Agenda Item #: 3.M.6.

# PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

## **AGENDA ITEM SUMMARY**

Meeting Date: July 22, 2008	[X] Consent [] Ordinance	[] Regular [] Public Hearing
Department: Parks and Recreation		•
Submitted By: Parks and Recreation Departme	<u>nt</u>	
Submitted For: Parks and Recreation Departme	<u>ent</u>	
I. EXECUTIV	E BRIEF	
Motion and Title: Staff recommends motion to ap Beach for the period July 22, 2008, through October for funding of 2007-2008 Senior Citizen Programs.	oprove: Agreement r 31, 2008, in an am	with the Town of South Palm ount not-to-exceed \$10,000
<b>Summary:</b> This funding is to help offset costs for South Palm Beach. The programs serve approximate the reimbursement of eligible expenses incurred sub Recreation Assistance Program (RAP) District 4 Fundament	ely 700 senior citizen sequent to October	s. The Agreement allows for
Background and Justification: The Town of South conducted at and/or originating at the Town Hall build offered in the areas of culture, education, health a series, music series, art shows, Quest for Knowledg	ding in South Palm Be nd safety, and recre	each. Over 30 programs are eation, including the lecture
The total cost of the Senior Citizen Programs is appr lecture fees, promotional materials, trips and tours, c miscellaneous expenses. The \$10,000 from RAP-I The Agreement has been executed on behalf of the 1 approved by the Board of County Commissioners.	ultural expenses, foc District 4 funds will h	od and beverages, and other nelp offset these expenses.
Attachment: Agreement		
Recommended by: Department Director	enan	6/30/08 Date
Approved by:		7-9-08
Aggintage County Admit		D - 4 -

## **II. FISCAL IMPACT ANALYSIS**

A. Five Year Summary o	of Fiscal Impa	act:			
Fiscal Years	2008	2009	2010	2011	2012
Capital Expenditures Operating Costs External Revenues Program Income (County In-Kind Match (County)	10,000 -0- -0- -0- -0-	-0- -0- -0- -0-	-0- -0- -0- -0-	-0- -0- -0- -0-	-0- -0- -0- -0-
NET FISCAL IMPACT	10,000	0	0	-0-	-0-
# ADDITIONAL FTE POSITIONS (Cumulative)	0				
Is Item Included in Currer Budget Account No.:	nt Budget? Fund <u>3600</u> Object <u>810</u>	Departmen		R904	
B. Recommended Source	es of Funds/	Summary of I	Fiscal Impact:		
Recreation Assistant District 4		904-103-8101		\$10,000	
C. Departmental Fiscal F	Review:	ckopelak	is		
	Ш. Б	REVIEW COMI	MENTS		
A. OFMB Fiscal and/or C				nents:	
OFMB & 13-108  B. Legal Sufficiency:	3-08 en <sub>7</sub> 1218 1 <b>81</b> 6	18/08 18/08	This Contract revision	prinent and doi	7/9/sentrol
Assistant County Attorne	7/9/0s				
C. Other Department Rev	view:				

REVISED 10/95 ADM FORM 01

Department Director

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# AGREEMENT BETWEEN PALM BEACH COUNTY AND THE TOWN OF SOUTH PALM BEACH FOR FUNDING OF 2007-2008 SENIOR CITIZENS PROGRAMS

THIS AGREEMENT is made and entered into on \_\_\_\_\_\_, by and between Palm Beach County, a political subdivision of the State of Florida, hereinafter referred to as "County", and the Town of South Palm Beach, a Florida municipal corporation, hereinafter referred to as "South Palm Beach".

#### WITNESSETH:

WHEREAS, South Palm Beach provides Senior Citizens Programs ("Programs") conducted at and/or originating at the Town Hall Building in South Palm Beach; and

WHEREAS, over thirty (30) Programs are offered in the areas of culture, education, health and safety, and recreation, including the lecture series, music series, art shows, Quest for Knowledge series, and various other activities; and

WHEREAS, approximately seven hundred (700) seniors attend the Programs; and

**WHEREAS,** the 2007-2008 Programs are estimated to cost approximately \$55,500 for personnel costs, printing, lecture fees, promotional materials, trips and tours, cultural expenses, food and beverages, and other miscellaneous expenses relating to Programs; and

WHEREAS, South Palm Beach has requested from County an amount not-to-exceed \$10,000 to help offset the costs of the Programs; and

WHEREAS, Programs for senior citizens benefit the public; and

WHEREAS, funding for the Programs in an amount not-to-exceed \$10,000 is available from the Recreation Assistance Program (RAP) – District 4; and

WHEREAS, the County desires to fund said South Palm Beach Programs; and WHEREAS, both parties desire to enter into this Agreement.

**NOW THEREFORE,** in consideration of the covenants and promises contained herein, the parties hereby agree to the following terms and conditions:

- 1. County agrees to fund an amount not-to-exceed \$10,000 to South Palm Beach to assist with funding of the Programs for personnel costs, printing, lecture fees, promotional materials, trips and tours, cultural expenses, food and beverages, and other miscellaneous expenses relating to Senior Citizen Programs as set forth in Exhibit "A", attached hereto and incorporated herein, hereinafter referred to as the "Project".
- 2. County will use its best efforts to provide said funds to South Palm Beach on a reimbursement basis within forty-five (45) days of receipt of the following information:

- a. A written statement that the Project, as specified herein, is complete; and
- b. A Contract Payment Request Form and a Contractual Services Purchases Schedule Form attached hereto and made a part hereof as Exhibit "B", which are required for each and every reimbursement requested by South Palm Beach. Said information shall list each invoice paid by South Palm Beach and shall include the vendor invoice number; invoice date; and the amount paid by South Palm Beach along with the number and date of the respective check or proof of payment for said payment. South Palm Beach shall attach a copy of each vendor invoice paid by South Palm Beach along with a copy of the respective check or proof of payment and shall make reference thereof to the applicable item listed on the Contractual Services Purchases Schedule. Further, South Palm Beach's Program Administrator and Project Financial Officer shall certify the total funds spent by South Palm Beach on the Project and shall also certify that each vendor invoice, as listed on the Contractual Services Purchases Schedule was paid by South Palm Beach and approved by South Palm Beach as indicated.
- 3. South Palm Beach incurred expenses for the Project beginning on October 1, 2007. Those costs incurred by South Palm Beach for the Project, approved and submitted accordingly by South Palm Beach subsequent to October 1, 2007, are eligible for reimbursement by County pursuant to the terms and conditions hereof.
- 4. RAP funds may be used as a match for other local, state, or federal grant programs, but South Palm Beach may not submit reimbursement requests for the same expenses to the County as other fund sources to receive duplicate reimbursement for the same expenses.
- 5. South Palm Beach agrees, warrants, and represents that all of the employees and participants in the Project will be treated equally during employment, and for the provision of services without regard to residency, race, color, religion, disability, sex, age, national origin, ancestry, marital status, or sexual orientation.
- 6. South Palm Beach shall be responsible for the operation and maintenance of the Project, including all associated costs.
- 7. The term of this Agreement shall be until October 31, 2008, commencing upon the date of execution by the parties hereto.
- 8. The parties agree that, in the event South Palm Beach is in default of its obligations under this Agreement, the County shall provide South Palm Beach thirty (30) days written notice

to cure the default. In the event South Palm Beach fails to cure the default within the thirty (30) day cure period, the County shall have no further obligation to honor reimbursement requests submitted by South Palm Beach for the Project deemed to be in default and South Palm Beach shall return any County RAP funds already collected by South Palm Beach for that Project.

- 9. Notwithstanding any provision of this Agreement to the contrary, this Agreement may be terminated by the County, without cause, upon thirty (30) days prior written notice to the other party. This Agreement may be terminated by the County with cause, upon expiration of the thirty (30) day cure period provided for in Section 8 above.
- 10. South Palm Beach shall complete the Project by July 31, 2008, and invoices and checks submitted for reimbursement must be dated within the project time frame of October 1, 2007, through July 31, 2008. South Palm Beach shall provide its final reimbursement request(s), including a project completion statement and reimbursement documentation as indicated in Section 2 above on or before October 31, 2008. Upon written notification to County at least ninety (90) days prior to that date South Palm Beach may request an extension beyond this period for the purpose of completing the Project. County shall not unreasonably deny South Palm Beach's request for said extension.
- 11. In the event South Palm Beach ceases to exist, or ceases or suspends the Project for any reason, any remaining unpaid portion of this Agreement shall be retained by County, and County shall have no further obligation to honor reimbursement requests submitted by South Palm Beach. The determination that South Palm Beach has ceased or suspended the Project shall be made by County and South Palm Beach agrees to be bound by County's determination.
- 12. South Palm Beach agrees to abide by, and be governed by, all applicable federal, state, county, and municipal laws, including but not limited to, Palm Beach County's ordinances, as said laws and ordinances exist and are amended from time to time. In entering into this Agreement, Palm Beach County does not waive the requirements of any County or local ordinance or the requirements of obtaining any permits or licenses normally required to conduct business or activity conducted by South Palm Beach. Failure to comply may result in County's refusal to honor reimbursement requests for the Project.
- 13. County reserves the right to withhold reimbursement if the Project is not completed as specified in Exhibit "A".

14. It is understood and agreed that South Palm Beach is merely a recipient of County funding and is an independent contractor and is not an agent, servant or employee of County or its Board of County Commissioners. It is further acknowledged that the County only contributes funding under this Agreement and operates no control over the Project. In the event a claim or lawsuit is brought against County or any of its officers, agents or employees, South Palm Beach shall indemnify, save and hold harmless and defend the County, its officers, agents, and/or employees from and against any and all claims, liabilities, losses, judgments, and/or causes of action of any type arising out of or relating to any act or omission of South Palm Beach, its agents, servants and/or employees in the performance of this Agreement. The foregoing indemnification shall survive termination of this Agreement.

In consideration for reimbursement of costs incurred prior to the term of this Agreement, the foregoing indemnification shall apply not only during the term of this Agreement but also for the period prior to the Agreement for which South Palm Beach is eligible to receive reimbursement from the County.

15. Without waiving the right to sovereign immunity as provided by Section 768.28, Florida Statutes, South Palm Beach acknowledges to be self-insured for General Liability and Automobile Liability under Florida sovereign immunity statutes with coverage limits of \$100,000 Per Person and \$200,000 Per Occurrence; or such monetary waiver limits that may change and be set forth by the legislature.

In the event South Palm Beach maintains third-party commercial General Liability and Business Auto Liability in lieu of exclusive reliance on self-insurance under Section 768.28, Florida Statutes, South Palm Beach shall agree to maintain said insurance policies at limits not less than \$500,000 combined single limit for bodily injury or property damage.

South Palm Beach agrees to maintain or to be self-insured for Worker's Compensation & Employer's Liability insurance in accordance with Florida Statute 440.

Prior to execution of this Agreement by the County, South Palm Beach shall deliver to the County an affidavit or Certificate of Insurance evidencing insurance, self-insurance, and/or sovereign immunity status, which County agrees to recognize as acceptable for the above mentioned coverages. Certificate holder=s address shall read Palm Beach County, c/o Parks and Recreation Department, 2700 Sixth Avenue South, Lake Worth, FL 33461, Attention: Administrative Support Manager.

Compliance with the foregoing requirements shall not relieve South Palm Beach of its liability and obligations under this Agreement.

16. Upon request by County, South Palm Beach shall demonstrate financial accountability through the submission of acceptable financial audits performed by an independent auditor.

17. South Palm Beach shall maintain books, records, documents and other evidence that sufficiently and properly reflect all costs of any nature expended in the performance of this Agreement for a period of not less than five (5) years. Upon advance notice to South Palm Beach, County shall have the right to inspect and audit said books, records, documents and other evidence during normal business hours.

18. The County and South Palm Beach may pursue any and all actions available under law to enforce this Agreement including, but not limited to, actions arising from the breach of any provision set forth herein.

19. This Agreement shall be governed by the laws of the State of Florida and any and all legal action necessary to enforce this Agreement shall be held in Palm Beach County.

20. As provided in Section 287.132-133, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, South Palm Beach certifies that it, its affiliates, suppliers, subcontractors and consultants who will perform hereunder, have not been placed on the convicted vendor list maintained by the State of Florida Department of Management Services within the thirty six (36) months immediately preceding the date hereof. This notice is required by Section 287.133 (3) (a), Florida Statutes.

21. This Agreement represents the entire agreement between the parties and supersedes all other negotiations, representations, or agreement, written or oral, relating to this Agreement. This Agreement may be modified and amended only by written instrument executed by the parties hereto.

22. Any notice given pursuant to the terms of this Agreement shall be in writing and hand delivered or sent by U.S. mail. All notices shall be addressed to the following:

As to the County:

Director of Parks and Recreation
Palm Beach County Parks and Recreation Department
2700 Sixth Avenue South
Lake Worth, Florida 33461

As to South Palm Beach:

Town Manager Town of South Palm Beach 3577 South Ocean Boulevard South Palm Beach, FI 33480

23. This Agreement is made solely and specifically among and for the benefit of the parties hereto, and no other person shall have any rights, interest, or claims hereunder or be entitled to any benefits under or on account of this Agreement as a third-party beneficiary or otherwise.

**IN WITNESS WHEREOF**, the undersigned parties have signed this Agreement on the date first above written.

ATTEST: SHARON R. BOCK, Clerk & Comptroller	PALM BEACH COUNTY, FLORIDA, BY ITS BOARD OF COUNTY COMMISSIONERS
Ву:	Dva
By: Deputy Clerk	By: Commissioner Addie L. Greene, Chairperson
ATTEST:	TOWN OF SOUTH PALM BEACH
By Janet Whipple Town Clerk	By: Mayor
APPROVED AS TO FORM AND LEGAL SUFFICIENCY	APPROVED AS TO TERMS AND CONDITIONS  By:    Main   Miles
Ву:	Dennis L. Eshleman, Director
County Attorney	Parks and Recreation Department

# Recreation Assistance Program (RAP) Exhibit "A" to Agreement

Name of Municipality: Town of South Palm Beach

Mailing Address: 3577 South Ocean Boulevard, South Palm Beach, FL 33480

Name of Mayor: MAURICE J. JACOBSON Name of City Manager: REX TAYLOR

Project Liaison Information:

Name: JANET K. WHIPPLE Telephone #: (561) 588-8889

Fax #: (561) 588-6632

e-mail: jwhipple@southpalmbeach.com PROJECT INFORMATION

- 1. Name of Project: 2007-2008 Senior Citizens Programs
- 2. Project Description
  - General (Project Scope):

THE SENIORSCITIZENS PROGRAMS CONTAINED IN THE CULTURAL AND RECREATION DEPARTMENT OFFERS SENIORS QUALITY PROGRAMS AND ACTIVITIES OF PARTICULAR INTEREST TO THEM IN THE AREAS OF CULTURAL, EDUCATIONAL, HEALTH, SAFETY AND RECREATION.

• Public Purpose:

THE PURPOSE OF THE SENIOR CITIZENS PROGRAMS IS TO PROVIDE MEANINGFUL PROGRAMS AND ACTIVITIES TO A SIZABLE PORTION OF SENIORS AS MEASURED

- Location: BY THE NUMBER WHO ATTEND. OVER THIRTY (30) SENIOR TOWN HALL PROGRAM EVENTS ARE OFFERED THROUGH THE LECTURE SERIES,
- Anticipated Number of Participants/Users:

APPROXIMATELY 700 SENIORS

3. Project Elements: List anticipated broad categories of Expenditure Items such as capital outlay, contractual services, personnel costs, operational expenses, equipment, and "Other Miscellaneous Project expenses". Do not include expenditure line item budget/ amounts.

personnel costs, printing, lecture fees, promotional materials, trips and tours, cultural expenses, good and beverages, and other miscellaneous expenses

- 4. Estimated Lump Sum Total for Project: \$\_55,500.00
- 5. Project Initiation date (date of first invoice for which reimbursement will be requested) and anticipated End date (date which project will be completed and all invoices paid). <a href="https://doi.org/10.2007/july/">OCTOBER 1, 2007</a> to <a href="https://doi.org/10.2008/july/">MARKER 31, 2008</a>

Note: Invoices and copies of proof of payment documents will be required for Project/Program reimbursement after the RAP Agreement is approved by the Board of County Commissioners. Do not submit reimbursement documentation at this time. After the Agreement is approved, and the reimbursement request is submitted, all invoices and checks must be dated within the stated project time frame AND Categories for Project Elements must be listed in Section 3 above in order to be eligible for RAP reimbursement.

6.	Required Attachments:	
	Certificate of Insurance	
Amou	int of Recreation Assistance Program Funding awarded	\$_10,000
_		District 4 (filled in by County

Form available online by request. Contact Susan Yinger at <a href="mailto:svinger@pbcgov.com">svinger@pbcgov.com</a>



# PALM BEACH COUNTY PARKS AND RECREATION DEPARTMENT

### CONTRACT PAYMENT REQUEST

Grantee:		Project Name: _		
Submission #:	. •	Reimbursement Period: _		
Item	Key	Project Costs This Submission	Cumulative Project Costs	
Contractual Services	(C)	<u> </u>		
Salary & Wages (% of salaries)	(S)			
Materials, Supplies, Direct Purchases	(M)	· · · · · · · · · · · · · · · · · · ·		
Equipment	(E)			
Travel	(T)			
Indirect Costs	(1)	And the second s		
TOTAL PROJECT COSTS  C = Contractual Services S = Salary & Wages M = Materials, Supplies, Direct Pu E = Equipment T = Travel I = Indirect Costs				
Certification: I hereby certify that the above expenses were incurred for the work identified being accomplished in the attached progress reports.	as	Certification: I hereby cer been maintained as required expenses reported above request.	red to support the projec	t

	PBC L	ISE ONLY		
County Funding Participation		\$		
Total Project Costs To Date:		\$		
County Obligation To Date		\$		
County Retainage ( %)		\$		
County Funds Previously Disbursed		\$	 ·	
County Funds Due this Billing		\$		
Reviewed and Approved By:				
	PBC Project Ac	ministrator	Date	e <sup>r</sup>
	Department Dire	ector	Date	



Key Legend

C = Contractual Services

S = Salary & Wages

M = Materials, Supplies, Direct Purchases

E = Equipment

T = Travel

I = Indirect C

I = Indirect Costs

### PALM BEACH COUNTY PARKS AND RECREATION DEPARTMENT **CONTRACTUAL SERVICES PURCHASE SCHEDULE**

**EXHIBIT B** 

	Submittal #	·		·		Cont	tract Reimbursen	nent Period:		•
			Check or \	oucher/		Invo	oice			
<u> </u>	Payee (Vendor/Contractor)	Key_	Number	Date	N	umber	Date	Amount	Expense Description	
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	Certification: I hereby certify that the paccomplishing this project.	ourchases r	noted above were	used in	Certifica docume request.	ntation hav	eby certify that bive been maintaine	d tabulations, executed c ed as required to support	ontract, cancelled checks, and other purchasing the costs reported above and are available for a	ıdit upoı

Key Legend
C = Contractual Services
S = Salary & Wages
M = Materials, Supplies, Direct Purchases
E = Equipment

T = Travel

I = Indirect Costs

### PALM BEACH COUNTY PARKS AND RECREATION DEPARTMENT CONTRACTUAL SERVICES PURCHASE SCHEDULE

**EXHIBIT B** (cont'd.)

	<b></b>	••••••	··········· Check or	r Voucher	Invoid	ce				
	Payee (Vendor/Contractor)	Key	Number	Date	Number	Date	Amount		<b>Expense Description</b>	
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	Certification: I hereby certify that the pe	urchases r	noted above were	e used in	Certification: 1 h	nereby certify that	at bid tabulations, ex	ecuted contract, ca	incelled checks, and	
	accomplishing this project.			•	other purchasing	g documentation	n have been maintair	ed as required to	support the costs	
					reported above	and are availab	le for audit upon requ	iest.		
			·	<del></del>		F		D. I.	· <del>-</del>	
			_			Financial Officer		Date		

#### CERTIFICATE OF COVERAGE Issue Date 3/28/08 Administrator Certificate Holder Florida League of Cities, Inc. PALM BEACH COUNTY BOARD OF COUNTY **COMMISSIONERS Public Risk Services** RECEIVED P.O. Box 530065 PARKS & RECREATION DEPARTMENT Orlando, Florida 32853-0065 MAR 3 1 2008 2700 6<sup>TH</sup> AVENUE LAKE WORTH FL 33461 COVERAGES THIS IS TO CERTIFY THAT THE AGREEMENT BELOW HAS BEEN ISSUED TO THE DESIGNATED MEMBER FOR THE COVERAGE 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 COVERAGE AFFORDED BY THE AGREEMENT DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH AGREEMENT. FLORIDA MUNICIPAL INSURANCE TRUST COVERAGE PROVIDED BY: COVERAGE PERIOD: TO 10/1/08 12:01 AM STANDARD TIME **AGREEMENT NUMBER: FMIT 0564 COVERAGE PERIOD: FROM 10/1/07** TYPE OF COVERAGE - PROPERTY TYPE OF COVERAGE - LIABILITY Miscellaneous ☐ Buildings **General Liability** Inland Marine ☐ Basic Form $\boxtimes$ Comprehensive General Liability, Bodily Injury, Property Damage and ☐ Electronic Data Processing ☐ Special Form Personal Injury ☐ Bond Personal Property ☐ Basic Form Supplemental Employment Practice ☐ Special Form ☐ Agreed Amount Medical Attendants'/Medical Directors' Malpractice Liability ☐ Deductible N/A ☐ Coinsurance N/A □ Law Enforcement Liability ☐ Blanket ☑ Underground, Explosion & Collapse Hazard □ Specific **Limits of Liability** ☐ Replacement Cost \* Combined Single Limit Actual Cash Value Deductible N/A Limits of Liability on File with Administrator **Automobile Liability** All owned Autos (Private Passenger) TYPE OF COVERAGE - WORKERS' COMPENSATION All owned Autos (Other than Private Passenger) M Hired Autos \$1,000,000 Each Accident Non-Owned Autos \$1,000,000 By Disease \$1,000,000 Aggregate By Disease **Limits of Liability** ☐ Deductible N/A \* Combined Single Limit Deductible N/A Automobile/Equipment - Deductible \$100 - Comprehensive - Auto N/A -Miscellaneous Equipment Physical Damage \$250 - Collision - Auto Other The limit of liability is \$100,000 Bodily Injury and/or Property Damage per person or \$200,000 Bodily Injury and/or Property Damage per occurrence. These specific limits of liability are increased to \$1,500,000 (combined single limit) per occurrence, solely for any liability resulting from entry of a claims bill pursuant to Section 768.28 (5) Florida Statutes or liability imposed pursuant to Federal Law or actions outside the State of Florida. Description of Operations/Locations/Vehicles/Special Items RE: Grant. The Certificate Holder is hereby added as an additional insured, except for Workers' Compensation and Employers Liability, as respects the member's liability for the above described item. THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE AGREEMENT ABOVE. DESIGNATED MEMBER CANCELLATIONS SHOULD ANY PART OF THE ABOVE DESCRIBED AGREEMENT BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED ABOVE, BUT FAILURE TO MAIL TOWN OF SOUTH PALM BEACH SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE PROGRAM, ITS AGENTS OR REPRESENTATIVES. 3577 SOUTH OCEAN BOULEVARD SOUTH PALM BEACH FL 33480

AUTHORIZED REPRESENTATIVE