nez Murphy

Sent: From: Thursday, July 31, 2025 5:25 PM Betzaida Cambero

Stephanie Gardner Jennie Dennett; Robert Delorimiere;

Certificate of Insurance

ပ္ပ Jo:

Fw: PANZARELLA MRF, LLC

Certificate for Panzarella MRF.pdf

Attachments: Subject:

Acceptable

Betzaida Cambero

Risk Management Analyst

Office of Human Resources | HR Risk Management

P.O. Box 229045

Hollywood, FL 33022

Email: bcambero@HollywoodFL.org

Telephone: 954-921-3639

www.HollywoodFL.org







From: Stephanie Gardner < SGARDNER@hollywoodfl.org>

Sent: Wednesday, July 30, 2025 4:36 PM

To: Certificate of Insurance <COI@hollywoodfl.org>

Cc: Jennie Dennett <JDENNETT@hollywoodfl.org>; Robert Delorimiere

<RDELORIMIERE@hollywoodfl.org>

Subject: PANZARELLA MRF, LLC

Scope of service:

Waste Management Services

Stephanie Gardner

Public Works Administrative Assistant I

Email: SGARDNER@hollywoodfl.org

Telephone: 754-329-0497

From: Judy Chance < Judy. Chance@king-insurance.com>

Sent: Wednesday, July 30, 2025 3:59 PM

To: Stephanie Gardner < SGARDNER@hollywoodfl.org>

Cc: Deborah Volpe <debbie@panzarellawaste.com>

Subject: RE: Panzarella MRF COI 25-26 City of Hollywood certificate

I have attached the requested certificate



Is proud to join forces with and become:

Judy Chance

Commercial Lines Account Manager

King Risk Partners

Office: (888) 401-4774 x11426 Judy.Chance@king-insurance.com Direct: (561) 934-6165

www.king-insurance.com 643 SW 4th Ave, Gainesville, FL 3260



Stephanie Gardner

Public Works Administrative Assistant I

SGARDNER@hollywoodfl.org

Please remember we cannot bind or change coverage via email. This email message and any attach prephone configst 1929 1949 are not the

insurance coverage cannot be bound or changed via voice mail, email, fax or online via our websits intended recipient, please immediately reply to the sender and delete the message from your email system. For your protection, please note

a licensed agent. In addition, the sender does not intend that this email, including any related email. The borah Volpe < debbie @PanzarellaWaste.com> means subject to the Massachusetts Uniform Electronic Transactions Act or any such similar act or Sent: Wednesday, July 30, 2025 12:21 PM

To: Stephanie Gardner < SGARDNER@hollywoodfl.org>; Al Panzarella

<<u>APanzarella@PanzarellaWaste.com</u>>

Subject: RE: [EXT]RE: Requesting your updated CO

Good Afternoon,

Panzarella MRF Attached, please find the COI that you have requested for Sent: Wednesday, July 30, 2025 12:25 PM From: Stephanie Gardner < SGARDNER@hollywoodfl.org>

of the email by the sender

Cc: Judy Chance < Judy. Chance @king-insurance.com? <<u>APanzarella@PanzarellaWaste.com</u>> To: Deborah Volpe < debbie@PanzarellaWaste.com >; Al Panzarella

Subject: Panzarella MRF COI 25-26 City of Hollywood Requesting your

You don't often get email from sgardner@hollywoodfl.org. Learn why this is

unless you recognize the sender and know the content is EXTERNAL EMAIL]DO NOT CLICK links or attachments

Holder's address should read: Thank you. Everything is perfect except the Certificate

City of Hollywood (nothing written)

Public Works

1600 S. Park Rd

Hollywood, FL 33021

REQUESTS TO PLEASE SEND ALL DISPATCH IS REQUESTED BY 3:00 pm THE DAY BEFORE SERVICE DISPATCH@PANZARELLAWASTE.COM

Regards,

Deborah Volpe

Sales Contract Office Administrator



4600 Powerline Road Fort Lauderdale, FL 33309

debbie@panzarellawaste.com

From: Stephanie Gardner < SGARDNER@hollywoodfl.org>

Sent: Wednesday, July 30, 2025 12:19 PM

To: Al Panzarella < APanzarella @Panzarella Waste.com>

Cc: Deborah Volpe < debbie@PanzarellaWaste.com>

Subject: RE: [EXT]RE: Requesting your updated COI

Renewal Application? Some of the Haulers contact vendors. Also, have one of your admins received your Hauler information have not been updated. Your name is not referenced because I BCC the other 2

Stephanie Gardner

Administrative Assistant I

Public Works

Email: SGARDNER@hollywoodfl.org

Telephone: 754-329-0497

From: Al Panzarella < APanzarella @Panzarella Waste.com>

Sent: Wednesday, July 30, 2025 12:14 PM

To: Stephanie Gardner < SGARDNER@hollywoodfl.org>

Subject: RE: [EXT]RE: Requesting your updated COI Cc: Deborah Volpe < debbie@PanzarellaWaste.com>

It does not have our name referenced anyplace on the e mail?

Is this for the Bid for Panzarella MRF?

Al Panzarella

President/CEO

Panzarella Waste & Recycling Services

4600 Powerline Road

Fort Lauderdale, FL 33309

877-720-9594

Fax: 888-522-5064

apanzarella@panzarellawaste.com

www.panzarellawaste.com



From: Stephanie Gardner < SGARDNER@hollywoodfl.org>

Sent: Wednesday, July 30, 2025 12:12 PM

To: Al Panzarella < APanzarella @Panzarella Waste.com>

Cc: edamaso@coastalwasteinc.com

Subject: RE: [EXT]RE: Requesting your updated COI

Panzarella No. It's accurate. I need an updated COI for

Coastal Waste and

Waste Management.

on updated our agreement. Please forward to my attention. City of Hollywood is working

Thanks.

Stephanie Gardner

Administrative Assistant I

Public Works

Email: SGARDNER@hollywoodfl.org

Telephone: 754-329-0497

From: Al Panzarella < APanzarella @Panzarella Waste.com>

Sent: Wednesday, July 30, 2025 12:06 PM

To: Stephanie Gardner < SGARDNER@hollywoodfl.org>

Subject: [EXT]RE: Requesting your updated COI

This e mail I guess was sent to us but for Coastal?

Al Panzarella

President/CEO

Panzarella Waste & Recycling Services

4600 Powerline Road

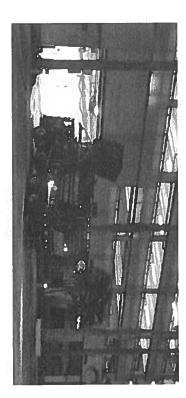
Fort Lauderdale, FL 33309

877-720-9594

Fax: 888-522-5064

apanzarella@panzarellawaste.com

www.panzarellawaste.com



From: Stephanie Gardner < SGARDNER@hollywoodfl.org>

Sent: Wednesday, July 30, 2025 11:31 AM

To: edamaso@coastalwasteinc.com

Subject: Requesting your updated COI

Good morning,

Management. see attached Sample COI from City of Hollywood Risk Please email me your updated Certificate of Insurance. Please

General Liability and Auto Policy City of Hollywood should be listed as an additional insured on

named as an additionally insure for General Liability and Auto Description of Operation should read: City of Hollywood is Liability.

The Certificate Holder section, below the COI, should read:

City of Hollywood (nothing written)

Public Works

1600 S. Park Rd

Hollywood, FL 33021

Thanks

Stephanie Gardner

Public Works Administrative Assistant I

P.O. Box 229045

Hollywood, FL 33022

Email: SGARDNER@hollywoodfl.org

Telephone: 754-329-0497

www.HollywoodFL.org

content is safe. links or open attachments unless you recognize the sender and know the CAUTION: This email originated from outside of the organization. Do not click



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/30/2025

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).

CONTACT

1/:	Distribution III C			1	PHONE (888) 377-0420 FAX					
_	Risk Partners, LLC				(A/C, No, Ext): (A/C, No):					
643	SW 4th Ave Suite 210				ADDRESS: judy.chance@king-insurance.com					
					INSURER(S) AFFORDING COVERAGE					NAIC#
Gainesville FL 32601						INSURER A: Great Divide Insurance Company				
INSU	RED	INSURER B: Key Risk Insurance Company					10885			
	Panzarella MRF, LLC	INSURER C : Penn America Insurance Company					32859			
	4600 Powerline Road	<u> </u>				INSURER D: Insurance Company of the West				
					INSURER D.					
	Fort Lauderdale			FL 33309	INSURER E :					
COL		TIEIC	ATE I	NUMBER: CL257108843	INSURER F:					
				TOMBETT	I ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD					
	DICATED. NOTWITHSTANDING ANY REQUIR									
	ERTIFICATE MAY BE ISSUED OR MAY PERTA							JBJECT TO ALL THE TERMS,		
	CLUSIONS AND CONDITIONS OF SUCH POL		s. Limi Isubri	ITS SHOWN MAY HAVE BEEN	REDUC	ED BY PAID CL POLICY EFF	AIMS. POLICY EXP			
INSR LTR	TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS		
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$ 1,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,6	000
						Ì		MED EXP (Any one person)	\$ 5,000	0
Α		Υ	c	GLP2025680-17		03/13/2025	03/13/2026	PERSONAL & ADV INJURY	\$ 1,000	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000	
	PRO-							PRODUCTS - COMP/OP AGG		0,000
	3,000							711050010 00111101 1100	\$	
	OTHER: AUTOMOBILE LIABILITY		Н					COMBINED SINGLE LIMIT	\$ 1,00	0.000
	X ANY AUTO							(Ea accident) BODILY INJURY (Per person)	\$	
В	OWNED SCHEDULED	Υ		BAP2025681-17		03/13/2025	03/13/2026	BODILY INJURY (Per accident)	\$	
В	AUTOS ONLY AUTOS NON-OWNED			DAF 2023001-17		03/13/2023	03/13/2020	PROPERTY DAMAGE		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$ 10,0	00
			\vdash					PIP-Basic		
	UMBRELLA LIAB COCCUR					03/13/2025	03/13/2026	EACH OCCURRENCE	Ψ	0,000
С	EXCESS LIAB CLAIMS-MADE			XPA1000765				AGGREGATE	\$ 4,00	0,000
	DED RETENTION \$								\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	1				01/21/2025	01/21/2026	➤ PER STATUTE OTH-		
D	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			WFL 5082223 00	01/21			E.L. EACH ACCIDENT	_{\$} 500,	000
"				*** € 5552225 55				E.L. DISEASE - EA EMPLOYEE	\$ 500,	
								E.L. DISEASE - POLICY LIMIT	\$ 500.	000
			'		1					
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	SIAC	ORD 1	ı 01, Additional Remarks Schedule.	may be at	ttached if more si	pace is required)			
	ect No. / Solicitation #: IFB-321-25-WV	•			•	·	. ,			
l '										
Title	: Processing and Disposal for Recycling, Ya	rd Wa	aste, B	Bulk Waste and Commingled N	Waste.					
The	City of Hollywood is listed as an additionally	insu	red for	r General liability and Auto lia	bility.					
	,,			.,	•					
L										
CE	RTIFICATE HOLDER				CANC	ELLATION				
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN) RELOKE		
City of Hollywood City of Hollywood City of Hollywood										
Public Works AUTHORIZED REPRESENTATIVE										
1600 S. Park Rd						William				
Hollywood FL 33021 Comiskey, Jr.										

ADDITIONAL COVERAGES										
Ref#	Description Agg Limit F						Form No.	Edition Date		
Limit 1 4,000,0	00	Limit 2 4,000,000	Limit 3	Deductible Amount Deductible Type		tible Type	Premium			
Ref#	Description					Coverage Code	Form No.	Edition Date		
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	tible Type	Premium			
Ref#	Description	1		Coverage Code	Form No. Edition Date					
Limit 1	L	Limit 2	Limit 3	Deductible Amount	Deductible Type		Premium			
Ref#	Description	1				Coverage Code	Form No.	Edition Date		
Limit 1		Limit 2	Limit 3	Deductible Amount	Deductible Type		Premium			
Ref#	Description	1				Coverage Code	Form No.	Edition Date		
Limit 1		Limit 2	Limit 3	Deductible Amount	Deductible Type		Premium			
Ref#	Description	1				Coverage Code	Form No.	Edition Date		
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	tible Type	Premium			
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Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium			
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Limit 1	1	Limit 2	Limit 3	Deductible Amount	Dedu	ctible Type	Premium			
Ref#	Description	n				Coverage Code	Form No.	Edition Date		
Limit 1		Limit 2	Limit 3	Deductible Amount	Dedu	ctible Type	Premium			
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