

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: November 3, 2009

☒ Consent
☐ Ordinance

☐ Regular
☐ Public Hearing

Department: Parks and Recreation

Submitted By: Parks and Recreation Department

Submitted For: Parks and Recreation Department

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Agreement with the South Florida Science Museum, Inc. for the period November 3, 2009, through November 30, 2009, in an amount not-to-exceed \$1,000 for student field trips to experience the Science Tunnel Exhibition of the Max Planck Society.

Summary: This funding is to offset the cost of student field trips sponsored by the Science Museum for its Max Planck Society exhibition. The Agreement allows for the reimbursement of eligible project costs incurred subsequent to January 6, 2009. Funding is from the Recreation Assistance Program (RAP) District 3 Funds. District 2 (AH)

Background and Justification: The South Florida Science Museum, Inc. is a not-for-profit organization that provides numerous activities to support education, culture, and tourism in Palm Beach County. The Science Museum sponsored the Science Tunnel "Send a Class" program to provide transportation and admission costs for students in grades four through twelve at Title I schools for a field trip to the South Florida Science Museum to participate in a high-level program presented in the Max Planck Society Science Tunnel. Approximately 75 participants participated in the "Send a Class" program.

The cost of the student field trips for transportation and admission fees was approximately \$1,000. The \$1,000 from District 3 RAP funding will offset these costs. The Agreement has been executed on behalf of the South Florida Science Museum, Inc., and now needs to be approved by the Board of County Commissioners.

Attachment: Agreement

Recommended by: 
Department Director

10/7/09
Date

Approved by: 
Assistant County Administrator

10/27/09
Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2010	2011	2012	2013	2014
Capital Expenditures	<u>1,000</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
Operating Costs	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
External Revenues	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
Program Income (County)	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
In-Kind Match (County)	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
NET FISCAL IMPACT	<u>1,000</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
# ADDITIONAL FTE POSITIONS (Cumulative)	<u>0</u>				

Is Item Included in Current Budget? Yes X No _____
Budget Account No.: Fund 3600 Department 583 Unit R913
Object 8201 Program N/A

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

FUND: Park Improvement Fund/Recreation Assistance Program
UNIT: RAP/Transportation Improvement Fund-District 3

Contributions-Non-Govts Agencies 3600-583-R913-010-8201 \$1,000

C. Departmental Fiscal Review: ckopelakis

III. REVIEW COMMENTS

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

[Signature] 10/22/09
OEMB 10/13/09 10/13/09 10/13/09

[Signature] 10/23/09
Contract Development and Control

B. Legal Sufficiency:

This Contract complies with our
contract review requirements.

Anne Delgent 10/26/09
Assistant County Attorney

C. Other Department Review:

Department Director

REVISED 10/95
ADM FORM 01

G:\SYINGER\RAP08-09\DISTRICT 3\South Florida Science Museum\Agenda.doc

**AGREEMENT BETWEEN PALM BEACH COUNTY AND SOUTH FLORIDA SCIENCE
MUSEUM, INC. FOR STUDENT FIELD TRIPS TO EXPERIENCE THE SCIENCE TUNNEL
EXHIBITION OF THE MAX PLANCK SOCIETY**

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 South Florida Science Museum, Inc., a Florida not-for-profit corporation, hereinafter referred to as "Science Museum".

W I T N E S S E T H:

WHEREAS, Science Museum owns and operates the South Florida Science Museum on property located in Dreher Park leased from West Palm Beach; and

WHEREAS, Science Museum provides numerous activities to support education, culture, and tourism in Palm Beach County; and

WHEREAS, Science Museum is sponsoring the Science Tunnel "Send a Class" program to provide transportation and admission costs for students in grades four (4) through twelve (12) at Title I schools for a field trip to the South Florida Science Museum; and

WHEREAS, the Science Museum Field trip allowed students to participate in a high-level program presented in the Max Planck Society Science Tunnel; and

WHEREAS, Science Museum is able to pay for transportation and admissions for seventy five (75) students and chaperones at a cost of \$1,000; and

WHEREAS, Science Museum has requested that County provide \$1,000 to offset costs for transportation and admissions for seventy five (75) students and chaperones to participate in the Max Planck Society Science Tunnel program; and

WHEREAS, County desires to provide funding to help offset costs for Title I student transportation and admissions to the Science Museum to participate in the Max Planck Society Science Tunnel program; and

WHEREAS, funding to assist Science Museum in an amount not-to-exceed \$1,000 is available from the Recreation Assistance Program (RAP) - District 3; and

WHEREAS, Science Museum's educational and recreational programs serve a public purpose; 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 \$1,000 to Science Museum to help

offset costs for transportation and admissions to the Science Museum for seventy five student and chaperones, as described in Exhibit "A", attached hereto and incorporated herein, and hereinafter referred to as the "Project".

2. County will use its best efforts to provide said funds to Science Museum 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, was carried out in accordance with this Agreement; 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 Science Museum. Said information shall list each invoice paid by Science Museum and shall include the vendor invoice number; invoice date; and the amount paid by Science Museum along with the number and date of the respective check or proof of payment for said payment. Science Museum shall attach a copy of each vendor invoice paid by Science Museum 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, Science Museum's Program Administrator and Project Financial Officer shall certify the total funds spent by Science Museum on the Project and shall also certify that each vendor invoice, as listed on the Contractual Services Purchases Schedule was paid by Science Museum and approved by Science Museum as indicated.

3. Science Museum incurred expenses for the Project beginning on January 6, 2009. Those costs incurred by Science Museum for the Project, approved and submitted accordingly by Science Museum subsequent to January 6, 2009, 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 Science Museum 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. Science Museum warrants that it is an active not-for-profit corporation, duly chartered and registered with the Florida Department of State, Division of Corporations.

6. Science Museum 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, sexual orientation, gender identity or expression.

7. Science Museum shall be responsible for the operation and maintenance of the

Project, including all associated costs.

8. The term of this Agreement shall be until November 30, 2009, commencing upon the date of execution by the parties hereto.

9. The parties agree that, in the event Science Museum is in default of its obligations under this Agreement, the County shall provide Science Museum thirty (30) days written notice to cure the default. In the event Science Museum 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 Science Museum for the Project deemed to be in default and Science Museum shall return any County RAP funds already collected by Science Museum for that Project.

10. 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 9 above.

11. Science Museum shall complete the Project by August 30, 2009, and invoices and checks submitted for reimbursement must be dated within the project time frame of January 6, 2009, through August 30, 2009. Science Museum shall provide its final reimbursement request(s), including a project completion statement and reimbursement documentation as indicated in Section 2 above on or before November 30, 2009. Upon written notification to County at least ninety (90) days prior to that date Science Museum may request an extension beyond this period for the purpose of completing the Project. County shall not unreasonably deny Science Museum's request for said extension.

12. In the event Science Museum 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 Science Museum. The determination that Science Museum has ceased or suspended the Project shall be made by County and Science Museum agrees to be bound by County's determination.

13. Science Museum 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 Science Museum. Failure to comply may result in County's refusal to honor reimbursement requests for the Project.

14. County reserves the right to withhold reimbursement if the Project is not completed as specified in Exhibit "A".

15. It is understood and agreed that Science Museum 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, Science Museum 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 Science Museum, 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 this Agreement for which Science Museum is eligible to receive reimbursement from the County.

16. Science Museum shall, at its sole expense, agree to maintain in full force and effect at all times during the life of this Agreement, insurance coverages and limits (including endorsements), as described herein. Science Museum shall agree to provide the County with at least ten (10) day prior notice of any cancellation, non-renewal or material change to the insurance coverages. The requirements contained herein, as well as County's review and acceptance of insurance maintained by Science Museum are not intended to and shall not in any manner limit or qualify the liabilities and obligations assumed by Science Museum under this Agreement.

Commercial General Liability. Science Museum shall maintain Commercial General Liability at a limit of liability not less than \$500,000 Each Occurrence. Coverage shall not contain any endorsement excluding Contractual Liability or Cross Liability unless granted in writing by County Risk Management Department. Science Museum shall provide this coverage on a primary basis.

Automobile. Science Museum shall maintain, during the life of this Agreement, comprehensive automobile liability insurance in the minimum amount of \$500,000 combined single limit bodily injury and property damage for claims arising from damages for bodily injury including wrongful death, as well as from claims for property damage which may arise from the

ownership, use, or maintenance of owned and non-owned automobiles, including rented automobiles, whether such operations be by Science Museum or by anyone employed by or contracting with Science Museum. Should Science Museum use independent bus companies for transportation, it shall require such company or companies to provide automobile liability on such buses in the minimum amount of \$1,000,000 combined single limit bodily injury and property damage liability and shall include Science Museum and Palm Beach County as Additional Insured.

Worker's Compensation Insurance & Employer's Liability. Science Museum shall maintain Worker's Compensation & Employers Liability in accordance with Florida Statute Chapter 440. Science Museum shall provide this coverage on a primary basis.

Additional Insured. Science Museum shall endorse the County as an Additional Insured with a CG 2026 Additional Insured - Designated Person or Organization endorsement, or its equivalent, to the Commercial General Liability. The Additional Insured endorsement shall read "Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents." Science Museum shall provide the Additional Insured endorsements coverage on a primary basis.

Waiver of Subrogation. Science Museum hereby waives any and all rights of Subrogation against the County, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then Science Museum shall agree to notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy when a condition to the policy specifically prohibits such an endorsement, or voids coverage should Science Museum enter into such an agreement on a pre-loss basis.

Certificate(s) of Insurance. Prior to execution of this Agreement by the County, Science Museum shall deliver to the County a Certificate(s) of coverage evidencing that all types and amounts of insurance coverages required by this Agreement have been obtained and are in full force and effect. Such Certificate(s) of Insurance shall include a minimum ten (10) day endeavor to notify due to cancellation or non-renewal of coverage. 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.

Right to Review. County, by and through its Risk Management Department, in

cooperation with the contracting/monitoring department, reserves the right to review, modify, reject or accept any required policies of insurance, including limits, coverages, or endorsements, herein from time to time throughout the term of this Agreement. County reserves the right, but not the obligation, to review and reject any insurer providing coverage because of its poor financial condition or failure to operate legally.

17. Upon request by County, Science Museum shall demonstrate financial accountability through the submission of acceptable financial audits performed by an independent auditor.

18. Science Museum 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 Science Museum, County shall have the right to inspect and audit said books, records, documents and other evidence during normal business hours.

19. The County and Science Museum 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.

20. 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.

21. As provided in Section 287.132-133, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, Science Museum 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.

22. 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.

23. 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 Science Museum:

President
South Florida Science Museum, Inc.
4801 Dreher Trail North
West Palm Beach, FL 33405

24. 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.

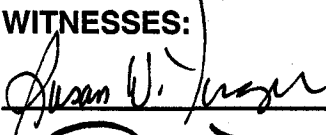
ATTEST:
SHARON R. BOCK, Clerk & Comptroller

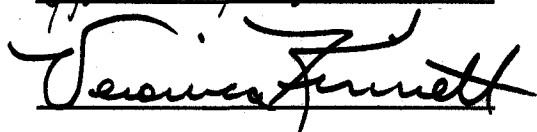
PALM BEACH COUNTY, FLORIDA, BY ITS BOARD OF COUNTY COMMISSIONERS

By: _____
Deputy Clerk

By: _____
Commissioner John F. Koons, Chairman

WITNESSES:





SOUTH FLORIDA SCIENCE MUSEUM, INC.
FEI Number: 590915177

By: DR. Rachel Doukala

Name (Type or Print)

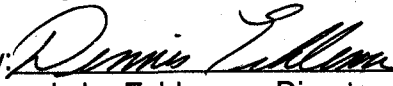
Title

Signature

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

By: _____
County Attorney

APPROVED AS TO TERMS AND CONDITIONS

By: 
Dennis L. Eshleman, Director
Parks and Recreation Department

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

Name of Agency: **South Florida Science Museum, Inc.**

Mailing Address: 4801 Dreher Trail North West Palm Beach, FL 33405

Federal Employer Identification Number: 59-0915177

Name of President: Ms. Mary Sellers, CEO

Name of Executive Director: Dr. Rachel Docekal, Deputy Director

Project Liaison Information:

Name: Dr. Laura Sessions, Director of Guest Experience

Telephone #: (561) 370-7710

Fax #: (561) 832-4461

e-mail: lsessions@sfsm.org

PROJECT INFORMATION

1. Name of Project: Science Tunnel, Exhibition of the Max Planck Society at the South Florida Science Museum
2. Project Description
 - General (Project Scope):

The Science Tunnel "Send a Class" program provides students in grades 4 - 12 at Title I schools with a field trip to the South Florida Science Museum. The program provides for all transportation and Museum admission costs for three classrooms of students. This high-level program presented in the Max Planck Society Science Tunnel is based upon the scope and sequence of Sunshine State Standards for each grade level. This exhibition content was judged so important by the School District of Palm Beach County that the FCAT blackout period for field trips was lifted for the exhibition. Following a tour, students are encouraged to engage in the hands-on components to the exhibition such as focusing a telescope, riding a bicycle at the speed of light, or examining common objects under a magnifier.

- Public Purpose:

For many schools on the Title I roster, field trips are virtually impossible. The "Send a Class" eliminates barriers by absorbing all expenses, making each Title I school groups' visit as effortless as possible, and takes the traditional field trip one step further with a personal tour through the exhibition.

- Location: South Florida Science Museum
- Anticipated Number of Participants/Users: 75 students per \$1,000.00 scholarship

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.

Museum Admission Students, Museum Admission Chaperones, Transportation

4. Estimated Lump Sum Total for Project: \$ 1,000.00
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).
January 6, 2009 to ~~June 8, 2009~~

August 30, 2009 / sy

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 ✓

Amount of Recreation Assistance Program Funding awarded

\$ 1,000
District X 3
(filled in by County)

Form available online by request. Contact Susan Yinger at syinger@pbcgov.com



PALM BEACH COUNTY
PARKS AND RECREATION DEPARTMENT

EXHIBIT B

CONTRACT PAYMENT REQUEST

Date _____

Grantee: _____ Project Name: _____

Submission #: _____ Reimbursement Period: _____

Item	Key	Project Costs This Submission	Cumulative Project Costs
Contractual Services	(C)	_____	_____
Salary & Wages (% of salaries)	(S)	_____	_____
Materials, Supplies, Direct Purchases	(M)	_____	_____
Equipment	(E)	_____	_____
Travel	(T)	_____	_____
Indirect Costs	(I)	_____	_____
TOTAL PROJECT COSTS		=====	=====

Key Legend

C = Contractual Services
S = Salary & Wages
M = Materials, Supplies, Direct Purchases
E = Equipment
T = Travel
I = Indirect Costs

Certification: I hereby certify that the above expenses were incurred for the work identified as being accomplished in the attached progress reports.

Certification: I hereby certify that the documentation has been maintained as required to support the project expenses reported above and is available for audit upon request.

Administrator

Date

Financial Officer

Date

PBC USE 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 Administrator

Date

Department Director

Date



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

Grantee: _____

Submittal #: _____

Date _____

Project Name: _____

Contract Reimbursement Period: _____

Check or Voucher				Invoice			Expense Description
#	Payee (Vendor/Contractor)	Key	Number	Date	Number	Date	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
						TOTAL \$	

Certification: I hereby certify that the purchases noted above were used in accomplishing this project.

Administrator _____

Date _____

Certification: I hereby certify that bid tabulations, executed contract, cancelled checks, and other purchasing documentation have been maintained as required to support the costs reported above and are available for audit upon request.

Date _____

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 6/1/2009	
PRODUCER Wells Fargo Insurance Services Southeast 2054 Vista Parkway, Suite 400 West Palm Beach FL 33411-2718 (561) 655-5500 (561) 655-5509		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 South Florida Science Museum 4801 Dreher Trail North West Palm Beach FL 33405		INSURERS AFFORDING COVERAGE INSURER A: Associated Indemnity Corporati 21865 INSURER B: Commerce & Industry 19410 INSURER C: Assurance Company of America 19305 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	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	MZX80906223	6/1/2009	6/1/2010	EACH OCCURRENCE	\$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
						MED EXP (Any one person)	\$ 10,000
						PERSONAL & ADV INJURY	\$ 1,000,000
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ 2,000,000
A		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	MZX80906223	6/1/2009	6/1/2010	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN EA ACC	\$
						AUTO ONLY: AGG	\$
B		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10,000	BE046462238	6/1/2009	6/1/2010	EACH OCCURRENCE	\$ 2,000,000
						AGGREGATE	\$ 2,000,000
							\$
							\$
							\$
C		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC272985501	1/1/2009	1/1/2010	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER	
						E.L. EACH ACCIDENT	\$ 500,000
						E.L. DISEASE - EA EMPLOYEE	\$ 500,000
						E.L. DISEASE - POLICY LIMIT	\$ 500,000
A		OTHER Bus Pers Property	MZX80906223	6/1/2009	6/1/2010	\$165,000 Theft Included Spec Form	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS 10 Day notice of cancellation for non payment of premium. Certificate holder is included as additional insured for general liability							

CERTIFICATE HOLDER Palm Beach County Parks & Recreation 2700 6th Avenue South Lake Worth FL 33461	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 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 <i>Louisa Canache</i>
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6/1/2009

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.