

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: December 17, 2019 [X] Consent [] Regular
[] Ordinance [] 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 receive and file a First Amendment to the Independent Contractor Agreement between Palm Beach County and Kiril Zahariev, USA Swimming Program at North County Aquatic Complex, to increase the amount of the FY2019 agreement (R2018-2015) by \$9,000 for a total amount not to exceed \$169,000 for the period October 1, 2018 through September 30, 2019.

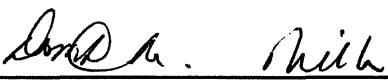
Summary: This Independent Contractor Agreement has been fully executed on behalf of the Board of County Commissioners (BCC) by the Director of the Parks and Recreation Department in accordance with Resolution 94-422, amended by Resolutions 2002-2103, 2007-0409, 2012-0168 and 2017-0822. The Department is now submitting this Agreement in accordance with County PPM CW-O-051, which requires all delegated agreements to be submitted by the initiating Department to the BCC as a Receive and File agenda item. District 1 (AH)

Background and Justification: A resolution providing authority to execute Independent Contractor Agreements with recreation instructors and sports officials (Resolution 94-422, amended by Resolutions 2002-2103, 2007-0409, 2012-0168 and 2017-0822) was adopted by the BCC to streamline the hiring process. The BCC granted the Director of Parks and Recreation authority to execute Independent Contractor Agreements and Amendments with recreation instructors and sports officials up to \$10,000, with contracts of \$10,000 or more requiring the County Administrator's approval.

The Agreement attached has been executed on behalf of the BCC by the Director of the Parks and Recreation Department in accordance with the authority delegated by the BCC, and is now being submitted to the BCC to receive and file.

Attachment: First Amendment to the Independent Contractor Agreement

Recommended by:  11-8-19
Department Director Date

Approved by:  11/20/2019
Assistant County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2020	2021	2022	2023	2024
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____
Is Item Included in Current Budget:	Yes _____		No _____		<u>X</u>
Does this item include use of federal funds?	Yes _____		No _____		<u>X</u>

Budget Account No.: Fund _____ Department _____ Unit _____
Object _____ Revenue Source _____ Program _____

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

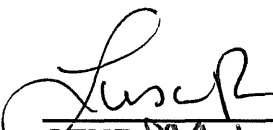
The revenue and expenses for this agreement were recorded in FY2019.

Contractor	Revenue	Expense
Kiril Zahariev	\$212,740	\$168,616
Totals	\$212,740	\$168,616

C. Departmental Fiscal Review: 

III. REVIEW COMMENTS

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

 11/14/19
OFMB 11/14 BR 11/14

 11/19/19
Contract Development & Control
11/19/19

B. Legal Sufficiency:

Anne Deland 11-20-19
Assistant County Attorney

C. Other Departmental Review:

Department Director

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

FIRST AMENDMENT TO INDEPENDENT CONTRACTOR AGREEMENT BETWEEN PALM BEACH COUNTY AND KIRIL ZAHARIEV.

THIS FIRST AMENDMENT TO INDEPENDENT CONTRACTOR AGREEMENT,” is made and entered into on Oct 18 2019, by and between the Board of County Commissioners of Palm Beach County, Florida, hereinafter referred to as “COUNTY,” and Kiril Zahariev, an Independent Contractor, hereinafter referred to as “CONTRACTOR”.

WITNESSETH:

WHEREAS, on September 24, 2018, COUNTY and CONTRACTOR entered into an Agreement (R2018-2015) for the provision of providing a USA Swimming Program at North County Aquatic Complex; hereinafter referred to as the “Agreement”; and

WHEREAS, under the Agreement the COUNTY is to provide funding in an amount not to exceed One Hundred Sixty Thousand Dollars (\$160,000) for the USA Swimming Program instructor services; and

WHEREAS, CONTRACTOR’s fee is the sum of 80% of the paid enrollment fees for the Program; and

WHEREAS, the program has exceeded revenue projections of One Hundred Ninety One Thousand Eight Hundred Eighty Dollars (\$191,880); and

WHEREAS, the total Agreement amount required to be paid to CONTRACTOR needs to be increased by Nine Thousand Dollars (\$9,000); and

WHEREAS, both parties desire to amend this Agreement.

NOW THEREFORE, in consideration of the mutual covenants and agreements expressed herein, the COUNTY and CONTRACTOR hereby agree as follows:

1. Section 3.a. of the Agreement is hereby deleted in its entirety and replaced with the following: “The total amount payable by COUNTY under this Agreement for the services to be performed hereunder is not to exceed One Hundred and Sixty Ninety Thousand Dollars (\$169,000.00).”
2. Except as provided herein, each and every other term of the Agreement shall remain in full force and effect and the Agreement is reaffirmed as modified herein.

REMAINDER OF PAGE LEFT INTENTIONALLY BLANK

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the date first written above.

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS:

By: Eric Call 9-24-19
Signature Date
Director / Assistant Director
Palm Beach County Parks and Recreation Department

If Agreement Value Exceeds \$10,000.00,:

County Administrator

W. Baker 10/8/19
Signature Date

WITNESS

Michael Colborn 9-19-19
Signature Date
Michael Colborn
Print

CONTRACTOR - Kiril Zahariev.

By: Kiril Zahariev 09/19/19
Signature Date
KIRIL ZAHARIEV
Print
Head Coach
Title

APPROVED AS TO
FORM AND LEGAL SUFFICIENCY:

County Attorney

Anne Delgado 9-24-19
Signature Date

APPROVED AS TO
TERMS & CONDITIONS:

Division Director

Sam Che 9-24-19
Signature Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/13/2019

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 have ADDITIONAL INSURED provisions or 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 Risk Management Services, Inc. P.O. Box 32712 Phoenix, AZ 85064-2712	1-602-840-3234	CONTACT NAME: PHONE (A/C, No, Ext): 6028403234 FAX (A/C, No): E-MAIL ADDRESS: info@theriskpeople.com
INSURED JUPITER DRAGONS SWIM TEAM USA Swimming, Inc dba USA Swimming KIRIL ZAHARIEV 861 TONEY PENNA DRIVE JUPITER, FL 33458-7538	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: NATIONAL CAS CO	11991
	INSURER B: Nationwide Life Insurance Company	66869
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 56940634 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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<div>COMMERCIAL GENERAL LIABILITY</div> <div><div>CLAIMS-MADE</div><div><input checked="" type="checkbox"/> OCCUR</div></div> <div><input checked="" type="checkbox"/> Participant Legal</div> <div><input checked="" type="checkbox"/> Liability Included</div> <div>GEN'L AGGREGATE LIMIT APPLIES PER:</div> <div><div>POLICY</div><div><input type="checkbox"/> PRO-JECT</div><div><input checked="" type="checkbox"/> LOC</div></div> <div>OTHER:</div>	<div>X</div> <div>X</div>	KK00000007443500	01/01/19	01/01/20	<div>EACH OCCURRENCE</div> <div>\$ 1,000,000</div> <div>DAMAGE TO RENTED PREMISES (Ea occurrence)</div> <div>\$ 1,000,000</div> <div>MED EXP (Any one person)</div> <div>\$ 5,000</div> <div>PERSONAL & ADV INJURY</div> <div>\$ 1,000,000</div> <div>GENERAL AGGREGATE</div> <div>\$ UNLIMITED</div> <div>PRODUCTS - COMP/OP AGG</div> <div>\$ 2,000,000</div> <div>Abuse/Molestation</div> <div>\$ 1,000,000</div>
	<div>AUTOMOBILE LIABILITY</div> <div><div>ANY AUTO</div><div><div>OWNED AUTOS ONLY</div><div><input type="checkbox"/> SCHEDULED AUTOS</div></div><div><div>HIRED AUTOS ONLY</div><div><input type="checkbox"/> NON-OWNED AUTOS ONLY</div></div></div>					<div>COMBINED SINGLE LIMIT (Ea accident)</div> <div>\$</div> <div>BODILY INJURY (Per person)</div> <div>\$</div> <div>BODILY INJURY (Per accident)</div> <div>\$</div> <div>PROPERTY DAMAGE (Per accident)</div> <div>\$</div>
A	<div>UMBRELLA LIAB</div> <div><div><input checked="" type="checkbox"/> EXCESS LIAB</div><div><input type="checkbox"/> CLAIMS-MADE</div></div> <div>DED</div> <div>RETENTION \$</div>	<div>X</div> <div>X</div>	XK00000007443600	01/01/19	01/01/20	<div>EACH OCCURRENCE</div> <div>\$ 5,000,000</div> <div>AGGREGATE</div> <div>\$ 5,000,000</div>
	<div>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</div> <div>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)</div> <div>If yes, describe under DESCRIPTION OF OPERATIONS below</div> <div>Y/N</div> <div><input type="checkbox"/> N/A</div>					<div>PER STATUTE</div> <div>OTH-ER</div> <div>E.L. EACH ACCIDENT</div> <div>\$</div> <div>E.L. DISEASE - EA EMPLOYEE</div> <div>\$</div> <div>E.L. DISEASE - POLICY LIMIT</div> <div>\$</div>
B	<div>XS Accident-Medical</div>		SPX00000289648	01/01/19	01/01/20	<div>Maximum Limit</div> <div>25,000</div>

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

Verification of General Liability, Excess Liability & Abuse/Molestation coverage for COVERED ACTIVITIES (See Attachment) Abuse/Molestation Aggregate on the General Liability Policy is \$5,000,000, Abuse/Molestation is excluded on the Excess Liability Policy. Excess Medical/Dental Accident coverage provided for members only. 30 Day Notice of Cancellation Per Policy Provisions. Certificate Holder is included as Additional Insured per attached ADDITIONAL INSURED ENDORSEMENT EFFECTIVE CERTIFICATE ISSUE DATE.

CERTIFICATE HOLDER	CANCELLATION
Palm Beach County Board of County Commissioners Political Subdivision of the State of Florida 2700 6th Avenue South Lake Worth, FL 33461 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 Carolyn J. Blumit

AGENCY K&K Insurance Group, Inc.		NAMED INSURED USA SWIMMING, INC. DBA USA Swimming Etal MEMBER NO: _____
POLICY NUMBER KKO-74435-00		
CARRIER SEE ACORD 25	NAIC CODE	
EFFECTIVE DATE: SEE ACORD 25		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 2 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

“COVERED ACTIVITIES”

With respect to USA Swimming member clubs, group members, member coaches, volunteers and additional insured owners/lessors of premises, sponsors and co-promoters, “Covered Activities” are defined as:

1) Swimming meets that have been issued a written sanction or approval. Approval means a permit issued by one of the USA Swimming, Inc. Local Swimming Committees for swimming meets conducted in conformance with USA Swimming, Inc. technical rules in which members and non-members may compete. USA Swimming, Inc. member clubs that either host or participate in a swimming meet that has been issued an approval will be considered an insured provided that all of its athletes or participants and coaches are members of USA Swimming, Inc.

2) Swimming practices, dry land training activities, camps and learn to swim programs where all swimmers or participants are members of USA Swimming, Inc. or United States Masters Swimming and are conducted under direct and active supervision of a member coach. Dry land training activities means weight training, running, calisthenics, exercise machine training, and any other activity for which an insured has received approval from USA Swimming, Inc. or its authorized representative.

3) USA Swimming, Inc. Swim-A-Thons, Fund raising activity which clubs can purchase for lap-athons

4) Approved social events and approved fund raising activities that are social events and activities for which an insured has received approval from USA Swimming, Inc. or its authorized representative.

5) Swimming tryouts. Swimming Tryouts means swimming practices where a swimmer(s) who is not and who has never been a member of USA Swimming, Inc. participates with a USA Swimming, Inc. club for a period not to exceed thirty consecutive days in a twelve month period to determine the swimmer's interest in becoming a member of USA Swimming, Inc.

6) Office premises liability for Member Clubs and LSCs

7) STSC, CPR, and Lifeguard Certifications of USA Swimming member coaches done by USA Swimming member coaches that are member representatives of one of the approved agencies listed on the USA Swimming STSC In-Water Skills Checklist.

8) "Organized practices" that have been reported and a premium has been paid for. Organized practices are defined as recreation league meets hosted by USA Swim Teams with community teams that are not USA Swimming member teams.

ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12:01 A.M. STANDARD TIME)	NAMED INSURED	AGENT NO.
KKO-74435-00	01/01/2019	USA SWIMMING, INC. DBA: USA Swimming Etal	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSUREDS OWNERS AND/OR LESSORS OF PREMISES,
SPONSORS OR CO-PROMOTERS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

The policy is amended to include as an additional Insured any person or organization of the types indicated by an "X" in any boxes shown below, but only with respect to liability arising out of your operations:


- ☒ Owners and/or lessors of the premises leased, rented, or loaned to you, subject to the following additional exclusions:
- a. This insurance applies only to an "occurrence" which takes place while you are a tenant in the premises;

b. This insurance does not apply to "bodily injury" or "property damage" resulting from structural alterations, new construction or demolition operations performed by or on behalf of the owner and/or lessor of the premises;

- c. This insurance does not apply to liability of the owners and/or lessors for "bodily injury" or "property damage" arising out of any design defect or structural maintenance of the premises or loss caused by a premises defect.

With respect to any additional insured included under this policy, this insurance does not apply to any negligence of such additional insured.

- ☒ Sponsors
- ☒ Co-Promoters
- ☐ Any individual person(s) or organization(s) listed below:



AUTHORIZED REPRESENTATIVE

DATE

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