From:	Certificate of Insurance
To:	Karl Chuck; Certificate of Insurance
Cc:	Daniel Mell
Subject:	FW: Broward County Fence
Date:	Thursday, December 19, 2024 1:08:04 PM
Attachments:	AcordForm - 2024-12-18T115816.335.pdf Insurance WC Exempt Brian Anderson expires 12-01-2026.pdf

Acceptable

From: Karl Chuck <KChuck@hollywoodfl.org>
Sent: Thursday, December 19, 2024 8:32 AM
To: Certificate of Insurance <COI@hollywoodfl.org>
Cc: Daniel Mell <DMELL@hollywoodfl.org>
Subject: RE: Broward County Fence

See attached revised.

From: Certificate of Insurance <COI@hollywoodfl.org>
Sent: Tuesday, December 17, 2024 1:37 PM
To: Karl Chuck <KChuck@hollywoodfl.org>
Cc: Daniel Mell <DMELL@hollywoodfl.org>; Certificate of Insurance <COI@hollywoodfl.org>
Subject: FW: Broward County Fence

Not acceptable,

1. Auto Liability – the City requires to be named as an additional insured for auto liability.

2. The City of Hollywood must be the certificate holder per the following format:
   City of Hollywood (Nothing else on this line)
   Department Name & Room # (if applicable)
   Department Address
   Department Address

From: Karl Chuck <KChuck@hollywoodfl.org>
Sent: Monday, December 16, 2024 3:56 PM
To: Certificate of Insurance <COI@hollywoodfl.org>
Cc: Daniel Mell <DMELL@hollywoodfl.org>
Subject: Broward County Fence

See attached COI, WC Exemption, and previous approval.

For fence repairs and installation at City parks. Annual expenditures approx. $50k.

KC

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 12/18/2024

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
Pettineo Insurance Agency, Inc
2428 E Commercial Blvd
Fort Lauderdale FL 33308

CONTACT NAME: Customer Service
PHONE (A/C, No, Ext): 954-493-9424 **FAX (A/C, No):** 9544939424
E-MAIL ADDRESS: coi@pettineo.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Heritage Insurance Company	14407
INSURER B : Infinity Assurance Insurance Company	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Broward County Fence, LLC.
5051 NE 13th Avenue
Oakland Park FL 33334

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 GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC [ ] OTHER:	Y	Y	HCR025025	12/17/2024	12/17/2025	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 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000
B	AUTOMOBILE LIABILITY [X] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [ ] HIRED AUTOS ONLY [ ] NON-OWNED AUTOS ONLY	Y		50020267001	12/14/2024	12/14/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $
	[ ] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE AGGREGATE	$ $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N [ ] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					[ ] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ $ $

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate Holder also listed as additional insured.

CERTIFICATE HOLDER
City of Hollywood
2600 Hollywood Blvd
Hollywood FL 33020

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
Louise Reid

JIMMY PATRONIS
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

*** * CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW * ***

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

EFFECTIVE DATE: 12/1/2024 **EXPIRATION DATE:** 12/1/2026

PERSON: BRIAN R ANDERSON **EMAIL:** BRIAN@BROWARDCOUNTYFENCE.COM

FEIN: 814496631

BUSINESS NAME AND ADDRESS:

BROWARD COUNTY FENCE LLC

5051 NE 13 AVE

FORT LAUDERDALE, FL 33334

This certificate of election to be exempt is NOT a license issued by the Department of Business and Professional Regulation. To determine if the certificate holder is required to have a license to perform work or to verify the license of the certificate holder, go to www.myfloridalicense.com.

IMPORTANT: Pursuant to subsection 440.05(13), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to subsection 440.05(11), F.S., Certificates of election to be exempt issued under subsection (3) apply only to the corporate officer named on the notice of election to be exempt. Pursuant to subsection 440.05(12), F.S., notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.