PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: October 08, 2019	[X] Consent	[]	Regular	
Department: Risk Management Submitted By: Risk Management Submitted For: Airports	[] Ordinance	[]	Public Hearing	
I. EXE	CUTIVE BRIEF			
Motion and Title: Staff recommendate liability insurance, for the period Octopurchased through the County's contraction of \$132,528.	ober 10, 2019 throu	igh Octo	ober 10, 2020; to be	
Summary: The total cost of \$132,528 increase over the expiring premium for numerous large losses throughout the has increased significantly in cost. While as a 15% increase in premium, ours recounty's proactive approach to controll	the same \$200,000 industry within the lessimilar sized agend remains very reason	,000 lim ast yea ies are d able du	nits of liability. Due to r, the aviation market experiencing as much le in large part to the	
Background and Justification: The liability insurance on behalf of the Departure as well as the County's three general a County's contracted insurance broker (050/LJ).	rtment of Airports, co aviation airports. Co	vering tl verage	he operations at PBIA is placed through the	
Attachments:				
1) Budget Availability Statement, Li	iability Insurance Re	newal -	Airports	
Recommended By:	t Director		9/1./19 Date	
Approved By: Name of Approved By: Assistant County	Administrator		9/14/19 Date	

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact

Fiscal Years	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>
Capital Expenditures Operating Costs External Revenues Program Income (County) In-Kind Match (County)			\$132,528		
Net Fiscal Impact			\$132,528		
# ADDITIONAL FTE POSITIONS (Cumulative)	0	0	0	0	0
Is Item Included in Curr Does this Item include t			Yes <u>X</u> Yes	No No	
-	No.: Fund No.: Fund	4100 DeptDept	120 Unit		Obj <u>4501</u> Obj
B. Recommended Sources of Funds/Summary of Fiscal Impact:					
C. Departmental Fis	B				
A. OFMB Fiscal and		W COMMEN ev. and Cont		s:	
Solit CoFM 9/17 B. Legal Sufficiency	ellele BDCall		entract Dev. ai	ewolus nd Control	9119119
Assistant Cour	lujd				
C. Other Departmen	t Review:				
 Departmen	t Director				

REVISED 9/03 ADM FORM 01 (THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.)

BUDGET AVAILABILITY STATEMENT RISK MANAGEMENT

REQUESTED BY: Risk Management
REQUESTED FOR: Airport Liability Insurance Renewal
REQUESTED AMOUNT: \$132,528 AGENDA DATE: 10/08/2019

BUDGET ACCOUNT NUMBER:

NORTH COUNTY

Fund: 4100	Dept: 120	Unit: VARIOUS Obj: 4501	Prog.	5
	-			Per.

BAS APPROVED BY:	m5	Cum DATE: 9/4/19
LANTANA	1230	\$6,626.40
GLADES	1240	\$6,626.40
ADMINISTRATION	1250	\$1,325.28
OPERATIONS INDIRECT	1280	\$1,325.28
AIRSIDE	1320	\$46,384.80
GROUND TRANSPORTATION	1340	\$13,252.80
FIS TERMINAL	1410	\$1,325.28
TERMINAL	1430	\$21,204.48
AVIATION	1451	\$6,626.40
NON-AVIATION	1452	\$1,325.28

1550 \$26,505.60

 $G: \c CASUALTY \c COUNTY'S\ INSURANCE \c COVERAGE\ FOLDERS \c Airport\ Liability \c BAS\ Airport\ docx$