



AGENDA ITEM SUMMARY

Submitted For: Department of Airports

1. Amendment (3)

LB
Recommended By:  10/21/14
Department Director Date
Approved By:  10/30/14
County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
Operating Revenues	<u>(\$1,823)</u>	<u>(\$2,187)</u>	<u>(\$2,187)</u>	<u>(\$2,187)</u>	<u>(\$2,187)</u>
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>(\$1,823)</u>	<u>(\$2,187)</u>	<u>(\$2,187)</u>	<u>(\$2,187)</u>	<u>(\$2,187)</u>
# ADDITIONAL FTE	_____	_____	_____	_____	_____
POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included in Current Budget? Yes ☐ No ☒
Budget Account No: Fund 4100 Department 120 Unit 8451 Rsource 4416
Reporting Category _____

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

This Amendment will result in a net decrease of approximately 3,365 square feet in Signature's overall leasehold. The current ground rental rate is \$.65 per square foot. The Amendment provides for adjustment of rental based on the reduction in square footage to occur on December 1, 2014. The annual reduction in rental will be approximately \$2,187.

C. Departmental Fiscal Review: CM Simon

III. REVIEW COMMENTS

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

[Signature] 10/27/14
AM OFMB
10/23

[Signature] 10/29/14
Contract Dev. and Control
10-29-14 B. Wheeler

B. Legal Sufficiency:

[Signature] 10/30/14
Assistant County Attorney

C. Other Department Review:

Department Director

**FIFTH AMENDMENT TO LEASE AGREEMENT
FOR FIXED BASE OPERATION BETWEEN PALM BEACH COUNTY
AND SIGNATURE FLIGHT SUPPORT CORPORATION**

THIS FIFTH AMENDMENT TO LEASE AGREEMENT (this "Amendment") is made and entered into as of _____, 2014, by and between **Palm Beach County**, a political subdivision of the State of Florida ("County"), and **Signature Flight Support Corporation**, a Delaware corporation, having its office and principal place of business at 201 S. Orange Avenue, Suite 1100S, Orlando, Florida 32801 ("Tenant").

WITNESSETH:

WHEREAS, County, by and through its Department of Airports (the "Department"), owns and operates the Palm Beach International Airport (the "Airport"), located in Palm Beach County, Florida; and

WHEREAS, the parties entered into that certain Lease Agreement dated September 30, 2004 (R-2004-1990), as amended by that certain First Amendment dated November 21, 2006 (R-2006-2416), Second Amendment dated September 14, 2010 (R-2010-1390), Third Amendment dated April 5, 2011 (R-2011-0493); and Fourth Amendment dated July 10, 2012 (R-2012-0982) (collectively the "Lease"); and

WHEREAS, the County will be causing certain infrastructure improvements to be constructed at the Airport that will potentially impact the Northwest Tract, which improvements will include vehicular roadways, a taxiway and extension of utilities and are anticipated to be constructed in two (2) or more phases (hereinafter referred to as the "County Infrastructure Project"); and

WHEREAS, Tenant desires to cause additional aircraft apron to be constructed to ensure continued aircraft access to the Northwest Tract during the construction of the County Infrastructure Project; and

WHEREAS, the parties have agreed to delete Ramp Area A from the Northwest Tract and a portion of the aircraft parking apron located within the Northwest Tract for use as an apron edge vehicular service road; and

WHEREAS, certain lighting improvements constructed by Tenant are located outside of the boundaries of the Northwest Tract and conflict with the construction of a public vehicular access roadway; and

WHEREAS, County is willing to relocate the lighting improvements during the construction of the public vehicular access roadway in an effort to minimize conflicts in construction schedules, subject to reimbursement of the relocation costs by Tenant; and

WHEREAS, the parties desire to amend the Lease as provided for herein.

NOW, THEREFORE, in consideration of the premises and mutual covenants herein contained, and other good and valuable consideration, the receipt of which the parties hereby expressly acknowledged, the parties hereto covenant and agree to the following terms and conditions:

Section 1. Recitals. The foregoing recitals are true and correct and are hereby incorporated herein by reference. Terms not defined herein shall have the meanings set forth in the Lease. Exhibit and article references in this Amendment shall refer to exhibits and articles of the Lease.

Section 2. Northwest Tract Description. Exhibit "B" to the Lease is hereby deleted in its entirety and replaced with Exhibit "B" to this Amendment.

Section 3. Amendment of Definitions. Article 2, Definitions, is hereby amended to delete Sections 2.41 and 2.49 in their entirety and replace them with the following:

2.41 "Northwest Tract" means the real property more particularly described on Exhibit "B" as "Net Jets Parcel (Northwest Tract)" and Phase 1A Apron, comprising approximately 353,548 square feet of ground.

2.49 "Phase 1A Apron" means the real property more particularly described on Exhibit "B" as "Phase 1A Apron", comprising approximately 32,126 square feet of ground.

Section 4. Amendment of Article 5.01. Article 5.01, Ground Rental, is hereby amended to delete Article 5.01(C) in its entirety and replace it with the following:

- (C) Commencing on December 1, 2014, for that portion of the Premises identified as the Northwest Tract, containing approximately 353,548 square feet of ground, the initial annual ground rental to be paid by Tenant to County shall be \$.65 per square foot, or \$229,806.20 annually, payable in equal monthly installments.

Section 5. Amendment of Article 8. Article 8, Construction of Improvements, is hereby amended to delete Section 8.06, Ramp Area A Improvements, in its entirety.

Section 6. Phase 1A Apron.

- (A) Tenant shall cause the construction of approximately 32,126 square feet of aircraft parking apron sufficient to support Group III aircraft within the Phase 1A Apron ("Required Phase 1A Apron Improvements") in accordance with construction plans and specifications approved by the Department and the requirements of Article 8. Construction of the Required Phase 1A Apron Improvements shall be at Tenant's sole cost and expense. All aircraft apron pavement sections to be constructed within the Phase 1A Apron shall be designed in accordance with FAA Advisory Circular 150/5320-6 Airport Pavement Design and Evaluation, as now or hereafter amended. The parties shall coordinate the construction of the County Infrastructure Project and Required Phase 1A Apron Improvements in an effort to minimize disruption in aircraft access to the Northwest Tract; provided, however, Tenant acknowledges and agrees that County shall have no liability whatsoever for temporary disruptions in aircraft access to the Northwest Tract resulting from the construction of the County Infrastructure Project. Tenant shall complete construction of the Required Phase 1A Apron Improvements on or before September 30, 2015, unless otherwise approved by the Department. Tenant shall use the Phase 1A Apron exclusively as a taxilane for the movement of aircraft and for no other purpose whatsoever.
- (B) Within sixty (60) days of substantial completion of the Required Phase 1A Apron Improvements, as evidenced by a certificate of occupancy or completion, Tenant, at its sole cost and expense, shall have prepared and delivered to County: (a) one (1) complete set of as-built drawings in a PDF or other electronic format approved by the Department and one (1) complete set of AutoCAD files in the latest version acceptable to the Department; and (b) a statement prepared and attested to by an independent Certified Public Accountant ("CPA"), reasonably acceptable to County, detailing the total costs incurred by Tenant for the construction of the Required 1A Apron Improvements ("Phase 1A Apron Cost").
- (C) Commencing one hundred eighty (180) after substantial completion of the Required Phase 1A Apron Improvements, County shall have the right to reclaim Phase 1A Apron provided that County causes

Tenant to be paid the Phase 1A Apron Buyout Amount (as hereinafter defined). The Phase 1A Buyout Amount shall be an amount equal to the Phase 1A Apron Cost minus any accumulated depreciation. Accumulated depreciation shall be calculated as the sum of annual depreciation deducted or to be deducted by Tenant on its applicable tax returns with respect to the Required 1A Apron Improvements. Annual depreciation shall be calculated on a straight line basis such that annual depreciation is the same throughout the life of the Required Phase 1 Improvements and, at the end of term of the Lease as to the Northwest Tract, including the renewal terms, the Phase 1A Buyout Amount shall be equal to zero. Accumulated depreciation shall also include any pro-rata annual depreciation for any periods less than a year calculated on a monthly basis, rounded up to the nearest whole monthly period. In the event County elects to reclaim the Phase 1A Apron, County shall provide to Tenant no less than ninety (90) days prior written notice of County's intent to reclaim the Phase 1A Apron. Upon the expiration of the ninety (90) day notice period and Tenant's receipt of the Phase 1A Buyout Amount, Tenant's lease as to the Phase 1A Apron shall be automatically terminated without formal amendment hereto, whereupon the parties shall be released from all further obligations under this Lease as to the Phase 1A Apron with the exception of those obligations that arise prior to termination or expressly survive termination of this Lease.

Section 7. High Mast Lighting. The parties acknowledge that the high mast lighting poles and related appurtenances, including electrical service and junction boxes (hereinafter collectively referred to as "High Mast Lighting") installed by Tenant and currently located outside the Northwest Tract's boundary conflict with the future public vehicular access roadway to be constructed by County as a part of the County Infrastructure Project. In the event County includes the construction of the public vehicular access road in the County Infrastructure Project, County agrees to relocate the High Mast Lighting to an area mutually acceptable to the parties within the Northwest Tract, subject to reimbursement of all costs incurred by County for inclusion of such additional work in the County Infrastructure Project, including, but not limited to, all consulting, bidding, construction, materials and construction management costs. Upon relocation of the High Mast Lighting, all costs incurred by County shall be reimbursed by Tenant to County within sixty (60) days of County's invoice therefor. Tenant is and shall remain solely responsible for the maintenance and repair of the High Mast Lighting upon relocation by County throughout the Term of the Lease.

Section 8. Updated Survey of Northwest Tract. Upon completion of the construction of the County Infrastructure Project and Phase 1A Apron, the County shall cause a boundary survey of the Northwest Tract and Phase 1A Apron to be completed, which shall be provided to Tenant for review and approval, which approval shall not be unreasonably withheld. The parties hereby agree to amend the Lease to replace Exhibit "B" to the Lease and to update the associated Lease provisions to correct any discrepancies in the square footage between the updated boundary survey and this Amendment. The parties agree that any adjustments to rental or license fees that are required as a result of discrepancies in the final square footage shall be adjusted prospectively and shall not be applied retroactively. Signature agrees to reimburse County for fifty percent (50%) of the cost of the updated boundary survey within thirty (30) days of the date of the County's invoice therefor.

Section 9. Ratification of Lease. Except as specifically modified herein, all of the terms and conditions of the Lease shall remain unmodified and in full force and effect and are hereby ratified and confirmed by the parties hereto. In the event of a conflict between this Amendment and the Lease, the terms and conditions of this Amendment shall control.

Section 10. Incorporation by Reference. Exhibits attached hereto and referenced herein shall be deemed to be incorporated in this Amendment by such reference.

Section 11. Paragraph Headings. The heading of the various sections of this Amendment are for convenience and ease of reference only, and shall not be construed to define, limit, augment or describe the scope, context or intent of the Lease or any part or parts of the Lease.

Section 12. Effective Date of Amendment. This Amendment shall be considered effective when signed by all parties and approved by the Palm Beach County Board of County Commissioners.

{Remainder of page intentionally left blank.}

IN WITNESS WHEREOF, the parties hereto have duly executed this Amendment as of the day and year first above written.

ATTEST:

SHARON R. BOCK

By: _____
Clerk and Comptroller

(SEAL)

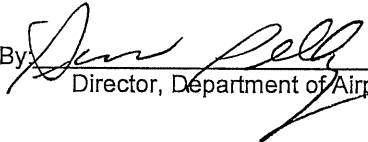
PALM BEACH COUNTY, a political
subdivision of the State of Florida by its
Board of County Commissioners

By: _____
Mayor

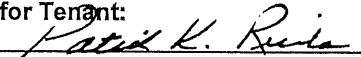
APPROVED AS TO FORM AND
LEGAL SUFFICIENCY

By: _____
County Attorney

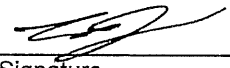
APPROVED AS TO TERMS
AND CONDITIONS

By: 
Director, Department of Airports

Signed, sealed and delivered
in the presence of two witnesses
for Tenant:


Signature


PATRICK K. RINIKA
Print Name


Signature

ALEX J. MILLS
Print Name

(Seal)

TENANT
Signature Flight Support Corporation

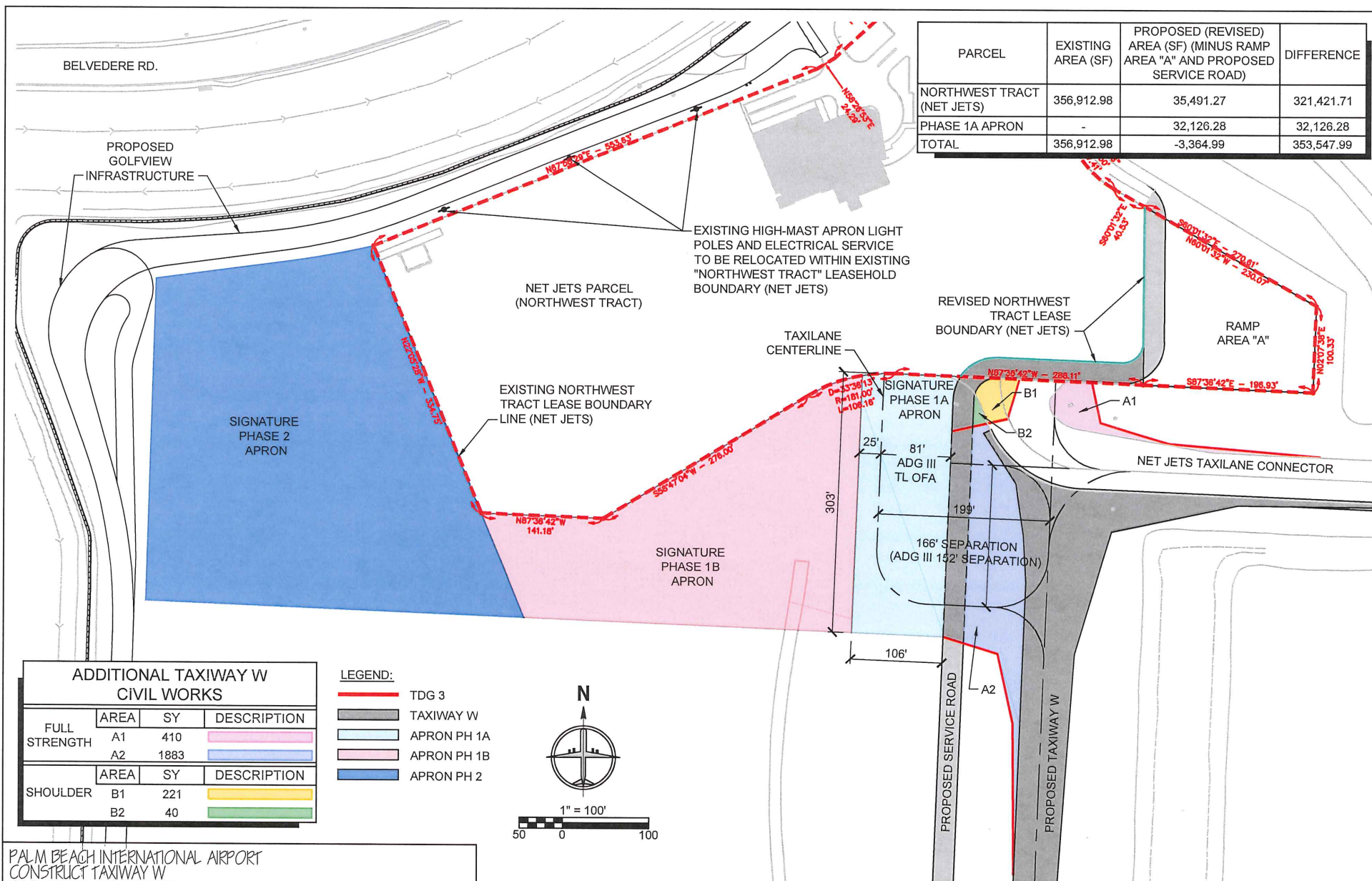

Signature

Maria A. Sastre
Print Name

President & COO
Title

APPROVED AS TO FORM:
PKR 10-3-2014
LEGAL DEPT.

EXHIBIT "B"
Northwest Tract



PARCEL	EXISTING AREA (SF)	PROPOSED (REVISED) AREA (SF) (MINUS RAMP AREA "A" AND PROPOSED SERVICE ROAD)	DIFFERENCE
NORTHWEST TRACT (NET JETS)	356,912.98	35,491.27	321,421.71
PHASE 1A APRON	-	32,126.28	32,126.28
TOTAL	356,912.98	-3,364.99	353,547.99

PALM BEACH INTERNATIONAL AIRPORT
 CONSTRUCT TAXIWAY W
 FBO APRON CONNECTOR
 STRAIGHT-IN APPROACH/ DUAL RAMP CONNECTOR - EXHIBIT 1 OF 2

C E R T I F I C A T E
(Corporation)

The undersigned hereby certifies that the following are true and correct statements:

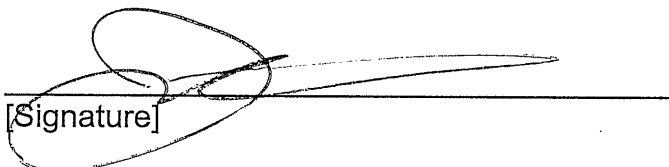
1. That Jeffrey T. Bankowitz is the Assistant Secretary of Signature Flight Support Corporation, a corporation organized and existing in good standing under the laws of the State of Delaware, hereinafter referred to as the "Corporation", and that the following are true and correct:

That the Corporation is authorized to enter into that certain Fifth Amendment to Lease Agreement for Fixed Base Operation at Palm Beach International Airport between Palm Beach County, a political subdivision of the State of Florida and the Corporation (the "Agreement"), a copy of which is attached hereto.

That Maria A. Sastre, the President of the Corporation, is hereby authorized and empowered to execute such Agreement and such other instruments as may be necessary and appropriate for the Corporation to fulfill its obligations under the Agreement.

That the Corporation is in good standing under the laws of the State of Florida, and has qualified, if legally required, to do business in the State of Florida and has the full power and authority to enter into such Agreement.

IN WITNESS WHEREOF, the undersigned has set his hand and affixed the Corporate Seal of the Corporation the 30th day of September, 2014.


[Signature]

Corporate Seal

Jeffrey T. Bankowitz, Assistant Secretary



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
09/30/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER
Aon Risk Services Northeast, Inc.
Boston MA Office
One Federal Street
Boston MA 02110 USA

CONTACT
NAME:
PHONE
(A/C, No, Ext): (866) 283-7122 FAX
(A/C, No.): (800) 363-0105
E-MAIL
ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURED
Signature Flight Support Corp.
201 S Orange Avenue
Suite 1100 A
Orlando FL 32801 -3478 USA

INSURER A: Allianz Global Corporate & Specialty SE AA1344102
INSURER B: New Hampshire Ins Co 23841
INSURER C: The Insurance Co of the State of PA 19429
INSURER D:
INSURER E:
INSURER F:

COVERAGES

CERTIFICATE NUMBER: 570055392061

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<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 OTHER:			AK1427001 Aviation Liability	10/01/2014	10/01/2015	EACH OCCURRENCE \$10,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY \$10,000,000 GENERAL AGGREGATE PRODUCTS - COMP/OP AGG Fire Legal \$1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			AK1427001 On-Airport Premises Auto	10/01/2014	10/01/2015	COMBINED SINGLE LIMIT (Ea accident) \$5,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
B C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WC028234439 WC028234442	09/30/2014 09/30/2014	09/30/2015 09/30/2015	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

SPECIAL PROVISIONS:

Solely as respects: (i) the Insurance coverages noted above (ii) the Contract(s) and only to the extent of the insurance requirements of the Contract(s) provided all policy terms, conditions, limitations, deductibles, warranties, and exclusions remain paramount, (iii) the Equipment (if applicable) and (iv) the operations of the Named Insured, subject to all policy terms, conditions, limitations, deductibles, warranties, and exclusions, the following provisions apply:
Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and

CERTIFICATE HOLDER

CANCELLATION

Palm Beach County
c/o Insurance Tracking Services, Inc.
(ITS)
PO Box 20270
Long Beach CA 90801 USA

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon Risk Services Northeast Inc.

Holder Identifier :

Certificate No : 570055392061



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED Signature Flight Support Corp.
POLICY NUMBER See Certificate Number: 570055392061		
CARRIER See Certificate Number: 570055392061	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Additional Description of Operations / Locations / Vehicles:
Agents, c/o Palm Beach International Airport, West Palm Beach Florida are included as Additional Insured in accordance with the policy provisions of the Aviation Liability policy. Aviation Liability evidenced herein is Primary to other insurance available to an Additional Insured, but only in accordance with the policy's provisions. A Waiver of Subrogation is granted in favor of Certificate Holder in accordance with the policy provisions of the Aviation Liability policy.



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED Signature Flight Support Corp.	
POLICY NUMBER See Certificate Number: 570055392061			
CARRIER See Certificate Number: 570055392061	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Special Provisions

As respects the Allianz Global & Corporate Specialty AG policy, Aon Risk Services Northeast, Inc. is acting as Consultant only and is generating and distributing this certificate in an administrative capacity. Aon UK Limited is the broker for policy number AK1427001.

Geographical Limits are Worldwide.

Comprehensive General Aviation Liability including inter alia, On-Airport Premises Automotive Liability, Premises, Products and Completed Operations Liabilities, Hangarkeepers Liability, Aircraft Liability, Contractual Liability, Cargo Liability, Baggage Liability, Advertisers Liability and Fire Legal Liability.

SEVERAL LIABILITY NOTICE: The subscribing insurers' obligations under contracts of insurance to which they subscribe are several and not joint and is limited solely to the extent of their individual subscriptions. The subscribing insurers are not responsible for the subscriptions of any co-subscribing insurer who for any reason does not satisfy all or part of its obligations. LSW 1001 (Insurance)

This certificate of Insurance shall automatically terminate, without further notice, upon the earliest of (i) natural expiration of the policies on the date shown above; (ii) cancellation of the policies prior to the natural expiration date (as notified to the Certificate Holder(s) in accordance with the provisions of this certificate); (iii) termination of the Contract (s); and (iv) in the case of Aircraft Hull and/or Aircraft Spares Insurance, termination of either the Named Insured (s) or the Certificate Holder(s) insurable interest in the equipment (and in the latter case, only with respect to that/those particular Certificate Holder(s)).



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED Signature Flight Support Corp.
POLICY NUMBER See Certificate Number: 570055392061		
CARRIER See Certificate Number: 570055392061	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Special Provisions Continued

Each of the above Insurers, individually for its policy only, has authorized the undersigned to issue this certificate on its behalf as a matter of convenience. The undersigned is not an insurer and has no liability of any sort under the above policies nor as a result of this certification.

This certificate or verification of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein, unless otherwise noted above. Notwithstanding any requirement, term or condition of any contract or other document with respects to which this certificate or verification of insurance may be issued or may pertain, the insurance afforded by the policies subscribed herein is subject to all terms, exclusions and conditions of such policies.



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
10/03/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

PRODUCER
Aon Risk Services Northeast, Inc.
Boston MA office
One Federal Street
Boston MA 02110 USA

CONTACT NAME:
PHONE (A/C, No, Ext): (866) 283-7122
FAX (A/C, No.): (800) 363-0105
E-MAIL ADDRESS:
PRODUCER CUSTOMER ID #: 570000035015

INSURED
Signature Flight Support Corp.
201 S Orange Avenue
Suite 1100 A
Orlando FL 32801 -3478 USA

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Factory Mutual Insurance Co.	21482
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 570055477161

REVISION NUMBER:

LOCATION OF PREMISES/ DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Re: FBO Lease Agreement with Palm Beach County for Operations at Palm Beach International Airport. Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents are included as Loss Payee ATIMA. A waiver of Subrogation is granted in favor of Certificate Holder as required by written contract but limited to

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	<input checked="" type="checkbox"/>	PROPERTY	LT121	10/01/2014	10/01/2015	BUILDING	
		CAUSES OF LOSS				PERSONAL PROPERTY	
		<input type="checkbox"/> BASIC				<input checked="" type="checkbox"/> BUSINESS INCOME w/o Extra Expense	\$1,000,000
		<input type="checkbox"/> BROAD				<input type="checkbox"/> EXTRA EXPENSE	
	<input checked="" type="checkbox"/>	SPECIAL				RENTAL VALUE	
		EARTHQUAKE				BLANKET BUILDING	
		WIND				BLANKET PERS PROP	
		FLOOD				<input checked="" type="checkbox"/> BLANKET BLDG & PP	\$5,000,000
		Blkt B&PP Ded					
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY				
		CAUSES OF LOSS	POLICY NUMBER				
		<input type="checkbox"/> NAMED PERILS					
	<input type="checkbox"/>	CRIME					
		TYPE OF POLICY					
	<input type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
"All Risk" Property Coverage of a Physical loss or damage including Boiler and Machinery, Theft, Fire, Flood, Earthquake, wind, and Business Interruption coverage subject to policy terms, conditions, and exclusions. Valuation: Replacement Cost. This certificate does not amend, extend, or alter the coverage afforded by the policy.

CERTIFICATE HOLDER

Palm Beach County
c/o Insurance Tracking Services, Inc.
(ITS)
P.O. Box 20270
Long Beach CA 90801 USA

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Aon Risk Services Northeast, Inc.



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED Signature Flight Support Corp.	
POLICY NUMBER See Certificate Number: 570055477161			
CARRIER See Certificate Number: 570055477161	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 24 FORM TITLE: Certificate of Property Insurance

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY
the operations of the Insured under said contract.

SPECIAL CONDITIONS / OTHER COVERAGES



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
10/01/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER Aon Risk Services Northeast, Inc. Boston MA Office One Federal Street Boston MA 02110 USA	CONTACT NAME:	
	PHONE (A/C, No, Ext): (866) 283-7122	FAX (A/C, No.): 800-363-0105
INSURED Signature Flight Support Corp. 201 S Orange Avenue Suite 1100 A Orlando FL 32801 -3478 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A: AIG Specialty Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES CERTIFICATE NUMBER: 570055436858 REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE
	CLAIMS-MADE						DAMAGE TO RENTED PREMISES (Ea occurrence)
							MED EXP (Any one person)
							PERSONAL & ADV INJURY
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE
	POLICY						PRODUCTS - COMP/OP AGG
	PRO-JECT						
	LOG						
	OTHER:						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)
	ANY AUTO						BODILY INJURY (Per person)
	ALL OWNED AUTOS						BODILY INJURY (Per accident)
	SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident)
	HIRED AUTOS						
	NON-OWNED AUTOS						
	UMBRELLA LIAB						EACH OCCURRENCE
	EXCESS LIAB						AGGREGATE
	DED						
	RETENTION						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE
	ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT
							E.L. DISEASE-EA EMPLOYEE
							E.L. DISEASE-POLICY LIMIT
A	Contractor Poll			PLS7589208	12/14/2013	12/14/2016	Limit - Aggregate \$10,000,000
				Contractor's Pollution			Each Incident Limit \$1,000,000
				SIR applies per policy terms & conditions			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: Lease agreement for FBO, #R2004 1990 dated September 30 2004, between Signature Flight Support Corp and Certificate Holder; Fuel Farm Facilities Lease Agreement, #R99 2004D dated October 19, 1999, between Aircraft Service International, Inc and Certificate Holder. Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents are included as Additional Insured as required by written contract, but limited to the operations of the Insured under said contract, per the applicable endorsement. A waiver of subrogation is granted in favor of Certificate Holder as required by written contract but limited to the operations of the Insured under said contract.

CERTIFICATE HOLDER	CANCELLATION
Palm Beach County c/o Insurance Tracking Services, Inc. (ITS) P.O. Box 20270 Long Beach CA 90801 USA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
	Aon Risk Services Northeast, Inc.

Holder Identifier :

Certificate No : 570055436858