

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2014	2015	2016	2017	2018
Capital Expenditures					
Operating Costs	\$316,794				
External Revenues	(\$316,794)				
Program Income (County)					
In-Kind Match (County)					
NET FISCAL IMPACT	-0-				
# ADDITIONAL FTE POSITIONS (Cumulative)	-0-				

Is Item Included In Current Budget? Yes X No _____

Budget Account No.:

Word of Faith (HOME)

Fund 1103 Dept 143 Unit 1434 Object 8201 Program Code/Period Varies: \$236,329.89

West Palm Beach Housing Authority: Southridge (DRI3 & DRI4)

Fund 1108 Dept 143 Unit 1422 Object 8201 Program Code/Period DRI338 - GY07 \$ 8,000 (DRI3)

Fund 1106 Dept 143 Unit 1427 Object 8201 Program Code/Period DRI41 - GY08 \$72,464 (DRI4)

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

Approval of this agenda item will allocate an additional \$236,329.89 to Word of Faith CDC and \$80,464 to the West Palm Beach Housing Authority.

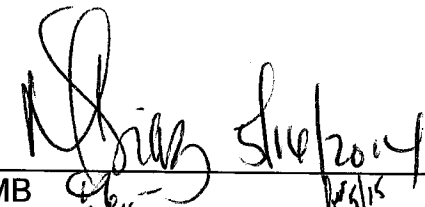
C. Departmental Fiscal Review:



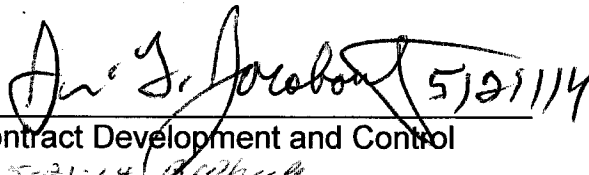
 Shairette Major / Fiscal Manager I

III. REVIEW COMMENTS

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



 OFMB
 5/15



 Contract Development and Control
 5-21-14

B. Legal Sufficiency:



 Chief Assistant County Attorney

C. Other Department Review:

Department Director

Background and Justification: (Continued from Page 1)

On May 26, 2010, the County entered into an Agreement (R2010-1036) with the Village of Wellington, as amended by Amendment No. 001 (R2010-1283) on August 17, 2010, by Amendment No. 002 (R2011-0398) on March 15, 2011, by Amendment No. 003 (R2011-0399) on March 15, 2011, by Amendment No. 004 (R2012-0129) on January 24, 2011, by Amendment No. 005 (R2012-1261) on June 8, 2012, and by Amendment No. 006 (R2013-0148) on December 27, 2012, to provide \$680,141.30 in NSP1 funds for the acquisition and rehabilitation of homes to be occupied by income qualified households. Amendment No. 007 reinstates the expired Agreement and extends the project completion date to September 4, 2014.

On December 7, 2010, the County entered into an Agreement (R2011-0615) with the West Palm Beach Housing Authority, as amended by Amendment No. 001 (R2011-0812) on June 7, 2011, Amendment No. 002 (R2012-0138) on October 22, 2011, Amendment No. 003 (R2012-1811) on October 15, 2012, Amendment No. 004 (R2013-1644) on July 19, 2013, and Amendment No. 005 (R2013-1645) on September 20, 2013 to provide \$2,471,537.65 in DRI3 funds for hurricane hardening improvements at the Colony Oaks and Twin Lakes housing complexes. Amendment No. 006 reinstates the expired Agreement, extends the project completion date to September 15, 2014 and revises certain administrative procedures within the Agreement.

On August 27, 2011, the County entered into an Agreement (R2011-1796) with the West Palm Beach Housing Authority, as amended by Amendment No. 001 (R2012-1260) on June 12, 2012, by Amendment No. 002 (R2013-0146) on December 13, 2012, by Amendment No. 003 (R2013-0923) on May 6, 2013, and by Amendment No. 004 (R2014-0275) on December 20, 2013 to provide \$812,449 in DRI4 funds and \$38,912 in DRI3 funds for infrastructure improvements at the Colony Oaks and Southridge housing complexes. Amendment No. 005 provides \$80,464 in additional DRI funding for the project.

AMENDMENT 004 TO THE AGREEMENT
WITH
WORD OF FAITH COMMUNITY DEVELOPMENT CORPORATION

Amendment 004 entered into on APR 28 2014, by and between Palm Beach County ("County") and Word of Faith Community Development Corporation ("Agency").

WITNESSETH:

WHEREAS, Palm Beach County entered into an Agreement (R2010-1752) with Word of Faith Community Development Corporation on October 19, 2010, as amended by Amendment 001 (R2011-1618) on October 18, 2011, by Amendment 002 (R2012-1891) on December 18, 2012, and by Amendment 003 (R2013-1171) on September 10, 2013, to provide \$529,398.66 of HOME Investment Partnerships (HOME) Program funds for the acquisition and rehabilitation of single family homes for occupancy by eligible households; and

WHEREAS, Agency has acquired two (2) properties and is currently obligated to acquire at least one (1) additional property; and

WHEREAS, both parties wish to modify the Agreement to increase the project allocation by \$236,329.89, provide for the purchase of at least one (1) additional unit, thereby bringing the number of units funded by this Agreement to a minimum of four (4), and establish expenditure deadlines for the additional funding, and

WHEREAS, both parties desire to further amend the original Agreement in accordance with the terms and conditions set forth herein.

NOW, THEREFORE, in consideration of the mutual covenants and agreements hereinafter set forth, and various other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

A. INCORPORATION OF RECITALS

The foregoing recitals are true and correct and incorporated herein by reference. Terms not defined herein shall have the same meaning as ascribed to them in the Agreement.

B. PART III - SECTION 1 - MAXIMUM COMPENSATION

Replace "\$529,398.66" with "765,728.55".

Delete the last sentence of the first paragraph and replace it with the following language:

"A minimum of \$236,329.89, (the "Additional Allocation") must be expended on eligible expenses, including the purchase/rehabilitation of at least one (1) additional unit, with reimbursement requests submitted to the County no later than September 15, 2014. The Additional Allocation consists of \$219,385.32 funded from CHDO Reserves and \$16,944.57 from the CHDO Operating Budget. Any remaining funds from the total amount funded by this Agreement must be expended by November 30, 2014. Any funds not expended in accordance with the deadlines set forth in this Agreement shall automatically revert to the County".

C. PART III - SECTION 2 - TIME OF PERFORMANCE

Insert the following language at the end of this Section:

"Notwithstanding anything to the contrary contained herein, the Additional Allocation must be expended on eligible expenses, including the purchase/rehabilitation of at least one (1) additional unit, with reimbursement requests submitted to the County no later than September 15, 2014. Any funds not expended in accordance with the deadlines set forth in this Agreement shall automatically revert to the County".

D. PART III - SECTION 3 - METHOD OF PAYMENT

Delete the last sentence of this Section and replace it with the following:

“All reimbursement requests for payments made by the Agency in connection with the expenditure of the Additional Allocation shall be submitted by Agency to the County no later than September 15, 2014. Reimbursement requests for payments made by the Agency in connection with the expenditure of all remaining funds available pursuant to this Agreement shall be submitted by the Agency no later than November 30, 2014”.

E. EXHIBIT A.1 - SECTION I.A - PROJECT SERVICES

Add the following language after the first paragraph:

“The Agency shall utilize the Additional Allocation to complete ongoing HOME activities and purchase/rehabilitate at least one (1) additional single family property pursuant to the terms and conditions contained herein, thereby bringing the number of units funded by this Agreement to a minimum of four (4) single family properties”.

F. EXHIBIT A.1 - SECTION I.F - PERFORMANCE BENCHMARKS

Add the following Subsection 7 to the end of this Section:

- “7. The expenditure of the Additional Allocation shall be subject to the following timeframes:
- A. Acquisition of Property: The Agency shall complete the acquisition of at least one (1) additional property no later than June 15, 2014.
 - B. Completion of Rehabilitation of Existing and Additional Properties: The Agency shall complete the rehabilitation of existing and additional properties and shall have received a certificate of occupancy or a certificate of completion for the rehabilitation work from the building department with jurisdiction over these properties, no later than September 1, 2014.
 - C. Expenditure of Additional Allocation Funds: In order to receive 100% of the \$236,329.89 designated as Additional Allocation for property acquisition, rehabilitation, and other eligible costs as specified herein, the Agency shall submit its requests for reimbursement from HOME funds no later than September 15, 2014.
 - D. Occupancy by Eligible Beneficiaries of Additional Properties: The Agency shall complete the occupancy of the additional properties by eligible beneficiaries approved by the County no later than December 31, 2014”.

G. EXHIBIT A.1 - SECTION I.M.7 - CONVERSION TO RENTAL PROPERTY

Add the following language to the end of this Section:

“Any property acquired and/or rehabilitated by the Agency through this additional allocation that has not been sold by the Agency, and occupied by a purchaser approved by the County, by September 30, 2014 shall be leased or leased with an option to buy according to the rental and lease-purchase requirements herein by December 31, 2014.

H. EXHIBIT A.1 - SECTION II. A - THE COUNTY AGREES TO

- A. Replace “\$505,774” with “\$725,159.32”.

B. Replace "\$23,624.66" with "\$40,569.23".

Delete the last two sentences of this Section and replace with the following:

"The Agency's reimbursable operating expenses shall not exceed \$40,569.23 in any fiscal year and no more than fifty (50) percent or \$20,284.62 will be disbursed without the benefit of project completion and beneficiary realized".


Except as modified by this Amendment 004, and previously, the Agreement remains unmodified and in full force and effect in accordance with the terms thereof. This Amendment 004 is expressly contingent upon the approval of the County and shall become effective only when signed by all parties.

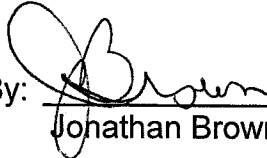
IN WITNESS WHEREOF, Agency and the County have caused this Amendment 004 to be executed on the date first above written.

(SEAL)
Corporation not-for-profit



**WORD OF FAITH COMMUNITY
DEVELOPMENT CORPORATION,**
a Florida not-for-profit corporation

By: 
Patricka Brown, Executive Director

By: 
Jonathan Brown, Project Manager

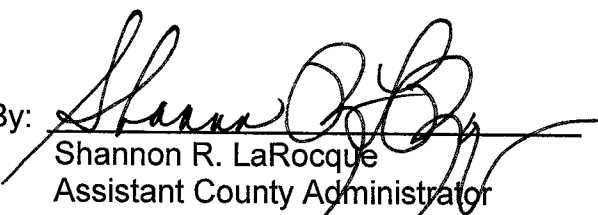
By: _____
Attorney for Agency
(Signature Optional)

Date: 4/21/14

(COUNTY SEAL BELOW)

**PALM BEACH COUNTY, FLORIDA, a
Political Subdivision of the State of Florida**


BOARD OF COUNTY COMMISSIONERS

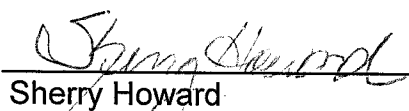
By: 
Shannon R. LaRocque
Assistant County Administrator

Date: 4/28/14

Approved as to Form and
Legal Sufficiency

Approved as to Terms and Conditions
Department of Economic Sustainability

By: 
Tammy K. Fields
Chief Assistant County Attorney

By: 
Sherry Howard
Deputy Director

AMENDMENT 007 TO AND REINSTATEMENT OF THE AGREEMENT
WITH
VILLAGE OF WELLINGTON

Amendment 007 to and Reinstatement of the Agreement ("Amendment/Reinstatement") entered into on APR 16 2014 by and between **Palm Beach County** ("County") and the **Village of Wellington** ("Municipality").

WITNESSETH:

WHEREAS, Palm Beach County entered into an Agreement with the Village of Wellington, on May 26, 2010 (R2010-1036), as amended on August 17, 2010, by Amendment 001 (R2010-1283), as amended on March 15, 2011, by Amendment 002 (R2011-0398), as amended on March 15, 2011, by Amendment 003 (R2011-0399), as amended on January 24, 2011, by Amendment 004 (R2012-0129), as amended on June 8, 2012, by Amendment 005 (R2012-1261), and as amended on December 27, 2012, by Amendment 006 (R2013-0148) to provide \$680,141.30 of Neighborhood Stabilization Program Grant funds (NSP1) for the acquisition and rehabilitation of properties; and

WHEREAS, the Agreement was in effect until March 4, 2014, for the purpose of sale of the homes acquired with NSP 1 grant funds; and

WHEREAS, unfavorable market conditions have impeded the resale of the last acquired home in a manner that the Municipality will not meet the March 4, 2014 home resale deadline; and

WHEREAS, the Municipality has requested a time extension to complete the sale of the final home, and

WHEREAS, the County and Municipality desire to reinstate the Agreement and amend it further to extend the home resale date; and

WHEREAS, the County and Municipality acknowledge and agree that during the period from March 4, 2014, until the date this Amendment/Reinstatement becomes effective, the parties were and are bound by the terms of the Agreement; and

WHEREAS, both parties desire to amend the Agreement in accordance with the terms and conditions set forth herein.

NOW, THEREFORE, in consideration of the mutual covenants and agreements hereinafter set forth, and various other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

A. PART III SECTION 2 – TIME OF PERFORMANCE

Replace "March 4, 2014" with "September 4, 2014".

B. EXHIBIT A.1 – SECTION I.K – RESALE OF PROPERTIES ACQUIRED FOR OWNER OCCUPANCY

Replace "March 4, 2014" with "September 4, 2014".

Except as modified by this Amendment 007, and previously, the Agreement remains unmodified and in full force and effect in accordance with the terms thereof. This Amendment 007 is expressly contingent upon the approval of the County and shall become effective only when signed by all parties.

IN WITNESS WHEREOF, the Municipality and County have caused this Amendment 007 to be executed on the date first above written

(MUNICIPALITY SEAL BELOW)


VILLAGE OF WELLINGTON

By: 
Bob Margolis, Mayor

By: 
Awilda Rodriguez, Village Clerk


**PALM BEACH COUNTY, FLORIDA, a
Political Subdivision of the State of
Florida**

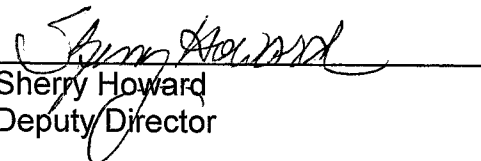
**FOR ITS BOARD OF COUNTY
COMMISSIONERS**

By: 
Shannon R. LaRocque
Assistant County Administrator

Approved as to Form and
Legal Sufficiency

Approved as to Terms and Conditions
Department of Economic Sustainability

By: 
Tammy K. Fields
Chief Assistant County Attorney

By: 
Sherry Howard
Deputy Director

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AMENDMENT 006 TO AND REINSTATEMENT OF THE AGREEMENT
WITH
WEST PALM BEACH HOUSING AUTHORITY

Amendment 006 to and Reinstatement of the Agreement (Amendment/Reinstatement) is made and entered into on MAY 01 2014, by and between **Palm Beach County** ("County") and **West Palm Beach Housing Authority** ("Agency").

WITNESSETH:

WHEREAS, the County entered into an Agreement (R2011-0615) with the Agency on December 7, 2010, as amended by Amendment No. 001 (R2011-0812) on June 7, 2011, Amendment No. 002 (R2012-0138) on October 22, 2011, Amendment No. 003 (R2012-1811) on October 15, 2012, Amendment No. 004 (R2013-1644) on July 19, 2013, and Amendment 005 (R2013-1645) on September 20, 2013, to provide \$2,471,537.65 under the State of Florida's 2005 Disaster Recovery Initiative Program - Supplemental Appropriation for hurricane hardening improvements, site lighting, and installation of an emergency generator at the Twin Lakes and Colony Oaks apartment complexes; and

WHEREAS, the Agency entered into the Agreement as a sub-recipient, but on September 15, 2011, it also assumed the general contractor's responsibilities for the hurricane hardening portion of the project which included existing subcontracts and permits, established budgets for the two apartment complexes, and work that was in progress; and

WHEREAS, the Agency has functioned as both owner and general contractor of the project, with the approval of the State of Florida, Department of Economic Opportunity (DEO), since September 15, 2011; and

WHEREAS, the Agency's assumption of the original general contractor's responsibilities, subcontracts, budgets, and work in progress caused procedural questions and performance delays; and

WHEREAS, the Agreement was in effect until December 15, 2013, for the purpose of work performance and reimbursement of expenses; and

WHEREAS, the work was substantially complete by December 15, 2013, but there were procedural and cost related questions regarding payment of the general contractor fee, payments of certain invoices, and the construction budgets for the two apartment complexes, and it was necessary to obtain an official determination regarding the issues from DEO; and

WHEREAS, the County has obtained DEO's approval to pay the Agency the general contractor fee in order to reimburse Agency for expenses and finalize the project; and

WHEREAS, the County and Agency desire to reinstate the Agreement and amend it further to extend the compensation deadline until September 15, 2014, provide for payment of the general contractor fee to the Agency, transfer funds between budgets to provide for reimbursement of Agency's expenses, and provide for a mechanism to accommodate workers' restitution for underpaid wages; and

WHEREAS, the County and Agency acknowledge and agree that during the period from December 15, 2013, until the date this Amendment/Reinstatement becomes effective, the parties were and are bound by the terms of the Agreement.

NOW, THEREFORE, in consideration of the mutual covenants and agreements hereinafter set forth, and various other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. The foregoing recitals are true and correct and incorporated herein by reference. Terms not defined herein shall have the same meaning as ascribed to them in the Agreement.

2. **PART III, SECTION 1 – MAXIMUM COMPENSATION**

Replace “December 15, 2013” with “September 15, 2014”.

3. **PART III, SECTION 2 – TIME OF PERFORMANCE**

Replace “December 15, 2013” with “September 15, 2014”.

4. **PART III, SECTION 4 – CONDITIONS ON WHICH PAYMENT IS CONTINGENT**

Add the following subsection (9) to this Section:

- (9) **GENERAL CONTRACTOR FEE**

The parties acknowledge that on September 15, 2011, Agency replaced E. O. Koch Construction Co. (“Koch”) as the General Contractor for the hurricane hardening portion of this project and assumed all of Koch’s rights and responsibilities under the construction contract. As General Contractor, Agency became responsible for additional staffing and other costs that weren’t anticipated when Agency entered into this Agreement as a sub-recipient. The General Contractor is entitled to reimbursement for operational costs (the “General Contractor Fee”) as General Conditions of administering the construction contract. Notwithstanding anything in this Agreement to the contrary, Agency shall be entitled to collect the General Contractor Fee for its performance as the General Contractor for this Project if there are sufficient funds available to pay such fee. The amount of the fee cannot be determined until Agency has submitted all payment applications and/or invoices for the project and has certified that the project has been completed. Agency may collect the difference between the original cost of the project bid by Koch (\$1,986,981.30) and the sum of all payment applications and/or invoices submitted for reimbursement prior to or concurrent with Agency’s certification of project completion. Nothing herein shall require County or DEO to make additional funds available for payment of a General Contractor Fee if there are not sufficient funds to pay Agency a General Contractor Fee. Nothing herein shall make County or DEO liable for any costs not submitted by Agency prior to or after the Agency’s collection of a General Contractor Fee or certification of project completion. The parties acknowledge that County has no responsibility or liability for any payments to Koch as general contractor.

5. **EXHIBIT A – PART II, SECTION F – CONSTRUCTION PAYMENT RETAINAGE**

The following is added to the end of Section F:

The Parties acknowledge that the final reimbursement request from the Agency will be processed by the County in order to make the project’s final payment. Said reimbursement request will include the “General Contractor Fee” and all remaining eligible expenses related to completion of the construction contract. The County will withhold funding from said final payment to cover costs associated with wage restitutions due employees who worked on the project, (the “Restitution Account”). Following receipt of acceptable documentation that

restitution has been issued to and received by the impacted employees, the County shall reimburse the Agency from the Restitution Account for amounts equal to the restitutions made and received. The amount to be withheld from the Agency in the Restitution Account and the acceptable documentation for reimbursement shall be determined by the County at its sole discretion. Restitution Account funds not issued to and received by the impacted employees shall remain with the County.

The Agency shall submit all reimbursement requests from the Restitution Account no later than thirty (30) days prior to the Agreement deadline contained herein.

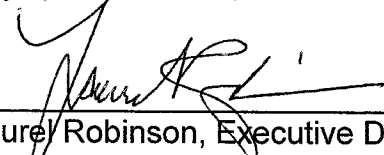
6. After final reimbursements have been processed for Colony Oaks, funds remaining in the construction contract budget for Colony Oaks shall be transferred to the construction contract budget for Twin Lakes provided approval for such transfer has been obtained from DEO.
7. Except as set forth herein, the Agreement is reinstated and remains unmodified and in full force and effect, and County and Agency hereby ratify, confirm, and adopt the Agreement as amended hereby.
8. This Amendment/Reinstatement is expressly contingent upon the approval of the County and shall become effective only when signed by all parties.

IN WITNESS WHEREOF, Agency and the County have caused this Amendment/Reinstatement to be executed on the date first above written.

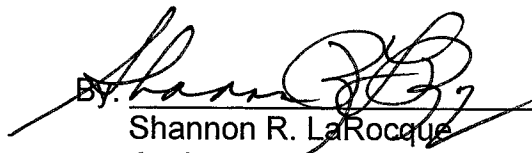
(AGENCY SEAL)

WEST PALM BEACH HOUSING AUTHORITY

By: 
Thyra Echols-Starr, Chair

By: 
Laurel Robinson, Executive Director

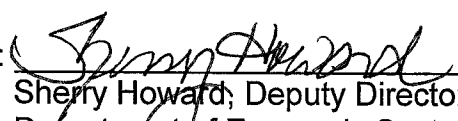
**PALM BEACH COUNTY, FLORIDA, a
Political Subdivision of the State of Florida
FOR ITS BOARD OF COUNTY
COMMISSIONERS**

By: 
Shannon R. LaRocque
Assistant County Administrator

Approved as to Form and
Legal Sufficiency

Approved as to Terms and Conditions
Department of Economic Sustainability

By: 
Tammy K. Fields
Chief Assistant County Attorney

By: 
Sherry Howard, Deputy Director
Department of Economic Sustainability

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**AMENDMENT 005 TO THE AGREEMENT
WITH
WEST PALM BEACH HOUSING AUTHORITY**

Amendment 005 entered into on MAY 01 2014, by and between **Palm Beach County** and **West Palm Beach Housing Authority**.

WITNESSETH:

WHEREAS, Palm Beach County entered into an Agreement (R2011-1796), with the West Palm Beach Housing Authority on August 27, 2011, as amended by Amendment 001 (R2012-1260) on June 12, 2012, Amendment 002 (R2013-0146) on December 13, 2012, Amendment 003 (R2013-0923) on May 6, 2013, and Amendment 004 (R2014-0275) on December 20, 2013 to provide \$812,449 in 2008 Disaster Recovery Initiative Program (DRI-4) funds and \$38,912 in 2005 Disaster Recovery Initiative – Supplemental Appropriation Program (DRI-3) funds for on-site infrastructure improvements at the Colony Oaks and Southridge Public Housing Developments; and

WHEREAS, both parties wish to modify this Agreement to provide \$8,000 in additional funding through the 2005 Disaster Recovery Initiative Program (DRI-3); and \$72,464 in additional funding through the 2008 Disaster Recovery Initiative Program (DRI-4); and

WHEREAS, both parties desire to modify the original Agreement, as amended, in accordance with the terms and conditions set forth herein.

NOW, THEREFORE, in consideration of the mutual covenants and agreements hereinafter set forth, and various other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

A. INCORPORATION OF RECITALS

The foregoing recitals are true and correct and incorporated herein by reference. Terms not defined herein shall have the same meaning as ascribed to them in the Agreement.

B. PART III – SECTION 1 - MAXIMUM COMPENSATION

Replace "\$851,361" with "\$931,825".

C. EXHIBIT "A" – WORK PROGRAM NARRATIVE - SECTION I.B.1 and SECTION I.B.2 – PROJECT SCOPE

Delete this Section and replace it with the following:

(1) Southridge Infrastructure Improvements (\$457,625)

The Scope of this project and eligible reimbursements shall include on-site infrastructure improvements including removal and replacement of cement walkways, asphalt roadway, and parking lots within the Southridge Public Housing Development, located at 3725 Georgia Avenue in West Palm Beach. The area to be resurfaced is approximately 89,400 square feet, of which approximately 80,000 square feet is asphalt and approximately 9,400 square feet is concrete. All change orders must be approved by DES and DEO prior to approval and execution by the Agency. The Agency shall be responsible for all construction costs which exceed the above stated amount.

D. EXHIBIT "A" – WORK PROGRAM NARRATIVE - SECTION II.A – THE COUNTY AGREES TO:

Replace "\$851,361" with "\$931,825".


Except as modified by this Amendment 005, and previously, this Agreement remains unmodified and in full force and effect in accordance with the terms thereof. This Amendment 005 is expressly contingent upon the approval of the County and shall become effective only when signed by all parties.

IN WITNESS WHEREOF, Agency and County have caused this Amendment 005 to be executed on the date first above written

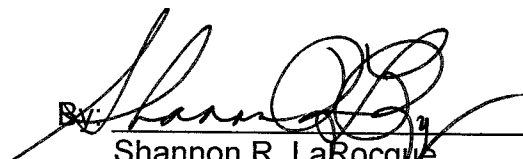
(AGENCY SEAL BELOW)

**WEST PALM BEACH HOUSING
AUTHORITY**

By: 
Thyra Echols-Starr, Chair

By: 
Laurel Robinson, Executive Director

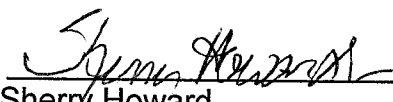
**PALM BEACH COUNTY, FLORIDA, a
Political Subdivision of the State of Florida
FOR ITS BOARD OF COUNTY
COMMISSIONERS**

By: 
Shannon R. LaRocque
Assistant County Administrator

Approved as to Form and Legal Sufficiency

Approved as to Terms and Conditions
Department of Economic Sustainability

By: 
Tammy K. Fields
Chief Assistant County Attorney

By: 
Sherry Howard
Deputy Director

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COMMERCIAL GENERAL LIABILITY
55181 (12-04)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS A POLITICAL SUBDIVISION OF THE STATE OF FLORIDA ITS OFFICERS EMPLOYEES AND AGENTS
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

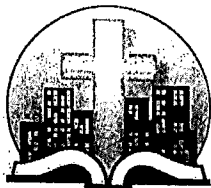
A. SECTION II - WHO IS AN INSURED is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule but only with respect to liability for "bodily injury", "property damage", "personal injury" or "advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or

2. In connection with your premises owned by or rented to you.

B. The following is added to SECTION III - LIMITS OF INSURANCE:

The limits of liability for the additional insured are those specified in the written contract or agreement between the insured and the designated person or organization, not to exceed the limits provided in this policy. These limits are inclusive of and not in addition to the limits of insurance shown in the Declarations.



WORD OF FAITH COMMUNITY DEVELOPMENT CORPORATION

"Building a Balance Between the Spiritual and Practical Aspects of Everyday Life"

May 14, 2014

Edward Lowery, Director
Palm Beach County Board of County Commissioners
Department of Economic Sustainability
100 Australian Avenue, Suite 500
West Palm Beach, FL 33406

Subject: Workers Compensation

Dear Mr. Lowery :

I am providing a letter to confirm that Word of Faith Community Development Corporation currently has 2 part-time employees and we elect not to carry Worker's Compensation coverage / insurance.

If you have any questions I can be reached at (561) 762-0409.

Sincerely,

Jonathan Brown, Project Manager
Word Of Faith CDC

OFFICE ADDRESS

2070 Scott Avenue,
West Palm Beach, FL 33409

OFFICE INFORMATION

Phone: (561) 766-1973

Fax: (561) 766-1974



DIRECTORS

Tamilka Peterkin
Board Chair

Vonshel Anderson
Board Member

Clarece Hayes
Board Member

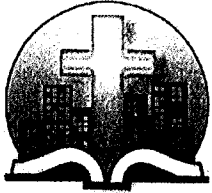
CDC STAFF

Patricka D. Brown
Executive Director

Jonathan B. Brown
Project Manager



Word of Faith CDC
is a HUD approved
Community Housing
Development
Organization (CHDO)



WORD OF FAITH COMMUNITY DEVELOPMENT CORPORATION

"Building a Balance Between the Spiritual and Practical Aspects of Everyday Life"

May 15, 2014

Edward Lowery, Director
Palm Beach County Board of County Commissioners
Department of Economic Sustainability
100 Australian Avenue, Suite 500
West Palm Beach, FL 33406

Subject: CHDO Extension - Automobile Insurance

Dear Mr. Lowery:

I am providing a letter to confirm that Word of Faith Community Development Corporation does not own any vehicles. Additionally, we do not anticipate acquiring or leasing any vehicles.

If you have any questions I can be reached at (561) 762-0409.

Sincerely,

Jonathan Brown, Project Manager
Word Of Faith CDC

OFFICE ADDRESS

2070 Scott Avenue,
West Palm Beach, FL 33409

OFFICE INFORMATION

Phone: (561) 766-1973

Fax: (561) 766-1974



DIRECTORS

Tamika Peterkin
Board Chair

Vonshel Anderson
Board Member

Clarece Hayes
Board Member

CDC STAFF

Patricka D. Brown
Executive Director

Jonathan B. Brown
Project Manager



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Community Housing
Development
Organization (CHDO)

CERTIFICATE OF COVERAGE

Certificate Holder PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS 100 AUSTRALIAN AVENUE SUITE 500 WEST PALM BEACH FL 33406	Administrator Florida League of Cities, Inc. Department of Insurance and Financial Services P.O. Box 530065 Orlando, Florida 32853-0065
Issue Date 3/27/2014	

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.

COVERAGES PROVIDED BY: **FLORIDA MUNICIPAL INSURANCE TRUST**

AGREEMENT NUMBER: FMIT 0001 COVERAGE PERIOD: FROM 10/01/13 COVERAGE PERIOD: TO 10/1/14 12:01 AM STANDARD TIME

<p>TYPE OF COVERAGE - LIABILITY</p> <p>General Liability</p> <p><input checked="" type="checkbox"/> Comprehensive General Liability, Bodily Injury, Property Damage and Personal Injury</p> <p><input checked="" type="checkbox"/> Errors and Omissions Liability</p> <p><input checked="" type="checkbox"/> Supplemental Employment Practice</p> <p><input checked="" type="checkbox"/> Employee Benefits Program Administration Liability</p> <p><input checked="" type="checkbox"/> Medical Attendants/Medical Directors' Malpractice Liability</p> <p><input checked="" type="checkbox"/> Broad Form Property Damage</p> <p><input type="checkbox"/> Law Enforcement Liability</p> <p><input checked="" type="checkbox"/> Underground, Explosion & Collapse Hazard</p> <p>Limits of Liability * Combined Single Limit</p> <p>Deductible Stoploss \$25,000</p> <p>Automobile Liability</p> <p><input checked="" type="checkbox"/> All owned Autos (Private Passenger)</p> <p><input checked="" type="checkbox"/> All owned Autos (Other than Private Passenger)</p> <p><input checked="" type="checkbox"/> Hired Autos</p> <p><input checked="" type="checkbox"/> Non-Owned Autos</p> <p>Limits of Liability * Combined Single Limit</p> <p>Deductible Stoploss \$25,000</p>	<p>TYPE OF COVERAGE - PROPERTY</p> <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Buildings</td> <td><input checked="" type="checkbox"/> Miscellaneous</td> </tr> <tr> <td><input checked="" type="checkbox"/> Basic Form</td> <td><input checked="" type="checkbox"/> Inland Marine</td> </tr> <tr> <td><input checked="" type="checkbox"/> Special Form</td> <td><input checked="" type="checkbox"/> Electronic Data Processing</td> </tr> <tr> <td><input checked="" type="checkbox"/> Personal Property</td> <td><input checked="" type="checkbox"/> Bond</td> </tr> <tr> <td><input type="checkbox"/> Basic Form</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/> Special Form</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Agreed Amount</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Deductible \$25,000</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Coinsurance N/A</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Blanket</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Specific</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Replacement Cost</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Actual Cash Value</td> <td></td> </tr> </table> <p style="text-align: center;">Limits of Liability on File with Administrator</p> <hr/> <p>TYPE OF COVERAGE - WORKERS' COMPENSATION</p> <p><input checked="" type="checkbox"/> Statutory Workers' Compensation</p> <p><input checked="" type="checkbox"/> Employers Liability \$1,000,000 Each Accident \$1,000,000 By Disease \$1,000,000 Aggregate By Disease</p> <p><input type="checkbox"/> Deductible N/A</p> <p><input type="checkbox"/></p>	<input checked="" type="checkbox"/> Buildings	<input checked="" type="checkbox"/> Miscellaneous	<input checked="" type="checkbox"/> Basic Form	<input checked="" type="checkbox"/> Inland Marine	<input checked="" type="checkbox"/> Special Form	<input checked="" type="checkbox"/> Electronic Data Processing	<input checked="" type="checkbox"/> Personal Property	<input checked="" type="checkbox"/> Bond	<input type="checkbox"/> Basic Form	<input type="checkbox"/>	<input checked="" type="checkbox"/> Special Form		<input checked="" type="checkbox"/> Agreed Amount		<input checked="" type="checkbox"/> Deductible \$25,000		<input type="checkbox"/> Coinsurance N/A		<input type="checkbox"/> Blanket		<input type="checkbox"/> Specific		<input checked="" type="checkbox"/> Replacement Cost		<input checked="" type="checkbox"/> Actual Cash Value	
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<input checked="" type="checkbox"/> Replacement Cost																											
<input checked="" type="checkbox"/> Actual Cash Value																											

Automobile/Equipment - Deductible

Physical Damage \$500 - Comprehensive - Auto \$500 - Collision - Auto Per Schedule - Miscellaneous Equipment

Other


The limit of liability is \$200,000 Bodily Injury and/or Property Damage per person or \$300,000 Bodily Injury and/or Property Damage per occurrence. These specific limits of liability are increased to \$2,000,000 for General Liability and \$1,000,000 for Automobile Liability (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/settlement for which no claims bill has been filed or liability imposed pursuant to Federal Law or actions outside the State of Florida.

Description of Operations/Locations/Vehicles/Special Items

Re: Neighborhood Stabilization Program Funds for assisting with purchase, renovation and resale of not less than five multifamily residential dwellings. 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 event.

Scheduled Properties: 13571 Jonquil Place

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.

<p>DESIGNATED MEMBER</p> <p>VILLAGE OF WELLINGTON 12300 FOREST HILL BOULEVARD WELLINGTON FL 33414</p>	<p>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 SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE PROGRAM, ITS AGENTS OR REPRESENTATIVES.</p> <p style="text-align: center;"></p> <p style="text-align: center;">AUTHORIZED REPRESENTATIVE</p>
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189 Commerce Court
 PO Box 189
 Cheshire, CT 06410-0189

203-272-8220 or 800-873-0242
 fax 203-271-2265
 www.housingcenter.com

CERTIFICATE OF INSURANCE

ID: 361, Endorsement: 01-10A-13-2014-26

Issue Date: 04/29/2014

Insured: West Palm Beach Housing Authority

Address: 1715 Division Avenue
 West Palm Beach, FL 33407-6289

Coverages

Type of Insurance	Policy Number	Limits
Commercial Liability	HARRG-361-134037-2014	General Aggregate: \$ 5,000,000 Per Occurrence: \$ 5,000,000 Personal and Adv Inj: \$ 5,000,000 Fire Damage Sub-Limit: \$ 50,000 Athletic Sport Sub-Limit
[X] CoverageA: Bodily Injury and Property Damage Liability: Occurrence	Effective Date: 04/01/2014 12:01 AM	Per Occurrence: \$ 250,000 Aggregate: \$ 250,000
[X] CoverageB: Personal and Advertising Injury Liability: Occurrence	Expiration Date: 04/01/2015 12:01 AM	Mold, Other Fungi or Bacteria: \$ 100,000
[X] CoverageE: Mold, Other Fungi or Bacteria Liability: Claims Made Retro Date: 4/1/04		

Description: Palm Beach County Board of County Commissioners scheduled as additional insured per Endt. No. 01-10A-13

Certificate Holder: Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents, c/o Department of Economics Sustainability 100 Australian Avenue, 5th Floor West Palm Beach, FL 33406

Company: Housing Authority Risk Retention Group, Inc.

THIS IS TO CERTIFY THAT THE POLICIES LISTED ABOVE 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY CLAIMS PAID. 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 ABOVE.

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 90 days written notice to the certificate holder named above, but failure to mail such notice shall impose no obligations or liability of any kind upon the company, its agents, or representatives.

Signature of Authorized Representative



Policy Change No. 01-10A-13-2014-26

Change Endorsement

Additional Insureds - Designated Person or Organization

Named Insured: West Palm Beach Housing Authority

Policy Number: HARRG-361-134037-2014

Policy Effective Date: 04/01/2014 - 04/01/2015

Issue Date: 04/29/2014

Premium:

Effective From: 04/01/2014 at the time of day the policy becomes effective.

Commercial Liability

The Insurance is Amended as follows:

This Endorsement modifies insurance provided under the following Coverage Section(s):

Bodily Injury and Property Damage Liability - Coverage Section A

Personal and Advertising Injury Liability - Coverage Section B

SCHEDULE

Additional Insured:

Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees, and Agents

c/o Department of Housing and Economic Sustainability

100 Australian Avenue, 5th Floor

West Palm Beach, FL 33406

Operations/Premises:

Regarding: Grant for - Southridge Location:

Paving, Drainage and Site Improvements - Contract Value \$454,338.74

Paragraph II.A., Who Is An Insured, is amended to include as an insured the person(s) or organization(s) shown in the Schedule, but only with respect to their liability for "bodily injury," "property damage" and/or "personal and advertising injury" caused or committed, in whole or in part, by you or those acting on your behalf:

A. In the performance of the ongoing operations described in the Schedule; or

B. In connection with the premises shown in the Schedule

All other terms and conditions contained in the policy remain in full force and effect.

Description: Palm Beach County Board of County Commissioners scheduled as additional insured per Endt. No. 01-10A-13



189 Commerce Court
PO Box 189
Cheshire, CT 06410-0189

203-272-8220 or 800-873-0242
fax 203-271-2265
www.housingcenter.com

CERTIFICATE OF INSURANCE

ID: 361, Endorsement: 01-10A-12-2014-25

Issue Date: 04/29/2014

Insured: West Palm Beach Housing Authority

Address: 1715 Division Avenue
West Palm Beach, FL 33407-6289

Coverages

Type of Insurance	Policy Number	Limits
Commercial Liability	HARRG-361-134037-2014	General Aggregate: \$ 5,000,000 Per Occurrence: \$ 5,000,000 Personal and Adv inj: \$ 5,000,000 Fire Damage Sub-Limit: \$ 50,000 Athletic Sport Sub-Limit
[X] CoverageA: Bodily Injury and Property Damage Liability: <u>Occurrence</u>	Effective Date: 04/01/2014 12:01 AM	Per Occurrence: \$ 250,000 Aggregate: \$ 250,000
[X] CoverageB: Personal and Advertising Injury Liability: <u>Occurrence</u>	Expiration Date: 04/01/2015 12:01 AM	Mold, Other Fungi or Bacteria: \$ 100,000
[X] CoverageE: Mold, Other Fungi or Bacteria Liability: <u>Claims Made</u> Retro Date: 4/1/04		

Description: Palm Beach County Board of County Commissioners scheduled as additional insured per Endt. No. 01-10A-12

Certificate Holder: Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents, c/o Department of Economics Sustainability 100 Australian Avenue, 5th Floor West Palm Beach, FL 33406

Company: Housing Authority Risk Retention Group, Inc.

THIS IS TO CERTIFY THAT THE POLICIES LISTED ABOVE 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY CLAIMS PAID. 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 ABOVE.

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 90 days written notice to the certificate holder named above, but failure to mail such notice shall impose no obligations or liability of any kind upon the company, its agents, or representatives.

Signature of Authorized Representative



Policy Change No. 01-10A-12-2014-25

Change Endorsement

Additional Insureds - Designated Person or Organization

Named Insured: West Palm Beach Housing Authority

Policy Number: HARRG-361-134037-2014

Policy Effective Date: 04/01/2014 - 04/01/2015

Issue Date: 04/29/2014

Premium:

Effective From: 04/01/2014 at the time of day the policy becomes effective.

Commercial Liability

The Insurance is Amended as follows:

This Endorsement modifies insurance provided under the following Coverage Section(s):

Bodily Injury and Property Damage Liability - Coverage Section A

Personal and Advertising Injury Liability - Coverage Section B

SCHEDULE

Additional Insured:

Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees, and Agents

c/o Department of Housing and Economic Sustainability

100 Australian Avenue, 5th Floor

West Palm Beach, FL 33406

Operations/Premises:

Regarding: Grant for - Colony Oaks Location:

Paving, Drainage and Site Improvements - Contract Value \$474,200

Paragraph II.A., Who Is An Insured, is amended to include as an insured the person(s) or organization(s) shown in the Schedule, but only with respect to their liability for "bodily injury," "property damage" and/or "personal and advertising injury" caused or committed, in whole or in part, by you or those acting on your behalf:

A. In the performance of the ongoing operations described in the Schedule; or

B. In connection with the premises shown in the Schedule

All other terms and conditions contained in the policy remain in full force and effect.

Description: Palm Beach County Board of County Commissioners scheduled as additional insured per Endt. No. 01-10A-12

CERTIFICATE OF COVERAGE

Certificate Holder

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS
 A POLITICAL SUBDIVISION OF THE ST OF FL, ITS OFFICERS,
 EMPLOYEES AND AGENTS
 C/O DEPT OF ECONOMIC SUSTAINABILITY
 100 AUSTRALIAN AVENUE, 5th FLOOR
 WEST PALM BEACH, FL 33406

Administrator

Issue Date 2/11/14

Florida League of Cities, Inc.
Department of Insurance and Financial Services
P.O. Box 530065
Orlando, Florida 32853-0065

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

COVERAGE PROVIDED BY:

FLORIDA MUNICIPAL INSURANCE TRUST

AGREEMENT NUMBER: FMIT 0933

COVERAGE PERIOD: FROM 10/1/13

COVERAGE PERIOD: TO 10/1/14 12:01 AM STANDARD TIME

TYPE OF COVERAGE - LIABILITY

General Liability

- Comprehensive General Liability, Bodily Injury, Property Damage, Personal Injury and Advertising Injury
- Errors and Omissions Liability
- Employment Practices Liability
- Employee Benefits Program Administration Liability
- Medical Attendants'/Medical Directors' Malpractice Liability
- Broad Form Property Damage
- Law Enforcement Liability
- Underground, Explosion & Collapse Hazard

Limits of Liability

Automobile Liability

- All owned Autos (Private Passenger)
- All owned Autos (Other than Private Passenger)
- Hired Autos
- Non-Owned Autos

Limits of Liability

* Combined Single Limit
 Deductible N/A

TYPE OF COVERAGE - PROPERTY

Buildings

- Basic Form
- Special Form

Personal Property

- Basic Form
- Special Form

Agreed Amount

Deductible N/A

Coinsurance N/A

Blanket

Specific

Replacement Cost

Actual Cash Value

Miscellaneous

- Inland Marine
- Electronic Data Processing
- Bond

Limits of Liability on File with Administrator

TYPE OF COVERAGE - WORKERS' COMPENSATION

Statutory Workers' Compensation

Employers Liability

\$1,000,000 Each Accident
 \$1,000,000 By Disease
 \$1,000,000 Aggregate By Disease

Deductible N/A

SIR Deductible N/A

Automobile/Equipment - Deductible

Physical Damage

Per Schedule - Comprehensive - Auto

Per Schedule - Collision - Auto

NA - Miscellaneous Equipment

Other

* The limit of liability is \$200,000 Bodily Injury and/or Property Damage per person or \$300,000 Bodily Injury and/or Property Damage per occurrence. These specific limits of liability are increased to \$300,000 for Automobile Liability (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/settlement for which no claims bill has been filed or liability imposed pursuant to Federal Law or actions outside the State of Florida.

Description of Operations/Locations/Vehicles/Special Items

RE: Grant to fund Infrastructure improvements including removal and replacement walkways, roadways and parking lots at the Southridge and Colony Oaks development, Contract #: 10-DB-K4-10-60-01-K29

RE: Events, activities, elections and functions authorized by the certificate holder involving the designated member while being held upon the premises of the certificate holder. 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 event.

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

West Palm Beach Housing Authority
 1715 Division Avenue
 West Palm Beach FL 33407-6298

Cancellations

SHOULD ANY PART OF THE ABOVE DESCRIBED AGREEMENT BE CANCELED 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 SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE PROGRAM, ITS AGENTS OR REPRESENTATIVES.



AUTHORIZED REPRESENTATIVE