NOTE: There is a three-minute time limit on all comments from the public, regardless of the subject matter. A request form is available from the Deputy Town Clerk; please fill it in and return it to her prior to the start of the meeting if you would like to speak during public comment. When you speak, you must come to the podium in the front and clearly state your name and address for the record. Please turn off or mute your cell phone or pager at the start of the meeting. Thank you.

TOWN OF BAY HARBOR ISLANDS

SPECIAL COUNCIL MEETING AGENDA

July 29, 2021

CALL TO ORDER: 6:00 p.m.

PLEDGE OF ALLEGIANCE:

ROLL CALL:

1. **Consideration** and **Approval** of a resolution approving the proposed millage rate as required by Section 200.065, Florida Statutes and setting the date, time and place of Public Hearing to adopt tentative and final millage and budget for fiscal year 2021 / 2022. Enclosed is a copy of the proposed resolution.

   STAFF RECOMMENDATION: Approval

2. **Consideration** and **Approval** of an inland marine insurance policy for the Shepard Broad Causeway Bridge from AXIS Surplus Insurance Company and Starstone Specialty Insurance Company for a term beginning July 15, 2021 to September 30, 2022, with a total premium not to exceed $275,000.00. Enclosed is a copy of the documents provided by Public Risk Insurance Advisors.

   STAFF RECOMMENDATION: Approval **POLL VOTE**

3. **Discussion** and presentation regarding the Block 11 parking leases for Hippo Land Inc. and Bay Harbor Executives Offices Inc. Enclosed are copies of the proposed leases.

ADJOURNMENT: Approximately 6:30 p.m.

Pursuant to Florida Statutes 286.0105, the Town hereby advises the public that should any person decide to appeal any decision of the Town Council with respect to any matter to be considered at this meeting or hearing, he or she will need a record of the proceedings, and that, for such purpose he or she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

AGENDA ITEM REPORT
July 29, 2021

ITEM NUMBER: 1.

ITEM: Consideration and **Approval** of a resolution approving the proposed millage rate as required by Section 200.065, Florida Statutes and setting the date, time and place of Public Hearing to adopt tentative and final millage and budget for fiscal year 2021 / 2022. Enclosed is a copy of the proposed resolution.

DESCRIPTION:
The legislative charter of the Town of Bay Harbor Islands, Florida, provides, among other things, that the Town Council shall determine the amount and fix the rate of taxation and make the annual tax levy for every Fiscal Year.

On July 1, 2021, the Miami-Dade County, Property Appraiser (the "Property Appraiser") served upon the Town a "Certification of Taxable Value" certifying to the Town its 2021 taxable value. The provisions of Section 200.065, Florida Statutes require the Town, within thirty-five (35) days of service of the Certification of Taxable Value, to advise the Property Appraiser of the Town's proposed millage rate, the Town's rolled-back rate, and the date, time and place at which public hearings will be held to adopt the tentative and final millage and budgets.

Proposed Millage Rate
The current budget draft assumes a millage rate of 3.62450 (the same millage rate as last year's millage rate). The resolution on the agenda for your consideration declares a proposed millage rate for the Town of Bay Harbor Islands for Fiscal Year 2021-2022 to be 3.6245 mills, which is $3.6245 per $1,000.00 of assessed property within the Town of Bay Harbor Islands.

Rolled-Back Rate
Said resolution further declares a proposed Rolled-Back Rate. The current year rolled-back rate, as computed pursuant to section 200.065, Florida Statutes, is 3.5958 mills, which is $3.5958 per $1,000.00 of assessed property within the Town of Bay Harbor Islands. The proposed millage rate is 0.8% more than the rolled-back rate.

Schedule of Budget Public Hearings.

DATE	TIME	PLACE
1st Budget Hearing September 13, 2021 *(Monday)* *(To consider the proposed millage rate and tentative budget)*	6:00 PM	Town Hall 9665 Bay Harbor Terrace Bay Harbor Islands, FL 33154

2nd Budget Hearing September 29, 2021 *(Wednesday)* *(To adopt a millage rate and final budget)*	6:00 PM	Town Hall 9665 Bay Harbor Terrace Bay Harbor Islands, FL 33154

RECOMMENDED ACTION:
Approval

FINANCIAL ANALYSIS:

BUDGET IMPACT:

Submitted By: Alba L. Chang, Town Clerk
Maria Lasday, Town Manager
Peter Kajokas, Finance Director

ATTACHMENTS
1. Budget Tentative TRIM Rate and Budget Hearing Resolution 7.21.21

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN COUNCIL OF THE TOWN OF BAY HARBOR ISLANDS, FLORIDA, DETERMINING THE TOWN'S PROPOSED MILLAGE RATES AS REQUIRED BY SECTION 200.065, FLORIDA STATUTES, AND SETTING THE DATE, TIME, AND PLACE OF PUBLIC HEARINGS TO ADOPT THE TENTATIVE AND FINAL MILLAGE AND BUDGET FOR FISCAL YEAR 2021-2022; DIRECTING THE TOWN CLERK AND THE TOWN MANAGER TO FILE THIS RESOLUTION WITH THE MIAMI-DADE COUNTY PROPERTY APPRAISER; AUTHORIZING THE TOWN MANAGER TO CHANGE THE BUDGET HEARING DATES IF NEEDED; AND PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, Chapter 200, Florida Statutes provides a procedure for the adoption of ad valorem tax and millage rates associated therewith; and

WHEREAS, Section 200.065, Florida Statutes provides for the adoption of a proposed millage rate, together with the establishment of a rolled-back millage rate computed pursuant to Section 200.065(1), Florida Statutes; and

WHEREAS, on July 1, 2021, the Honorable Pedro J. Garcia, Miami-Dade County, Property Appraiser (the "Property Appraiser") served upon the Town of Bay Harbor Islands, Florida (the "Town") a "Certification of Taxable Value" certifying to the Town its 2021 taxable value; and

WHEREAS, the Town Manager and Staff have prepared a tentative budget and have computed a proposed millage rate necessary to fund the tentative budget other than the portion of the budget to be funded from sources other than ad valorem taxes; and

WHEREAS, the provisions of Section 200.065, Florida Statutes require the Town,within thirty-five (35) days of service of the Certification of Taxable Value, to advise the Property Appraiser of the Town's proposed millage rate, the Town's rolled-back rate, and the date, time and place at which public hearings will be held to adopt the tentative and final millage and budgets.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF BAY HARBOR ISLANDS, FLORIDA, AS FOLLOWS:

Section 1. Recitals. The above recitals are true and correct and are incorporated herein by this reference.

Section 2. **Declaration of Proposed Millage Rate.** The proposed millage rate for the Town of Bay Harbor Islands for Fiscal Year 2021-2022 is declared to be 3.6245 mills, which is $3.6245 per $1,000.00 of assessed property within the Town of Bay Harbor Islands.

Section 3. **Declaration of Rolled-Back Rate.** The current year rolled-back rate, as computed pursuant to section 200.065, Florida Statutes, is 3.5958 mills, which is $3.5958 per $1,000.00 of assessed property within the Town of Bay Harbor Islands. The proposed millage rate is 0.8% more than the rolled-back rate.

Section 4. **Schedule of Millage and Budget Hearings.** The proposed date, time, and place of the first and second public hearings are hereby set by the Town Council as follows:

DATE	TIME	PLACE
1st Budget Hearing September 13, 2021*(Monday)* *(To consider the proposed millage rate and tentative budget)*	6:00 PM	Town Hall 9665 Bay Harbor Terrace Bay Harbor Islands, FL 33154
2nd Budget Hearing September 29, 2021 *(Wednesday)* *(To adopt a millage rate and final budget)*	6:00 PM	Town Hall 9665 Bay Harbor Terrace Bay Harbor Islands, FL 33154

Section 5. **Transmittal.** The Town Clerk and Town Manager are directed to take all necessary steps to submit the Town's 2021 Certification of Taxable Valuable (DR-420) Form and provide a Certified Copy of this Resolution to the Honorable Pedro Garcia, Property Appraiser of Miami-Dade County, on or before Wednesday, August 4, 2021.

Section 6. **Authorization.** In the event that the Miami-Dade County Board of County Commissioners or the Miami-Dade County School Board schedule or reschedule a Budget Hearing on a date scheduled for a Town of Bay Harbor Islands Budget Hearing, the Town Manager is authorized to change the date of either or both Town budget hearings.

Section 7. Effective Date. This Resolution shall take effect immediately upon adoption.

_____
MAYOR

ATTEST:

_____
TOWN CLERK

AGENDA ITEM REPORT
July 29, 2021

ITEM NUMBER: 2.

ITEM: Consideration and **Approval** of an inland marine insurance policy for the Shepard Broad Causeway Bridge from AXIS Surplus Insurance Company and Starstone Specialty Insurance Company for a term beginning July 15, 2021 to September 30, 2022, with a total premium not to exceed $275,000.00. Enclosed is a copy of the documents provided by Public Risk Insurance Advisors.

DESCRIPTION:
The proposed property insurance policy for the Broad Causeway Bridge renews July 15th. The insurance market for bridge insurance is extremely limited. Each year, The Town insurance broker Brian Cottrell of Public Risk Insurance Advisors approaches between 12 and 18 insurance companies, including our incumbent carrier – AXIS Surplus Insurance Company to quote on our behalf. The FMIT insurance program does not provide coverage for bridges and the State of Florida's Division of Risk Management does not have any programs to provide bridge insurance through "piggy-backing" with local governments.

Property premiums in Florida swing between a "soft market", plenty of capacity and low premiums, to a "hard market", where capacity is restricted, and rates increase. This hard market started last year and has carried over to 2021 and has impacted our renewal premium for the bridge this year. This cycle typically lasts several years before the insurance market softens once again.

While the property rate per $100 has increased it should be noted that this year's renewal rate is 30% lower than the rate paid by the Town in 2014, due to a previous hard market cycle. However, this year the premium for 12 months is $225,508.00, which is above last year's annual premium of $146,039.

Covenants relating to the outstanding debt on the Causeway require that the causeway be insured.

Staff recommends that the Town Council approve the proposed insurance annual renewal from AXIS Surplus Insurance Company and StarStone Specialty Insurance Company for insurance coverage related to the Causeway Bridge in the total amount of $225,508. In addition, staff request approval to extend policy coverage to run concurrently with the Town's fiscal year, adding an additional 2 ½ months to the policy through September 30, 2022, in the amount of $48,250. Accordingly, the total cost for bridge insurance coverage from July 15, 2021 to October 1, 2022 would be of $273,768.00.

RECOMMENDED ACTION:
Approval

FINANCIAL ANALYSIS:

This expenditure is budgeted in the 2021 / 2022 budget year.

BUDGET IMPACT:

Submitted By: Shaun Gelvez, Human Resources Manager
Maria Lasday, Town Manager

ATTACHMENTS

1. Bay Harbor Islands Bridge Property Proposal 21-22 REV 7-2-21

PRIA

PUBLIC RISK INSURANCE ADVISORS

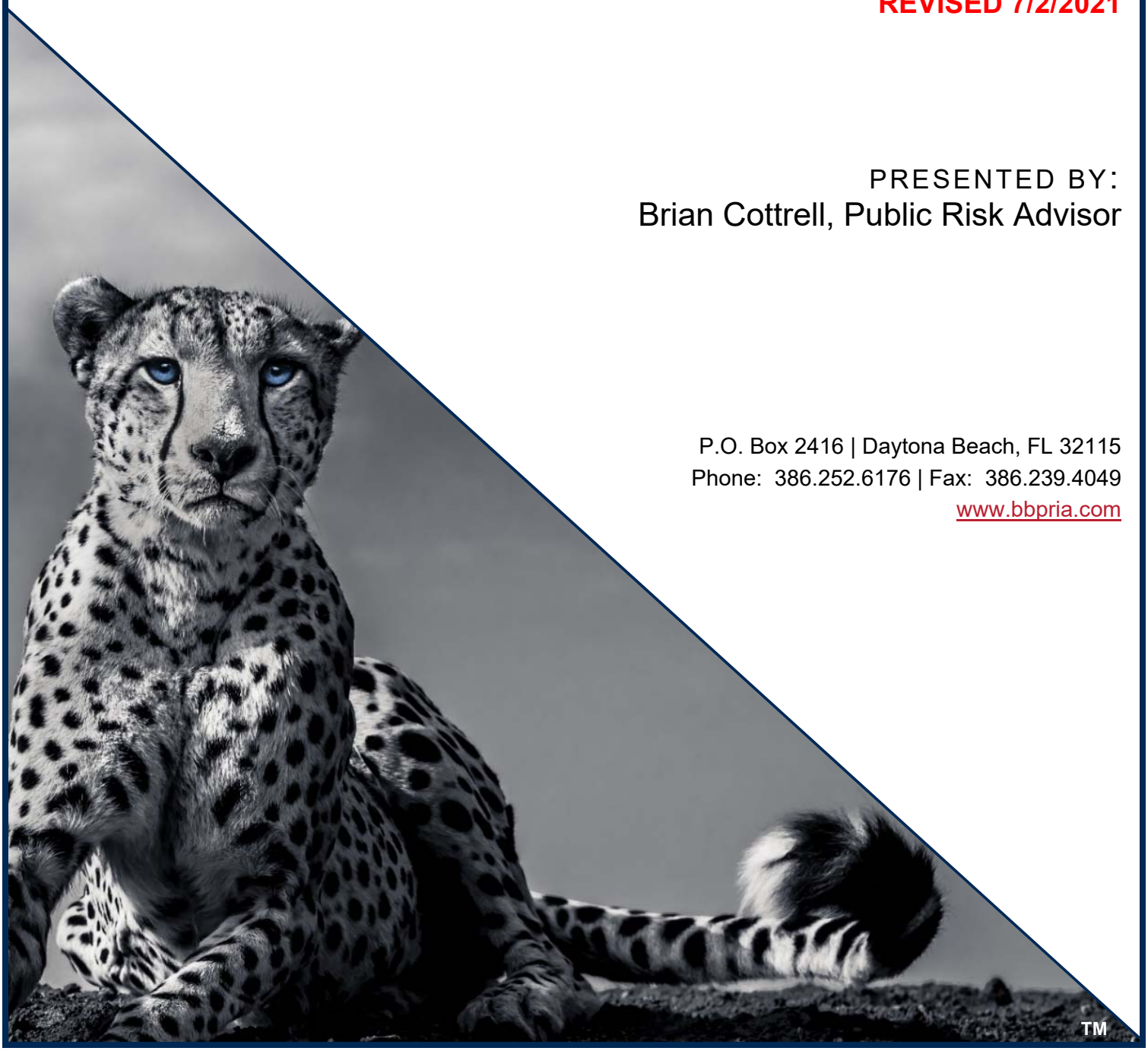
PART OF THE
BROWN & BROWN TEAM

INSURANCE PROPOSAL PREPARED FOR

Town of Bay Harbor Islands

Bridge Property Renewal Proposal

REVISED 7/2/2021



PRESENTED BY:
Brian Cottrell, Public Risk Advisor

P.O. Box 2416 | Daytona Beach, FL 32115
Phone: 386.252.6176 | Fax: 386.239.4049
www.bbpria.com

Table of Contents

REVISED 7/2/2021

Our Story

Public Risk Insurance Advisors (PRIA) is a proud member of the Brown & Brown family – an 80-year-old, publicly traded, Florida corporation currently ranked as the 6th largest insurance brokerage in the United States of America. Our Brown & Brown family is now more than 10,000 teammates, spanning from London to Los Angeles. Through our collaborative efforts, we design, place, and service more than $20 Billion in annual insurance products. We passionately undertake these efforts on behalf of our clients – ranging from individuals and small businesses, to state governments and Fortune 500 companies.

The PRIA team is a highly-specialized unit of insurance advisors 100% trained to deliver industry-leading services to public entities in the State of Florida. Since 1992, we have continuously refined that specialization and enhanced our services, while becoming the largest public entity brokerage in Florida. Our team provides Property & Casualty and Employee Benefits services to governments from Key West to the Panhandle and represents more than 250 clients.

We have proven over nearly three decades of service to local governments that we are a highly sophisticated and accountable team of insurance professionals, laser-focused on providing both world-class brokerage services and concierge-level support to our clients. We have built our reputation by empowering our governmental clients to outperform their industry peers, lower their cost of risk, and enhance their employee benefits programs - all while staying within their annual budgetary constraints. Our team is committed to serve those who serve the public – and provide superior service to our clients, their staff, and their employees.

An Introduction to Your Service Team

Account Executives		
Matt Montgomery Executive Vice President	(386) 239-7245	mmontgomery@bbpria.com
Robin Russell, ARM-P, CISR, CSRM Director of Operations	(386) 239-4044	rrussell@bbpria.com
Paul Dawson, ARM-P Senior Vice President / Public Risk Advisor	(386) 239-4045	pdawson@bbpria.com
Michelle Martin, CIC Vice President / Public Risk Advisor	(386) 239-4047	mmartin@bbpria.com
Brian Cottrell, CIC, CRM Vice President / Public Risk Advisor	(386) 239-4060	bcottrell@bbpria.com
Kyle Stoekel, ARM-P, CIC Public Risk Advisor	(386) 944-5805	kstoekel@bbpria.com
Michelle Perry, CIC, CRM Public Risk Advisor	(386) 333-6047	mperry@bbpria.com
Victoria "Tori" Reedy Executive Coordinator	(386) 239-4043	vreedy@bbpria.com
Service Representatives		
Melody Blake, ACSR Public Risk Specialist	(386) 239-4050	mblake@bbpria.com
Patricia "Trish" Jenkins, CPSR Public Risk Specialist	(386) 239-4042	pjenkins@bbpria.com
Danielle Coggon, CISR Public Risk Specialist	(386) 239-4048	dcoggon@bbpria.com
Christina Carter, CIC, CRM Public Risk Specialist	(386) 333-6069	ccarter@bbpria.com
Schylar Howard Public Risk Specialist	(386) 265-6117	showard@bbpria.com
Alexa Gray Assistant Public Risk Specialist	(386) 333-6068	agray@bbpria.com
Jennifer St. Jean Assistant Public Risk Specialist	(386) 333-6018	jstjean@bbpria.com
Certificate Requests: certificates@bbpria.com	***Claim Reporting:*** claims@bbpria.com	

Our Service Team philosophy focuses on accountability at all levels of account management. Our goal is not simply to meet your service needs, but to exceed them. All the employees at PRIA are dedicated to achieving this goal and distinguishing ourselves from the competition.

Property (Bridge) Pricing History

Policy Term	TIV	Policy Limit	Premium	Rate	Carrier
14-15	$4,800,000	$4,800,000	$110,000	$2.29	Westchester
15-16	$14,000,000	$5,000,000	$188,370	$1.34	Westchester
16-17	$14,000,000	$5,000,000	$172,200	$1.23	Westchester
17-18	$14,000,000	$5,000,000	$159,600	$1.14	Westchester
18-19	$14,000,000	$14,000,000	$125,000	$0.89	AXIS
19-20	$14,000,000	$5,000,000	$110,000	$0.78	AXIS
20-21	$14,000,000	$5,000,000	$146,039	$1.04	AXIS
21-22	$14,000,000	$5,000,000	$225,508	$1.61	AXIS/StarStone

Market Summary

MARKET	NOTES / FEEDBACK
AXIS (Incumbent)	Quoted
StarStone	Quoted
Allianz	Declined; Class of Business
ACE/Westchester	Pending Response
AmRisc	Declined; Class of Business
Arch	Declined; Class of Business
Arrowhead	Declined; Class of Business
Aspen	Declined; Class of Business
AWAC	Declined; Class of Business
Avondale	Declined; Class of Business
Berkshire Hathaway	Declined; Class of Business
Catalytic	Declined; Class of Business
Colony	Pending Response
Decus (Lloyds)	Indication: Excess of $3.00/100 rate $400K+
Ironshore (Liberty)	Pending Response
RLI/Mt. Hawley	Declined; Class of Business
RSUI/Landmark	Declined; Class of Business
Ventus	Declined; Class of Business
WKF&C (Chubb)	Declined; Class of Business

Property (Bridge)

Term: July 15, 2021 to July 15, 2022

Company Name:	A.M. Best Rating	Participation
Primary - $5,000,000		
AXIS Surplus Insurance Company	A XV	$2,500,000 part of $5,000,000
StarStone Specialty Insurance Company	A- XI	$2,500,000 part of $5,000,000

Coverages: Real & Personal Property, Business Interruption, Extra Expense

Perils Insured: All Risk of direct physical loss including Flood & Earthquake

Total Insurable Values: $14,000,000

Valuation: Replacement Cost, Actual Loss Sustained

Coinsurance: 80% Real & Personal Property

Exclusions: Asbestos, Mold/Fungus, Terrorism, Cyber, Pollution, Nuclear, Biological, Chemical, Exclusion of Loss or Damage due to Virus or Bacteria. As more fully described in policy.

Property (Bridge)

Sublimits:	
Property Damage Coverage, Extension of Coverage	
$100,000	Accounts Receivable
$1,000,000 or 25% of the loss, whichever is less	Debris Removal
$100,000	Electronic Data Processing Equipment Breakdown
$100,000	Electronic Data Processing Media Breakdown
$100,000	Expediting Expense
$25,000	Fine Arts
$100,000	Fire Department Service Charge
$25,000 (Annual Aggregate)	Limited Coverage for "Fungus," Wet Rot, Dry Rot & Bacteria
$100,000	Miscellaneous Unnamed Locations
$500,000	Newly Acquired Property
Included	Ordinance or Law – Coverage A
$500,000	Ordinance or Law – Coverage B&C Combined
$25,000 ($2,500 Max Any One Item)	Trees, Shrubs, and Plants
$25,000 (Annual Aggregate)	Pollutant Clean Up and Removal
$100,000	Preservation of Property
$100,000	Professional Fees
$50,000	Property Off Premises
$50,000	Property in Transit
$100,000	Service Interruption
$100,000	Valuable Papers & Records
$50,000	Sewer/Water Back Up

Time Element Coverage, Extension of Coverage	
$2,000,000	Business Income
$100,000	Extra Expense
$25,000	Leasehold Interest
30 Days	Civil Authority
$25,000	Contingent Business Income
180 Days	Extended Period of Indemnity
30 Days	Ingress/Egress
60 Days	Newly Acquired Property
$100,000	Service Interruption

Property (Bridge)

Flood & Earthquake	
$5,000,000 Annual Aggregate Maximum	As respects all loss, damage, or expenses caused by or resulting from physical damage to all other locations which is caused by or the results from Flood.
$5,000,000 Annual Aggregate	Earthquake

- Sublimits are per Occurrence and are part of, not in addition to, the policy limits.

Deductibles:		
	All Coverages and Perils	$50,000 per Occurrence
	EXCEPT:	
	Earthquake	$25,000 per Occurrence
	Flood	$500,000 per Occurrence
	Named Storm	5% of the Real and Personal Property, Personal Property of Others and Business Income Interruption total insured values at time of loss or damage at the locations where the physical damage occurred subject to a minimum of $250,000 in any one occurrence.
	All Other Wind/Hail	$100,000
	Business Income	72 Hours per Occurrence

- Deductibles are per Occurrence unless otherwise noted above or in the Policy Form.

Terms & Condition (Include but not limited to):

1. (30) Days' Notice of Cancellation, except (10) days for non-payment of premium.
2. Inspection and compliance with any recommendation deemed essential by the Company
3. Minimum Earned Premium: 35% at inception of coverage
4. All policy and inspection fees are fully earned. No flat cancellation permitted.
5. Complete inspection contact name, phone number and insured's mailing address is required prior to binding.
6. In the event of any storm activity (named or unnamed) the binding of this quote is at the discretion of the insuring carrier and is not considered effective until carrier approval is received.
7. The Carrier is issued pursuant to the FL Surplus Lines laws. Entities insured by surplus lines carriers do not have the protection of the FL Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent, unlicensed insurer.

Property (Bridge)

Company Conditions (Included but not limited to):

StarStone Specialty Insurance Company

- Policy Form: CSI-CPF-600-0720 Co-Insuring Form (Following Axis Form)
- Endorsements included but not limited:
  - CSI-CPN-201-0720 Cover Page
  - CSI-CSN-818-0720 Surplus Lines Policyholder Notifications
  - CSI-CPD-103-0720 Co-Insuring Form Policy Declarations
  - CSI-CPN-202-0720 Forms and Endorsement Schedule
  - CSI-CPN-203-0720 Policy Holder Notification – Fraud Notice
  - CSI-CPN-204-0720 Policy Holder Notification – OFAC
  - CSI-CPN-205-0720 Notice of Claims Reporting
  - CSI-CPN-206-0720 Notice of Privacy Policies and Practices
  - CSI-CPN-006-0720 Minimum Earned and Wind Minimum Earned Premium Endorsement
  - CSI-CPE-010-0720 Terrorism Exclusion Endorsement
  - CSI-CPE-034-0720 War and Warlike Action Exclusion Endorsement
  - CSI-CPE-035-0720 Cyber, Electronic Data and Systems Exclusion Endorsement
  - CSI-CPE-037-0720 Service of Suit
  - CSI-CPE-048-0720 Several Liability Endorsement
  - CSI-CPE-036-0720 TRIA Acceptance Endorsement
  - CSI-CPE-039-0720 TRIA Rejection Endorsement
- Terms & Condition Included but not limited to:
  - Minimum Earned Premium: 35% at inception of coverage
  - All policy and inspection fees are fully earned. No flat cancellation permitted.
  - (90) Days' Notice of Cancellation, except (10) days for non-payment of premium.
  - All bound risks will be inspected. Any bound risks which do not meet underwriting guidelines or which differ from the information submitted to us may be subject to increased premium or cancellation.
  - The Carrier is issued pursuant to the FL Surplus Lines laws. Entities insured by surplus lines carriers do not have the protection of the FL Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent, unlicensed insurer.
  -

Coinsurance Example

Coinsurance Example	
Amount of Loss	$40,000
Building Insured For	$100,000
Replacement Cost at Time of Loss	$150,000
Coinsurance Percentage	80%
Minimum Amount Building Should Be Insured For	$120,000
Deductible	$5,000

Step 1: $150,000 x .80 = $120,000

Step 2: $100,000/120,000 = .83

Step 3: $40,000 x .83 = $33,200

Step 4: $33,200 - $5,000 = $28,200

In this example, the carrier would pay $28,200 of the $40,000 loss.

Town of Bay Harbor Islands

PRIA
PUBLIC RISK INSURANCE ADVISORS

Premium Recapitulation
REVISED 7/2/2021

	Annual Premium	Check Option Accept	Reject
Property (Bridge)			
AXIS Surplus Insurance Co.	$112,500.00		
Fees	$254.00		
StarStone Specialty Insurance Co.	$112,500.00		
Fees	$254.00		
TOTAL	$225,508.00	☐	☐
AXIS Surplus Optional TRIA	*$6,000.00*	☐	☐
StarStone Specialty Optional TRIA	*$50,000.00*	☐	☐
Option to Extend Coverage Term (7/15/22-10/1/22)	$48,250.00	☐	☐

I authorize PRIA to request the underwriters to bind coverage on the items indicated above and acknowledge receipt of the Compensation and Financial Condition Disclosure(s) provided in this proposal.

SIGN HERE

_____
(Signature)

_____
(Name & Title)

_____
(Date)

Notes of Importance:

1. Quotes provided in the proposal are valid until 7/15/2021. After this date terms and conditions are subject to change by the underwriters.

2. The policies are issued pursuant to the FL Surplus Lines laws. Entities insured by surplus lines carriers do not have the protection of the FL Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent, unlicensed insurer.

3. Premiums are subject to change if all lines of coverage quoted are not bound. **Premiums are subject to 35% minimum premium upon binding.**

4. Not all coverages requested may be provided in this quotation.

5. Flood quotes from NFIP may be available. Please advise your agent if you have property located in zones A or V and would like to have separate NFIP quotes.

6. Property values are based on information supplied by you. You should have reviewed your property schedule and as you deem necessary have appraisals done to verify your reported values are accurate based on current market conditions.

7. **The total premium is due within 30 days of inception. Premium financing can be arranged if needed.**

8. Quote is not bound until written orders to bind are received from the insured and the Company subsequently accepts the risk.

9. Should signed application reveal differing details/data than original application received, the entire quote/binder is subject to revision and possible retraction.

10. Higher limits of liability may be available. Please consult with your agent.

11. This proposal is based upon exposures to loss made known to the Public Risk Insurance Advisors. Any changes in exposures (i.e. new operations, new acquisitions of property or change in liability exposure) need to be promptly reported to us in order that proper coverage may be put into place.

12. **This proposal is intended to give a brief overview. Please refer to coverage agreements for complete information regarding definition of terms, deductibles, sub-limits, restrictions and exclusions that may apply. In the event of any differences, the policy will prevail.**

Retail Compensation Disclosure

In addition to the commissions or fees received by us for assistance with the placement, servicing, claims handling, or renewal of your insurance coverages, other parties, such as excess and surplus lines brokers, wholesale brokers, reinsurance intermediaries, underwriting managers and similar parties, some of which may be owned in whole or in part by Brown & Brown, Inc., may also receive compensation for their role in providing insurance products or services to you pursuant to their separate contracts with insurance or reinsurance carriers. That compensation is derived from your premium payments. Additionally, it is possible that we, or our corporate parents or affiliates, may receive contingent payments or allowances from insurers based on factors which are not client-specific, such as the performance and/or size of an overall book of business produced with an insurer. We generally do not know if such a contingent payment will be made by a particular insurer, or the amount of any such contingent payments, until the underwriting year is closed. That compensation is partially derived from your premium dollars, after being combined (or "pooled") with the premium dollars of other insureds that have purchased similar types of coverage. We may also receive invitations to programs sponsored and paid for by insurance carriers to inform brokers regarding their products and services, including possible participation in company-sponsored events such as trips, seminars, and advisory council meetings, based upon the total volume of business placed with the carrier you select. We may, on occasion, receive loans or credit from insurance companies. Additionally, in the ordinary course of our business, we may receive and retain interest on premiums you pay from the date we receive them until the date of premiums are remitted to the insurance company or intermediary. In the event that we assist with placement and other details of arranging for the financing of your insurance premium, we may also receive a fee from the premium finance company.

If an intermediary is utilized in the placement of coverage, the intermediary may or may not be owned in whole or part by Brown & Brown, Inc. or its subsidiaries. Brown & Brown entities operate independently and are not required to utilize other companies owned by Brown & Brown, Inc., but routinely do so. In addition to providing access to the insurance company, the Wholesale Insurance Broker/Managing General Agent may provide additional services including, but not limited to: underwriting; loss control; risk placement; coverage review; claims coordination with insurance company; and policy issuance. Compensation paid for those services is derived from your premium payment, which may on average be 15% of the premium you pay for coverage, and may include additional fees charged by the intermediary.

Questions and Information Requests. Should you have any questions, or require additional information, please contact this office at (386) 252-6176 or, if you prefer, submit your question or request online at http://www.bbinsurance.com/customerinquiry/.

PRIA
PUBLIC RISK INSURANCE ADVISORS

Guide to Bests Ratings		
Best Category	**Rating**	**Description**
Secure	A++	Superior
Secure	A+	Superior
Secure	A	Excellent
Secure	A-	Excellent
Secure	B++	Very Good
Secure	B+	Very Good
Vulnerable	B	Fair
Vulnerable	B-	Fair
Vulnerable	C++	Marginal
Vulnerable	C+	Marginal
Vulnerable	C	Weak
Vulnerable	C-	Weak
Vulnerable	D	Poor
Vulnerable	E	Under Regulatory Supervision
Vulnerable	F	In Liquidation
Vulnerable	S	Rating Suspended
Not Rated	NR-1	Insufficient Data
Not Rated	NR-2	Insufficient Size and/or operating experience
Not Rated	NR-3	Rating Procedure Inapplicable
Not Rated	NR-4	Company Request
Not Rated	NR-5	Not Formally Followed
Rating Modifier	u	Under Review
Rating Modifier	q	Qualified
Affiliation Code	g	Group
Affiliation Code	p	Pooled
Affiliation Code	r	Reinsured

Guide to Best's Financial Size Categories		
Reflects size of insurance company based on their capital, surplus and conditional reserve funds in U.S. dollars.	**I**	Less than $1,000,000
	II	$1,000,000 - $2,000,000
	III	$2,000,000 - $5,000,000
	IV	$5,000,000 - $10,000,000
	V	$10,000,000 - $25,000,000
	VI	$25,000,000 - $50,000,000
	VII	$50,000,000 - $100,000,000
	VIII	$100,000,000 - $250,000,000
	IX	$250,000,000 - $500,000,000
	X	$500,000,000 - $750,000,000
	XI	$750,000,000 - $1,000,000,000
	XII	$1,000,000,000 - $1,250,000,000
	XIII	$1,250,000,000 - $1,500,000,000
	XIV	$1,500,000,000 - $2,000,000,000
	XV	Greater than $2,000,000,000

Public Risk Insurance Advisors always strives to place your coverage with highly secure insurance companies. We cannot, however, guarantee the financial stability of any carrier.

Statement Acknowledging That Coverage Has Been Placed With A Non-Admitted Carrier

Per Florida Statute, the insured is required to sign the following E&S disclosure:

The undersigned hereby agrees to place insurance coverage in the surplus lines market and understands that superior coverage may be available in the admitted market and at a lesser cost. Persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Association with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

Town of Bay Harbor Islands
Named Insured

SIGN HERE

Signature of Insured's Authorized Representative Date

AXIS Surplus Insurance Company & StarStone Specialty Insurance Company
Name of Excess and Surplus Lines Carrier

Property (Bridge)	EAF63177520
Type of Insurance	Policy Number/Renewal of Policy Number
7/15/2021	Florida
Effective/Expiration Date of Coverage	State

COMMERCIAL INSURANCE APPLICATION

APPLICANT INFORMATION SECTION

DATE (MM/DD/YYYY): 2/16/2021

AGENCY: Public Risk Insurance Agency P. O. Box 2416 Daytona Beach FL 32115	CARRIER: AXIS Surplus Insurance Co. — NAIC CODE: 10172
CONTACT NAME: Danielle Coggon	COMPANY POLICY OR PROGRAM NAME: — PROGRAM CODE:
PHONE (A/C, No, Ext): (386)252-6176	POLICY NUMBER: 21-22 BRIDGE
FAX (A/C, No): (386)239-4049	UNDERWRITER: — UNDERWRITER OFFICE:
E-MAIL ADDRESS:	STATUS OF TRANSACTION: [X] QUOTE [ ] ISSUE POLICY [X] RENEW; [ ] BOUND (Give Date and/or Attach Copy); [ ] CHANGE; [ ] CANCEL 7/15/2021 DATE 12:01 TIME [X] AM [ ] PM
CODE: — SUBCODE:	
AGENCY CUSTOMER ID: 00002069	

SECTIONS ATTACHED

INDICATE SECTIONS ATTACHED	PREMIUM		PREMIUM		PREMIUM
[ ] ACCOUNTS RECEIVABLE / VALUABLE PAPERS	$	[ ] ELECTRONIC DATA PROC	$	[X] PROPERTY	$
[ ] BOILER & MACHINERY	$	[ ] EQUIPMENT FLOATER	$	[ ] TRANSPORTATION / MOTOR TRUCK CARGO	$
[ ] BUSINESS AUTO	$	[ ] FIDUCIARY LIABILITY COVERAGE	$	[ ] TRUCKERS / MOTOR CARRIER	$
[ ] BUSINESS OWNERS	$	[ ] GARAGE AND DEALERS	$	[ ] UMBRELLA	$
[ ] COMMERCIAL GENERAL LIABILITY	$	[ ] GLASS AND SIGN	$	[ ] YACHT	$
[ ] CRIME	$	[ ] INSTALLATION / BUILDERS RISK	$	[ ]	$
[ ] CYBER AND PRIVACY COVERAGE	$	[ ] LIQUOR LIABILITY	$	[ ]	$
[ ] DEALERS	$	[ ] OPEN CARGO	$	[ ]	$

ATTACHMENTS

[ ] ADDITIONAL INTEREST	[ ] INTERNATIONAL PROPERTY EXPOSURE SUPPLEMENT	[ ]	
[ ] ADDITIONAL PREMISES	[ ] LOSS SUMMARY	[ ]	
[ ] APARTMENT BUILDING SUPPLEMENT	[ ] PREMIUM PAYMENT SUPPLEMENT	[ ]	
[ ] CONDO ASSN BYLAWS (for D&O Coverage only)	[ ] PROFESSIONAL LIABILITY SUPPLEMENT	[ ]	
[ ] CONTRACTORS SUPPLEMENT	[ ] RESTAURANT / TAVERN SUPPLEMENT	[ ]	
[ ] COVERAGES SCHEDULE	[ ] STATEMENT / SCHEDULE OF VALUES	[ ]	
[ ] DRIVER INFORMATION SCHEDULE	[ ] STATE SUPPLEMENT (If applicable)	[ ]	
[ ] HOTEL / MOTEL SUPPLEMENT	[ ] VACANT BUILDING SUPPLEMENT	[ ]	
[ ] INTERNATIONAL LIABILITY EXPOSURE SUPPLEMENT	[ ] VEHICLE SCHEDULE	[ ]	

POLICY INFORMATION

PROPOSED EFF DATE	PROPOSED EXP DATE	BILLING PLAN	PAYMENT PLAN	METHOD OF PAYMENT	AUDIT	DEPOSIT	MINIMUM PREMIUM	POLICY PREMIUM
7/15/2021	7/15/2022	[ ] DIRECT [X] AGENCY				$	$	$ 0.00

APPLICANT INFORMATION

NAME (First Named Insured) AND MAILING ADDRESS (including ZIP+4)	GL CODE	SIC	NAICS	FEIN OR SOC SEC #
Bay Harbor Islands, Town of 9665 Bay Harbor Terrace Bay Harbor Islands, FL 33154				596000273
	BUSINESS PHONE #: (305)866-6241			
	WEBSITE ADDRESS:			

[ ] CORPORATION [ ] JOINT VENTURE [ ] NOT FOR PROFIT ORG [ ] SUBCHAPTER "S" CORPORATION
[ ] INDIVIDUAL [ ] LLC NO. OF MEMBERS AND MANAGERS: ____ [ ] PARTNERSHIP [ ] TRUST

NAME (Other Named Insured) AND MAILING ADDRESS (including ZIP+4)	GL CODE	SIC	NAICS	FEIN OR SOC SEC #
	BUSINESS PHONE #:			
	WEBSITE ADDRESS:			

[ ] CORPORATION [ ] JOINT VENTURE [ ] NOT FOR PROFIT ORG [ ] SUBCHAPTER "S" CORPORATION
[ ] INDIVIDUAL [ ] LLC NO. OF MEMBERS AND MANAGERS: ____ [ ] PARTNERSHIP [ ] TRUST

NAME (Other Named Insured) AND MAILING ADDRESS (including ZIP+4)	GL CODE	SIC	NAICS	FEIN OR SOC SEC #
	BUSINESS PHONE #:			
	WEBSITE ADDRESS:			

[ ] CORPORATION [ ] JOINT VENTURE [ ] NOT FOR PROFIT ORG [ ] SUBCHAPTER "S" CORPORATION
[ ] INDIVIDUAL [ ] LLC NO. OF MEMBERS AND MANAGERS: ____ [ ] PARTNERSHIP [ ] TRUST

AGENCY CUSTOMER ID: 00002069

CONTACT INFORMATION

CONTACT TYPE: Claims Info	CONTACT TYPE: Inspection
CONTACT NAME: Melissa Cruz	CONTACT NAME: Melissa Cruz
PRIMARY PHONE # ☐ HOME ☒ BUS ☐ CELL (305)866-6241 / SECONDARY PHONE # ☐ HOME ☐ BUS ☐ CELL	PRIMARY PHONE # ☐ HOME ☒ BUS ☐ CELL (305)866-6241 / SECONDARY PHONE # ☐ HOME ☐ BUS ☐ CELL
PRIMARY E-MAIL ADDRESS: mcruz@bayharborislands.net	PRIMARY E-MAIL ADDRESS: mcruz@bayharborislands.net
SECONDARY E-MAIL ADDRESS:	SECONDARY E-MAIL ADDRESS:

PREMISES INFORMATION (Attach ACORD 823 for Additional Premises)

LOC #	STREET	CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: $
1	Broad Street Causeway	☐ INSIDE	☐ OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: Bay Harbor Islands STATE: FL	☐ OUTSIDE	☐ TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY: ZIP: 33154				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N

LOC #	STREET	CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: $
		☐ INSIDE	☐ OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: STATE:	☐ OUTSIDE	☐ TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY: ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N

LOC #	STREET	CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: $
		☐ INSIDE	☐ OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: STATE:	☐ OUTSIDE	☐ TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY: ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N

LOC #	STREET	CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: $
		☐ INSIDE	☐ OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: STATE:	☐ OUTSIDE	☐ TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY: ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N

NATURE OF BUSINESS

☐ APARTMENTS ☐ CONDOMINIUMS ☐ CONTRACTOR ☐ INSTITUTIONAL ☐ MANUFACTURING ☐ OFFICE ☐ RESTAURANT ☐ RETAIL ☐ SERVICE ☐ WHOLESALE ☐

DATE BUSINESS STARTED (MM/DD/YYYY)

DESCRIPTION OF PRIMARY OPERATIONS

Municipality with a Toll Bridge Causeway. Moveable Bascule Bridge from abutment to abutment

Total Insured Value $14,000,000

RETAIL STORES OR SERVICE OPERATIONS % OF TOTAL SALES:	INSTALLATION, SERVICE OR REPAIR WORK	OFF PREMISES INSTALLATION, SERVICE OR REPAIR WORK
	%	%

DESCRIPTION OF OPERATIONS OF OTHER NAMED INSUREDS

ADDITIONAL INTEREST (Not all fields apply to all scenarios - provide only the necessary data) Attach ACORD 45 for more Additional Interests

INTEREST		NAME AND ADDRESS RANK: ☐ EVIDENCE: ☐ CERTIFICATE ☐ POLICY ☐ SEND BILL	INTEREST IN ITEM NUMBER	
☐ ADDITIONAL INSURED	☐ LOSS PAYEE		LOCATION:	BUILDING:
☐ BREACH OF WARRANTY	☐ MORTGAGEE		VEHICLE:	BOAT:
☐ CO-OWNER	☐ OWNER		AIRPORT:	AIRCRAFT:
☐ EMPLOYEE AS LESSOR	☐ REGISTRANT		ITEM CLASS:	ITEM:
☐ LEASEBACK OWNER	☐ TRUSTEE		ITEM DESCRIPTION	
☐ LIENHOLDER		REFERENCE / LOAN #: INTEREST END DATE:		
☐		LIEN AMOUNT: PHONE (A/C, No, Ext):	FAX (A/C, No):	
REASON FOR INTEREST:		E-MAIL ADDRESS:		

AGENCY CUSTOMER ID: 00002069

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES	Y / N
1a. IS THE APPLICANT A SUBSIDIARY OF ANOTHER ENTITY ?	N

PARENT COMPANY NAME	RELATIONSHIP DESCRIPTION	% OWNED

1b. DOES THE APPLICANT HAVE ANY SUBSIDIARIES?	N

SUBSIDIARY COMPANY NAME	RELATIONSHIP DESCRIPTION	% OWNED

2. IS A FORMAL SAFETY PROGRAM IN OPERATION?	Y

☐ SAFETY MANUAL ☐ MONTHLY MEETINGS ☐
☐ SAFETY POSITION ☐ OSHA

3. ANY EXPOSURE TO FLAMMABLES, EXPLOSIVES, CHEMICALS?	N

4. ANY OTHER INSURANCE WITH THIS COMPANY? (List policy numbers)	N

LINE OF BUSINESS	POLICY NUMBER	LINE OF BUSINESS	POLICY NUMBER

5. ANY POLICY OR COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE PRIOR THREE (3) YEARS FOR ANY PREMISES OR OPERATIONS? **(Missouri Applicants - Do not answer this question)**	N

☐ NON-PAYMENT ☐ AGENT NO LONGER REPRESENTS CARRIER ☐
☐ NON-RENEWAL ☐ UNDERWRITING ☐ CONDITION CORRECTED (Describe):

6. ANY PAST LOSSES OR CLAIMS RELATING TO SEXUAL ABUSE OR MOLESTATION ALLEGATIONS, DISCRIMINATION OR NEGLIGENT HIRING?	N

7. DURING THE LAST FIVE YEARS (TEN IN RI), HAS ANY APPLICANT BEEN INDICTED FOR OR CONVICTED OF ANY DEGREE OF THE CRIME OF FRAUD, BRIBERY, ARSON OR ANY OTHER ARSON-RELATED CRIME IN CONNECTION WITH THIS OR ANY OTHER PROPERTY? (In RI, this question must be answered by any applicant for property insurance. Failure to disclose the existence of an arson conviction is a misdemeanor punishable by a sentence of up to one year of imprisonment).	N

8. ANY UNCORRECTED FIRE AND/OR SAFETY CODE VIOLATIONS?	N

OCCURRENCE DATE	EXPLANATION	RESOLUTION	RESOLUTION DATE

9. HAS APPLICANT HAD A FORECLOSURE, REPOSSESSION, BANKRUPTCY OR FILED FOR BANKRUPTCY DURING THE LAST FIVE (5) YEARS?	

OCCURRENCE DATE	EXPLANATION	RESOLUTION	RESOLUTION DATE

10. HAS APPLICANT HAD A JUDGEMENT OR LIEN DURING THE LAST FIVE (5) YEARS?	

OCCURRENCE DATE	EXPLANATION	RESOLUTION	RESOLUTION DATE

11. HAS BUSINESS BEEN PLACED IN A TRUST?	N

NAME OF TRUST

12. ANY FOREIGN OPERATIONS, FOREIGN PRODUCTS DISTRIBUTED IN USA, OR US PRODUCTS SOLD / DISTRIBUTED IN FOREIGN COUNTRIES? (If "YES", attach ACORD 815 for Liability Exposure and/or ACORD 816 for Property Exposure)	N

13. DOES APPLICANT HAVE OTHER BUSINESS VENTURES FOR WHICH COVERAGE IS NOT REQUESTED?	

REMARKS / PROCESSING INSTRUCTIONS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

PRIOR CARRIER INFORMATION

YEAR	CATEGORY	GENERAL LIABILITY	AUTOMOBILE	PROPERTY	OTHER:
	CARRIER				
	POLICY NUMBER				
	PREMIUM	$	$	$	$
	EFFECTIVE DATE				
	EXPIRATION DATE				

AGENCY CUSTOMER ID: 00002069

PRIOR CARRIER INFORMATION (continued)

YEAR	CATEGORY	GENERAL LIABILITY	AUTOMOBILE	PROPERTY	OTHER:
	CARRIER				
	POLICY NUMBER				
	PREMIUM	$	$	$	$
	EFFECTIVE DATE				
	EXPIRATION DATE				
	CARRIER				
	POLICY NUMBER				
	PREMIUM	$	$	$	$
	EFFECTIVE DATE				
	EXPIRATION DATE				

LOSS HISTORY

☐ Check if none (Attach Loss Summary for Additional Loss Information)

ENTER ALL CLAIMS OR LOSSES (REGARDLESS OF FAULT AND WHETHER OR NOT INSURED) OR OCCURRENCES THAT MAY GIVE RISE TO CLAIMS FOR THE LAST _____ YEARS

TOTAL LOSSES: $

DATE OF OCCURRENCE	LINE	TYPE / DESCRIPTION OF OCCURRENCE OR CLAIM	DATE OF CLAIM	AMOUNT PAID	AMOUNT RESERVED	SUBRO-GATION Y / N	CLAIM OPEN Y / N

SIGNATURE

☐ Copy of the Notice of Information Practices (Privacy) has been given to the applicant. (Not required in all states, contact your agent or broker for your state's requirements.)

PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT OR OTHER INVESTIGATIVE REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU IN CONNECTION WITH THIS APPLICATION FOR INSURANCE AND SUBSEQUENT AMENDMENTS AND RENEWALS. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION. CREDIT SCORING INFORMATION MAY BE USED TO HELP DETERMINE EITHER YOUR ELIGIBILITY FOR INSURANCE OR THE PREMIUM YOU WILL BE CHARGED. WE MAY USE A THIRD PARTY IN CONNECTION WITH THE DEVELOPMENT OF YOUR SCORE. YOU MAY HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND REQUEST CORRECTION OF ANY INACCURACIES. YOU MAY ALSO HAVE THE RIGHT TO REQUEST IN WRITING THAT WE CONSIDER EXTRAORDINARY LIFE CIRCUMSTANCES IN CONNECTION WITH THE DEVELOPMENT OF YOUR CREDIT SCORE. THESE RIGHTS MAY BE LIMITED IN SOME STATES. PLEASE CONTACT YOUR AGENT OR BROKER TO LEARN HOW THESE RIGHTS MAY APPLY IN YOUR STATE OR FOR INSTRUCTIONS ON HOW TO SUBMIT A REQUEST TO US FOR A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING PERSONAL INFORMATION. INITIAL HERE

(Not applicable in AZ, CA, DE, KS, MA, MN, ND, NY, OR, VA, or WV. Specific ACORD 38s are available for applicants in these states.) (Applicant's Initials): _____

Applicable in AL, AR, DC, LA, MD, NM, RI and WV: Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CO: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in FL and OK: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)*. *Applies in FL Only.

Applicable in KS: Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

Applicable in KY, NY, OH and PA: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

Applicable in ME, TN, VA and WA: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

Applicable in NJ: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in OR: Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PR: Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars ($5,000) and not more than ten thousand dollars ($10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print)	STATE PRODUCER LICENSE NO (Required in Florida)
	Brian Cottrell/DCOGG	
APPLICANT'S SIGNATURE SIGN HERE	**DATE**	**NATIONAL PRODUCER NUMBER**

AGENCY CUSTOMER ID: 00002069

ACORD®

PROPERTY SECTION

DATE (MM/DD/YYYY): 2/16/2021

AGENCY NAME	CARRIER	NAIC CODE
Public Risk Insurance Agency	AXIS Surplus Insurance Co.	10172

POLICY NUMBER	EFFECTIVE DATE	NAMED INSURED(S)
21-22 BRIDGE	7/15/2021	Bay Harbor Islands, Town of, DBA: Town of Bay Harbor Islands

BLANKET SUMMARY

BLKT #	AMOUNT	TYPE	BLKT #	AMOUNT	TYPE

PREMISES INFORMATION

PREMISES #: 1 — STREET ADDRESS: Broad Causeway

BUILDING #: — BLDG DESCRIPTION: Moveable Bascule Bridge from abutment to abutment

SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Policy Limits	5,000,000	80	RC	All Risks		50,000			$250,000 or 5% of TIV - Named Windstorm

ADDITIONAL INFORMATION [X] BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 [ ] VALUE REPORTING INFORMATION - Attach ACORD 811

ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

SPOILAGE COVERAGE (Y / N): [ ]

DESCRIPTION OF PROPERTY COVERED:

LIMIT: $

DEDUCTIBLE: $

REFRIG MAINT AGREEMENT (Y / N): [ ]

OPTIONS: [ ] BREAKDOWN OR CONTAMINATION [ ] POWER OUTAGE [ ] SELLING PRICE

SINKHOLE COVERAGE (Required in Florida) [ ] ACCEPT COVERAGE [ ] REJECT COVERAGE LIMIT: $

MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV) [ ] ACCEPT COVERAGE [ ] REJECT COVERAGE LIMIT: $

[ ] PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK — # OF OPEN SIDES ON STRUCTURE: ____

CONSTRUCTION TYPE	DISTANCE TO HYDRANT FT	DISTANCE TO FIRE STAT MI	FIRE DISTRICT	CODE NUMBER	PROT CL	# STORIES	# BASM'TS	YR BUILT	TOTAL AREA

BUILDING IMPROVEMENTS: [ ] WIRING, YR: [ ] PLUMBING, YR: [ ] ROOFING, YR: [ ] HEATING, YR: [ ] OTHER: YR:

BLDG CODE GRADE | TAX CODE | ROOF TYPE

WIND CLASS: [ ] RESISTIVE [ ] SEMI- RESISTIVE

OTHER OCCUPANCIES

[N] HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT DATE INSTALLED: _____

MANUFACTURER:

PRIMARY HEAT: [ ] BOILER [ ] SOLID FUEL [ ] IF BOILER, IS INSURANCE PLACED ELSEWHERE? [ ] Y / N

SECONDARY HEAT: [ ] BOILER [ ] SOLID FUEL [ ] IF BOILER, IS INSURANCE PLACED ELSEWHERE? [ ] Y / N

RIGHT EXPOSURE & DISTANCE	LEFT EXPOSURE & DISTANCE	FRONT EXPOSURE & DISTANCE	REAR EXPOSURE & DISTANCE

BURGLAR ALARM TYPE | CERTIFICATE # | EXPIRATION DATE | [ ] CENTRAL STATION [ ] LOCAL GONG [ ] WITH KEYS

BURGLAR ALARM INSTALLED AND SERVICED BY | EXTENT | GRADE | # GUARDS / WATCHMEN | [ ] CLOCK HOURLY

PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) | % SPRNK | FIRE ALARM MANUFACTURER | [ ] CENTRAL STATION [ ] LOCAL GONG

ADDITIONAL INTEREST

[ ] ACORD 45 attached for additional names

INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	INTEREST IN ITEM NUMBER
[ ] LOSS PAYEE [ ] MORTGAGEE [ ]			[ ]		LOCATION: BUILDING: ITEM CLASS: ITEM: ITEM DESCRIPTION

REFERENCE / LOAN #:

AGENCY CUSTOMER ID: _____

ADDITIONAL PREMISES INFORMATION

PREMISES #:	STREET ADDRESS:
BUILDING #:	BLDG DESCRIPTION:

SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU-ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY

ADDITIONAL INFORMATION ☐ BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 ☐ VALUE REPORTING INFORMATION - Attach ACORD 811

ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

SPOILAGE COVERAGE (Y / N) ☐ | DESCRIPTION OF PROPERTY COVERED | LIMIT $ | DEDUCTIBLE $ | REFRIG MAINT AGREEMENT (Y / N) ☐ | OPTIONS ☐ BREAKDOWN OR CONTAMINATION ☐ POWER OUTAGE ☐ SELLING PRICE

SINKHOLE COVERAGE (Required in Florida) ☐ ACCEPT COVERAGE ☐ REJECT COVERAGE LIMIT: $

MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV) ☐ ACCEPT COVERAGE ☐ REJECT COVERAGE LIMIT: $

☐ PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK # OF OPEN SIDES ON STRUCTURE: _____

CONSTRUCTION TYPE	DISTANCE TO HYDRANT FT	FIRE STAT MI	FIRE DISTRICT	CODE NUMBER	PROT CL	# STORIES	# BASM'TS	YR BUILT	TOTAL AREA

BUILDING IMPROVEMENTS
☐ WIRING, YR: ☐ PLUMBING, YR:
☐ ROOFING, YR: ☐ HEATING, YR:
☐ OTHER: YR:

BLDG CODE GRADE | TAX CODE | ROOF TYPE

WIND CLASS ☐ RESISTIVE ☐ SEMI- RESISTIVE

OTHER OCCUPANCIES
☐ HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT DATE INSTALLED: _____
MANUFACTURER:

PRIMARY HEAT
☐ BOILER ☐ SOLID FUEL ☐
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N

SECONDARY HEAT
☐ BOILER ☐ SOLID FUEL ☐
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N

RIGHT EXPOSURE & DISTANCE	LEFT EXPOSURE & DISTANCE	FRONT EXPOSURE & DISTANCE	REAR EXPOSURE & DISTANCE

BURGLAR ALARM TYPE	CERTIFICATE #	EXPIRATION DATE	☐ CENTRAL STATION ☐ LOCAL GONG ☐ WITH KEYS

BURGLAR ALARM INSTALLED AND SERVICED BY	EXTENT	GRADE	# GUARDS / WATCHMEN	☐ CLOCK HOURLY ☐

PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems)	% SPRNK	FIRE ALARM MANUFACTURER	☐ CENTRAL STATION ☐ LOCAL GONG

ADDITIONAL INTEREST ☐ ACORD 45 attached for additional names

INTEREST
☐ LOSS PAYEE
☐ MORTGAGEE
☐

NAME AND ADDRESS RANK: _____ EVIDENCE: ☐ CERTIFICATE

REFERENCE / LOAN #:

INTEREST IN ITEM NUMBER
LOCATION: BUILDING:
ITEM CLASS: ITEM:
ITEM DESCRIPTION

REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Applicable in AL, AR, DC, LA, MD, NM, RI and WV

Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CO

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in FL and OK

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)*. *Applies in FL Only.

Applicable in KS

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

Applicable in KY, NY, OH and PA

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties* (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

Applicable in ME, TN, VA and WA

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

Applicable in NJ

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in OR

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PR

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars ($5,000) and not more than ten thousand dollars ($10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print)	STATE PRODUCER LICENSE NO (Required in Florida)
	Brian Cottrell/DCOGG	
APPLICANT'S SIGNATURE 	**DATE**	**NATIONAL PRODUCER NUMBER**

STARSTONE

Part of the Enstar Group

POLICYHOLDER DISCLOSURE

NOTICE OF TERRORISM INSURANCE COVERAGE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, as amended ("TRIA"), that you now have a right to purchase insurance coverage for losses arising out of acts of terrorism, **as defined in Section 102(1) of the Act, as amended:** The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security and the Attorney General of the United States, to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of an air carrier or vessel or the premises of a United States mission; and to have been committed by an individual or individuals, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Any coverage you purchase for "acts of terrorism" shall expire at 12:00 midnight December 31, 2020, the date on which the TRIA Program is scheduled to terminate, or the expiry date of the policy whichever occurs first, and shall not cover any losses or events which arise after the earlier of these dates.

YOU SHOULD KNOW THAT COVERAGE PROVIDED BY THIS POLICY FOR LOSSES CAUSED BY CERTIFIED ACTS OF TERRORISM IS PARTIALLY REIMBURSED BY THE UNITED STATES UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THIS FORMULA, THE UNITED STATES PAYS 85% THROUGH 2015; 84% BEGINNING ON JANUARY 1, 2016; 83% BEGINNING ON JANUARY 1, 2017; 82% BEGINNING ON JANUARY 1, 2018; 81% BEGINNING ON JANUARY 1, 2019 AND 80% BEGINNING ON JANUARY 1, 2020; OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURER(S) PROVIDING THE COVERAGE. YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A USD100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS USD100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED USD100 BILLION, YOUR COVERAGE MAY BE REDUCED.

THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

Acceptance or Rejection of Terrorism Insurance Coverage

	I hereby elect to purchase terrorism coverage for a premium of **$Per Quote**
	I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified Acts of terrorism.

SIGN HERE

_____ _____

Policyholder/Applicant's Signature Date

_____

Print Name

AGENDA ITEM REPORT
July 29, 2021

ITEM NUMBER: 3.

ITEM: Discussion and presentation regarding the Block 11 parking leases for Hippo Land Inc. and Bay Harbor Executives Offices Inc. Enclosed are copies of the proposed leases.

DESCRIPTION:
Town Attorney Joseph Geller will provide an update on parking leases for Block 11.

RECOMMENDED ACTION:

FINANCIAL ANALYSIS:

BUDGET IMPACT:

Submitted By: Alba L. Chang, Town Clerk
Joseph Geller, Town Attorney

ATTACHMENTS
1. Sherman Parking Lease

LEASE

THIS LEASE, executed this 1st day of **July,** 2021, between **BAY HARBOR EXECUTIVE OFFICES, INC.,** a Florida corporation, the owner of the following described real property, the Lessor, and the **TOWN OF BAY HARBOR ISLANDS,** Florida, the Lessee.

W I T N E S S E T H

The Lessor for and in consideration of the rent herein reserved to be paid by the Lessee, and in consideration of the covenants herein to be kept and performed by the Lessee, do hereby lease and demise unto said Lessee the following described premises, situate, lying and being in the Town of Bay Harbor Islands, County of Dade, State of Florida:

> That portion of Lots 12 and 13, in Block 11, **BAY HARBOR ISLANDS** according to the Plat thereof, recorded in Plat Book 46, Page 5, of the Public Records of Miami-Dade County, Florida, more particularly bounded and described as follows: Beginning at a point in the northerly line of said Lot 13 at its intersection with the westerly line of Lot 14; thence running westerly along the northerly line of said Lots 12 and 13, a distance of 100 feet more or less to the easterly line of Lot 11; thence turning at a right angle and running southerly along the westerly line of lot 12 a distance of 50 feet; thence turning at a right angle and running easterly along a line parallel to the northerly line of said Lots 12 and 13 a distance of 100 feet more or less to the westerly line of Lot 14; thence turning at a right angle and running northerly along the said easterly line of Lot 14 a distance of 50 feet more or less to the point of beginning.

TO HAVE AND TO HOLD the said premises unto said Lessee from the 1st day of July, 2021, to and including the 30th day of June , 2026, the Lessee yielding and paying to the Lessor the following rental:

The entire rental for this period to be the rate of $13,000 per year, payable each year, payable as follows: THIRTEEN THOUSAND DOLLARS ($13,000.00) on the 1st day of July, of each year stipulated in this agreement, with the said rental to be payment in advance for the year next ensuing after the date of payment.

The Lessee agrees to keep, conform to and abide by each and every of the following, which are hereby made conditions of this Lease:

1. The premises shall be used only for the purpose of off-street parking, sidewalks, ingress and egress roads, and incidental beautification of the off-street parking.

2. The land hereby leased is declared to be exempt from state, county and city taxes of any nature and description whatsoever for the term of this Lease. In the event any real estate taxes are found to be due, they shall be paid by Lessee, provided that Lessor shall cooperate fully in reducing the amount of any real estate taxes which may be due.

3. The Lessor hereby covenants with the Lessee that, upon the performance by the Lessee of all the conditions herein above set forth on the part of the Lessee to be performed, Lessee may quietly have, hold, occupy and use the above-described premises without interruption.

4. The Lessee hereby agrees to indemnify and save the Lessor harmless of any and all liability, loss, damage, claims, costs, expenses, taxes and judgments of any nature and description whatsoever arising out of, in connection with, or in any way related to the land lease herein.

5. In the event that any repairs, maintenance, changes or modifications are necessary to the buildings located adjacent to the leased premises, whether ordinary or required pursuant to applicable building or zoning codes, which would deny or restrict access to the leased premises, the Lessee agrees that the Lessor shall not be liable for any loss in parking meter revenue or other damages incurred by the Lessee in connection therewith.

Notwithstanding the foregoing, the Lessee shall be permitted to charge parking tees to contractors and workers engaged in said repairs, maintenance, changes or modifications.

6. Lessee is responsible for maintenance of the leased premises.

7. The Lessor is to be named as additional insured on town liability policy, solely with regard to the leased property.

8. Both parties have the right to cancel this agreement, and any extension thereof, upon one year's written notice to the other party.

9. The Lessee shall have the option of extending this lease, at its sole option, for an additional period of six (6) years, subject to the one year cancellation provision set forth above.

IN WITNESS WHEREOF, the respective parties hereto have caused these presents to be signed, sealed, and delivered on the day and year first above written.

Witnesses:

_____
Name:

_____
Name:

BAY HARBOR EXECUTIVE OFFICES, INC., a Florida Corporation

By: _____
Name

Witnesses:

_____
Name:

_____
Name:

TOWN OF BAY HARBOR ISLANDS

By: _____
MAYOR

Attest:_____
TOWN CLERK