Agenda Item #: 4C-1

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY

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Meeting Date: September 15, 2026 [ ]Consent [ ] Regular
[ ]Ordinance [X] Public Hearing

Department: Office of Emergency Management

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I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: the issuance of a Special Secondary Service Provider Certificate of Public Convenience and Necessity (COPCN) to Cambridge Security Services, Corporation (Cambridge) for the gated community of Broken Sound Club located at 2401 Willow Springs Dr, Boca Raton, Florida.

Summary: Cambridge has applied for a Special Secondary Service Provider COPCN to provide Advanced Life Support (ALS) first response, non-transport services for the gated community of Broken Sound Club. Security agencies for private communities can provide rapid response to medical emergencies and have the capability to provide advanced life support services until the primary ALS agency arrives. The Office of Emergency Management (OEM) has reviewed the application and recommends approval of a Special Secondary Service ALS Provider - Non-Transport COPCN to be issued to Cambridge. The application was in compliance and eligible for a one (1)-time COPCN based on the Palm Beach County (PBC) Code of Ordinances, Chapter 13, Sections 13-22. The COPCN will be issued for operations restricted to the confines of Broken Sound for the period August 18, 2026, and until Cambridge's contractual agreement with Broken Sound is terminated. Boca Raton Fire Rescue is the Primary COPCN holder and has signed a Memorandum of Understanding with Cambridge to coordinate their emergency services at an emergency scene. On July 16, 2026 the Emergency Medical Services (EMS) Advisory Council voted 10-0 to recommend approval to grant Cambridge a Special Secondary Service ALS Provider - Non-Transport COPCN. District 4 (SB)

Background and Policy Issues: To be licensed as an EMS provider by the State of Florida, the provider must obtain a COPCN from each county in which they will operate, in accordance with Chapter 401, Florida Statutes. Special Secondary Service Providers are agencies with contracts to provide non-transport ALS services within communities to provide rapid response to medical emergencies until the primary ALS agency arrives. The PBC Code of Ordinances, Chapter 13, Sections 13-20, requires each Special Secondary Service Provider to obtain a COPCN from the County. Cambridge provides security and ALS first response, non-transport services to three (3) other gated communities in Palm Beach County.

Attachments:

1. Summary Report of COPCN application
2. COPCN Application
3. COPCN (2)
4. Proof of Publication

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Recommended By: Mary Blakeney 8/4/26
Department Director **Date**

Approved By: 8/13/26
Deputy County Administrator **Date**

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact

Fiscal Years	2026	2027	2028	2029	2030
Capital Expenditures					
Operating Costs					
External Revenues	($500)				
Program Income (County)					
In-Kind Match (County)					
Net Fiscal Impact	($500)	*	*	*	*
# ADDITIONAL FTE POSITIONS (Cumulative)					

Is Item Included In Current Budget? Yes X No _____
Is this item using Federal Funds? Yes _____ No X
Is this item using State Funds? Yes _____ No X

Budget Account Exp No: Fund _____ **Dept** _____ **Unit** _____ **Object** _____
Rev No: Fund 0001 **Dept** 660 **Unit** 7110 **RevSc** 2900/4295

B. Recommended Sources of Funds/Summary of Fiscal Impact:
*A onetime application fee of $500 was collected in FY26. Permit fee of $150 per unit will be charged annually. Fiscal impact will depend on number of vehicles.

Departmental Fiscal Review: Myra Chan 7/30/26

III. REVIEW COMMENTS

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

Lisa Mata 8/11/2026
OFMB 8/11 RNF 8/7

Brandi Gracia 8/11/26
Contract Administration 8.10.26

B. Legal Sufficiency:

8/12/26
Assistant County Attorney

C. Other Department Review:

_____
Department Director

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

Palm Beach County
Office of Emergency Management
Special Secondary COPCN Summary Report

Attachment 1

Community: Broken Sound Club (Broken Sound Master Association)

Agency Information

Corporate Name: **Cambridge Security Services**

Name of Agency: **Cambridge Security Services**

Mailing Address: 951 Broken Sound Parkway, Suite 188

Base Station Address: 2701 N.W. 64th Blvd., Boca Raton FL., 33496

Phone#: 954-320-4407

Agency Public Sector ☐ **Private Sector** ☒

Chief's/ Manager's/ Owner's Name: James D'Arcy, COO

Medical Director's Name: Dr. Hillel Z. Harris, MD

Medical Director's Business Address: 5301 South Congress Avenue, Atlantis, FL., 33462-1149

Medical Director's Medical License #: **ME 102298** **Exp. Date:** January 31, 2028

Palm Beach County
Office of Emergency Management
Special Secondary COPCN Summary Report

Application Requirement	Verification	Met Requirements
#1 (13-22.a.5.c) Describe the need and area(s) for the proposed service to be covered by your agency. You must submit copies of any municipal resolution(s), contractual agreements, and Community Association contracts allowing your agency to provide medical response services to any municipality or community.	A letter describing the service area has been submitted by the companies COO. An executed contract between Cambridge Security and Broken Sound Master Association has been submitted. (Attachment 1)	YES
#2 (13-22.b.2.a) The affected Community Association must submit a letter of request prepared and signed by an authorized representative indicating the dates of service coinciding with the effective date and the expiration date of the contract between the Community Association and the applicant. The expiration date may be amended upon renewal of the contract by submitting an updated letter of request to the administrator. The Community Association shall notify the administrator of early termination or an extension of the contract.	Broken Sound Master Association (Broken Sound) provided letter stating a 3-year service window effective 05/31/26. (Attachment 2)	YES
#3 (13-22.b.2.b) A memorandum of understanding that is executed between the applicant and the Primary COPCN Holder.	A fully executed MOU between Cambridge Security has been submitted. (Attachment 3)	YES
#4 (13-22.a.5.f) Copy of proposed rate structure, if any.	Cambridge does not bill for services. (Attachment 4)	N/A
#5 (13-22.a.5.g)(13.22.a.5.h) Applicants for Special Secondary Service Provider must provide a summary history of applicant's EMS performance record, which provides proof that at the time of application, the applicant has demonstrated experience providing	Cambridge sent letter confirming ordinance requirement are met. (Attachment 5)	YES

Application Requirement	Verification	Met Requirements
ALS Service for at least the past three (3) consecutive years. For Special Secondary Service Providers, the applicant must have at least one (1) supervisory or higher level employee who possesses a minimum of three (3) years of experience in pre-hospital ALS Services. Applicants that meet the Staff experience requirement set forth herein, but do not meet the performance record requirement, are eligible for a COPCN with conditions as set forth in the EMS Ordinance.		
#6 (13-22.a.5.i) Disclosure of litigation involving patient care for the past six (6) years which resulted in a judgment, award, or finding in favor of a patient or the complaining party, including case number, nature of the claim and allegations, and a copy of final judgment or award.	There has been no litigation involving patient care for the past six (6) years.	YES
#7(13-22.a.5.j) Proof of satisfactory completion of all federal, state, and/or local agency vehicle inspections for the last three (3) years including copies of all deficiency reports.	Letter from Florida Department of Health showing successful Compliance Site Survey conducted in December 2024. Verified by State that this was latest inspection. Verified that all County inspections by done by OEM have passed with no deficiency reports. (Attachment 7)	YES
#8 (13-22.a.5.k) Documentation substantiating the implementation of a formal quality assurance system consistent with Florida Statute Section 401.265 and Rule 64J-1.004(3b), Florida Administrative Code, as may be amended.	Cambridge Security Services provided: *Quality Assurance Program information contained within the SOP document (Attachment 13)	YES
#9 (13-22-a.5.n) The applicant must provide a certified letter from the COPCN Holder's Chief	Letter provided by James D'Arcy, COO.	YES

Palm Beach County
Office of Emergency Management
Special Secondary COPCN Summary Report

Application Requirement	Verification	Met Requirements
Executive Operating Officer or Fire Chief that the applicant has met all applicable federal, state, and local requirements pertaining to the delivery of EMS.	(Note- Language stating same, as well as notarization letter contained with the COPCN application) (Attachment 9)	
#10 (13-22.a.5.p) Management Plan: Provide information on how the following business functions will be conducted and managed: a) employee and driver training programs, b) complaint handling system, c) system for handling accidents and/or injuries, and d) vehicle maintenance system.	Applicant provided policies regarding all requirements mentioned. (Attachment 10)	YES
#11(13-22.a.5.q) Copy of current State Emergency Medical Services (EMS) license(s) and/or current COPCN, if any.	Advanced Life Support Service License provided #10010 expires 12/12/2026. Current COPCN's for The Club at Admirals Cove, Addison Reserve, and the Village at Admirals Cove. (Attachment 11)	YES
#12 (13-22.a.5.r) The Medical Director must be a Florida licensed physician. Provide a copy of a fully executed contract or agreement. Include copies of the current DEA and Florida Physician's License. Must meet requirements of 64J-1.004, F.A.C.	Dr. Hillel Z. Harris, MD, ME102298, expires 01/31/28 Contract with Cambridge provided Controlled substance license expires 10/31/28 (Attachment 12)	YES
#13 (13-22.a.5.s) (13.22.b.2.c) Copy of applicant's standard operating procedures (SOPs) and protocols relating to EMS that have been approved by the applicants Medical Director, and confirmation that the Medical Protocols have been approved by the Primary COPCN Holder's Medical Director for the applicable Area.	Letter from Dr Harris that Cambridge has adopted the PBCFR EMS protocols. Letter provided by Dr. Jeniel Parmar, Medical Director for BRFR, that he approves of Cambridge using PBCFR protocol. (Attachment 13)	YES
#14 (13-22.a.5.s) A letter from your Medical Director stating your agency has adopted the State-approved countywide Trauma Transport Protocols.	Letter provided by Dr. Hillel Harris stating Trauma Transport protocols have been adopted (Attachment 14)	YES

Palm Beach County
Office of Emergency Management
Special Secondary COPCN Summary Report

Application Requirement	Verification	Met Requirements
#15 (13-22.a.5.t) Copy of profile sheet(s) relating to current Florida State license(s), if any, or the equivalent Information sheet listing all of the agency's vehicles, if any.	State Department of Health profile sheet submitted 3 vehicles listed on State profile report. (Attachment 15)	YES
#16 (13-22.a.5.v) Personnel roster. Personnel must meet all requirements of certification and training referred to in 64J-1.020, Florida Administrative Code ("F.A.C."). The applicant must have at least one (1) supervisory or higher level employee who possesses a minimum of three (3) years of experience in pre-hospital ALS Services.	Personnel roster provided with expiration dates and PMD numbers. (Attachment 16)	YES
#17 (13-22.a.5.x) A radio system agreement between the applicant and Palm Beach County, through its Facilities Development and Operations Department. The applicant must meet all requirements set forth in the agreement. The radio agreement must be executed prior to submittal of the COPCN application.	Amended and Restated Agreement with Palm Beach County to access EMS and Common Talk groups for the Public Safety Radio System and interoperable communications (Attachment 17)	YES
#18 (13-22.a.5.y) Insurance verification. A copy of an insurance policy, a self-insurance policy, or a Certificate of Insurance is acceptable, so long as the agency meets the minimum insurance limits as required by Section 64J-1.014(a), F.A.C. There must be a 30-day cancellation notice and Palm Beach County shall be shown as the certificate holder.	HUB International Insurance Services *Expiration dates for all types of insurance: Various dates (Attachment 18)	YES
#19 (13-22.a.5.e) The financial information of the applicant to ensure financial ability to provide and continue to provide service to the area. Such financial information shall include copies of the applicant's past two (2) Medicare audits if any. Privately held entities must provide copies of the past	Acknowledgement form submitted by Broken Sound Master Association N/A Medicare audits – non transport (Attachment 19)	YES Financial statements received on 07/06/26

Application Requirement	Verification	Met Requirements
three (3) years of audited financial statements of the company and its parent company or holding company if any. For Special Secondary Service Provider applicants only, if such company does not have audited financial statements, then reviewed financial statements shall be acceptable, provide the applicant also submits a written acknowledgment from the affected Community Association, signed by an authorized representative, confirming that the Community Association acknowledges and accepts that the applicant does not have audited financial statements and has submitted with its COPCN application reviewed financial statements in lieu of audited financial statements. For purposes of this Division a parent company or holding company shall mean any person, corporation or company holding, owning or in control of more than ten (10) percent stock or financial interest of another person, corporation or company.		
#20 (13-22.a.5.z) A non-refundable application fee in the amount of five hundred dollars ($500.00) made payable to: "Palm Beach County Board of County Commissioners.	Check included for $500, check copy and voucher included (Attachment 20)	YES

Staff Recommendations

The Office of Emergency Management (OEM) has reviewed Cambridge Security Services Corp. application and recommends approval of a Special Secondary Service ALS Provider - Non-Transport COPCN for Broken Sound Club.

ATTACHMENT 2

PALM BEACH COUNTY

OFFICE OF EMERGENCY MANAGEMENT
EMERGENCY MEDICAL SERVICES

APPLICATION FOR SPECIAL SECONDARY SERVICE PROVIDER CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY (COPCN)

Section 1:

X Applying for **new** Special Secondary Service Provider Certificate of Public Convenience and Necessity (COPCN) with an Advanced Life Support (ALS) Endorsement and an ALS Non-transport Service Endorsement

Specific Community/Area to be covered :
BROKEN SOUND MASTER ASSOCIATION
2701 N.W. 64th BLVD., BOCA RATON, FL. 33496

Proposed start date of services: TBD - Once COPCN is approved

Minimum number of non-transport ALS Vehicles that will be dedicated, operationally available, and fully staffed in Palm Beach County, in accordance with Chapter 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code (FAC), and any other applicable laws, to provide the applicable services: 1

SPECIAL SECONDARY SERVICE PROVIDER Provides ALS Non-transport Service within a Community until the Primary Service Provider arrives. Community is defined as a development, subdivision, or business campus. For a fire department serving as a Special Secondary Service Provider, Community means an identifiable geographic area served by the fire department, and references herein to a Community Association are not applicable. A Special Secondary Service Provider must obtain a COPCN for each Community it serves and the term of the COPCN terminates automatically upon the termination or expiration of the COPCN Holder's contract for service with the Community Association, or upon notice from the Community Association. A Special Secondary Service Provider must also obtain, and maintain, a memorandum of understanding (MOU) between the applicant and the Area's Primary Service Provider to coordinate emergency services at an emergency scene.

Section 2: AGENCY INFORMATION

Exact full and complete legal name of Agency that is applying for and will hold the COPCN
CAMBRIDGE SECURITY SERVICES

951 BROKEN SOUND PARKWAY, SUITE 188
BOCA RATON, FL. 33487

Mailing address BSMA - 2701 N.W. 6th BLVD., BOCA RATON, FL 33496

Central place of business to support Palm Beach County:

951 Broken Sound Parkway NW, Suite 188, Boca Raton, FL 33487790194

Phone # 954-320-4407

Agency is public sector _____ or private sector X

Fire Chief or Chief Executive Operating Officer James J. D'Arcy

Medical Director's name Hillel Z. Harris

Medical Director's business address 5301 S. Congress Ave., Atlantis, FL 33462

Medical Director's Medical License# ME 102298 Exp. Date 1/31/2028

If applicant is a private sector agency, provide a list of all owner(s), officers, directors, primary shareholders. Include each person's position/interest and business address

Section 3: ATTACHMENTS REQUIRED

Applicants shall submit the application for COPCN as set forth in Chapter 13, Article II, Division 1, of the Palm Beach County Code (EMS Ordinance) and satisfy all requirements therein. Applicants shall also provide satisfactory completion of the following requirements. **Please be sure to include with the Application, as separately numbered Attachments in a three (3) ring binder, the following:**

1. Describe the need and Area(s) for the proposed service to be covered by your Agency. You must submit copies of any Community Association contracts allowing your Agency to provide medical response services to the Community.

2. The affected Community Association must submit a letter of request prepared and signed by an authorized representative indicating the dates of service coinciding with the effective date and the expiration date of the contract between the Community Association and the applicant. Should said contract be renewed or its expiration date be extended or amended, the COPCN's expiration date may be amended to coincide with the new contract expiration date, upon the applicant submitting to the Administrator a copy of the contract renewal, extension or amendment, and an updated letter of request from the Community Association. The applicant shall, and the Community Association may, notify the Administrator of an early termination of the contract.

3. A memorandum of understanding that is executed between the applicant and the Primary Service Provider COPCN Holder to coordinate emergency services at an

emergency scene, including dispatch protocols, the roles and responsibilities of Special Secondary Service Provider personnel at an emergency scene, and the documentation required for Patient care rendered.

4. Copy of current fee schedule, if any.

5. Applicants for Special Secondary Service Provider COPCNs must provide a summary history of applicant's EMS performance record, which provides proof that at the time of application, the applicant has demonstrated experience providing ALS Service for at least the past three (3) consecutive years. For Special Secondary Service Providers, the applicant must have at least one (1) supervisory or higher level employee who possesses a minimum of three (3) years of experience in ALS Services.
Applicants that meet the Staff experience requirement set forth herein, but do not meet the performance record requirement, are eligible for a COPCN with conditions as set forth in the EMS Ordinance.

6. Disclosure of litigation involving Patient care, for the past six (6) years which resulted in a judgment, award, or finding in favor of a Patient or the complaining party, including case number, nature of the claim and allegations, and a copy of final judgment or award.

7. Proof of satisfactory completion of all federal, state, and/or local agency vehicle and staff inspections for the last three (3) years including copies of all deficiency reports.

8. Records substantiating the implementation of a formal quality assurance system consistent with Section 401.265, Florida Statutes, and Chapter 64J-1, FAC, as may be amended.

9. The applicant must provide a certified letter from the COPCN Holder's Chief Executive Operating Officer or Fire Chief representing that the applicant has met and will continue to meet all applicable federal, state and local requirements pertaining to the delivery of EMS.

10. Management Plan: Provide information on how the following business functions will be conducted and managed: a) employee and driver training programs, b) complaint handling system, c) system for handling accidents and/or injuries, and d) vehicle maintenance system.

11. Copy of current State of Florida Emergency Medical Services (EMS) license(s) and any current COPCNs.

12. The Medical Director must be a Florida licensed physician. Provide a copy of a fully executed contract or agreement. Provide copies of current DEA and Florida Physician's License. Must meet requirements of Rule 64J-1.004, FAC, and Section 401.265, Florida Statutes.

13. Copy of applicant's standard operating procedures (SOPs) and protocols relating to EMS that have been approved by applicant's Medical Director, and confirmation that

the Medical Director of the Primary Service Provider COPCN Holder has approved all EMS-related SOPs and protocols.

14. A letter from applicant's Medical Director confirming that your Agency has adopted the State-approved countywide Trauma Transport Protocols.

15. Copy of profile sheet(s) relating to current Florida State license(s), if any, or the equivalent information sheet(s) listing all of the Agency's vehicles, if any.

16. Personnel roster. A list of the names of personnel, and their EMS certifications, certification numbers and expiration dates, that the applicant will dedicate to provide the applicable services in Palm Beach County. Personnel must meet all certification and training requirements in Chapter 401, Florida Statutes, Chapter 64J-1, FAC, and any other applicable laws.

17. A radio system agreement between the applicant and Palm Beach County, through its Facilities Development and Operations Department. The applicant must meet all requirements as set forth in the agreement. The radio system agreement must be executed by the applicant prior to submittal of the COPCN application.

18. Insurance verification. A copy of an insurance policy, a self-insurance policy, or a Certificate of Insurance is acceptable. Documentation must be current, and include a schedule of vehicles covered, if the policy is not blanket coverage or self-insurance. Limits of liability, effective, and expiration date must be indicated on the proof of coverage. **Palm Beach County shall be shown as the certificate holder with a mailing address of 301 N. Olive Ave, West Palm Beach, FL 33401.**
Insurance coverage is required for claims arising out of injury or death of persons and damage to the property of others resulting from any cause for which applicant's business or service would be liable. Non-government operated service vehicles shall be insured for the sum of at least $200,000.00 for injuries to or death of any one person arising out of any one accident; the sum of at least $300,000.00 for injuries to or death of more than one person in any one accident; and, for the sum of at least $50,000.00 for damage to property arising from any one accident. Government operated service vehicles shall be insured for at least the limitation amounts set forth in Florida Statutes Section 768.28, as may be amended, for any and all claims or judgments. Compliance with these insurance requirements is required at all times while operating under the COPCN. Evidence of compliance is required at the time of application and thereafter as requested by the Office of Emergency Management. There must be a 30 calendar day cancellation notice and Palm Beach County shall be shown as the certificate holder.

19. The financial information of the applicant relating to financial ability to provide and continue to provide service to the Area. Such financial information shall include copies of the applicant's past two (2) Medicare audits if any. Government entities must provide the past three (3) years Comprehensive Annual Financial Reports via hard copy, or electronically. Privately held entities must submit audited financial statements, if any, of the company and of its parent company or holding company if any, for the past three (3) years. For Special Secondary Service Provider applicants

only, if such company does not have audited financial statements, then reviewed financial statements shall be acceptable, provide the applicant also submits a written acknowledgment from the affected Community Association, signed by an authorized representative, confirming that the Community Association acknowledges and accepts that the applicant does not have audited financial statements and has submitted with its COPCN application reviewed financial statements in lieu of audited financial statements. For purposes of this Division a parent company or holding company shall mean any person, corporation or company holding, owing or in control of more than ten (10) percent stock or financial interest of another person, corporation or company.

20. A non-refundable application fee in the amount of five-hundred dollars ($500.00) made payable to: "Palm Beach County Board of County Commissioners."

Section 4: AUTHORIZED SIGNATURE

I, the undersigned representative of the applicant Agency, do hereby attest and represent that said Agency meets, and shall continue to meet, all the requirements of Palm Beach County's EMS Ordinance, as well as all the requirements for the operation of an emergency medical service as provided for in Chapter 401, Part III, Florida Statutes, and Chapter 64J, FAC. I understand and acknowledge that any violation of the EMS Ordinance may subject the Agency to corrective or other disciplinary action. Further, I understand that an annual vehicle Permit fee of one hundred fifty dollars ($150.00) per vehicle shall be paid for any EMS vehicle or ambulance utilized in Palm Beach County.

I, the undersigned representative of the applicant Agency, further attest that this Agency is in compliance with the State of Florida EMS Communications Plan.

I, the undersigned representative of the applicant Agency, hereby submit this application on behalf of the applicant Agency, and hereby affirm that I am authorized to submit this application on behalf of the applicant Agency and that, to the best of my knowledge, all statements on this application and the included attachments in support of the application are true and correct.

James J. D'Arcy

Printed / Typed Name of Agency Representative

Signature of Agency Representative

5/18/2026

Date

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing application was acknowledged before me by means of ✓ physical presence or ___ online notarization, this 18 day of May, 202 6e, by James D'Arcy (name of person) as COO (title or type of authority) for Cambridge Security Services Corp. (exact legal name of entity on behalf of whom instrument was executed).

Signature of Notary Public
State of Florida

Roxanne Gil
Print, Type or Stamp Commissioned
Name of Notary Public
Personally Known _____ OR Produced Identification _____
Type of Identification Produced:

Notary Stamp/Seal:

ROXANNE GIL
Notary Public - State of Florida
Commission # HH 563774
My Comm. Expires Apr 13, 2029
Bonded through National Notary Assn.

FOR OFFICIAL USE ONLY

Date Application Received 5/18/26

Date Reviewed by EMS Advisory Council_____

Recommended _____ Not Recommended _____

Reason for not recommending: _____

Dated reviewed by BCC_____

Approved _____ Not Approved _____

Reason for not Approving: _____

Attachment 1

CAMBRIDGE SECURITY

May 18, 2026

Re: COPCN Application for Broken Sound Master Association

To Whom It May Concern,
Please know that we are applying for a COPCN for Broken Sound Master Association (BSMA). The Broken Sound Master Association (BSMA) controls the master-association common areas of the Broken Sound Planned Unit Development in north-central Boca Raton. Officially, BSMA describes itself as the "umbrella" association for a PUD made up of 28 village associations, two apartment communities, Broken Sound Country Club, and three commercial parcels.

In practical boundary terms:

- South side: Yamato Road, including the main community entrance near St. Andrews Boulevard.
- North side: generally toward Clint Moore Road / NW 67th Street.
- West side: generally Jog Road / Powerline Road area.
- East side: generally Military Trail, with the Old Course.

If you have any questions or concerns, please do not hesitate to contact me.

Respectfully submitted,

James J. D'Arcy
Chief Operating Officer

cc: Louis Caplan, Esq.
Sachs Sax & Caplan
6111 Broken Sound Pkwy NW, Suite 200
Boca Raton, FL 33487

SERVICE AGREEMENT

THIS SERVICE AGREEMENT is made as of this _____ day of _____, 202_ between **CAMBRIDGE SECURITY SERVICES CORPORATION**, whose corporate address is 951 Broken Sound Parkway NW, Suite 188, Boca Raton, FL 33487 (**"CAMBRIDGE"**), and **BROKEN SOUND MASTER ASSOCIATION** whose address is 2701 NW 64th Blvd, Boca Raton, FL 33496 **("CLIENT").**

WITNESSETH:

WHEAREAS, CLIENT desires to engage the services of CAMBRIDGE as an independent contractor and not as an employee to perform the services described herein (the "Services") for CLIENT; and

WHEAREAS, CAMBRIDGE desires to perform the Services as requested and CLIENT agrees to use CAMBRIDGE exclusively for said Services during the term Hereof.

NOW, THEREFORE, for and in consideration of the promises and the undertakings hereinafter set forth and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

1. **Recitals.** The recitals set forth above and any exhibits hereto are true and correct and each is incorporated herein by reference.

2. **Services**. During the term of this Agreement and any extensions thereof, CAMBRIDGE shall perform or furnish persons designated and qualified to perform the Services described in **Exhibit "A"** attached hereto and made a part hereof for all purposes, and CAMBRIDGE agrees to perform the Services for CLIENT subject to the terms and conditions contained herein. Services are being provided only to the CLIENT. No other person or entity is, nor is there intended to be, a third-party beneficiary under this agreement. CAMBRIDGE is assuming no duty to protect any other persons or entities or their property.

3. **Term and Termination.** This Agreement shall commence on _____ and shall continue for a 3-year term ending on _____. The Agreement shall automatically renew for one (1) year at the expiration of each term. CAMBRIDGE and CLIENT may cancel this Agreement, with or without cause, after the completion of year two, with 60 days' written notice to the other party.

4. **Compensation**. CAMBRIDGE will remit invoices to CLIENT during the term of this Agreement for CAMBRIDGE's performance of the Services in the amounts set forth in **Exhibit "A"**. The invoices will be payable by CLIENT upon receipt, without deduction, setoff or holdback of any kind whatsoever. Any payments not received by CAMBRIDGE within 30 days from the posting of an invoice will accumulate interest at the rate of 1 ½ % per month on the unpaid balance. In addition, a late payment fee of $50.00 will be applied to each delinquent invoice. Claims by CLIENT for losses or damages shall be made separately and independently from said invoices. CLIENT shall submit any such claims to CAMBRIDGE and/or the appropriate insurer for processing. Any deduction made from a CAMBRIDGE invoice will be considered a breach of this Agreement by CLIENT. CLIENT represents that it is financially solvent. CLIENT represents that CLIENT shall be responsible for payment of all amounts invoiced by CAMBRIDGE hereunder. Notwithstanding anything to the contrary herein, CAMBRIDGE may terminate this Agreement at any time after forty-eight (48) hours prior written notice to CLIENT due to CLIENT's failure to pay any moneys due hereunder, or if at any time during the term if this Agreement shall be filed by or against CLIENT in any court, pursuant to any statute, a petition in Bankruptcy, insolvency, reorganization

Initial
Initial

or the appointment of a receiver to receive all or a portion of the CLIENT's property. In such an event CLIENT agrees to pay, as liquidated damages, a sum equal to twice the actual amount owed to CAMBRIDGE by CLIENT as of the last date of service. For purposes of this paragraph, time is of the essence.

5. **Bill Rate Escalation.** The bill rates for all positions described in **Exhibit "A"** shall remain in effect through _____. On each anniversary of this Agreement, the fees set forth herein shall be adjusted by the percentage change in the Consumer Price Index for Palm Beach County Average, as published by the Bureau of Labor Statistics, compared to the index published 12 months prior.

Cap/Floor Clause: Any increase shall not exceed 3% per year, and the price shall not be adjusted downward.

In addition to the foregoing, in the event that any Federal, State or local law, rule or regulation, result in an increase in the cost of labor and services provided by CAMBRIDGE under this Agreement, including without limitation an increase in minimum hourly wage to an amount that exceeds the then existing hourly wage rates, CAMBRIDGE reserves the right, in in its sole discretion, to escalate bill rates for all positions described in **Exhibit "A"** to reflect such increase in costs. In the event of a change in any bill rates for services provided under this Agreement, CAMBRIDGE will provide CLIENT with written notice of the bill rate change. CLIENT shall then have 10 days to approve the billing rate change in writing, or to terminate the Agreement by providing 30 days written notice. In the event that the CLIENT fails to object to the bill rate change in writing within 10 days of receipt, then such bill rate change shall be deemed effective as of the date set forth in such notice.

6. **Independent Contractor Status.** CLIENT and CAMBRIDGE understand and agree that CAMBRIDGE's status under this Agreement is that of an independent contractor and that CAMBRIDGE's status shall in no way be deemed to be that of an employee of CLIENT or any of its affiliates.

7. **Proof of Business License.** CAMBRIDGE represents that CAMBRIDGE and all of its personnel have current state, county, city, and local licenses, as applicable, in all names under which conducting business in the relevant area, and that all of its employees have been properly registered and that all other regulatory governmental authorities and state departmental agency requirements have been met and are current with the State of Florida, as required.

8. **Other Clients.** CAMBRIDGE may represent, perform services for, and be employed by such clients, persons, or companies other than CLIENT, as CAMBRIDGE, in its sole discretion, may determine.

9. **Limited Liability.**

   a. It is understood that insurance, if any, (other than provided in paragraph 11 hereof) shall be obtained by the CLIENT and that the amounts payable to CAMBRIDGE hereunder are based upon the value of the Services, and the scope of liability as herein set forth are unrelated to the value of the CLIENT's property or the property of others located in CLIENT's premises. CAMBRIDGE makes no guarantee or warranty, including any implied for loss, damage or injury due directly or indirectly to occurrences, or consequences therefrom, which the Services are designated to detect or avert. CAMBRIDGE shall not be liable to Client, any of Client's customers or any persons not a party to this Agreement for any bodily injuries, including death or property damage. CAMBRIDGE shall have no liability for any injury, claim, loss, death or cause of action arising from a slip, trip or fall while on or near the premises of CLIENT. Without limiting

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the generality of the foregoing, it is expressly understood and agreed that CAMBRIDGE is not responsible for performing any maintenance services including but not limited to elevator or escalator maintenance, building upkeep, garbage or debris removal and water removal. Notwithstanding anything to the contrary herein it is agreed that any additional insured or indemnity provision throughout this Agreement applies only to claims arising solely from the direct negligent acts of CAMBRIDGE employees while performing agreed upon duties as licensed security guards. The parties agree that the services furnished under this Agreement shall be in conformity with practices that are generally current in the security industry. CAMBRIDGE's responsibility is solely limited to providing physical security services under the terms and conditions set forth herein.

b. CLIENT represents and warrants that they have solely determined the nature and number of security officers at CLIENT's location. The security officers furnished by CAMBRIDGE shall perform such services as agreed upon in this Agreement. If the CLIENT alters any instructions or directions given by CAMBRIDGE to any security officers or if the CLIENT assumes any supervision of the security officers, the CLIENT shall be solely liable for any and all consequences thereof and agrees to indemnify, defend and hold harmless CAMBRIDGE from and against any and all losses, claims, expenses or damages arising from or relating to the actions or omissions of such security officers. No suit or action shall be brought against CAMBRIDGE more than one (1) year after the accrual of the cause of action therefore. The limitation on liability expressed in this Agreement shall inure to the benefit of and apply to all parents (both direct and indirect), subsidiaries and affiliates of CAMBRIDGE. Nothing in this Agreement shall confer any rights upon any person or entity not a signatory to this Agreement.

c. CLIENT agrees to Hold Harmless, Indemnify and defend CAMBRIDGE for and from any losses, (including loss of Life) and property, claims, actions and or suites, that arise from or as a result of CAMBRIDGE periodically and randomly remotely viewing CAMBRIDGE's employees on Camera while performing their duties on the CLIENT's location and or location, as remote viewing is only used as an additional tool to better supervise CAMBRIDGE's employees, and is not intended or able to prevent and or deter any loss and or losss to include loss of life and or property. It is further understood and agreed the CLIENT agrees to hold harmless, indemnify and defend CAMBRIDGE for and from any losses, (including loss of life) and property, claims, actions and or suits, that arise from or as a result of CAMBRIDGE's employees periodically and randomly viewing the CLIENT's cameras, as the viewing of cameras will not prevent loss to include loss of life, and or property.

10. **Client Insurance.** In the event CAMBRIDGE employees are requested or required to use CLIENT vehicles (including, without limitation, golf carts, Segway-like devices, or similar) in the performance of their duties, such vehicles shall be fully insured by the CLIENT and CLIENT assumes any and all liability for any injury to person or damage to property resulting from the use of CLIENT vehicles.

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11. **Cambridge Insurance.** At all times during this Agreement, CAMBRIDGE shall, at its own expense, maintain and provide:

TYPE OF INSURANCE	LIMIT OF INSURANCE
Commercial Liability – Occurrence Form – CG0001 (12/04) Including Security Services Errors and Omissions and Care, Custody and Control Liability	$1,000,000 Per Occurrence $3,000,000 Aggregate
Workers Compensation & Employers Liability	Statutory
CAMBRIDGE Auto Liability including Hired and Non-Owned Auto Liability	$1,000,000
Fidelity / Crime "A" – Employee Dishonesty including 3rd party crime	$1,000,000
Excess Liability over General Liability, Auto Liability and Employers Liability	$5,000,000 Per Occurrence $5,000,000 Aggregate

CAMBRIDGE agrees to name CLIENT on a primary and non-contributory basis as an Additional Insured on CAMBRIDGE's Commercial Liability, Auto Liability and Excess Liability Insurance Plans but only for liability caused solely by direct negligent acts of CAMBRIDGE's employees while performing agreed upon duties as security guards as set forth in this Agreement. To the extent permitted by applicable law CAMBRIDGE agrees to waive its and its insurers right of subrogation on all policies of insurance issued to CAMBRIDGE.

12. **Non-Solicitation.** During the term of this Agreement and for a period of two (2) years after the termination of this Agreement, CLIENT shall not, directly or indirectly, for itself or any other person employ any person who is employed by CAMBRIDGE on the date hereof or who has accepted an offer employment from CAMBRIDGE during the term of this Agreement or solicit or encourage any such person to terminate his employment with CAMBRIDGE or to become affiliated with any other company or business which is engaged in the services business. It is impractical and extremely difficult to fix the actual damages, if any, which may proximately result from CLIENT's breach of this provision. Accordingly, for each breach of this of this provision (per employee), CLIENT shall pay 1/3rd (33.33%) of the employee annual salary to CAMBRIDGE as liquidated damages, and not as a penalty.

13. **Notices.** All notices required or permitted by this Agreement shall be in writing, signed by the party serving the notice, sent to the party at the address shown on the first page hereof or to such other address as either party designates to the other in writing as a place for the service of notice. Such notices shall be sent either via facsimile, via registered or certified United States mail (return receipt requested), or via a nationally recognized air courier service, and shall be deemed given when actually received at the address shown on the postal or air courier receipt. Notices not given in this manner or within the time limits set forth in this Agreement shall be of no effect and may be disregarded by the party whom they are directed.

14. **Indemnification.** Subject to the limitations set forth in this Agreement, CAMBRIDGE agrees to indemnify, defend and hold harmless, CLIENT, and their respective directors, trustees, and officers from

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liability, costs, losses, damages, demands, actions, claims, and expenses (including, by way of example rather than limitation, reasonable attorney's fees and disbursements) which are caused solely by direct negligent acts of CAMBRIDGE employees performing agreed upon duties as security guards as set forth in this Agreement, provided, however, that any such liability shall be limited to making a claim against CAMBRIDGE's insurance as set forth herein.

15. **Attorney's Fees.** If any arbitration, mediation or action at law or equity is necessary to enforce to interpret the terms of this Agreement, the prevailing party shall be entitled to reasonable attorneys' fees, costs, and necessary disbursements in addition to any other relief that may be available. In the event any invoice is placed in the hands of CAMBRIDGE's attorney for collection but no suit, arbitration or formal proceeding is commenced, CLIENT agrees to pay costs of such collection, including attorney's fees.

16. **Governing Law.** This Agreement shall be construed under and in accordance with the laws of the State of Florida without regard to the conflicts of law principles thereof. In the event court intervention is required, CLIENT hereby irrevocably consents to the exclusive jurisdiction of any Florida State or Federal Court sitting in Palm Beach County, Florida over any suit, action or proceeding arising out of or relating to, this Agreement and hereby irrevocably waives any objection to the venue of any such suit, action or proceedings as well as any objection with respect thereto of inconvenient forum. Additionally, an arbitration or mediation that may be conducted shall be conducted in Palm Beach County, Florida.

17. **Arbitration.** In the event CAMBRIDGE and CLIENT are unable to amicably resolve a dispute rising out of or in any way related to this Agreement or the rights and remedies arising from it. CAMBRIDGE and/or CLIENT shall have the right to demand binding arbitration by written notice to the other. Arbitration shall be held in accordance with the then prevailing commercial rules of the American Arbitration Association. Said notice shall detail the contentions of the noticing party in the nature of a complaint in an action at law and shall appoint an arbitrator advocate and the other party shall serve opposing contentions in the nature of an answer, counterclaim, set-off, in an action at law and shall appoint an arbitrator advocate. Immediately thereafter, the arbitrator advocate for each party shall jointly select a third arbitrator whereupon such claims shall be submitted to binding arbitration for the entering of an appropriate award. In the event the arbitrator advocates of the parties are unable to select a third arbitrator, the parties agree to submit the dispute to an arbitrator appointed by and pursuant to the rules of the American Arbitration Association. A Court of competent jurisdiction in the State of Florida shall enter judgment containing the Arbitrator's award. Any portion of the award in favor of CAMBRIDGE for non-payment in whole or in part of any invoice shall bear interest at the rate of 1.5% per month from the date said payment was due.

18. **Parties Bound.** This Agreement shall be binding on and inure to the benefit of the contracting parties and assigns.

19. **Force Majeure.** CAMBRIDGE shall not be liable and have no liability to CLIENT, its officers, directors, employees, agents, guests, invitees or any other third party and, to the fullest extent permitted by law, CLIENT hereby releases CAMBRIDGE, its stockholders, directors, officers, employees and agents for any property loss, economic loss or personal injury (including death) resulting from CAMBRIDGE's delay in performing or failure to perform any service under this Agreement where such delay or failure is caused, in whole or in part, by any event beyond the reasonable control of the CAMBRIDGE, its employees and agents, including but not limited to any ; Act Of War Or Terrorism, Active Shooter Event, Sudden And Unforeseen Acts That Endeavor To Cause Mass Casualties Or Injuries,

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Acts Of God, Pandemic Outbreak, Flood, Windstorm, Governmental Embargo, Quarantine, Strike, Riot, Civil Disorder, Hostile Fire, Sabotage or Governmental Seizure.

20. **Severability/Legal Construction.** In case any one or more of the provisions contained in this Agreement shall for any reason be held to be invalid, illegal, or unenforceable in any respect, the invalidity, illegality, or unenforceability shall not affect any other provision had never been contained in it. Further, CLIENT acknowledges that this Agreement was fully negotiated and agrees that such Agreement shall not be interpreted against either party as the drafter.

21. **Waiver of Subrogation.** CLIENT waives all subrogation and other rights of recovery against CAMBRIDGE that any insurer or other person may have as a result of paying a claim or loss.

22. **Modifications.** No waivers, alterations, or modifications of this Agreement or any agreements in connection with it shall be valid unless in writing and duly executed by both CLIENT and CAMBRIDGE.

23. **Cambridge's Property.** Any and all property, equipment, supplies and materials furnished by CAMBRIDGE hereunder and placed at or on any of CLIENT's sites shall remain the property of CAMBRIDGE, and CAMBRIDGE shall at all times during and after the term of this Agreement have the sole and exclusive right to install, maintain, replace and remove such property, equipment, supplies and materials.

24. **Headings.** The headings in this Agreement are included for convenience only and shall not be taken into consideration in any construction or interpretation of this Agreement or any of its provisions.

25. **Opportunity to Seek Counsel.** CLIENT acknowledges that he/she has had an opportunity to consult with an attorney prior to executing this Agreement.

26. **Entire Agreement.** This Agreement together with any Exhibits or attachments hereto and other written agreements entered into contemporaneously herewith constitutes and represents the entire agreement between the parties hereto and supersedes any prior understanding or agreements, written or verbal, between the parties hereto respecting the subject matter herein. This Agreement may be executed in multiple counterparts which, taken together, shall constitute a single agreement.

27. **Service Level Expectations.** The parties acknowledge and agree tat they have reviewed and mutually agreed to the service level expectations set for in Exhibit B attached hereto and incorporate herein by reference. Exhibit B forms and integral part of this Agreement and governs the related obligations of the Company.

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

Each individual executing this Agreement represents and warrants that he or she is duly authorized to execute and deliver this Agreement on behalf of the respective parties to this Agreement.

CAMBRIDGE SECURITY SERVICES CORPORATION ("CAMBRIDGE")

Name: James J. D'Arcy

Signature: _____

Title: Chief Operating Officer

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BROKEN SOUND MASTER ASSOCIATION ("CLIENT")

Name: David H Schlatter

Signature: _____

Title: Vice President, BSMA

Initial:
Initial:

Attachment 2

BROKEN SOUND

To Whom it May Concern,

Please know that Broken Sound Master Association has engaged in a three-year agreement, with Cambridge Security Services, to provide Advanced Life Support Services. The agreement begins on May 31, 2026.

Please let us know if you have any questions.

John Ayllon, LCAM
Director of Operations & Community Association Manager
Broken Sound Master Association
E-mail: CAM@brokensound.us
Office: 561-998-5813 Fax: 561-997-8065
2701 NW 64th **Blvd., Boca Raton, FL 33496**
website: Broken Sound Master Association | POA in BOCA RATON, FL

BROKEN SOUND

Attachment 3

MEMORANDUM OF UNDERSTANDING
BETWEEN THE CITY OF BOCA RATON
AND CAMBRIDGE SECURITY SERVICES CORPORATION

THIS AGREEMENT made and entered into this 22nd day of May, 2026, by and between the CITY OF BOCA RATON, a municipal corporation of the State of Florida, hereinafter referred to as "CITY", and CAMBRIDGE SECURITY SERVICES CORPORATION, a State of Florida corporation, hereinafter referred to as "CAMBRIDGE":

WITNESSETH:

WHEREAS, the CITY desires to enter into this Memorandum of Understanding ("Agreement") with CAMBRIDGE for the purpose of establishing dispatch protocols, the roles and responsibilities of first responder personnel at an emergency scene, and the documentation required for patient care rendered, pursuant to section 401.435(2), Florida Statutes, and section 64J-1, Florida Administrative Code and recognizing that the CITY retains ultimate medical direction, control, and authority over emergency medical services within its jurisdiction pursuant to Chapter 401, Florida Statutes.; and

WHEREAS, this Agreement is a requirement of the "Special Secondary Service Provider COPCN" (Certificate of Public Convenience and Necessity) as provided in sections 13-20 and 13-22(b)(2)(b), Palm Beach County Code; and

WHEREAS, CAMBRIDGE and Country Club Maintenance Association D/B/A Broken Sound Master Association, Inc. ("Association") have entered into an agreement (a copy of which is attached hereto as Exhibit "A") under which CAMBRIDGE is required to provide emergency assistance within the Broken Sound Planned Unit Development ("Broken Sound") (more specifically, within the areas depicted and described in Exhibit "B").

NOW, THEREFORE, in consideration of the mutual promises contained herein and other good and valuable consideration, the receipt of which is hereby acknowledged by both parties, the CITY and CAMBRIDGE agree as follows:

1. Recitations. The above recitations are incorporated as if fully set forth herein.

2. Effective Date & Term. The effective date of this Agreement shall be the date CAMBRIDGE receives its Special Secondary Service Provider COPCN (Certificate of Public Convenience and Necessity) for Broken Sound from Palm Beach County (CAMBRIDGE shall provide written proof of issuance of such COPCN to the CITY prior to commencement of any services under this Agreement) and shall run thereafter for a five (5) year term, with the option to renew for five (5) additional one-year periods, subject to termination as provided herein.

3. Dispatch Protocols.

a) Dispatch. The CITY's 911 Police/Fire Dispatch Center shall be the primary public safety answering point for all requests for emergency assistance in Broken Sound and shall be responsible for the dispatch of CITY Fire Rescue units. CAMBRIDGE agrees that it will not advertise its own services or the services of any other private emergency assistance provider, and instead, shall only advertise and promote the use of 911 for the reporting of emergencies. CAMBRIDGE shall discourage Broken Sound residents from notifying CAMBRIDGE before using the 911 system. In the event a Broken Sound resident does initially contact CAMBRIDGE for emergency assistance, CAMBRIDGE shall immediately retransmit such requests for emergency assistance to the CITY 911 Police/Fire Dispatch Center.

b) EMS Notification. The CITY will notify CAMBRIDGE when CITY Fire Rescue Services is responding to an EMS incident within Broken Sound. The CITY shall determine the method in which it will notify CAMBRIDGE. Costs associated with notification, if any, will be billed to CAMBRIDGE on a quarterly basis. Any liability arising from notification failures shall be governed exclusively by Section 9 (Indemnification).

4. First Responder Roles and Responsibilities.

a) Intent. The intent of this section is to identify CAMBRIDGE's responsibility to both the patient and to the CITY. It is also to clearly establish the CITY as the final authority over patient care and transport, as provided by the CITY's Certificate of Public Convenience and Necessity issued by Palm Beach County.

b) Responsibility Upon Arriving. Upon arriving at an emergency scene,

CAMBRIDGE shall assess for scene safety and determine whether it is feasible to enter. If the scene is not safe, CAMBRIDGE shall retreat to safety, shall notify all other responding units of its assessment of scene safety through the CITY's 911 system, and shall request law enforcement to respond.

CAMBRIDGE shall remain at the emergency scene until the arrival of CITY Fire Rescue, at which time CITY Fire Rescue shall thereafter assume full responsibility for the call and the emergency scene, thereby relieving CAMBRIDGE of any further responsibility.

c) Patient Assessment. Upon patient contact, CAMBRIDGE shall begin patient assessment and initiate care of any sick or injured person to the extent of CAMBRIDGE's ability until care is transferred to CITY Fire Rescue.

d) Care Protocols. All care provided by CAMBRIDGE shall be in accordance with the pre-hospital treatment protocols approved by the CAMBRIDGE Medical Director. All care provided shall be in accordance with the minimum standard pre-hospital treatment protocols approved by the CITY Fire Rescue Medical Director. Prior to the effective date of this Agreement, the CITY and CAMBRIDGE shall exchange pre-hospital treatment protocols, and within ten (10) days of any change thereto. CAMBRIDGE shall adhere to all local, state, and federal laws and regulations related to worker safety, inclusive of an infection control plan. All services shall be performed in accordance with the prevailing professional standard of care applicable to similarly situated emergency medical service providers in the State of Florida.

e) First Responder Duties. CAMBRIDGE shall function only as an ALS First Responder by providing only Florida-certified Paramedics who have with them at all times a full set of Advanced Life Support medications and equipment as required by Chapter 401, Florida Statutes, and Chapter 64J-1.003, Florida Administrative Code, for an Advanced Life Support, Non-Transport vehicle.

f) Location of CAMBRIDGE Services. Such care by CAMBRIDGE shall only be provided within the specific private property boundaries of Broken Sound that are depicted and described in Exhibit "B" hereto, which are made part hereof.

g) Transport Decisions. Decisions concerning the transport of emergency medical patients shall remain the sole authority and responsibility of CITY Fire Rescue. CITY Fire Rescue shall be the exclusive provider of Advanced Life Support transport.

5. ALS First Responder Qualifications. CAMBRIDGE's Paramedics shall be certified by the State of Florida and shall meet all qualifications and educational requirements as set forth in Chapter 401, Florida Statutes and Chapter 64J-1.009, Florida Administrative Code. CAMBRIDGE shall ensure all personnel maintain current certifications and continuing education requirements.

6. Documentation of Patient Care Rendered by First Responder.

a) Documentation Requirements. CAMBRIDGE shall document all patient contact on a preliminary patient care report, which shall be given to CITY Fire Rescue units at the scene in order to provide timely and accurate patient care information. At a minimum, each patient contact shall be documented as required by section 64J-1.014(4), Florida Administrative Code, which shall provide information pertinent to the patient's identification, assessment, and care provided. Additionally, the names and identification number of all CAMBRIDGE personnel on the scene who provided patient care shall be included on the patient care report. Florida Administrative Code 64-J1.014 specifies that the transporting EMS Provider shall have the complete and accurate patient care report available upon request within 24 hours of the time the vehicle was originally dispatched. CAMBRIDGE shall upon the request by the receiving facility or CITY Fire Rescue, submit a complete and accurate patient care record within the 24-hour window.

b) Medical Run Reports. Upon CITY Fire Rescue request, CAMBRIDGE shall provide to CITY Fire Rescue copies of complete and accurate patient care reports to which CAMBRIDGE responded to in Broken Sound. Such reports shall include all patient assessments, treatments/interventions, responses to treatments/interventions, response, assessment, and treatment times. The paramedic rendering treatment must sign each medical report. CITY Fire Rescue shall use these reports for Quality Assurance purposes, and as such,

they shall be treated as confidential to the extent exempt under Florida law.

c) CAMBRIDGE shall comply with all applicable public records requirements of Chapter 119, Florida Statutes, including §119.0701, and shall maintain and provide access to records as required by law.

7. Exposure to Infectious Disease.

If a potential or actual exposure to infectious disease occurs during a response within Broken Sound, CITY Fire Rescue shall immediately notify the CAMBRIDGE Designated Infection Control Officer. Should CAMBRIDGE become aware of a potential or actual exposure incident that involves responding CAMBRIDGE personnel, CAMBRIDGE shall immediately notify the CITY Fire Rescue Designated Infection Control Officer. Each agency shall be responsible for providing care to its own personnel in the event of an exposure. Each party shall comply with all applicable OSHA standards and HIPAA requirements relating to exposure incidents and protected health information.

8. Termination of Agreement

a) The obligation to continue services under this Agreement may be terminated for cause by either Party upon seven (7) days written notice of substantial failure by the other Party to perform in accordance with the terms hereof. If this Agreement is terminated for cause, CAMBRIDGE shall terminate performance of all services on a schedule acceptable to the CITY or at the end of the seven (7) day period, but in no event longer than fourteen (14) days and shall no longer provide any such services in Broken Sound.

b) The CITY or CAMBRIDGE shall have the right to terminate this Agreement without cause and without penalty or fee for that party's convenience upon fourteen (14) days written notice to the non-terminating party. Upon termination of this Agreement under this provision, CAMBRIDGE shall terminate performance of all services at the end of such fourteen (14) day period, or on a schedule acceptable to the CITY, but in no event longer than twenty-one (21) days from the date of the notice, and shall thereafter no longer provide any such services in Broken Sound.

c) In the event CAMBRIDGE's Special Secondary Service Provider COPCN (Certificate of Public Convenience and Necessity) for Broken Sound expires or is revoked or terminated by Palm Beach County, this Agreement shall terminate automatically and immediately on the date such Special Secondary Service Provider COPCN expires or is revoked or terminated.

9. Indemnification. CAMBRIDGE shall defend, indemnify and hold harmless the CITY, its officers, and employees, from all liabilities, damages, claims, losses and costs, including, but not limited to reasonable attorney's fees, to the extent caused by the negligence, recklessness or intentional wrongful misconduct of CAMBRIDGE and/or persons employed or utilized by CAMBRIDGE in the performance of this agreement.

Any costs and expenses, including reasonable attorney's fees, appellate, bankruptcy or defense counsel fees incurred by the CITY to enforce this Indemnification Clause shall be borne by CAMBRIDGE. In no event will either party be liable to the other party for any loss of business or profits, penalties, or special or indirect, consequential, punitive, exemplary or liquidated damages. CAMBRIDGE's liability to City shall be limited to the limits of CAMBRIDGE insurance coverages as set forth in Paragraph 10 of this Agreement.

This Indemnification Clause shall continue indefinitely and survive the cancellation, termination, expiration, lapse or suspension of this Agreement.

10. Insurance. CAMBRIDGE shall obtain and maintain, for the term of this Agreement, Comprehensive Liability Insurance covering any and all claims that may arise under this Agreement, which shall be in the minimum amount of $1,000,000 per occurrence / $2,000,000 aggregate and from a company rated A+ or better by the BEST Guide. All insurance shall be primary and non-contributory with respect to any insurance maintained by the CITY. CAMBRIDGE shall name the CITY as an additional insured under such insurance. CAMBRIDGE's naming of the City as an additional insured on its liability policy pursuant to this Agreement shall afford coverage only for the negligence, recklessness or intentional wrongful misconduct of CAMBRIDGE pursuant to this Agreement, be limited to the terms and conditions of this Agreement and shall in no event be construed for any purpose whatsoever so as to make CAMBRIDGE or issuer of such liability policies responsible or liable in any way

for the acts, errors, omissions, negligence (including joint, concurrent, independent or individual) or willful misconduct of the CITY. The insurance certificate shall state that the CITY shall receive notice of cancellation in accordance with the policy provisions. This insurance shall remain in full force and effect during the term of this Agreement.

CAMBRIDGE shall maintain Workers' Compensation Insurance in compliance with Chapter 440, Florida Statutes.

CAMBRIDGE shall procure and maintain, for the term of this Agreement, Commercial Umbrella Liability coverage at a limit of $1,000,000. CAMBRIDGE agrees to endorse the City of Boca Raton as an "Additional Insured" on the Commercial Umbrella Liability policy, unless the Commercial Umbrella Liability provides coverage on a pure/true follow-form basis, or the City of Boca Raton is automatically defined as an Additional Protected Person.

CAMBRIDGE shall procure and maintain, for the term of this Agreement, either Professional Liability Insurance or Errors and Omissions Insurance. This coverage is for damages arising out of the insured's negligence and for mistakes or failure to take appropriate action in the performance of business or professional duties. This coverage shall be on a "Claims Made" basis and kept for 2 years after completion. The minimum limits of coverage shall be $1,000,000.00 per occurrence / $2,000,000 aggregate. Notice will be provided to the City of Boca Raton in the event of cancellation, in accordance with the policy provisions.

11. Notice. Any notice, demand, communication, or request required or permitted hereunder shall be in writing and delivered in person or sent by certified mail, postage prepaid as follows:

a) Name, address, telephone number and fax number of the contact person for the CITY is as follows:

John Treanor, Fire Chief
Boca Raton Fire Rescue Services Department
6500 Congress Avenue, Suite 200
Boca Raton, FL 33487
Phone: (561) 982-4000
Fax: (561) 982-4050

b) Name, address, telephone number, and fax number of the contact person for CAMBRIDGE is as follows:

James D'Arcy, Vice President/Director
Cambridge Security Services
951 Broken Sound Parkway NW, Suite 188
Boca Raton, FL 33487
Phone: (954) 320-4407

Notices shall be effective when received at the address specified above. Changes in the respective addresses to which such notice may be directed may be made from time to time by any party by written notice to the other party. Facsimile is acceptable notice effective when received, however, facsimiles received (i.e. printed) after 5:00 p.m. or on weekends or holidays, will be deemed received on the next business day. The original of the notice must additionally be mailed as required herein.

The above shall be construed as restricting the transmission of routine communications between representatives of CAMBRIDGE and CITY.

12. Venue and No Jury Trial Provision. This Agreement shall be construed under the laws of the State of Florida, and venue for any actions arising out of this Agreement shall lie in Palm Beach County. If any provision hereof is in conflict with any applicable statute or rule, or is otherwise unenforceable, then such provision shall be deemed null and void to the extent of such conflict, and shall be deemed severable, but shall not invalidate any other provision of this Agreement.

BY ENTERING INTO THIS AGREEMENT, CAMBRIDGE AND THE CITY HEREBY EXPRESSLY WAIVE ANY RIGHTS EITHER PARTY MAY HAVE TO A TRIAL BY JURY OF ANY CIVIL LITIGATION RELATED TO THIS AGREEMENT.

13. Nonwaiver. A waiver by either CITY or CAMBRIDGE of any breach of this Agreement shall not be binding upon the waiving party unless such waiver is in writing and duly signed by both parties to this agreement. In the event of a written waiver, such a waiver shall not affect the waiving party's rights with respect to any other or further breach. The making or acceptance of a payment by either party with knowledge of the existence of a default or breach shall not operate or be construed to operate as a waiver of any subsequent default or breach.

14. Severability. The invalidity, illegality, or unenforceability of any provision of this Agreement, or the occurrence of any event rendering any portion or provision of this Agreement void or voidable, shall in no way affect the validity or enforceability of any other portion or provision of the Agreement. Any void or voidable provision shall be deemed severed from the Agreement and the balance of the Agreement shall be construed and enforced as if the Agreement did not contain the particular portion or provision held to be void. The parties further agree to reform the Agreement to replace any stricken provision with a valid provision that comes as close as possible to the intent of the stricken provision.

The provisions of this section shall not prevent the entire Agreement from being held void should a provision which is of the essence of the Agreement be determined to be void by a court of competent jurisdiction.

15. Counterparts. The Agreement may be executed in any number of counterparts, any one of which may be taken as an original.

16. Legal Authority. Each party represents that the person signing this Agreement has the legal authority to bind the parties to this Agreement.

17. Integration and Modification. This Agreement is adopted by the CITY and CAMBRIDGE as a final, complete and exclusive statement of the terms of the Agreement between the CITY and CAMBRIDGE. This Agreement supersedes all prior agreements, contracts, proposals, representations, negotiations, letters or other communications between the CITY and CAMBRIDGE pertaining to the Services, whether written or oral.

18. Successors and Assigns. The CITY and CAMBRIDGE each binds itself and its directors, officers, partners, successors, executors, administrators, assigns and legal representatives to the other party to this Agreement. Any assignment, sale, pledge or conveyance of this contract by CAMBRIDGE must be previously approved in writing by the CITY, whose consent may be reasonably withheld. A change in ownership or control of CAMBRIDGE shall be deemed an assignment requiring CITY approval.

19. City Signature Required. This Agreement shall not be valid, unless signed by the

City Manager.

20. Filing of Agreement Required. This Agreement shall not be valid unless filed with the Bureau of Emergency Services, Department of Health, 4052 Bald Cypress Way, Tallahassee, FL 32399-1738, within ten (10) days of execution in accordance with the Florida Administrative Code, pursuant to Florida Statute Section 401.435.

21. Force Majeure. Neither Party shall be liable for any failure or delay in the performance of this Agreement, in whole or in part, where such failure or delay is caused by circumstances beyond the Parties' control, including but not limited to acts of God, severe weather, fire, terrorism, vandalism or civil riots, war, civil disturbance, labor activity or strike, court order or any other cause outside the Parties' exclusive and direct control.

22. CAMBRIDGE is not an employee or agent of the CITY.

23. Nothing herein shall be deemed a waiver of sovereign immunity pursuant to Section 768.28, Florida Statutes.

24. E-Verify. CAMBRIDGE shall comply with Section 448.095, Florida Statutes.

IN WITNESS WHEREOF, the City of Boca Raton has caused these presents to be signed by the City Manager, and its seal to be hereunto affixed, and CAMBRIDGE has executed this contract, all as of the day and year first above written.

CITY OF BOCA RATON, FLORIDA

By _____
Mark Sohaney, City Manager

ATTEST:

_____
Mary Siddons, City Clerk

Approved as to form and legal sufficiency:

_____
Joshua Daniele Koehler
City Attorney

CAMBRIDGE SECURITY SERVICES

By: _____
James J. D'Arcy, Chief Operating Officer
Secretary and Director

ATTEST:

_____
(Name & Title) Matthew Pettitt, Director of the Command Center

Exhibit A

City of Boca Raton

Incorporated 1925

RESOLUTION

043-2026

A RESOLUTION OF THE CITY OF BOCA RATON AUTHORIZING THE CITY MANAGER TO EXECUTE A MEMORANDUM OF UNDERSTANDING WITH CAMBRIDGE SECURITY SERVICES CORPORATION IN CONNECTION WITH CAMBRIDGE'S APPLICATION TO PALM BEACH COUNTY FOR A CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY TO PROVIDE EMERGENCY SERVICES FOR THE COUNTRY CLUB MAINTENANCE ASSOCIATION D/B/A BROKEN SOUND: PROVIDING FOR SEVERABILITY; PROVIDING FOR REPEALER; PROVIDING AN EFFECTIVE DATE

WHEREAS, Cambridge Security Services Corporation ("Cambridge") entered into an agreement with the Country Club Maintenance Association d/b/a Broken Sound Master Association, Inc. in order to provide emergency assistance services within the Broken Sound Planned Unit Development ("Broken Sound"), which also requires the issuance by Palm Beach County of a Special Secondary Service Provider Certificate of Public Convenience and Necessity ("COPCN"), pursuant to the Code of Ordinances of Palm Beach County; and

WHEREAS, in order for Palm Beach County to issue such COPCN, Cambridge must enter into a memorandum of understanding ("MOU") with the City in order to establish protocols for Cambridge to use at Broken Sound for dispatch, the roles and responsibilities of first responder personnel at an emergency scene, and for documentation required relative to patient care rendered pursuant to Florida law; and

WHEREAS, Cambridge requested the City execute and provide the MOU in order for Cambridge to begin the process of obtaining the COPCN from Palm Beach County; and

WHEREAS, the MOU shall not become effective unless, and until the date Cambridge receives a COPCN from Palm Beach County to provide emergency assistance services at Broken Sound; now therefore

BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF BOCA RATON:

Section 1. That the MOU with Cambridge, which is attached hereto, be executed by the City Manager.

Section 2. If any section, subsection, clause or provision of this resolution is held invalid, the remainder shall not be affected by such invalidity.

Section 3. All resolutions or parts of resolutions in conflict herewith shall be and hereby are repealed.

Section 4. This resolution shall take effect the later of 10 days after adoption or the date Palm Beach County issues a COPCN to Cambridge to provide emergency assistance services at Broken Sound.

PASSED AND ADOPTED by the City Council of the City of Boca Raton this 12th day of May, 2026.

CITY OF BOCA RATON, FLORIDA

ATTEST:

Andy Thomson, Mayor

Mary Siddons, City Clerk

COUNCIL MEMBERS	YES	NO	ABSTAINED
MAYOR ANDY THOMSON	✓		
DEPUTY MAYOR MICHELLE GRAU	✓		
COUNCIL MEMBER YVETTE DRUCKER	✓		
COUNCIL MEMBER JON PEARLMAN	✓		
COUNCIL MEMBER STACY SIPPLE	✓		

Attachment 4

4. Copy of current fee schedule, if any.

A. Cambridge Security Services will not be charging fees.

Attachment 5

5. Applicants for Special Secondary Service Provider COPCNs must provide a summary history of applicant's EMS performance record, which provides proof that at the time of application, the applicant has demonstrated experience providing ALS Service for at least the past three (3) consecutive years. For Special Secondary Service Providers, the applicant must have at least one (1) supervisory or higher level employee who possesses a minimum of three (3) years of experience in ALS Services.
Applicants that meet the Staff experience requirement set forth herein, but do not meet the performance record requirement, are eligible for a COPCN with conditions as set forth in the EMS Ordinance.

A. Cambridge Security Services has been performing ALS since December of 2018. We currently service The Club at Admirals Cove, Golf Village at Admirals Cove, Jupiter Hills Village and Addison Reserve Country Club.
B. Qualifying Paramedic – Daniel Tilles - PMD13148 - License Original Issue Date 07/23/1993 – Former Captain, Tequesta Fire Rescue

Attachment 6

6. Disclosure of litigation involving Patient care, for the past six (6) years which resulted in a judgment, award, or finding in favor of a Patient or the complaining party, including case number, nature of the claim and allegations, and a copy of final judgment or award.

A. None

Attachment 7

Cambridge Security Services Corporation - Lic #10010
5100 North Federal Highway Suite 405
Fort Lauderdale, FL 33308

Dear James D'Arcy,

Congratulations on your outstanding Compliance Monitoring site survey conducted on 07/29/2024, by the Bureau of Emergency Medical Services. Your vehicles and service records were outstanding, and we found no deficiencies during our visit. Thank you for being a role model of excellence as an EMS provider in the state of Florida.

Also, please extend my sincere gratitude to your staff for their assistance and overall contribution to your service and the community. Your continued support of emergency medical services is deeply appreciated.

Please take a moment to complete the survey, via the link below, for your Regional EMS Coordinator's site visit, this will help us ensure quality customer service and improve our processes.
https://www.surveymonkey.com/r/ReviewerEvans

Again, thank you for your assistance in the Compliance Monitoring program and I look forward to hearing from you.

Sincerely,

Yvette Evans

Yvette Evans, Region 7
Bureau of Emergency Medical Oversight

Enclosure:
Records and Facilities
Records Supplemental
ALS/BLS Inspection
Site Visit Narrative

Malinda Ragoonath

From: Malinda Ragoonath
Sent: Tuesday, July 7, 2026 3:57 PM
To: Richard Ellis
Cc: Mary Blakeney E.
Subject: Cambridge Completion of Vehicle Inspections

Good day, Rich.

Cambridge Security Services has passed the last three vehicle inspections. The dates of inspections were for 2024, 2025, and 2026. There are no deficiencies to report.

Thank you.

Malinda I. Ragoonath | Emergency Program Coordinator - EMS
Palm Beach County
Office of Emergency Management
20 South Military Trail | West Palm Beach, Florida 33415
Phone: (561) 712-6484 | Email: mragoonath@pbc.gov
www.ReadyPBC.com

Attachment 8

Please refer to attachment 13 for information regarding the Quality Assurance processes.

Attachment 9

CAMBRIDGE SECURITY

May 18, 2026

Re: COPCN Application for Broken Sound Master Association

To Whom It May Concern,

Please know that we are applying for a COPCN for Broken Sound Master Association. Additionally, Cambridge Security Services meets all applicable federal, state and local requirements pertaining to the delivery of EMS.

Thanks so much!

Sincerely,

James J. D'Arcy
Chief Operating Officer

Attachment 10

10. Management Plan: Provide information on how the following business functions will be conducted and managed: a) employee and driver training programs, b) complaint handling system, c) system for handling accidents and/or injuries, and d) vehicle maintenance system.

a. All Paramedics will be required to obtain CEVO emergency vehicle driver training that prepares first responders for safe, effective vehicle operation.

b. EMS Complaint handling system:

Cambridge Security - EMS Complaint Handling Policy

Purpose

To establish a consistent process for receiving, documenting, investigating, resolving, and tracking complaints involving EMS personnel, patient care, customer service, billing, operations, or conduct.

1. Policy Statement

The agency is committed to providing professional, safe, respectful, and high-quality emergency medical services. All complaints will be taken seriously, investigated objectively, and resolved promptly while protecting patient confidentiality and employee rights.

2. Definitions

Complaint

Any verbal or written allegation of dissatisfaction regarding EMS services, including:

- Patient care concerns
- Staff behavior or professionalism
- Delayed response
- HIPAA/privacy concerns

- Vehicle operation complaints
- Discrimination or harassment allegations

Complainant

Any patient, family member, citizen, employee, healthcare facility, or agency submitting a complaint.

3. Methods of Receiving Complaints

Complaints may be received through:

- Phone call
- Email
- Agency website
- Written letter
- In person
- Social media referral
- Hospital or partner agency notification

4. Initial Intake Procedure

Receiving Employee Responsibilities

The employee receiving the complaint shall:

1. Remain professional and courteous
2. Obtain:
    - Complainant name and contact information
    - Date/time/location of incident
    - Unit number or crew members if known
    - Detailed description of concern
3. Forward the complaint to a supervisor before end of shift

5. Investigation Process

Supervisor Responsibilities

The assigned supervisor shall:

Within 24 hours:

- Acknowledge receipt of complaint
- Determine severity level
- Preserve relevant records

Investigation May Include:

- Review of PCR
- CAD dispatch review
- Radio/audio recordings
- Body cam or vehicle video
- Witness interviews
- QA/QI review

7. Timeframes

Action	Timeframe
Complaint acknowledgment	Within 24 hours
Preliminary review	Within 72 hours
Full investigation completion	Within 30 days
Final response to complainant	Within 45 days

8. Resolution Options

Possible outcomes include:

- Complaint unfounded
- Complaint resolved through education
- Policy clarification
- Counseling or retraining
- Corrective action
- Referral to HR
- Referral to licensing authority
- Referral to law enforcement

9. Documentation

All complaints shall include:

- Investigation notes
- Supporting evidence
- Findings
- Corrective actions
- Final disposition

Records shall be maintained according to state retention laws and company policy.

10. Confidentiality

Complaint investigations are confidential to the extent permitted by law.

Protected information shall be handled in compliance with:

- HIPAA
- State public records laws
- Employment regulations

12. Non-Retaliation

No employee or complainant shall be subject to retaliation for reporting a concern in good faith.

c. Accidents and Injuries Policy:

Company Vehicle Accident Reporting & Response Policy

Purpose

This policy establishes procedures for reporting, investigating, and responding to accidents involving company-owned, leased, or authorized vehicles to ensure employee safety, regulatory compliance, risk management, and proper insurance handling.

1. Scope

This policy applies to:

- All employees operating company vehicles
- Employees operating personal vehicles for company business
- Company-owned, leased, or rented vehicles

2. Policy Statement

Employees operating company vehicles are expected to do so safely, lawfully, and responsibly. All accidents, regardless of severity or fault, must be reported immediately and handled according to this policy.

Failure to comply may result in disciplinary action, up to and including termination.

3. Definitions

Accident

Any incident involving a company vehicle that results in:

- Property damage
- Bodily injury
- Death
- Vehicle damage
- Theft or vandalism
- Collision with another vehicle, object, or animal

4. Driver Responsibilities at the Scene

Employees involved in an accident shall:

A. Ensure Safety

- Stop immediately
- Move to a safe location if possible
- Activate emergency lights
- Call 911 if injuries or hazards exist

B. Notify Authorities

Employees must contact law enforcement when:

- Injuries occur
- Significant property damage exists
- Required by state law
- Another party requests police response C

D. Gather Information

Obtain:

- Names/contact information
- Driver license numbers
- Insurance information
- Vehicle descriptions and plate numbers

- Witness information
- Photos of:
    - Vehicles
    - Damage
    - Scene conditions
    - Roadway/signage

5. Internal Reporting Requirements

Employees must notify:

1. Immediate supervisor
2. Cambridge Command Center
3. Human resources (if injury involved)

Reporting Timeline

- Immediate verbal notification: ASAP or within 1 hour
- Written accident report: Before end of shift or within 24 hours

6. Post-Accident Drug & Alcohol Testing

Employees may be required to undergo post-accident drug and alcohol testing when:

- Injury occurs
- Citation is issued
- Significant property damage exists
- Reasonable suspicion exists

Refusal to test may result in disciplinary action.

7. Medical Evaluation

Employees involved in accidents shall:

- Seek medical attention when appropriate
- Report all injuries immediately
- Comply with workers' compensation procedures

8. Vehicle Recovery & Repairs

Only authorized personnel may:

- Arrange towing
- Authorize repairs
- Communicate with insurers regarding repairs

Employees shall not independently authorize repair work.

9. Accident Investigation

The company may investigate:

- Driver conduct
- Vehicle condition
- Policy compliance
- Preventability
- Contributing factors

Investigations may include:

- GPS review
- Camera footage
- Telematics data
- Witness interviews
- Police reports

10. Preventable Accident Review

Accidents may be classified as:

- Non-preventable
- Preventable
- Undetermined

Corrective actions may include:

- Coaching
- Defensive driving training
- Probation
- Suspension of driving privileges
- Disciplinary action

11. Insurance Cooperation

Employees must fully cooperate with:

- Insurance carriers
- Company investigators
- Legal counsel

Failure to cooperate may result in disciplinary action.

12. Prohibited Conduct

Employees shall not:

- Leave the scene unlawfully
- Operate vehicles under the influence
- Use vehicles for unauthorized purposes
- Use handheld devices illegally while driving
- Permit unauthorized drivers to operate company vehicles

13. Recordkeeping

The company shall maintain:

- Accident reports
- Investigation records
- Insurance correspondence
- Corrective action documentation

Records will be retained according to company policy and legal requirements.

D. Vehicle Maintenance Program

All Cambridge Security Services vehicles are maintained by our in-house fleet services team. A loaner vehicle is always exchanged for the vehicle requiring repair or service. Below is our policy:

In-House Fleet Maintenance Policy

Purpose

This policy establishes standards and procedures for the inspection, preventive maintenance, repair, and documentation of company-owned vehicles maintained by the company's internal fleet maintenance operation. The goal is to ensure vehicle safety, reliability, regulatory compliance, and cost-effective fleet management.

1. Scope

This policy applies to:

- All company-owned or leased vehicles
- Fleet maintenance personnel
- Employees assigned company vehicles
- Supervisors overseeing fleet operations

2. Policy Statement

The company shall maintain all fleet vehicles in safe operating condition through a structured preventive maintenance program, timely repairs, accurate recordkeeping, and regular inspections performed by qualified personnel.

No vehicle shall be operated if determined to be unsafe.

3. Responsibilities

Fleet Maintenance Manager

Responsible for:

- Overseeing maintenance operations
- Scheduling preventive maintenance
- Ensuring regulatory compliance
- Maintaining service records
- Managing parts inventory
- Monitoring repair costs and downtime

Fleet Technicians

Responsible for:

- Performing inspections and repairs
- Documenting all work completed
- Reporting unsafe conditions
- Following manufacturer specifications
- Maintaining shop safety standards

Vehicle Operators

Responsible for:

- Conducting pre-trip inspections
- Reporting defects promptly
- Maintaining vehicle cleanliness
- Not operating unsafe vehicles
- Bringing vehicles in for scheduled service

4. Preventive Maintenance Program

All fleet vehicles shall be maintained according to:

- Manufacturer recommendations
- Engine-hour intervals

Typical Preventive Maintenance Includes

- Oil and filter changes
- Tire rotation and inspection
- Brake inspection
- Fluid checks
- Battery testing
- Steering and suspension inspection
- Belt and hose inspection
- Lighting inspection
- Air filter replacement
- Safety equipment inspection

5. Inspection Requirements

Daily/Pre-Trip Inspections

Operators shall inspect:

- Tires
- Lights
- Mirrors
- Fluid leaks
- Brakes
- Windshield/wipers
- Warning indicators

Defects shall be reported immediately.

Scheduled Safety Inspections

Vehicles shall undergo periodic inspections based on:

- Mileage
- Usage

6. Repair Procedures

Defect Reporting

Employees shall immediately report:

- Mechanical issues
- Warning lights
- Safety concerns
- Collision damage

Vehicle Out-of-Service Criteria

Vehicles shall be removed from service when:

- Unsafe to operate
- Legally non-compliant

- Major systems are compromised
- Repairs are overdue

Only authorized personnel may return vehicles to service.

7. Maintenance Documentation

The fleet department shall maintain records including:

- VIN/unit number
- Maintenance dates
- Mileage/hours
- Repairs performed
- Technician performing work
- Parts replaced
- Inspection reports
- Warranty information

Records shall be retained according to company policy and applicable laws.

8. Parts & Inventory Control

The fleet maintenance operation shall:

- Maintain inventory accountability
- Use approved replacement parts
- Track parts usage and costs
- Properly dispose of hazardous materials

9. Vendor & Outside Repair Management

Outside vendors may be used when:

- Specialized repairs are required

- Equipment exceeds in-house capability
- Emergency repairs are needed
- Warranty work applies

All outside repairs require fleet management approval.

Attachment 11

STATE OF FLORIDA
DEPARTMENT OF HEALTH
BUREAU OF EMERGENCY MEDICAL OVERSIGHT

ADVANCED LIFE SUPPORT SERVICE LICENSE

This is to certify that: **CAMBRIDGE SECURITY SERVICES CORPORATION** **Provider Number #: 10010**
Name of Provider

5100 NORTH FEDERAL HGIHWAY, FORT LAUDERDALE, FLORIDA 33308
Address

has complied with Chapter 401, Florida Statutes, and Chapter 64J-1, Florida Administrative Code, and is authorized to operate as an Advanced Life Support Service subject to any and all limitations specified in the applicable Certificate(s) of Public Convenience and Necessity and/or Mutual Aid Agreements for the County(s) listed below:

MARTIN, PALM BEACH
County(s)

Michael Hall, Section Administrator
Emergency Medical Services
Florida Department of Health

THIS CERTIFICATE EXPIRES ON: 12/12/2026

This certificate shall be posted in the above mentioned establishment

Certificate of Public Convenience and Necessity
Palm Beach County Emergency Medical Services

WHEREAS, there is a need for Cambridge Security Services Corporation to operate and provide essential emergency medical services to the citizens and visitors of Palm Beach County, Florida; and

WHEREAS, said agency has applied to provide these services: and

WHEREAS, said agency has indicated that it will comply with the requirements of Palm Beach County's Emergency Medical Services Ordinance (#2017-030) as amended, the Board of County Commissioners of Palm Beach County hereby issues a Certificate of Public Convenience and Necessity with conditions to said emergency medical service provider, valid from issuance on December 4, 2018 and until the earlier of termination by the Board of County Commissioners or termination of the contractual agreement with The Club at Admirals Cove.

In issuing this Certificate, it is understood that the agency named hereon will meet the requirements of all pertinent county and state legislation and will provide emergency medical services on a twenty-four hour basis in the area(s) or zone(s) designated, providing the level of service endorsed as follows:

Area(s): The Club at Admirals Cove.

Service Endorsed: Special Secondary Service Provider – ALS Non – Transport

DEC 0 4 2018

Director, Public Safety Department

Mayor, Board of County Commissioners
Mack Bernard

Certificate of Public Convenience and Necessity
Palm Beach County Emergency Medical Services

WHEREAS, there is a need for Cambridge Security Services Corporation to operate and provide essential emergency medical services to the citizens and visitors of Palm Beach County, Florida; and

WHEREAS, said agency has applied to provide these services; and

WHEREAS, said agency has indicated that it will comply with the requirements of Palm Beach County's Emergency Medical Services Ordinance (#2017-030) as amended, the Board of County Commissioners of Palm Beach County hereby issues a Certificate of Public Convenience and Necessity to said emergency medical service provider, valid from issuance on April 20, 2021 and until the earlier of termination by the Board of County Commissioners or termination of the contractual agreement with Addison Reserve Country Club.

In issuing this Certificate, it is understood that the agency named hereon will meet the requirements of all pertinent county and state legislation and will provide emergency medical services on a twenty-four hour basis in the area(s) designated, providing the level of service endorsed as follows:

Area(s): Community of Addison Reserve

Service Endorsed: Special Secondary Service Provider – ALS Non – Transport

R2021 0530
APR 20 2021

Director, Public Safety Department

Mayor, Board of County Commissioners

Certificate of Public Convenience and Necessity
Palm Beach County Emergency Medical Services

WHEREAS, there is a need for Cambridge Security Services Corporation to operate and provide essential emergency medical services to the citizens and visitors of Palm Beach County, Florida; and

WHEREAS, said agency has applied to provide these services; and

WHEREAS, said agency has indicated that it will comply with the requirements of Palm Beach County Code, Chapter 13, Article II, EMS Ordinance as amended, the Board of County Commissioners of Palm Beach County hereby issues a Certificate of Public Convenience and Necessity to said emergency medical service provider, valid from issuance on February 24, 2022 and until the earlier of termination by the Board of County Commissioners or termination of the contractual agreement with Golf Village at Admirals Cove Master Property Owners Association, Inc.

In issuing this Certificate, it is understood that the agency named hereon will meet the requirements of all pertinent county and state legislation and will provide emergency medical services on a twenty-four hour basis in the area(s) designated, providing the level of service endorsed as follows:

R2022 [illegible]

Area(s): Golf Village at Admiral's Cove

FEB 2 4 2022

Service Endorsed: Special Secondary Service Provider – ALS Non-Transport

Stephanie Sejnoha
Director, Public Safety Department

Mayor, Board of County Commissioners

MARTIN COUNTY BOARD OF COUNTY COMMISSIONERS
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

WHEREAS, in accordance with Chapter 87, Codes of Laws and Ordinances of Martin County, **Cambridge Security Services Corporation,** has requested authorization to provide the services indicated below to the citizens of Martin County; and

WHEREAS, there has been demonstrated need to provide these essential services to the citizens of Martin County; and

WHEREAS, the above-named service affirms that it will maintain compliance with the requirements of the Emergency Medical Services Act (Chapter 401, F.S) and rules (Chapter 64-J, F.A.C.).

THEREFORE, the Martin County Board of County Commissioners hereby issues the Certificate of Public Convenience and Necessity to provide the services as indicated below, with limitations as prescribed on this certificate. In issuing this certificate, the governing body of Martin County has considered recommendations of affected municipalities.

- [ ] Primary Care Provider
- [ ] Primary Air Provider
- [ ] Secondary Service Provider
- [X] Special Secondary Service Provider

Date Issued: March 22, 2022

Date of Expiration: Upon termination of community MOU

LIMITATIONS: May provide non-transport Advanced Life Support (ALS) response in the confines of Jupiter Hills Village, located at 17813 SE Village Circle, Tequesta Florida. Cambridge Security Corporation has an Agreement with Martin County Fire Rescue, dated February 14, 2022.

Martin County Board of County Commissioner
Doug Smith, Chair

3/29/22
Date

Attachment 12

WHEREAS, Cambridge is in the business of providing security services;

WHEREAS, certain of Cambridge's clients require Cambridge to contract with a Florida-licensed physician to serve as Medical Director providing medical supervision for the daily operations and training of Cambridge's emergency medical services; and

WHEREAS, Physician is duly licensed by, and in good standing with, the appropriate licensing agency for the State of Florida and qualified to render professional medical services as may be necessary and desirable in the performance of this Agreement, and more particularly, in emergency medicine; and

WHEREAS, Cambridge desires to engage Physician as an Independent Contractor to serve as Cambridge's Medical Director and to perform the services described herein and Physician desires to enter into this Agreement to serve as the Medical Director for Cambridge; and

NOW, THEREFORE, in consideration of the foregoing recitals, the mutual promises and covenants contained herein, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, intending to be legally bound, the parties hereby agree as follows:

Section 1. Retention of Physician; Conditions Precedent to Retention and Continued Retention.

(a) Retention of Physician. Cambridge agrees to retain and continue to retain Physician as Medical Director as of the Effective Date pursuant to the terms of this Agreement.

(b) Licensure; Registrations; Experience. At all times during which this Agreement is in effect, Physician shall have and maintain in good standing a currently valid and unrestricted license to practice medicine in the State of Florida and Physician certifies that as of the Effective Date of this Agreement, he has practiced Emergency medicine in the State of Florida for at least three years.

(c) Copy of Licensure. Upon execution of this Agreement by Physician and upon request by Cambridge from time to time, Physician shall provide Cambridge with a copy of Physician's licensure and registrations evidencing compliance with Section 1(b).

(d) Board Certifications. At all times during the term(s) of this Agreement, Physician shall be Board Certified in Emergency Medicine. Upon request, Physician shall provide Cambridge with a copy of Physician's board certification evidencing compliance with this Section 1(d).

(e) Medical Association Participation. At all times during the term(s) of this Agreement, Physician shall actively participate in the Palm Beach County Medical Directors Association. Upon request, Physician shall provide Cambridge with documentation evidencing compliance with this Section 1(e).

(b) Standards. Physician shall provide the Services and conduct activities in accordance with (i) the then currently accepted methods and practices (including codes of ethics) of the American Medical Association and the appropriate state licensing authority for physicians; (ii) any applicable Cambridge bylaws, policies and procedures as provided or made available to Physician in writing.

(c) Availability and Location. Cambridge and Physician shall agree upon the dates and times at which Physician shall perform the Services hereunder, which the parties acknowledge and agree shall be sufficient to satisfy Cambridge's obligations to its clients and customers.

Section 3. Nature of Relationship.

(a) Capacity/Independent Contractor. Physician, in its relation to Cambridge, shall at all times be an independent contractor, and neither Physician, nor any of his employees, agents or assistants shall, under any circumstances, be deemed to be the employees or agents of Cambridge. The parties acknowledge that this Agreement does not create a partnership or joint venture between them and is exclusively a contract for service.

(b) Non-Exclusivity. Physician shall be free to operate its business as it deems appropriate and may provide services to the general public provided the provision of such services do not interfere with Physician's obligations under this Agreement. Nothing in this Agreement shall prohibit Physician from entering into relationships with other entities, including hospitals, medical practices or associations, or health care groups, provided such relationships do not interfere with Physician's obligations under this Agreement.

Section 4. Responsibilities of Cambridge.

(a) Means of Providing Services. Physician shall be responsible for providing any and all facilities, equipment and supplies necessary to perform the services under this Agreement.

(b) Personnel. Physician shall employ, terminate and reinstate, as it deems appropriate, such non-medical personnel as it deems necessary to perform the services under this Agreement.

Section 5. Physician's Fee.

(a) Annual Fee for Physician's Services. For Physician's provision of the Services described herein, Cambridge shall pay Physician $10.000.00 annually. This payment shall be paid in monthly installments, each installment being due within ten (10) days of Cambridge's receipt of Physician's invoice for services rendered in the preceding month.

(b) Ineligibility for Employment or Other Benefits. The parties acknowledge that Physician shall not be eligible for sick leave, vacation pay, health benefits, retirement benefits or other employee benefits provided to Cambridge employees. Cambridge is not required to pay, or make any contributions to, any social security, local, state or federal tax, unemployment tax, unemployment compensation, workers' compensation, or insurance premiums on Physician's behalf.

and $5,000,000 annual aggregate.

(b) Additional Insured; Proof of Insurance. With respect to the insurance coverages set forth in Section 6(a) of this Agreement, Cambridge shall name Physician as an additional insured by endorsement under its insurance policy or policies. Cambridge shall provide Physician with proof it is maintaining the insurance coverages required under this Agreement within three (3) days of his request for same.

Section 7. Term and Termination.

(a) Term. This Agreement shall commence on the Effective Date and shall remain in effect for an initial term of one year (the "Initial Term"). Thereafter, this Agreement shall automatically renew for successive one (1) year periods, each such period constituting a "Renewal Term." Notwithstanding the preceding sentence, this Agreement shall not renew if either party first delivers notice to the other party of its intent to not renew this Agreement at least thirty (30) days prior to the beginning of any Renewal Term.

(b) Termination. Notwithstanding the provisions of Section 7(a) hereof, this Agreement may be terminated as follows:

(1) Termination on Notice for Default. In the event either party shall give notice to the other of a substantial default in the performance of any obligations under this Agreement and the default is not cured within ten (10) days following the receipt of such notice, this Agreement may be terminated by the party giving notice. Cure shall include absolute cure where possible (such as in the case of a payment obligation) or, if absolute cure is not reasonably possible, then cure shall include ongoing diligent good faith efforts intended to lead to absolute cure.

(2) Termination Due to Change in Law. In the event that any law or regulation enacted, promulgated or amended after the date of this Agreement or any interpretation of law or regulation by a court or regulatory authority of competent jurisdiction after the date of this Agreement (collectively "Change in Law") materially affects or impacts upon the reasonable expectations of either party under this Agreement, renders any provision of this Agreement illegal or unenforceable, or materially affects the ability of either party to perform its obligations under this Agreement, then either party may request renegotiation of the applicable terms of this Agreement by written notice to the other party. Both parties shall negotiate in good faith an amendment to this Agreement that preserves the original reasonable expectations of the parties to the extent possible in a manner consistent with the Change in Law. If no such Amendment is agreed upon within thirty (30) days of receipt of such notice, then Cambridge or Physician may terminate this Agreement upon an additional thirty (30) days written notice.

(3) Termination Without Cause. Commencing upon the expiration of the Initial Term, either party may terminate this Agreement without cause upon thirty (30) days prior written notice.

be counted as successive if Physician has not returned to work for at least ten (10) consecutive days between each such period of disability. Physician acknowledges that Cambridge also shall be entitled to terminate this Agreement immediately if any of the following events occur:

(a) The withdrawal, suspension, revocation or limitation of Physician's license to practice medicine in the State of Florida or any other jurisdiction;

(b) Physician's refusal to actively participate in the Palm Beach County Medical Directors Association;

(c) Sanctions are imposed against Physician for significant professional misconduct by any certifying board having jurisdiction;

(d) Physician's conviction by any court having jurisdiction of any felony or of any misdemeanor crime or moral turpitude; or

(e) Physician's ineligibility for medical malpractice insurance coverage.

(5) Effects of Termination. Upon termination of this Agreement, neither party shall have any further obligations hereunder, except for (i) obligations accruing prior to the date of termination; and (ii) obligations, promises or covenants contained herein which are expressly made to extend beyond the term(s) or termination of this Agreement.

Section 8. Privacy of Information.

(a) Without limiting the generality of any other provision contained in this Agreement, Physician covenants and agrees to comply in all respects with the Health Insurance Portability and Accountability Act ("HIPAA") and any corresponding Florida state statute, and any regulations promulgated now or in the future thereunder, and to amend this Agreement as may be required to comply with HIPAA or any corresponding Florida state statute, and all other federal and state laws governing patient privacy.

Section 9. Miscellaneous.

(a) Entire Agreement. This Agreement supersedes all previous agreements between the parties relating to the subject matter of this Agreement and constitutes the entire understanding between the parties relating to the subject matter of this Agreement, and no amendments or variation thereto shall be valid unless evidenced by a writing signed by both parties.

(b) Governing Law. This Agreement shall be construed and enforced in accordance with the laws of the State of Florida without regard to conflict of laws provisions thereof.

(c) Severability. In the event any provision of this Agreement is held to be unenforceable for any reason, such enforceability shall not affect the remainder of this Agreement, which shall remain in full force and effect and enforceable in accordance with its terms.

Attachment # 1

FOR CAMBRIDGE SECURITY SERVICES, INC.

By: _____ 5.23.18
James D'Arcy, COO

By: _____ M.D.
Hillel Harris, M.D.

14141607v1

Attachment # 1

Page 30 of 97

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
FH0496542	10-31-2028	$888

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, 3N,4,5	PRACTITIONER	09-25-2025

HARRIS, HILLEL, Z, MD
JFK MEDICAL CENTER
5301 S CONGRESS AVE
ATLANTIS, FL 334621149

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
FH0496542	10-31-2028	$888

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, 3N,4,5	PRACTITIONER	09-25-2025

HARRIS, HILLEL, Z, MD
JFK MEDICAL CENTER
5301 S CONGRESS AVE
ATLANTIS, FL 334621149

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223 (9/2016)

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
FH0496542	10-31-2028	$888

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, 3N,4,5	PRACTITIONER	09-25-2025

HARRIS, HILLEL, Z, MD
JFK MEDICAL CENTER
5301 S CONGRESS AVE
ATLANTIS, FL 334621149

CONTROLLED SUBSTANCE/REGULATED CHEMICAL
REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223/511 (9/2016)

REPORT

CHANGES

PROMPTLY

REQUESTING MODIFICATIONS TO YOUR REGISTRATION CERTIFICATE

To request a change to your registered name, address, the drug schedule or the drug codes you handle, please

1. visit our web site at **deadiversion.usdoj.gov** - or
2. call our customer Service Center at **1-(800) 882-9539** - or
3. submit your change(s) in writing to:
   Drug Enforcement Administration
   P.O. Box 2639
   Springfield, VA 22152-2639

See Title 21 Code of Federal Regulations, Section 1301.51 for complete instructions.

You have been registered to handle the following chemical/drug codes:

Your license number is ME 102298.

Please use it in all correspondence with your board/council. Each licensee is solely responsible for notifying the Department in writing of the licensee's current mailing address and practice location address. If you have not received your renewal notice 90 days prior to the expiration date shown on this license, please visit www.FLHealthSource.gov and click "Renew A License" to renew online.

The Medical Quality Assurance Online Services Portal gives you the ability to manage your license to perform address updates, name changes and much more.

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
12/13/2025	ME 102298	1008517

THE MEDICAL DOCTOR
NAMED BELOW HAS MET ALL REQUIREMENTS OF
THE LAWS AND RULES OF THE STATE OF FLORIDA.

EXPIRATION DATE: **JANUARY 31, 2028**

HILLEL ZVI HARRIS, MD
5301 SOUTH CONGRESS AVENUE
ATLANTIS, FL - 33462

Ron DeSantis
GOVERNOR

Joseph A. Ladapo, MD, PhD
STATE SURGEON GENERAL

Scan QR Code for
License Authentication

DISPLAY IF REQUIRED BY LAW

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO	CONTROL NO
12/13/2025	ME 102298	1008517

THE MEDICAL DOCTOR
NAMED BELOW HAS MET ALL REQUIREMENTS OF
THE LAWS AND RULES OF THE STATE OF FLORIDA

HILLEL ZVI HARRIS, MD Expiration Date: **JANUARY 31, 2028**

LICENSEE SIGNATURE

Attachment 13

CAMBRIDGE SECURITY

EMS OPERATIONS MEMO

TO: All Paramedic Staff Members

FROM: Dr. Hillel Z. Harris, MD, FACEP, Corporate Medical Director

RE: Pre-Hospital Treatment Protocols

Date: January 8, 2019

Page: 1 of 1

Cambridge Security Services and I have adopted the minimum standard, pre-hospital treatment and transport protocols as approved by the Palm Beach EMS Council. A copy of those protocols is on file at your post or available upon request to your Director of Security.

Should you have any questions or concerns, please do not hesitate to contact me at 561-819-2988.

Hillel Harris, M.D.

13.22.b.2.c

From: Jeniel Parmar <jenielparmar@gmail.com>
Sent: Tuesday, June 23, 2026 2:18 PM
To: Parks, Robert <RParks@bocaraton-fl.gov>
Subject: [EXTERNAL] Re: Cambridge Security COPCN application

Yes, both Boca Raton Fire Rescue and I, as the Medical Director, accept and recognize the Palm Beach County Fire Rescue Medical Protocols.

However, to ensure regulatory clarity and proper risk management, our acceptance is contingent on the following medicolegal boundaries:

No Extension of Medical Direction: Our acceptance applies strictly to the clinical validity of the PBCFR protocols themselves. It does not constitute or imply any medical oversight, credentialing, quality assurance review, or clinical delegation by myself or BRFR over Cambridge Security Services or its personnel.

Retention of Liability: Dr. Harris, as Cambridge's designated Medical Director, retains sole regulatory responsibility and medicolegal liability for the actions, training, and clinical care provided by Cambridge personnel under Florida law.

Primary Agency Authority: BRFR remains the primary ALS response and transport authority for the jurisdiction, and Cambridge personnel will operate strictly within the bounds of a secondary, non-transport provider during active incidents.

We appreciate your diligence during this review process and look forward to maintaining high-quality emergency care for the residents of Broken Sound.

Jeniel Parmar, MD, PhD
Attending Physician, Emergency Medicine
Associate Medical Director, Boca Raton Fire and Rescue
Associate Medical Director, Highland Beach Fire and Rescue
Affiliate Faculty, Florida Atlantic University
Ringside Physician

CAMBRIDGE SECURITY

OPERATIONS MEMO

TO: All Paramedic Staff

FROM: Dr. Hillel Z. Harris, MD FACEP

RE: Pre-Hospital Treatment Protocols

Please know that Cambridge Security Services and I have adopted the 2023 Patient Care Protocols (JLP below) as approve by Palm Beach County Fire Rescue and its Medical Director.

A copy of those protocols is on file at each ALS post, Paramedic vehicle and available upon request to your Director of Security.

Should you have any questions or concerns, please do not hesitate to contact me at 561-819-2988.

Hillel Harris M.D.

Hillel Harris, M.D.

Cambridge Security Services Corporation
Standard Operating Policies and Guidelines

Business Unit: Cambridge Emergency Medical Services		No.: CSS.EMS.00
Title: Quality Assurance	Issued: 1/11/2021	Revised:

I. DATA COLLECTION

An EMS report is generated by Paramedics for any EMS event or when a patient encounter occurs, as defined by Florida EMS Data Dictionary.

On-scene data collection is performed through the completion of the current approved Cambridge Security EMS Field Report. This document provides the means of gathering patient data to be used to complete the patient care report (PCR). Patient care reports are completed as soon as possible and no later than 24 hours from initial dispatch. The completion of the PCR for each EMS incident assures that the most accurate information is collected on each patient.

Each EMS report (PCR) is reviewed by the EMS Coordinator for adherence to protocols and completion of required data. Any discrepancies are returned to the individual paramedic for correction by amendment or resolution. Any disputes will be forwarded to the the Medical Director for a protocol compliance review. All report data is used to develop future training needs for the Company.

II. PATIENT CARE REPORT REVIEW PROCESS

In order to provide consistent and constant review of our procedures, the following steps shall be followed for each patient who receives care.

All EMS reports will be reviewed by the EMS Coordinator. Completed run reports shall be located in the locked EMS Supply Cabinet. This is a secure location and the reports will not be viewable by non-paramedics or visitors. Reports shall not be reviewed in common areas.

The EMS Coordinator will attach a QA checklist/Resolution Form to the report.

If the report is approved, it will be placed in a folder located in the EMS Supply Cabinet. If discrepancy is noted, it is returned to the paramedic of the call-in question for amendment or resolution.

When issues are resolved, the report will be placed in the run folder in the EMS Supply Cabinet.

If the issue is unresolved, it is forwarded to the Medical Director for review and remediation.

Amendments are written and attached as part of the original report.

Quality Control resolutions are written on the QA check list and are not considered as part of the report. They are to be removed if a copy of the report is requested.

Business Unit: Cambridge Emergency Medical Services		No.: CSS.EMS.002
Title: Quality Assurance	Issued: 1/11/2021	Title: Quality Assurance

III. REMEDIATION

All reports which may have questions regarding compliance with current protocols will be flagged for further review by the EMS Coordinator.

Any Medical treatment issues not resolved by the EMS Coordinator will be presented to the Medical Director for review and final resolution.

Compliance issues deemed to require corrective action or retraining may result in the removal of the Paramedic at the discretion of the Medical Director or Chief Operating Officer.

IV. TRENDS AND CHANGES

The EMS Coordinator will track all trends in service to determine future needs for training and or changes in the protocols. All recommended changes to the protocols shall be forwarded, in writing, to the Medical Director for consideration.

V. EMS QUALITY ASSURANCE MATRIX

The following matrix shall be used to provide continued quality improvement to the Company's EMS system.

The following guidelines will be used for the review of either EMS reports or on-scene observations. They are based upon Palm Beach County EMS Protocols and will be revised as the Protocols are revised.

Basic documentation for all EMS Reports:

- Call time date/ Completion time date;
- Quality of Care Delivered/ Customer Satisfaction;
- Total Number of Patients;
- Patient Identification on ALL pages;
- Biographical and Personal Data;
- Incident Information Unit#;
- Incident#, Call Level;
- Times, Entry Date;
- Crew ID Paramedic
- Legibility, Spelling;
- Identification of Chief Complaint;
- Patient History / Pertinent;
- Physical Exam results including airway, breathing, circulation, pupils, skin and vitals;
- On-Scene Observations;

Business Unit: Cambridge Emergency Medical Services		No.: CSS.EMS.002
Title: Quality Assurance	Issued: 1/11/2021	Title: Quality Assurance

EMS QUALITY ASSURANCE MATRIX (continued)

- Mental Status (AAOX3, GCS) or P.O.A.;
- Vital Signs - throughout incident including times;
- EKG and 12 Lead interpretation;
- Diagnosis - Was the Proper Guideline Identified and followed?
- Documentation of ALL treatment or interventions;
- Medications given including time, medication and route:
- Medically Appropriate Care;
- Narrative - documents all pertinent patient care along with any unusual occurrences;
- Who was Pt turned over to? (Was a report given?)

Cambridge Security Services Corporation
Standard Operating Policies and Guidelines

Business Unit: Cambridge Emergency Medical Services		No.: CSS.EMS.002
Title: Quality Assurance	Issued: 1/11/2021	Title: Quality Assurance

QUALITY ASSURANCE CHECKLIST AND RESOLUTION FORM

Date of Review: _____ Reviewer: _____

Incident #: _____ Return to: _____

EMS REPORT
Please correct the following item(s):

( )	Date	( )	Incident #	( )	Unit #	( )	Call Level
( )	Narrative	( )	Vital Signs	( )	Treatment/Interventions		
( )	Incident Info	( )	Time	( )	Patient Info	( )	Signatures
( )	Supply Sheet	( )	EKG				

Comments: _____

Cambridge Security Services Corporation
Standard Operating Policies and Guidelines

Business Unit: Cambridge Emergency Medical Services		No.: CSS.EMS.002
Title: Quality Assurance	Issued: 1/11/2021	Title: Quality Assurance

EMS REPORT AMENDMENT FORM

Attached this form to the original incident reports as a part of the official record.

Amended by: _____ Date: _____ Incident # _____

Date of Incident: _____

Responding Paramedic Remarks:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Attachment 14

BUREAU OF EMERGENCY MEDICAL OVERSIGHT

TTP ATTESTATION STATEMENT

As the medical director for Cambridge Security Services (Service Name) # 10010 (License #)
I developed, directed, and/or approved the development of the Trauma Transport Protocols presented in this document.

Dr. Hillel Z. Harris, FACEP		09/04/2024
Name of Medical Director	Signature of Medical Director	Approval Date

ME102298
M.D./D.O. LICENSE NUMBER

CAMBRIDGE SECURITY

OPERATIONS MEMO

TO: All Paramedic Staff

FROM: Dr. Hillel Z. Harris, MD FACEP

RE: Pre-Hospital Treatment Protocols

Date: June 1, 2021

Please know that Cambridge Security Services and I have adopted the county-wide Trauma Transport Protocols, as approved by the Palm Beach County EMS Council.

Should you have any questions or concerns, please do not hesitate to contact me at 561-819-2988.

Hillel Harris, M.D.

Attachment 15

Department of Health

Cambridge Security Services Corporation

License Number: ALS10010

Data As Of 5/18/2026

Profession	EMS Service Provider (ALS)
License	ALS10010
License Status	Clear/
Qualifications	Non - Transport
License Expiration Date	12/12/2026
License Original Issue Date	12/13/2018
Address of Record	5100 North Federal Highway Suite 405 FORT LAUDERDALE, FL 33308
Discipline on File	No

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

Discipline Public Records Request

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:
Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01
Tallahassee, FL 32399-3251

Please include the following:
1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a $25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
HARRIS, HILLEL ZVI MD	PRIMIARY MEDICAL DIRECTOR	MEDICAL DOCTOR	102298	12/13/2018

Click on the License Number to view License Details for that Practitioner

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
1FM5K8AB5MGB21422	PERMIT	VEHICLE PERMIT (ALS)	26862	2/26/2025

Name	Relationship	Profession	License	Effective Date
1FM5K8AC8RGA71485	PERMIT	VEHICLE PERMIT (ALS)	27008	4/14/2025

Click on the License Number to view License Details for that Practitioner

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

Discipline Public Records Request

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:
Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01
Tallahassee, FL 32399-3251

Please include the following:
1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a $25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
HARRIS, HILLEL ZVI MD	PRIMIARY MEDICAL DIRECTOR	MEDICAL DOCTOR	102298	12/13/2018

Click on the License Number to view License Details for that Practitioner

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
1FM5K8AB5MGB21422	PERMIT	VEHICLE PERMIT (ALS)	26862	2/26/2025
1FM5K8AC6PGB98989	PERMIT	VEHICLE PERMIT (ALS)	26861	2/26/2025
1FM5K8AC8RGA71485	PERMIT	VEHICLE PERMIT (ALS)	27008	4/14/2025

Click on the License Number to view License Details for that Practitioner

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

Attachment 16

Name	Expiry Date	# License
Roderick Crismond	12/1/2026	PMD537595
Juan Dangond	12/1/2026	PMD526540
Ana Gomez	12/1/2026	PMD534325
Douglas Henry	12/1/2026	PMD14493
CHRISTOPHER JANCI	12/1/2026	PMD535333
Jesus Jasso	12/1/2026	PMD536210
Joseph Militello	12/1/2026	PMD11024
Benjamin Moortgat	12/1/2026	PMD532896
Jamal Major	12/1/2026	PMD534622
Myia Williams	12/1/2026	PMD544800
WAGNER PAUL	12/1/2026	PMD 535337
Amber Allen	12/1/2026	PMD545473
Jonathon Grimm	12/1/2026	PMD547677
Leroy Gadson	12/1/2026	PMD539849
Jason Rodriguez	12/1/2026	PMD518646
Aaron Adkins	12/1/2026	PMD561672
Rayan Issa	12/1/2026	PMD537599
Matthew Sternfeld	12/1/2026	PMD529950
Fuad Said	12/1/2026	PMD 548385
Nicole Hernandez	12/1/2026	PMD 544353
Donald Reid	12/1/2026	PMD11460
Matthew Garbers	12/1/2026	PMD 545007
Christine Fiore	12/1/2026	PMD17507
Noah Denker	12/1/2026	PMD 534930
Alan Navarrete	12/1/2026	PMD548916
John Edmondson	12/1/2026	PMD 546191
Jason Hutton	12/1/2026	PMD 540115
Joseph Miklosh	12/1/2026	PMD 531943
Shereph Simmons	12/1/2028	PMD 550497
Daniel Tilles	12/1/2026	PMD 13148

Attachment 17

R2020 1034

AMENDED AND RESTATED 800 AGREEMENT

THIS AMENDED AND RESTATED AGREEMENT ("Agreement") is made and entered into this _____ day of AUG 2 5 2020, by and between PALM BEACH COUNTY, a political subdivision of the State of Florida ("County") and Cambridge Security Services Corporation, a corporation licensed to do business in the State of Florida, ("Participant"), with a Federal Tax ID number of 26-3471402.

WITNESSETH

WHEREAS, on September, 2018, the County and the Participant entered into an Agreement R2018-1363 (the 2018 Agreement) setting forth the terms and conditions by which the County would provide interoperable radio communications through the EMS and countywide common talk groups to the Participant; and

WHEREAS, to set forth the terms and conditions for all interoperable radio communications, this Agreement amends and restates, in its entirety, and replaces, the 2018 Agreement; and

WHEREAS, the County is continually identifying more effective service delivery methods which result in enhanced public safety services to the residents of Palm Beach County; and

WHEREAS, the County has purchased, designed, installed, and operates a Public Safety Radio System that supports the needs of the Palm Beach County Sheriff's Office, Palm Beach County Fire Rescue, Palm Beach County Emergency Medical Services, and various Palm Beach County general government agencies; and

WHEREAS, the County and the Participant have determined that the ability to provide interoperable communications is critical to the effective and efficient provision of public safety services; and

WHEREAS, it has been determined to be mutually beneficial to both Parties to execute this Agreement which sets forth the parameters under which the Participant can access the Emergency Medical Services (EMS) and Common Talk Groups established on the County's Public Safety Radio System to receive the public safety benefit of EMS communications and interoperability; and

WHEREAS, the Palm Beach County Public Safety Department/Emergency Management Division has requested that the Participant be granted limited access to the County's Public Safety Radio System in order to enhance communication and coordination efforts between hospitals and medical response providers.

NOW THEREFORE, in conjunction with the mutual covenants, promises and representations contained herein, the parties hereto agree as follows:

SECTION 1: PURPOSE

The purpose of this Agreement is to set forth the parameters under which the County will provide access to the EMS and Common Talk Groups established on the County System specifically to provide interoperable communications among public safety agencies capable of accessing this feature of the County System. This Agreement also identifies the conditions of use, the monitoring requirements, and ability of the Participant to participate in the operational decisions relating to the use of the EMS and Common Talk Groups.

SECTION 2: DEFINITIONS

2.01 Certificate of Public Convenience and Necessity (COPCN): is a certificate with endorsements issued by the Board of County Commissioners, deeming it to be in the public convenience and necessity for the named advanced life support provider to operate within the confines of the County, as authorized in Section 401.25, Florida Statutes, as amended.

2.02 Common Talk Groups: Talk groups established on the County's System that are made available to County agencies, municipalities and other non-County agencies for interoperable communications between agencies for the purpose of providing mutual assistance and planning and execution of on-scene operations.

2.03 County Talk-Groups: Talk groups established on the County's System that are made available to County agencies providing for inter-departmental communications. These talk groups are reserved for particular departments/agencies and only available to outside departments by separate agreements.

2.04 EMS Talk Groups: Talk groups established on the County's System that are made available for emergency service personnel to communicate directly with hospitals in and around Palm Beach County.

2.05 Participant Equipment: Also known as "agency radios," are Participant owned P25 compliant handheld and mobile radios and control stations that operate in the 800 MHz spectrum that have the ability to be programmed and used on the County's System.

2.06 Radio Alias: The unique name assigned to an operator's radio that displays on the dispatcher's console when a radio transmits.

2.07 SmartZone Controller: The SmartZone Controller is the central computer that controls the operation of the County's Public Safety Radio System. The SmartZone Controller manages access to System features, functions, and talk-groups.

2.08 System: The Public Safety Radio System funded, purchased, installed, maintained and owned by the County.

2.09 System Manager: An employee within the County's Electronic Services & Security Division of the Department of Facilities Development & Operations with the title Radio

System Manager who is responsible for day to day administration and management of the System and the County's designated contact person pursuant to various sections of this Agreement.

SECTION 3: ADMINISTRATION

3.01 System Contact. The Palm Beach County Electronic Services & Security Division's System Manager will be the Participant's day to day contact and can be reached at 561-233-0837. The Electronic Services & Security Division is staffed from 8:00 a.m. to 5:00 p.m., Monday through Friday, excluding County holidays. After hours emergency contact will be made through the County's Emergency Operations Dispatch Center at 561-712-6428 and the appropriate contact will be made.

3.02 CRSSC. The System Maintenance and Administration Plan as referenced on Attachment I hereto, identifies the general procedures for the management of the System and procedures for input through the user committees into operating procedure development. The plan establishes the Countywide Radio System Steering Committee (CRSSC), which is responsible for overseeing and implementing the policies and procedures for the County's System.

3.03 Compliance with System Policies and Procedures. The Participant shall follow all policies and standard operating procedures in place at the time of this Agreement as well as those developed in the future and issued to the Participant by the System Manager. The Participant agrees to comply with any enforcement actions required by these policies and procedures for misuse or abuse of the County's System.

SECTION 4: COUNTY SYSTEM & RESPONSIBILITIES

4.01 County System. The County System consists of eleven (11) transmit and receive sites with co-located microwave equipment and three (3) microwave only sites that provide network connectivity as well as the SmartZone Controller.

4.02 Coverage for Common Talk Groups. The County System provides seamless County-wide portable and mobile radio coverage for the EMS and Common Talk Groups. The radio coverage for the EMS and Common Talk Groups is identical to that of other County Talk Groups that reside on the County's System.

4.03 County Responsibilities for System Maintenance and Operations. The County shall be responsible for the maintenance and operation of the County's System, including all costs associated with permitting and licensing.

4.04 Scheduled Outages. The County shall maintain the coverage as described in the County's contract with Motorola R2015-1673, dated 11/17/15, and as described within Participant's geographic boundaries as described in Participant's COPCN, throughout the term of this Agreement except for times of scheduled preventive maintenance, where it will be required to disable portions of the network for a pre-determined length of time or during times of system

failures. The Participant shall be notified of scheduled preventive maintenance, pursuant to the policies and procedures referenced on Attachment I hereto.

4.05 Management. The County shall be responsible for talk group and fleet mapping management in accordance with the policies and procedures set forth on Attachment I, as may be amended and updated from time to time.

SECTION 5: PARTICIPANT EQUIPMENT AND RESPONSIBILITIES

5.01 Participant Equipment. The Participant's equipment will be P25 compliant 800 MHz mobile, portable, and control station equipment programmed to be used on the County's System. Equipment other than that manufactured by Motorola shall be approved by the System Manager prior to purchase by the Participant. The Participant is required to keep its equipment in proper operating condition and the Participant is responsible for maintenance of its radio equipment.

5.02 Agreement Limited to EMS and Common Talk Groups. The Participant will only program the EMS and Common Talk Groups and the individual unit ID numbers assigned by the System Manager as part of this Agreement. The Participant will **not** program into its radios the County operational talk groups without a letter of authorization or a signed agreement from the County.

5.03 Participant Contacts. The Participant shall provide the County with a list of persons/positions, which are authorized to request activating/deactivating existing units or new units. No programming will be undertaken by the Participant or its service provider until requested and approved in writing by the System Manager.

5.04 County Confidential Information. The Participant shall receive certain access codes to the County's System to enable the Common Talk Groups to be programmed into the Participant's equipment. ***The access codes are considered to be exempt and confidential security system information under F.S. 119.071(3) and must not be released to the public or unauthorized persons.*** The access codes are to be treated as confidential information and the Participant is responsible for safeguarding and protecting the confidentiality of the code information from release to unauthorized parties. All confidential security system information and data obtained, developed, or supplied by the County ("Confidential Information") will be kept confidential by the Participant and will not be disclosed to any other party, directly or indirectly, without the County's prior written consent, unless required by law or lawful order. All system parameters shall remain the County's property, and may only be reproduced or distributed with the written permission of the County. The Participant agrees that the County has sole and exclusive ownership of all right, title and interest to the Confidential Information and may be recalled at any time.

5.04.01 Authorized Parties. Service staff directly employed by the Participant shall be considered authorized to receive access and programming codes for the maintenance of the Participant's radio equipment. Commercial service providers are not considered authorized to receive access to programming codes for the System. If the

Participant plans to use commercial services for its system or subscriber unit maintenance, the Participant must include confidentiality requirements in their contracts with the commercial service providers acceptable to the System Manager before access or programming codes may be released to these companies.

5.04.02 Commercial Service Providers. Commercial maintenance service providers are **not** considered authorized to receive access to programming codes for the County's System, unless meeting the requirements of Section 5.04.03 and/or 5.04.04 below. If the Participant does not have employees capable of programming Participant radio equipment or prefers to have others program Participant radio equipment, it may request that the Palm Beach County Sheriff's Office, Palm Beach County Fire Rescue or Palm Beach County Electronic Services & Security Division program Participant's radio equipment under the terms of a separate agreement.

5.04.03 County Review of Existing Service Provider Agreements. If the Participant uses a commercial service provider to program Participant radio equipment at the time of execution of this Agreement, and desires that the commercial service provider program the Participant radio equipment with the EMS and Common Talk Groups, the Participant must submit its existing contract with the commercial service provider to the System Manager for review. The review will focus on whether the contract terms between the Participant and the commercial service provider are adequate to protect the County's System from misuse, harm or release of access and programming codes to unauthorized persons. Notwithstanding the previous statement, the County retains the right, in its sole opinion with or without written reason or cause, to approve or disapprove the use of a commercial service provider. If approved, the System Manager will release the access and programming codes to the commercial service provider. The Participant will be responsible for ensuring that the commercial service provider adheres to the terms of this Agreement pertaining to the proper use of programming codes and radio equipment and pertaining to the safeguarding and protection of the confidentiality of the access codes. If not approved, the Participant shall use the Palm Beach County Sheriff's Office, Palm Beach County Fire Rescue, or the Palm Beach County Electronic Services & Security Division to program Participant radio equipment with EMS and Common Talk Groups.

5.04.04 Review of Bid Documents for Service Provider. If the Participant intends to use a commercial service provider to program Participant radio equipment with the EMS and Common Talk Groups, the Participant shall submit the appropriate bid documents/contract to the System Manager for approval prior to soliciting a bid or quote from the commercial service provider. The System Manager will work with the Participant to develop the appropriate language for the contract which will allow for approval of the commercial service provider. Notwithstanding the previous statement, the County retains the right, in its sole opinion with or without written reason or cause, to approve or disapprove the use of a commercial service provider. If approved, the System Manager will release the access and programming codes to the commercial service provider. The Participant will be responsible for ensuring that the commercial service provider adheres to the terms of this Agreement pertaining to the proper use of the

programming codes and radio equipment use and the terms requiring the safeguarding and protection of the confidentiality of the access codes. If not approved, the Participant shall use the Palm Beach County Sheriff's Office, Palm Beach County Fire Rescue, or Palm Beach County Electronic Services & Security Division to program Participant radio equipment with EMS and Common Talk Groups.

5.04.05 Survival. The provisions of this section regarding the Participant's duty to keep the County's access codes confidential shall survive the termination or expiration of this Agreement.

5.05 Malfunctioning Participant Equipment. The Participant is solely responsible for the performance and the operation of the Participant equipment and any damages or liability resulting from the use thereof. Should the County identify malfunctioning Participant owned equipment; the County will request that the Participant discontinue use of the specific device until the repairs are completed. The County may, in its discretion, disable the equipment from the System after properly notifying the Participant in writing if the device is causing interference to the System.

5.06 Stolen or Lost Participant Radios. In the case of lost or stolen equipment, the Participant will notify the System Manager by e-mail authorizing the System Manager to disable the equipment. The authorization shall provide the County issued individual unit ID number and the serial number of the radio. The System Manager will advise via e-mail when the radio has been disabled. A request by the Participant to re-activate a disabled radio must be in writing by e-mail to the System Manager.

5.07 COPCN. Prior to obtaining the access codes to the County's System, the Participant shall obtain a COPCN, which will detail the emergency services that can be conducted by the Participant as well as the geographical area within the County where it can perform services. The Participant must maintain its COPCN in order to use the access codes for the County's System.

5.08 Use of Radio Equipment. Radio equipment programmed with access codes for the County's System shall only be used by staff directly employed by the Participant and shall only be used in the locations authorized by the COPCN.

SECTION 6: SUBSCRIBER UNIT INFORMATION TO BE PROVIDED BY PARTICIPANT

The Participant will be required to provide to the County an initial inventory of the radios that are proposed to be programmed for use of the EMS and Common Talk Groups. The Participant will provide the following information to the County:

- Radio manufacturer and model numbers.
- Radio serial numbers.
- Requested aliases to be programmed.

The System Manager will then compile this information and transmit back to the Participant a matrix of the County-wide Talk Groups, aliases, and radio ID numbers prior to the Participant's radios being activated on the County's Public Safety Radio System. The Participant is responsible for adhering to the Talk-Group and Radio ID allocations established by the County. The County's Talk-Group and Radio ID allocations are on file with the County and available upon request.

SECTION 7: UTILIZATION AND MONITORING OF EMS AND COMMON TALK GROUPS

7.01 Purpose of EMS Talk Groups. The EMS Talk Group was implemented specifically for emergency medical communications between the emergency providers and hospitals in and around Palm Beach County. The usage of the talk groups are defined below. Typical Usage Scenario:

- A field unit requiring communications with a hospital will request communications through the County's Fire Rescue Dispatch Center on its currently assigned talk-group or on a MED Control talk-group.
- The Fire Rescue Dispatch Center will approve the request that the field unit change talk-groups to the requested hospital talk-group.
- The field unit will then switch to the appropriate talk-group.
- At the conclusion of the communications the field unit will switch back to its assigned talk-group and advise the Fire Rescue Dispatch Center of its return.

7.02 Purpose of Common Talk Groups. The Common Talk Groups were implemented specifically for inter-agency communication among multiple agencies, regardless of their specific discipline or affiliation. They were also created to allow communications between agencies without requiring cross-programming operational talk groups in each agency's radios.

Typical Usage Scenario:

- A unit requesting to coordinate a multi-jurisdictional operation or call for mutual assistance, places a call on the Call Talk Group for the appropriate discipline (i.e. Law Enforcement, Fire Rescue, or Local Government) to the dispatch center of the required agency(ies).
- The responding dispatch center assigns one of the Common Talk Groups to the requesting unit and contacts its agency's unit(s) and requests that the user switch to the corresponding talk group.
- The participating units would communicate on the Common Talk Group(s) and upon completion of the operation; the talk-group is cleared of all radio traffic and put back into the pool for other agencies.

7.03 Approved Uses. Usage of the EMS and Common Talk Groups is authorized to coordinate multi-jurisdictional fire/law enforcement/disaster recovery operations such as fires requiring multi-agency responses, police pursuit through multiple jurisdictions, coordination and response to local emergencies and disasters, and for emergency medical communications between emergency providers and hospitals in and around Palm Beach County. Other authorized uses include undercover operations, investigations, perimeter communications, fire ground coordination, scene security and landing zone communications requiring participation of multiple agencies and disciplines.

7.04 Prohibited Uses. The EMS and Common Talk Groups shall not be used for every-day routine communications or as an extra talk group for agencies that have cross programming agreements and duplicated talk groups programmed into their radios. Other prohibited uses include communications for special events and operations, use as an additional dispatch, administrative or a car to car talk group for a single agency.

7.05 Required Monitoring. Agencies requesting to use the EMS and Common Talk Groups by this Agreement have a requirement to monitor the Calling Talk Group in their respective dispatch center to respond to calls for assistance from field units. The dispatch centers which combine more than one discipline in their dispatch center are required to monitor the disciplines which are dispatched. Agencies which do not utilize their own dispatch center are not required to monitor the Calling Talk Group.

SECTION 8: LIABILITY

8.01 No Representation as to Fitness. The County makes no representations about the design or capabilities of the County's System. The Participant has decided to enter into this Agreement and use the County's System on the basis of having interoperability with the County and /or other municipalities during times of mutual aid and/or joint operations. The County agrees to use its best reasonable efforts to provide the Participant with full use of the EMS and Common Talk Groups but makes no guarantee as to the continual, uninterrupted use of the System, or its fitness for the communication needs of the Participant.

8.02 Indemnification. The Participant agrees to protect, defend, reimburse, indemnify and hold County, it's agents, employees and elected officials and each of them (hereinafter collectively and for the purposes of this paragraph, referred to as "County"), free and harmless at all times from and against any and all claims, liability, expenses, losses, costs, fines and damages (including attorney's fees at trial and appellate levels) and causes of action of every kind and character against, or in which County is named or joined, of any damage to property or the environment, economic losses, or bodily injury (including death) incurred or sustained by any party hereto, or of any party acquiring an interest hereunder, and any third party or other party whomsoever, or any governmental agency, arising out of or in incident to or in connection with Participant's performance under this Agreement, the condition of the property, Participant's acts or omissions or operations hereunder, of the performance, non-performance or purported performance of the Participant of any breach of the terms of this Agreement; provided however, that Participant shall not be responsible to County for damages resulting out of bodily injury or

damages to property which Participant can establish as being primarily attributable to the negligence of the County.

Participant further agrees to hold harmless and indemnify County for fines, citations, court judgments, insurance claims, restoration costs or other liability resulting from Participant's activities pursuant to this Agreement, whether or not Participant was negligent or even knowledgeable of any events precipitating a claim or arising as a result of any situation involving Participant's activities.

Participant shall indemnify, defend and save County harmless from and against any and all claims, actions, damages, liability and expense in connection with: (i) loss of life, personal injury and/or damage to or destruction of property arising from or out of any use or lack thereof, of the County's System; (ii) use by Participant, or (iii) any act or omission of Participant. its agents, contractors, employees or invitees. In case County shall be made a party to any litigation commenced against the Participant or by Participant against any third party, then Participant shall protect and hold harmless and pay all costs and attorney's fees incurred by County in connection with such litigation, and any appeals thereof.

8.03 No Responsibility for Third Party Claims. Neither the County nor the Participant shall be liable to each other or for any third party claim, which may arise out of the services provided hereunder or of the radio System itself, its operation or use, or its failure to operate as anticipated, upon whatever cause of action any claim is based. The System is designed to assist qualified law enforcement, fire, and other emergency service professionals. It is not intended to be a substitute for the exercise of judgment or supervision of these professionals. Both parties acknowledge that the responsibility for providing law enforcement, fire, or other emergency services rests with the agency which is providing such service and not necessarily either party to this Agreement.

8.04 No Consequential Damages. The terms and conditions of this Agreement incorporate all the rights, responsibilities, and obligations of the parties to each other. The remedies provided herein are exclusive. The County and the Participant waive all other remedies with respect to each other, including, but not limited to, consequential and incidental damages.

8.05 Survival. The provisions of this section shall survive the termination or expiration of this Agreement.

SECTION 8A: INSURANCE

The Participant shall at its sole expense, maintain in effect at all times during the performance of work hereunder insurance coverage with limits not less than those set forth below and with insurers and under forms of policies acceptable to the County.

During the term of this Agreement, Participant shall maintain Workers Compensation Insurance and Employers Liability insurance in accordance with Chapter 440 Florida Statutes and applicable Federal Acts. This coverage shall be provided on a primary basis. If any work is subcontracted, Participant shall require all subcontractors to similarly comply with this

requirement unless such subcontractor's employees are covered by the Participant's Workers Compensation Insurance policy.

Participant shall purchase and maintain during the term of this Agreement, Commercial General Liability insurance (required coverages, premises/operations, independent contractors, products/completed operations, contractual liability, broad form liability, X-C-U coverages, if applicable) in the amount no less than $1,000,000 per occurrence.

Should any of the work hereunder involve water craft owned or operated by Participant or any subcontractor, such shall be insured under the Commercial General Liability policy or by other such liability insurance such as Protection and Indemnity in an amount no less than $5,000,000 per occurrence.

Should any of the work hereunder involve aircraft (fixed wing or helicopter) owned or operated by Participant or any subcontractor, Participant shall procure and maintain Aircraft Liability insurance in the amount of $5,000,000 per occurrence bodily injury (including passengers) and property damage.

Should the Participant provide patient carrier services using Participant owned or leased vehicles, the Participant shall purchase and maintain during the term of this Agreement, Business Automobile Liability insurance covering on all owned, non-owned and hired automobiles with all of the limits, terms and conditions with a combined single limit bodily injury and property damage in an amount no less than $1,000,000 per occurrence.

The requirements contained herein as to types and limits, as well as County's approval of insurance coverage to be maintained by Participant are not intended to and shall not in any manner limit or qualify the liabilities and obligations assumed by Participant under this Agreement.

The County shall be named as an Additional Insured on each liability insurance policy required, except for Workers Compensation and Business Auto Liability. The additional insured endorsements shall provide coverage on a primary basis. The Additional Insured endorsement shall read "Palm Beach County Board of County Commissioners, a political subdivision of the State of Florida, its Officers, Employees and Agents", c/o Electronic Services & Security Division, 2633 Vista Parkway, West Palm Beach, FL, 33411. All involved policies must be endorsed so that thirty (30) days notification of cancellation and any material change(s) in coverage shall be provided to the Board of County Commissioners of Palm Beach County.

The Certificates of Insurance must provide clear evidence that Participant's Insurance Policies contain the minimum limits of coverage and special provisions prescribed in this Section, in accordance with all of the limits, terms and conditions set forth above and shall remain in force during the entire term of this Agreement. Prior to the execution of this Agreement, Participant shall deliver to County Certificate of Insurance, evidencing that such policies are in full force and effect. Such Certificates shall adhere to the conditions set forth herein. Such initial evidence of insurance shall be sent to:

Palm Beach County
C/O Facilities Development & Operations Department
Attn: Business & Community Agreements Manager
2633 Vista Parkway
West Palm Beach, FL 33410

During the term of the Agreement and prior to each subsequent renewal thereof, the Participant shall provide this evidence of compliance with the insurance requirements contained herein to Palm Beach County. Said Certificate(s) of Insurance shall, to the extent allowable by the insurer, include a minimum thirty (30) day endeavor to notify due to cancellation (10 days for nonpayment of premium) or non-renewal of coverage. Should Participant fail to maintain the insurance required herein, the County may terminate Participant's use of the Radio System until coverage is reinstated.

County may request evidence of compliance with the insurance requirements during the term of this Agreement and Participant shall supply such evidence within forty-eight (48) hours of the County's request to do so, by delivering to the County a signed Certificate(s) of Insurance evidencing that all types and amounts of insurance coverages required by this Agreement have been obtained and are in full force and effect.

SECTION 9: OWNERSHIP OF ASSETS

All assets maintained under this Agreement will remain assets of the respective party.

SECTION 10: TERM OF AGREEMENT

10.01 Initial Term. The initial term of this Agreement is for five (5) years and shall commence immediately upon full execution of this Agreement.

10.02 Renewals. The Agreement may be renewed for two (2) additional terms of five (5) years each. At least six (6) months prior to the expiration of this Agreement's term, the Participant shall provide the County with a request to renew this Agreement. Such renewal will require approval of both parties and the County may not unreasonably withhold its approval of the renewal.

10.03 Existing Interlocal Terminated. This Agreement when effective terminates and replaces the Interlocal Agreement between County and Participant R2018-1363.

SECTION 11: AMENDMENTS TO THIS AGREEMENT

This Agreement may be amended from time to time by written amendment as agreed to by all parties.

SECTION 12: TERMINATION

This Agreement shall terminate if Participant's COPCN expires or is revoked and may be terminated by either party, with or without cause upon ten (10) days written notice to the other party. Upon notice of termination, the System Manager will proceed to disable the Participant's radios from the County's System. It will be the responsibility of the Participant to reprogram the Participant's radios removing the County's System information from the radios. The Participant will complete reprogramming the Participant's radios within sixty (60) days of the date of termination. A Participant with greater than one hundred (100) radios will be given ninety (90) days to re-program its radios.

SECTION 13: NOTICES

Any notice given pursuant to the terms of this Agreement shall be in writing and be delivered by Certified Mail, Return Receipt Requested. The effective date of such notice shall be the date of receipt, as evidenced by the Return Receipt. All notices shall be addressed to the following:

As to the County:

County Administrator
301 North Olive Avenue
West Palm Beach, FL 33401

Director, Facilities Development & Operations
2633 Vista Parkway
West Palm Beach, FL 33411-5603

With a copy to:

Radio System Manager
Palm Beach County Electronic Services & Security Division
2601 Vista Parkway
West Palm Beach, FL 33411-5610

County Attorney's Office
301 North Olive Avenue
West Palm Beach, FL 33401

As to the Participant:

Cambridge Security Services Corporation
5100 N Federal Hwy, 4th Floor
Fort Lauderdale, FL 33408

SECTION 14: APPLICABLE LAW

This Agreement shall be governed by the laws of the State of Florida. Any legal action necessary to enforce the Agreement will be held in a court of competent jurisdiction located in Palm Beach County, Florida.

SECTION 15: FILING

A copy of this Agreement shall be filed with the Clerk of the Circuit Court in and for Palm Beach County.

SECTION 16: ENTIRE AGREEMENT

This Agreement and any Attachments hereto constitute all agreements, conditions and understandings between the County and the Participant concerning access to the EMS and Common Talk Groups. All representations, either oral or written, shall be deemed to be merged into this Agreement, except as herein otherwise provided, no subsequent alteration, waiver, change or addition to this Agreement shall be binding upon the County or Participant unless reduced to writing and signed by them.

SECTION 17: DELEGATION OF DUTY

Nothing contained herein shall be deemed to authorize the delegation of the Constitutional or Statutory duties of the County's officers.

SECTION 18: PALM BEACH COUNTY OFFICE OF THE INSPECTOR GENERAL AUDIT REQUIREMENTS

Palm Beach County has established the Office of the Inspector General in Palm Beach County Code, Section 2-421 - 2-440, as may be amended. The Inspector General is authorized with the power to review past, present and proposed County contracts, transactions, accounts and records. The Inspector General's authority includes, but is not limited to, the power to audit, investigate, monitor, and inspect the activities of entities contracting with the County, or anyone acting on their behalf, in order to ensure compliance with contract requirements and to detect corruption and fraud. Failure to cooperate with the Inspector General or interfering with or impeding any investigation shall be a violation of Palm Beach County Code, Section 2-421 - 2-440, and punished pursuant to Section 125.69, Florida Statutes, in the same manner as a second degree misdemeanor.

SECTION 19: NO THIRD PARTY BENEFICIARY

No provision of this Agreement is intended to, or shall be construed to, create any third party beneficiary or to provide any rights to any person or entity not a party to this Agreement, including but not limited to any citizen or employees of the County and/or Participant.

SECTION 20: NON-DISCRIMINATION

The County is committed to assuring equal opportunity in the award of contracts and complies with all laws prohibiting discrimination. Pursuant to Palm Beach County Resolution R2017-1770, as may be amended, the Participant warrants and represents that throughout the term of the Agreement, including any renewals thereof, if applicable, all of its employees are treated equally during employment without regard to race, color, religion, disability, sex, age, national origin, ancestry, marital status, familial status, sexual orientation, gender identity or expression, or genetic information. Failure to meet this requirement shall be considered default of the Agreement.

SECTION 21: ASSIGNMENT

Participant may not assign, mortgage, pledge, or encumber this Agreement in whole or in part, without prior written consent of County, which may be granted or withheld at the County's absolute discretion. This provision shall be construed to include a prohibition against an assignment, mortgage, pledge, encumbrance or sublease, by operation of law, legal process, receivership, bankruptcy, or otherwise, whether voluntary or involuntary.

SECTION 22: SEVERABILITY

If any term of the Agreement or the application thereof to any person or circumstance shall be determined by a court of competent jurisdiction to be invalid or unenforceable, the remainder of the Agreement, or the application of such term to persons or circumstances other than those as to which it is held invalid or unenforceable, shall not be affected thereby, and each term of the Agreement shall be valid and enforceable to the fullest extent permitted by law.

SECTION 23: COUNTERPARTS

This Agreement may be executed in counterparts, each of which shall be deemed to be an original, but all of which, taken together, shall constitute one and the same agreement.

SECTION 24: ANNUAL BUDGETARY FUNDING/CANCELLATION

This Agreement and all obligations of County hereunder requiring the expenditure of funds are subject to and contingent upon annual budgetary funding and appropriations by the Palm Beach County Board of County Commissioners .

SECTION 25: EFFECTIVE DATE

This Agreement is expressly contingent upon the approval of the Palm Beach County Board of County Commissioners and shall become effective only when signed by all Parties and approved by the Palm Beach County Board of County Commissioners.

THE REMAINDER OF THIS PAGE LEFT BLANK INTENTIONALLY

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed on the day and year first above written.

ATTEST:

SHARON R. BOCK
CLERK & COMPTROLLER

By: _____
Deputy Clerk

R2020 1034 AUG 25 2020

PALM BEACH COUNTY, a political subdivision of the State of Florida

By: _____
Dave Kerner, Mayor

APPROVED AS TO LEGAL SUFFICIENCY:

By: _____
County Attorney

APPROVED AS TO TERMS AND CONDITIONS:

By: _____
Audrey Wolf, Director
Facilities Development & Operations

WITNESS:

By: Emilia Waite
Witness Signature

Emilia Waite
Print Signature Name

By: _____
Witness Signature

Eric Diaz
Print Signature Name

PARTICIPANT:

By: _____
Jim D'Arcy Title COO

ATTACHMENT I

PALM BEACH COUNTY
PUBLIC SAFETY RADIO SYSTEM
POLICIES AND PROCEDURES

Policy / Procedure Title

1. Countywide Use of 800 MHz System (O.P. # I-01)
2. Countywide Use of 800 MHz System Talk Groups (O.P. # I-04)
3. Monitoring and Evaluation of Public Safety Radio System Talk Groups (O.P. # I-05)
4. Emergency Medical Communications (O.P. # I-06)
5. Reporting of Problems and Modifications of the Public Safety Radio System (O.P. # I-07)
6. Countywide Use of Public Safety Radio System During Times of Catastrophic Failure which result in non-trunking "conventional" operation (O.P. # I-10)
7. System Maintenance and Administration Plan

Attachment 18

CAMBSEC-01 KANDALON

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 12/12/2025

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 License # 0757776 HUB International Insurance Services Inc. 548 W Cromwell Avenue Suite 101 Fresno, CA 93711	CONTACT NAME: Joel Malone PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: joel.malone@hubinternational.com
INSURED Cambridge Security Services Corporation 951 Broken Sound Pkwy Ste 188 Boca Raton, FL 33487	INSURER(S) AFFORDING COVERAGE — NAIC # INSURER A : Lexington Insurance Company — 19437 INSURER B : Arch Insurance Company — 11150 INSURER C : MS Transverse Specialty Insurance Company — 41807 INSURER D : INSURER E : INSURER F :

COVERAGES **CERTIFICATE NUMBER:** **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE [X] OCCUR X Errors & Omissions GEN'L AGGREGATE LIMIT APPLIES PER: POLICY [X] PRO-JECT [ ] LOC OTHER:	X		080877973	9/27/2025	9/27/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 300,000 $ $ 1,000,000 $ 3,000,000 $ 3,000,000
B	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY			ZACAT1210601	1/1/2026	1/1/2027	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $
C	UMBRELLA LIAB [X] OCCUR X EXCESS LIAB [ ] CLAIMS-MADE DED RETENTION $			EMB-00000006-00	9/27/2025	9/27/2026	EACH OCCURRENCE AGGREGATE Aggregate	$ 2,000,000 $ $ 2,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N [ ] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		ZAWCI1139301	1/1/2026	1/1/2027	X PER STATUTE / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 1,000,000 $ 1,000,000 $ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Palm Beach County Board of County Commissioners Additional Insured with regard to General Liability when required by written contract
Endorsements attached: #5

CERTIFICATE HOLDER

Palm Beach County Board of County Commissioners
Insurance Compliance c/o EBIX, Inc.
PO Box 100085 - DX
Duluth, GA 30096

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

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The ACORD name and logo are registered marks of ACORD

ENDORSEMENT # 005

This endorsement, effective 12:01 AM 09/27/2025

Forms a part of policy no.: 080877973

Issued to: CAMBRIDGE SECURITY SERVICES CORP.

By: LEXINGTON INSURANCE COMPANY

ADDITIONAL INSURED REQUIRED BY WRITTEN CONTRACT ENDORSEMENT

This endorsement modifies insurance provided under the following:

GUARDSECURE® SECURITY RELATED GENERAL AND PROFESSIONAL LIABILITY POLICY

A. Section II - Who Is An Insured is amended to include any person or organization you are required to include as an additional insured on this policy by a written contract or written agreement in effect during this policy period and executed prior to the "occurrence" or "wrongful act".

B. The insurance provided to the above described additional insured under this endorsement is limited as follows:

1. **COVERAGE A BODILY INJURY, PROPERTY DAMAGE AND PROFESSIONAL LIABILITY (SECTION I - COVERAGES)** only.

2. The person or organization is only an additional insured with respect to liability arising out of "your work" or your "professional services".

3. In the event that the Limits of Insurance provided by this policy exceed the Limits of Insurance required by the written contract or written agreement, the insurance provided by this endorsement shall be limited to the Limits of Insurance required by the written contract or written agreement. This endorsement shall not increase the Limits of Insurance shown in the Declarations pertaining to the coverage provided herein.

4. This insurance does not apply to "bodily injury", "property damage" or "professional liability" arising out of:

   a. "Your work" or your "professional services" unless you are required to provide such coverage by written contract or written agreement and then only for the period of time required by the written contract or written agreement and in no event beyond the expiration date of the policy; or

   b. The sole negligence of the additional insured for its own acts or omissions or those of its employees or anyone else acting on its behalf.

5. Any coverage provided by this endorsement to an additional insured shall be excess over any other valid and collectible insurance available to the additional insured whether provided on a primary, excess, contingent or on any other basis, unless the written contract or written agreement with the additional insured specifically requires that this insurance be primary and non-contributory with any other insurance issued to the additional insured. In such case, this insurance shall be primary and non-contributory with any other insurance issued to the additional insured.

C. In accordance with the terms and conditions of the policy and as more fully explained in the policy, as soon as practicable, each additional insured must give us prompt notice of any "occurrence" or "wrongful act" which may result in a claim, forward all legal papers to us, cooperate in the defense of any actions, and otherwise comply with all of the policy's terms and conditions. Failure to comply with this provision may, at our option, result in the claim or "suit" being denied.

All other terms and conditions of the policy remain the same.

Authorized Representative

11. **Cambridge Insurance.** At all times during this Agreement, CAMBRIDGE shall, at its own expense, maintain and provide:

TYPE OF INSURANCE	LIMIT OF INSURANCE
Commercial Liability – Occurrence Form – CG0001 (12/04) Including Security Services Errors and Omissions and Care, Custody and Control Liability	$1,000,000 Per Occurrence $3,000,000 Aggregate
Workers Compensation & Employers Liability	Statutory
CAMBRIDGE Auto Liability including Hired and Non-Owned Auto Liability	$1,000,000
Fidelity / Crime "A" – Employee Dishonesty including 3rd party crime	$1,000,000
Excess Liability over General Liability, Auto Liability and Employers Liability	$5,000,000 Per Occurrence $5,000,000 Aggregate

CAMBRIDGE agrees to name CLIENT on a primary and non-contributory basis as an Additional Insured on CAMBRIDGE's Commercial Liability, Auto Liability and Excess Liability Insurance Plans but only for liability caused solely by direct negligent acts of CAMBRIDGE's employees while performing agreed upon duties as security guards as set forth in this Agreement. To the extent permitted by applicable law CAMBRIDGE agrees to waive its and its insurers right of subrogation on all policies of insurance issued to CAMBRIDGE.

12. **Non-Solicitation.** During the term of this Agreement and for a period of two (2) years after the termination of this Agreement, CLIENT shall not, directly or indirectly, for itself or any other person employ any person who is employed by CAMBRIDGE on the date hereof or who has accepted an offer employment from CAMBRIDGE during the term of this Agreement or solicit or encourage any such person to terminate his employment with CAMBRIDGE or to become affiliated with any other company or business which is engaged in the services business. It is impractical and extremely difficult to fix the actual damages, if any, which may proximately result from CLIENT's breach of this provision. Accordingly, for each breach of this of this provision (per employee), CLIENT shall pay 1/3rd (33.33%) of the employee annual salary to CAMBRIDGE as liquidated damages, and not as a penalty.

13. **Notices.** All notices required or permitted by this Agreement shall be in writing, signed by the party serving the notice, sent to the party at the address shown on the first page hereof or to such other address as either party designates to the other in writing as a place for the service of notice. Such notices shall be sent either via facsimile, via registered or certified United States mail (return receipt requested), or via a nationally recognized air courier service, and shall be deemed given when actually received at the address shown on the postal or air courier receipt. Notices not given in this manner or within the time limits set forth in this Agreement shall be of no effect and may be disregarded by the party whom they are directed.

14. **Indemnification.** Subject to the limitations set forth in this Agreement, CAMBRIDGE agrees to indemnify, defend and hold harmless, CLIENT, and their respective directors, trustees, and officers from

Initial
Initial

Attachment 19

Acknowledgement Form Relating to Special Secondary Service Provider's Financial Statements

The below named Community Association hereby certifies, acknowledges and agrees as follows:

In accordance with Palm Beach County Code, Chapter 13, Article 11, Division 1 (Emergency Medical Services Ordinance or EMS Ordinance), an agency desiring to provide non-transportALS services within a community until the primary provider arrives, pursuant to a contract with that Community Association, must submit an application to the County and meet the requirements for issuance of a Special Secondary Service Provider (SSSP) Certificate of Public Convenience and Necessity (COPCN). The EMS Ordinance requires SSSP applicants to submit financial information to ensure financial ability to provide and continue to provide services, including audited financial statements; but if such company does not have audited financial statements, then the applicant may instead submit reviewed financial statements, provided the applicant also submits a written acknowledgment from the affected Community Association, signed by an authorized representative, confirming that the Community Association acknowledges and accepts the that the applicant does not have audited financial statements and has submitted with its COPCN application reviewed financial statements in lieu of audited financial statements.

The below named Community Association has a contract with CAMBRIDGE SECURITY SERVICES (Provider) to provide non-transport ALS services within BROKEN SOUND (Community) until the primary provider arrives; and Provider has applied to the County for a SSSP COPCN within this Community. The below named Community Association submits this written acknowledgment, in support of Provider's SSSP COPCN application, to confirm that said Community Association acknowledges and accepts that Provider does not have audited financial statements and has submitted with its COPCN application reviewed financial statements in lieu of audited financial statements.

The undersigned individual hereby confirms and represents that he or she is an authorized representative of the Community Association with authority to sign and submit this acknowledgment form.

BROKEN SOUND MASTER ASSOCIATION

WITNESS:

Signature

Natalia Olortegui

Name

BY:

~~Signature of Authorized Representative~~

John Fuller

Name of Authorized Representative

Community Association Manager

Title of Authorized Representative

Broken Sound Master Association
2701 NW 64th Blvd
Boca Raton, FL 33496

Office of
Emergency Management
20 South Military Trail
West Palm Beach, FL 33415
(561) 712-6400
FAX: (561) 712-6464
www.pbc.gov

Palm Beach County
Board of County
Commissioners

Sara Baxter, Mayor

Marci Woodward, Vice Mayor

Maria G. Marino

Gregg K. Weiss

Joel G. Flores

Maria Sachs

Bobby Powell Jr.

County Administrator

Joseph Abruzzo

July 10, 2026

Reviewed financial statements were provided with this application but have been redacted as trade secrets pursuant to Section 812.081, Florida Statute.

A copy of the reviewed financial statements will be maintained in the Palm Beach County Office of Emergency Management records located in the office of the EMS Specialist.

Any questions or concerns, please contact:

Malinda Ragoonath, Emergency Program Coordinator – EMS

561-712-6484 mragoonath@pbc.gov

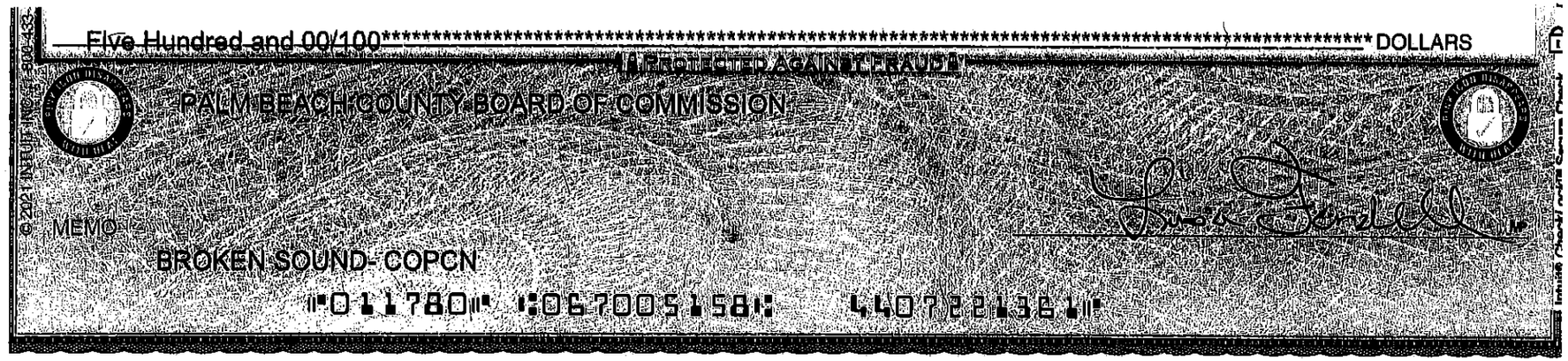
"An Equal Opportunity Employer"

Official Electronic Letterhead

Attachment 20

	Palm Beach County Emergency Medical Services COPCN Application **Special Secondary COPCN Fee**		Together Emergencies Are Managed
Agency Name	**Cambridge Security Services**		
	Broken Sound	Received By	L. Lawler
General Fund 0001-660-7110-4295			
Payment Received	Date		6/11/2026
	Check Number		
	Amount		$500.00

PAID



CAMBRIDGE SECURITY SERVICES CORP.

11780

PALM BEACH COUNTY BOARD OF COMMISSIONERS 5/18/2026

Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
5/18/2026	Bill	BROKEN SOUND	500.00	500.00		500.00
					Check Amount	500.00

Seacoast Operating	BROKEN SOUND- COPCN	500.00

Certificate of Public Convenience and Necessity
Palm Beach County Emergency Medical Services

WHEREAS, there is a need for Cambridge Security Services Corporation to operate and provide essential emergency medical services to the citizens and visitors of Palm Beach County, Florida; and

WHEREAS, said agency has applied to provide these services; and

WHEREAS, said agency has indicated that it meets and will comply with all requirements of Palm Beach County's EMS Ordinance, set forth in Chapter 13, Article II, Division 1, of the Palm Beach County Code, and related Rules, as well as Chapter 401, Part III, Florida Statutes, and Chapter 64J, Florida Administrative Code.

NOW THEREFORE, the Board of County Commissioners of Palm Beach County hereby issues a Certificate of Public Convenience and Necessity to said emergency medical service provider, valid from issuance on **September 15, 2026** and until the earlier of termination by the Board of County Commissioners or termination of the contractual agreement with Broken Sound Club.

In issuing this Certificate, it is understood that the agency named hereon will meet the requirements of all pertinent County and State laws, rules and regulations, and will provide emergency medical services on a twenty-four hour basis in the area(s) designated, providing the level of service endorsed as follows:

Area(s): Broken Sound Club

Service Endorsed: Special Secondary Service Provider – ALS Non – Transport

Director, Office of Emergency Management

Mayor, Board of County Commissioners