	ımber(	(s) andlo	(561 ephone	e(s) In	Block 1	2001 Area C	

purpose for disclosure of the Social Security number is to assure maintenance of records that have a high degree of usefulness in regulatory investigations or proceedings. The information collected may be provided to those officers and employees request of the head of such department or agency. The authority to collect the SSN is 31 CFR 103.25. The SSN will be used to identify the individuals conducting business with the Customs Service.

Statement required by 5 CFR 1320.21. The estimated systems burder.

Statement required by 5 CFR 1302.21: The estimated average burden associated with this collection of information is 6 minutes per respondent or recordseeper depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to U.S. Customs Service, Paper Management Branch, Washington DC 20229. DO NOT send completed form(s) to this office.

Paperwork Reduction Act Notice: We need this information to establish the importer's name, address, and importer number. We will use this information as basis for establishing bond coverage, release and entry of merchandise, liquidation, issuance of bills and refunds, and processing of drawback and FP&F actions. Your response is mandatory.

Customs Form 5106 (030899)

#### INDEMNITY TO:

#### AMERICAN CASUALTY CO. OF READING, PA CONTINENTAL CASUALTY COMPANY. FEDERAL INSURANCE COMPANY RLI INSURANCE COMPANY

# TRAVELERS CASUALTY AND SURETY COMPANY WESTCHESTER FIRE INSURANCE COMPANY WESTERN SURETY COMPANY

061220008

By Palm Beach CountyPalm Beach Inter. Airport	Address Building 846, West Palm Beach, FL 33406
on behalf of Palm Beach CountyPalm Beach Inter. Airport,	Address Building 846, West Palm Beach, FL 33406
its subsidiaries and affiliates, as principal, for any Bond in favor of THE	E UNITED STATES OF AMERICA as Obligee.

Each undersigned person, firm and corporation, jointly and severally (also called "Indemnitor") in consideration of the execution by any of the above-captioned sureties, (called "Company") of a bond, or the continuation of any previously executed bond, of the substitution or renewal on any and all bonds, in which the Obligee is THE UNITED STATES OF AMERICA and other claimants, does undertake and agree:

1. To pay or cause to be paid to Company the agreed premium and/or collateral security for its suretyship until the undersigned shall furnish to Company competent written evidence, satisfactory to Company, of the termination of any bond as to future liability, but with privilege to Company, at any time, to withdraw from future liability under any bond if it so elects, in which event Company's only liability to the undersigned shall be for the pro rata unearned portion of the premium paid in accordance with law. The Indemnitor expressly waives any right, if any, to interest which may be earned on collateral security and further consents that the collateral security provided in consideration of suretyship may be held by the Company or the Company's representative, in any bank as the Company or Company's representative, as in its sole discretion, deems advisable and prudent.

2. To indemnify and save harmless Company from and against any and all liability, claim, demand, loss, damage, expense, cost, attorney's fees and expenses, included without limitation, fees and disbursements of counsel incurred by the Company in any action or proceeding between the indemnitor and the Company, or between the Company and any third party, which Company shall at any time incur by reason of its execution of any bond or its payment of or its liability to pay any claim, irrespective of whether the claim is made against the Company as a joint or several obligor and whether the indemnitor is then liable to make such payment, and to place the Company in funds to meet all its liability under any bond, promptly upon request and before Company may be required to make any payment thereunder; and copy of the claim, demand, voucher or other evidence of the payment by the Company of any liability, claim, demand, loss, damage, expense, cost and attorney's fees, shall be prima facie evidence of the fact and amount of Indemnitor's liability to Company under this agreement. Any demand upon the Company by the Obligee shall be sufficient to conclude that a liability exists and the Indemnitor shall then place the Company with sufficient funds in a form and amount deemed acceptable in the Company's sole discretion, as collateral security to cover the liability.

The Company may make or consent to any modification in any bond and may execute renewals or substitute obligation in any instrument, contract or agreement concerned, without notice to any Indemnitor (notice being expressly waived) and, in such case, each Indemnitor shall be liable to the Company as fully and to the same extent that the Company shall be liable under such modified bond or renewal or substitute obligation, in lieu thereof.

Each Indemnitor and the heirs, legal representatives, successors and assigns of each Indemnitor are, jointly and severally, bound by the provisions of this agreement, and the liability of each Indemnitor shall not be dependent upon the execution of this agreement or any instrument referred to by any other Indemnitor, and that if the Company procures any co-surety or reinsurance or other surety on said bond or bonds this agreement shall be deemed extended to and for the benefit of the co-surety, reinsuring company or other surety.

It is mutually agreed that this contract is deemed made in the State of New York, regardless of the order in which the signatures of the parties shall have been affixed and shall be interpreted, and the rights and liabilities of the parties determined, in accordance with the laws of the State of New York. In consideration for the surety being so bound, the Indemnitor agrees that all actions or proceedings arising directly or indirectly from this agreement shall be litigated only in courts having situs within the State of New York, and consents to the personal jurisdiction and venue of any local, state or Federal Court located therein.

Signed and Sealed this	13th	day of	March	2007
<b>J</b>	WITNESS	SIGNATUR Palm Beach Co	E(S) OF INDEMNITOR(S) buntyPalm Beach Inter. Airport	Affix Corp Seal (L.S.)
<b>V</b>				(L.S.)
(This form is to be no	otarized or signed by two witnesses)			(L.S.)

W
n-

Please return this form along with the other forms in this packet.

	Bond Information	
Shea Reference: 061220008		12/20/2006
Company Name: Palm Beach CountyF Building 846 West Palm Beach, FL	·	Activity Code: 1
Please complete the questions below and fill-in	the missing information, if any.	
Co -Principals	IRS	State of Inc. Type of Organization
Palm Beach CountyPalm Beach Inter.	Airport 59-600078500	FL Corporation
Requested Effective Date F	Please print the name of the person who signed the bor	d Title Commissioner
Is there a bond currently in effect? Yes if yes, please indicate, bond type, insura	No ance carrier and broker	
Customs Bond, American Casu	aley Co. of Reading PA, Arther J. (	Gallagher Risk Management Servic
	corporation ever filed any form of Bankruptcy? Yes	
Has a surety ever paid a U.S. Customs cla	im on your behalf? Yes No	if yes, please explain
Has your company ever been penalized un	der Customs section USC1592? Yes No if ye	es, please advise of current status or outcome
Has your company been audited by U.S. C	• •	if yes, please advise of the audit outcome
Does your company participate in Periodic	Monthly Processing of your duty payments? Yes	No N/A
Are your goods subject to anti-dumping, co	untervailing duty or withheld appraisement? Yes	No if yes, please explain

N/A

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

Addie L. Greene, Chairperson Jeff Koons, Vice Chair Karen T. Marcus Warren H. Newell Mary McCarty Burt Aaronson Jess R. Santamaria



COUNTY ADMINISTRATOR Robert Weisman

DEPARTMENT OF AIRPORTS

March 13, 2007
Bureau of Customs and Border Protection
Attention: Bond Desk
Gentlemen:
We respectfully request permission to file a continuous Customs Form 301 Bond
We are importers of <u>N/A</u> .
Total value of importations entered, and Duties paid during the calendar year 2005 were approximately:
Value \$\frac{N/A}{Duty, Taxes, Fees Paid} \$\frac{N/A}{N/A}\$ (WHERE APPLICABLE)
Our Employer I.R.S. Identification Number is <u>59-600078500</u> . We will also be importing under the following tradenames and unincorporated division(s) with the following I.R.S. Identification Numbers.
I certify that the factual information contained in this application is true and accurate and any information provided which is based upon estimates is based upon the best information available on the date of this application.
Respectfully,
(Name & Title of Person Signing)
DALM DEACH COUNTY DEPARTMENT OF AIRPORTS

EACH COUNTY DEPARTMENT OF AIRPORTS 846 Palm Beach International Airport West Palm Beach, FL 33406-1470 (561) 471-7412 FAX: (561) 471-7427 www.pbia.org

PALM BEACH COUNTY GLADES AIRPORT Pahokee

printed on recycled paper

PALM BEACH COUNTY PARK AIRPORT Lantana

NORTH COUNTY GENERAL AVIATION AIRPORT Palm Beach Gardens

"An Equal Opportunity Affirmative Action Employer"

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS Addie L. Greene, Chairperson Jeff Koons, Vice Chair Karen T. Marcus Warren H. Newell Mary McCarty Burt Aaronson Jess R. Santamaria



COUNTY ADMINISTRATOR Robert Weisman

DEPARTMENT OF AIRPORTS

March 13, 2007

Bureau of Customs and Border Protection
Attention: Bond Desk
Sir:
We respectfully request you terminate our bond529200534 effective as a new bond is being filed.
This letter is being filed concurrently with a new bond and this request to terminate the above captioned bond is contingent upon acceptance of the new bond.
Thank you for your cooperation in this matter.
Respectfully,
Oleman R. Title of Domest Circuits
(Name & Title of Person Signing)

PALM BEACH COUNTY DEPARTMENT OF AIRPORTS 846 Palm Beach International Airport West Palm Beach, FL 33406-1470 (561) 471-7412 FAX: (561) 471-7427 www.pbia.org

PALM BEACH COUNTY GLADES AIRPORT Pahokee

printed on recycled paper

PALM BEACH COUNTY PARK AIRPORT

NORTH COUNTY GENERAL AVIATION AIRPORT Palm Beach Gardens

"An Equal Opportunity Affirmative Action Employer"