



**II. FISCAL IMPACT ANALYSIS**

**A. Five Year Summary of Fiscal Impact:**

Fiscal Years	2009	2010	2011	2012	2013
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	\$52,248.15	\$50,589.60	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
<b>NET FISCAL IMPACT</b>	<u>\$52,248.15</u>	<u>\$50,589.60</u>	_____	_____	_____
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included in Current Budget: Yes   X   No \_\_\_\_\_

Budget Account No: Fund 0001 Dept 164 Unit 1604 Object 4410  
 Program \_\_\_\_\_

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**

**C. Departmental Fiscal Review:** \_\_\_\_\_

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Development Comments:**

<p><u>Jan Paul 12/24/08</u>                  OFMB                  (14) 12/23/08 CN 12/10/08</p>	<p><u>J. J. Jacobs 12/29/08</u>                  Contract Development and Control</p>
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**This item complies with current County policies.**

**B. Legal Sufficiency:**

[Signature] 12/31/08  
 Assistant County Attorney

**C. Other Department Review:**

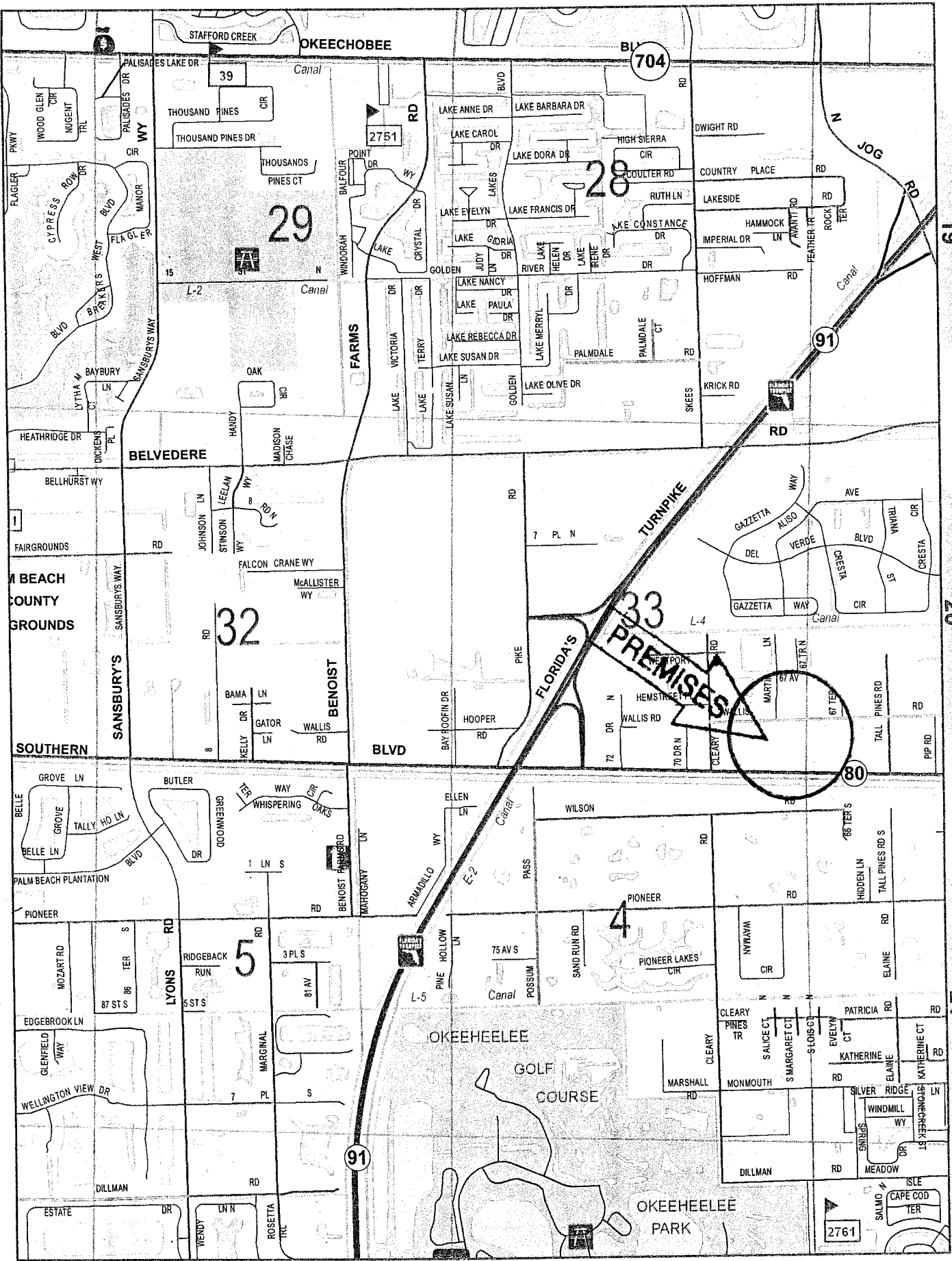
\_\_\_\_\_  
 Department Director

**This summary is not to be used as a basis for payment.**

T43

1

T44



# LOCATION MAP





January 13, 2009

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

7007 1490 0000 5460.1640

Facilities Development &  
Operations Department  
Property & Real Estate  
Management Division

Tallman, LLC  
Attn: Harold G. Murphy  
6907 Southern Boulevard  
West Palm Beach, Florida 33413-1629

2633 Vista Parkway  
West Palm Beach, FL 33411-5605  
(561) 233-0200  
FAX: (561) 233-0210  
www.pbcgov.com/fdo

**Re: Exercise of First Option to Extend Lease Agreement  
(R2007-0395) dated March 13, 2007, by and between  
Tallman, LLC (Landlord) and Palm Beach County**

Palm Beach County  
Board of County  
Commissioners

Dear Mr. Murphy:

Jeff Koons, Chairman  
Burt Aaronson, Vice Chairman  
Karen T. Marcus  
Shelley Vana  
Mary McCarty  
Jess R. Santamaria  
Addie L. Greene

Pursuant to the provisions of Section 1.04 of the above referenced Lease Agreement, Palm Beach County is hereby exercising its first option to extend the term of said Lease Agreement for an additional period of one (1) year effective March 29, 2009, through March 28, 2010.

County Administrator

ATTEST:

Robert Weisman

SHARON R. BOCK,  
CLERK & COMPTROLLER  
of

PALM BEACH COUNTY,  
a political subdivision of the State  
Florida

By: \_\_\_\_\_  
Deputy Clerk

By: \_\_\_\_\_  
John F. Koons, Chairman



APPROVED AS TO FORM  
LEGAL SUFFICIENCY

APPROVED AS TO TERMS AND  
CONDITIONS

By: [Signature]  
Assistant County Attorney

By: [Signature]  
Department Director

"An Equal Opportunity  
Affirmative Action Employer"

BUDGET AVAILABILITY STATEMENT

REQUEST DATE: 12/02/2008

REQUESTED BY: Martha LaVerghetta, Property Specialist, PREM

SENT TO: Larry Schaner, Fiscal Manager II, FD&O

PROJECT NAME: Opt 1, PBSO Impound Lot

IS ITEM INCLUDED IN CURRENT BUDGET: YES X NO

BUDGET ACCOUNT NO:

FUND: 0001 DEPT: 164 UNIT: 1604 OBJ: 4410 PROGRAM:

FIVE YEAR SUMMARY OF FISCAL IMPACT

Table with 6 columns: FISCAL YEARS (2009, 2010, 2011, 2012, 2013) and rows for CAPITAL EXPENDITURES, OPERATING COSTS (rent), EXTERNAL REVENUE, PROGRAM INCOME (COUNTY), IN KIND MATCH (COUNTY), and NET FISCAL IMPACT.

IDENTIFY FUNDING SOURCE FOR EACH ACCOUNT: (check all that apply)

- Ad Valorem (source/type: General Fund)
Non-Ad Valorem (source/type: )
Grant (source/type: )
Park Improvement Fund (source/type: )
General Fund
Operating Budget
Federal/Davis Bacon

Department: FD+O

ENCUMBRANCE NUMBER:

PROPOSED BCC MEETING DATE: January 13, 2009

BAS APPROVED BY: [Signature] DATE: 12-2-08

**LANDLORD'S DISCLOSURE OF BENEFICIAL INTERESTS  
(REQUIRED BY FLORIDA STATUTES 286.23)**

TO: PALM BEACH COUNTY CHIEF OFFICER, OR HIS OR HER OFFICIALLY DESIGNATED REPRESENTATIVE

STATE OF FLORIDA  
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, this day personally appeared, Harold G. Murphy, hereinafter referred to as "Affiant", who being by me first duly sworn, under oath, deposes and states as follows:

1. Affiant is the Manager of Tallman LLC, a Florida Limited Liability Company, (the "Owner") which entity is the owner of the real property legally described on the attached Exhibit "A" (the "Property").
2. Affiant's address is: 6907 Southern Boulevard, West Palm Beach, Florida, 33413-1629
3. Attached hereto as Exhibit "B" is a complete listing of the names and addresses of every person or entity having a five Percent (5%) or greater beneficial interest in the Owner and the percentage interest of each such person or entity.
4. Affiant acknowledges that this Affidavit is given to comply with Florida Statutes 286.23, and will be relied upon by Palm Beach County in its lease of the Property.
5. Affiant further states that Affiant is familiar with the nature of an oath and with the penalties provided by the laws of the State of Florida for falsely swearing to statements under oath.
6. Under penalty of perjury, Affiant declares that Affiant has examined this Affidavit and to the best of Affiant's knowledge and belief it is true, correct, and complete.

FURTHER AFFIANT SAYETH NAUGHT.

Harold G. Murphy Affiant  
(Print Affiant Name)  
HAROLD MURPHY

The foregoing instrument was acknowledged before me this 11 day of DECEMBER, 2008 by HAROLD MURPHY  
 who is personally known to me or  who has produced \_\_\_\_\_ as identification and who did take an oath.

Linda L. Murphy  
Notary Public  
Linda L. Murphy  
(Print Notary Name)

NOTARY PUBLIC NOTARY PUBLIC STATE OF FLORIDA  
State of Florida at Large  Linda L. Murphy  
Commission # DD009085 Expires: SEP 11, 2012  
My Commission Expires: SEP 11, 2012  
BONDED THRU ATLANTIC BONDING CO., INC.

## EXHIBIT "A"

## PROPERTY

## LEGAL DESCRIPTION (As furnished by client)

THE EAST HALF (E 1/2) OF TRACT 70, BLOCK 6, PALM BEACH FARMS CO., PLAT NO. 3, ACCORDING TO THE PLAT THEREOF, ON FILE IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT IN AND FOR PALM BEACH COUNTY, FLORIDA, RECORDED IN PLAT BOOK 2, PAGE 45 TO 54, INCLUSIVE, LESS THE NORTHERLY 15 FEET THEREOF, LESS THE FOLLOWING DESCRIBED PARCEL:

BEGINNING AT THE SOUTHEAST CORNER OF TRACT 70; THENCE N01°22'25"W, ALONG THE EAST LINE OF SAID TRACT 70, A DISTANCE OF 69.13 FEET TO A POINT; THENCE N88°29'03"W, A DISTANCE OF 330.49 FEET TO A POINT; THENCE S01°00'12"E, A DISTANCE OF 78.53 FEET TO A POINT ON THE SOUTH LINE OF SAID TRACT 70; THENCE N89°01'07"E, A DISTANCE OF 330.21 FEET, MORE OR LESS, TO THE POINT OF BEGINNING.

TRACT CONTAINS 190,871.5 SQUARE FEET, MORE OR LESS AND 4.38 ACRES, MORE OR LESS.

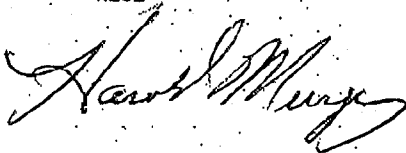


EXHIBIT "B"

SCHEDULE TO BENEFICIAL INTERESTS IN PROPERTY

Landlord is only required to identify five percent (5%) or greater beneficial interest holders. If none, so state. Landlord must identify individual owners. If, by way of example, Landlord is wholly or partially owned by another entity, such as a corporation, Landlord must identify such other entity, its address and percentage interest, as well as such information for the individual owners of such other entity.

NAME	ADDRESS	PERCENTAGE OF INTEREST
Tallman, LLC	6907 Southern Blvd., WPB	100%

\*Harold G. Murphy, is the Manager of Tallman, LLC and owns 100% of this Limited Liability Company.

*Harold G. Murphy*



# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID WN  
MURPH-1

DATE (MM/DD/YYYY)  
07/08/08

**PRODUCER**  
Chase Insurance Agency Inc  
P O Box 17497  
Plantation FL 33318-7497  
Phone: 954-792-4300 Fax: 954-791-9344

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 POLICIES BELOW

**INSURED**  
Murphy's Paint & Body Shop LLC  
& Tallman LLC  
6907 Southern Blvd  
West Palm Beach FL 33413

**INSURERS AFFORDING COVERAGE**

**NAIC #**

INSURER A: National Casualty Company

11991

INSURER B:

INSURER D:

INSURER E:

## COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$1000 BI/PD DED <input checked="" type="checkbox"/> \$1000 P/CO DED GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	OPO0026170	06/16/08	06/16/09	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/DP AGG \$ 2,000,000
A		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> \$1,000 BI/PD DED	OPO0026170	06/16/08	06/16/09	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A		GKPR Legal Liab	OPO0026170	06/16/08	06/16/08	\$1000 DED \$300,000
A		Personal Injury	OPO0026170	06/16/08	06/16/09	No Ded \$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

## CERTIFICATE HOLDER

Palm Beach County BOCC  
Property & Real Estate Mgmt  
Attn: Martha LaVerghetta  
2633 Vista Pkwy  
West Palm Beach FL 33411

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*R. N. Chapp*