# AGREEMENT BETWEEN THE CITY OF DORAL AND EVOLVING LIVES, INC. FOR

#### PAID WORK-BASED LEARNING EXPERIENCES

**THIS AGREEMENT** is made between the **CITY OF DORAL**, Florida, a Florida municipal corporation (hereinafter the "City"), and **EVOLVING LIVES**, **INC**. a Florida Not for Profit Corporation, whose Federal Tax ID is **81-2969786**.

WHEREAS, Provider is a vendor for the Florida Department of Education, Division of Vocational Rehabilitation, that provides assistance for youth who are transitioning from posteducation to pre-employment, by providing paid work-based-learning experiences, job development and job coaching; and

**WHEREAS**, the Provider and the City wish to collaborate, whereby the Provider will provide the City with individuals ("Participants") that have the skills and capacity to assist the City through Paid Work Based Learning Experiences, also known as, On-The-Job Training ("Services"); and

**WHEREAS,** the Provider shall be responsible for providing, and paying all costs associated with, identifying and screening eligible Participants, performing all background screenings, paying Participant wages, and providing workers compensation insurance.

**WHEREAS**, the Provider and City, through mutual negotiation, have agreed on the terms and conditions in this Agreement for the provision of Services.

#### 1. Scope of Services/Deliverables.

- 1.1 The Provider shall provide the following (collectively "Services"):
  - A. Identify and screen eligible Participants to support in the City's operations;
  - B. Perform and pay the costs associated with any worksite requirements such as background screenings, and any other requirements imposed by the City prior to Participant being placed with the City;
  - C. Support Participants through job coaching if necessary;

- D. Pay Participants' wages and ensure effective coverage of workers compensation insurance through the Florida Department of Education.
- E. Provider shall ensure that the Participants are made aware of the City's policies, procedures, and administrative regulations, and ensure compliance with same.
- 1.2 The Services shall be performed by Provider to the full satisfaction of the City. Provider agrees to furnish all labor in a professional manner to perform Services. Provider will require its Participants to perform their work in a manner befitting the type and scope of work to be performed.

#### 2. Term/Commencement Date.

2.1 This Agreement shall become effective upon execution by both parties and shall remain in effect for the term of one (1) year. Thereafter the Agreement shall atomically renew on an annual basis, unless earlier terminated in accordance with Paragraph 6.

#### 3. **Compensation and Payment.**

- 3.1 There shall be no compensation to Provider for Services provided under this Agreement. Nor shall there be any reimbursable expenses associated with this Agreement. Provider expressly agrees and understands that the City shall have no liability for payment of wages, taxes, or benefits for the Participants.
- 3.2 Provider shall make no other charges to the City for wages, supplies, labor, taxes, licenses, permits, overhead or any other expenses or costs. Provider shall not pledge the City's credit or make it a guarantor of payment or surety for any contract, debt, obligation, judgment, lien, or any form of indebtedness. The Provider further warrants and represents that it has no obligation or indebtedness that would impair its ability to fulfill the terms of this Agreement.

#### 4 Sub-providers.

- 4.1 The Provider shall be responsible for all payments to any Participant or subproviders and shall maintain responsibility for all work related to the Services.
- 4.2 Any Participants provided pursuant to the Services must have the prior written approval of the City Manager or his designee.

#### 5 <u>City's Responsibilities.</u>

- 5.1 The City may provide opportunities for Participants to gain valuable professional skills in associated departments within the City on an as-needed basis.
- 5.2 The City agrees to communicate with Provider regarding the performance of Participants to ensure duties and responsibilities are completed according to standards in the City.
- 5.3 Arrange for access to and make all provisions for the Participants to enter upon real property as required for the Participants to perform Services as set forth in the On-The-Job Training Plan.

#### 6 Termination.

- 6.1 The City Manager for any reason may terminate this Agreement upon ten (10) days written notice to the Provider, or immediately with cause. Cause for purposes of this Agreement shall be defined as: a material breach of this Agreement which Provider fails to cure within five (5) days of receiving notice from the City of such breach; a failure on the part of Provider to adhere to the City's reasonable requests regarding the objectives of this Agreement; and/or any act or omission of Provider that constitutes a violation of Federal, State, County, or City Law.
- 6.2 Upon receipt of the City's written notice of termination, Provider shall stop providing Services, and shall communicate with the Participants that they shall immediately cease reporting to the City.
- 6.3 The Provider shall transfer all books, records, reports, working drafts, documents, and data pertaining to the Services to the City, in a hard copy and electronic format specified by the City within 14 days from the date of the written notice of termination or the date of expiration of this Agreement.
- 6.4 If the Provider wishes to terminate this Agreement, it must provide the City with sixty (60) days written notice. Failure to provide the City with such days written notice may result in the Provider being unable to do business with the City in the future.

#### 7 Insurance.

7.1 The Provider shall provide the statutory minimum requirements for workers compensation to cover all Participants performing work or on the City's

- premises as a result of this Agreement.
- 7.2 Additionally, the Provider shall secure and maintain throughout the duration of this Agreement medical and/or commercial insurance of such type and in such amounts as required for Provider to operate its business.
- 7.3 The City may require proof of the aforementioned insurance prior to the commencement of the Services. The City further reserves the right to solicit additional coverage, or require higher limits of liability as needed, and depending on the nature of scope, or level of exposure.

#### 8 Nondiscrimination.

8.1 During the term of this Agreement, Provider shall not discriminate against any of its employees or applicants for employment because of their race, color, religion, sex, or national origin, and to abide by all Federal and State laws regarding nondiscrimination.

#### 9 Attorneys' Fees and Waiver of Jury Trial.

- 9.1 In the event of any litigation arising out of this Agreement, each party shall be responsible for their attorneys' fees and costs, including the fees and expenses of any paralegals, law clerks and legal assistants, and including fees and expenses charged for representation at both the trial and appellate levels.
- 9.2 In the event of any litigation arising out of this Agreement, each party hereby knowingly, irrevocably, voluntarily and intentionally waives its right to trial by jury.

#### 10 **Indemnification**.

10.1 Provider shall defend, indemnify, and hold harmless the City, its officers, agents and employees, from and against any and all demands, claims, losses, suits, liabilities, causes of action, judgment or damages, arising out of, related to, or any way connected with Provider's performance or non-performance of any provision of this Agreement including, but not limited to, liabilities arising from the negligent or intentional acts and/or omissions of the Provider or the Participants pursuant to this Agreement. Provider shall reimburse the City for all its expenses including reasonable attorneys' fees and costs incurred in and about the defense of any such claim or investigation and for any judgment or damages arising out of, related to, or in any way connected with Provider's performance or non-performance of this Agreement. This section shall be interpreted and construed in a manner to comply with any applicable Florida Statutes, including without limitation

Sections 725.06 and 725.08, Fla. Stat., if applicable.

- 10.2 The provisions of this section shall survive termination of this Agreement.
- 10.3 Ten dollars (\$10) of the payments made by the City constitute separate, distinct, and independent consideration for the granting of this indemnification, the receipt and sufficiency of which is voluntary and knowingly acknowledged by the Provider.

#### 11 Notices/Authorized Representatives.

11.1 Any notices required by this Agreement shall be in writing and shall be deemed to have been properly given if transmitted by hand-delivery, by registered or certified mail with postage prepaid return receipt requested, or by a private postal service, addressed to the parties (or their successors) at the following addresses:

For the City: Barbara Hernandez

City Manager

City of Doral, Florida 8401 NW 53<sup>rd</sup> Terrace Doral, Florida 33166

With a Copy to: Valerie Vicente, ESQ.

City Attorney

City of Doral, Florida 8401 NW 53<sup>rd</sup> Terrace

Doral, FL 33166

For the Provider: Khristopher Lucin

Director

Evolving Lives, Inc. 24601 Packing House

Rd

Homestead, FL 33032

#### 14. **Governing Law**.

14.1 This Agreement shall be construed in accordance with and governed by the laws of the State of Florida. Exclusive venue for any litigation arising out of this Agreement shall be in Miami-Dade County, Florida.

#### 15. Entire Agreement/Modification/Amendment.

- 15.1 This writing contains the entire Agreement of the parties and supersedes any prior oral or written representations. No representations were made or relied upon by either party, other than those that are expressly set forth herein.
- 15.2 No agent, employee, or other representative of either party is empowered to modify or amend the terms of this Agreement, unless executed with the same formality as this document.

#### 16. Ownership and Access to Records and Audits.

- 16.1 All records, books, documents, maps, data, deliverables, papers and financial information (the "Records") that result from the Provider providing services to the City under this Agreement shall be the property of the City.
- 16.2 The Provider shall be required to comply with the following requirements under Florida's Public Records Law:
  - A. Provider shall keep and maintain public records required by the City to perform the service.
  - B. Upon request from the City, Provider shall provide the City with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided by Chapter 119, Florida Statutes, or as otherwise provided by law.
  - C. Provider shall ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the contract if the Provider does not transfer the records to the City.
  - D. Provider shall, upon completion of the contract, transfer, at no cost, to the City all public records in possession of the Provider or keep and maintain public records required by the City to perform the service. If the Provider transfers all public records to the City upon completion of the contract, the Provider shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If the Provider keeps and maintains public records upon completion of the contract, the Provider shall meet all applicable requirements for retaining public records. All records stored

electronically must be provided by Provider to the City, upon request from the City, in a format that is compatible with the information technology systems of the City.

IF THE PROVIDER HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE PROVIDER'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CITY'S CUSTODIAN OF PUBLIC RECORDS AT 305-593-6730, CITYCLERK@CITYOFDORAL.COM, 8401 NW 53RD TERRACE, DORAL, FLORIDA 33166.

16.3 The City may cancel this Agreement for refusal by the Provider to allow access by the City Manager or his designee to any Records pertaining to work performed under this Agreement that are subject to the provisions of Chapter 119, Florida Statutes.

#### 17. **Nonassignability.**

17.1 This Agreement shall not be assignable by Provider unless such assignment is first approved by the City Manager. The City is relying upon the apparent qualifications and personal expertise of the Provider, and such firm's familiarity with the City's area, circumstances and desires.

#### 18. Severability.

18.1 If any term or provision of this Agreement shall to any extent be held invalid or unenforceable, the remainder of this Agreement shall not be affected thereby, and each remaining term and provision of this Agreement shall be valid and be enforceable to the fullest extent permitted by law, provided the severance of any term does not result in interest on any Bonds issued to finance the Fields being includable in gross income for federal tax purposes.

#### 19. **Independent Contractor.**

- 19.1 The Provider and its Participants, employees, volunteers and agents shall be and remain independent contractors and not agents or employees of the City with respect to all of the acts and services performed by and under the terms of this Agreement. This Agreement shall not in any way be construed to create a partnership, association or any other kind of joint undertaking, enterprise or venture between the parties.
- 19.2 The Provider agrees that it will not take any Federal tax position inconsistent with it being a service provider.

#### 20. **Compliance with Laws.**

20.1 The Provider shall comply with all applicable laws, ordinances, rules, regulations, and lawful orders of public authorities relating to the Service.

#### 21. Waiver

21.1 The failure of either party to this Agreement to object to or to take affirmative action with respect to any conduct of the other which is in violation of the terms of this Agreement shall not be construed as a waiver of the violation or breach, or of any future violation, breach or wrongful conduct.

#### 22. **Survival of Provisions**

22.1 Any terms or conditions of either this Agreement that require acts beyond the date of the term of the Agreement, shall survive termination of the Agreement, shall remain in full force and effect unless and until the terms or conditions are completed and shall be fully enforceable by either party.

#### 23. **Prohibition of Contingency Fees.**

23.1 The Provider warrants that it has not employed or retained any company or person, other than a bona fide employee working solely for the Provider, to solicit or secure this Agreement, and that it has not paid or agreed to pay any person(s), company, corporation, individual or firm, other than a bona fide employee working solely for the Provider, any fee, commission, percentage, gift, or any other consideration, contingent upon or resulting from the award or making of this Agreement.

#### 24. **Counterparts**

24.1 This Agreement may be executed in several counterparts, each of which shall be deemed an original and such counterpart shall constitute one and the same instrument.

#### 25. Removal of Unsatisfactory Personnel

25.1 The City may make written request to Provider for the prompt removal and replacement of any personnel employed or retained by Provider or any sub provider. The Provider shall respond to the City within fourteen

calendar days of receipt of such request with either the removal and replacement of such personnel or with written justification as to why removal is not warranted. All decisions involving personnel will be made by Provider. Such request shall solely relate to said employees work under this agreement. In the event the City Manager disagrees with the justification offered by Provider, the City Manager's decision to replace the employee shall be final.

**IN WITNESS WHEREOF**, the parties execute this Agreement on the respective dates under each signature: The City, signing by and through its City Manager, attested to by its City Clerk, duly authorized to execute same and by Provider by and through its <u>Director</u>, whose representative has been duly authorized to execute same.

Attest:	CITY OF DORAL
Countie Diaz, City Clerk	By: _ Barbara Hernandez, City Manager
	Date:
Approved As To Form and Legal Sufficiency for the U And Reliance of the City of Doral Only:	se
Valerie Vicente	
Valerie Vicente, ESQ. City Attorney	
	PROVIDER
	By: Klews Loven
	Its: Program Director
	Date: 07/10/2023

#### **RESOLUTION No. 23-01**

A RESOLUTION OF THE MAYOR AND THE CITY COUNCIL OF THE CITY OF DORAL, FLORIDA, AUTHORIZING THE CITY MANAGER TO EXECUTE THE HOST AGENCY AGREEMENT WITH EVOLVING LIVES, INC. FOR YOUTH WHO ARE TRANSITIONING FROM POST-EDUCATION TO PRE-EMPLOYMENT; PROVIDING FOR IMPLEMENTATION; AND PROVIDING FOR AN EFFECTIVE DATE

WHEREAS, it has been a priority of the City of Doral (the "City") to establish strategic partnerships with local agencies to enhance City services; and

WHEREAS, becoming a host agency will provide the City with temporary additional manpower to strengthen the programs and services we provide to the community; and

**WHEREAS**, the program will also provide youth with an opportunity to gain meaningful work experience and be compensated through Evolving Lives Inc. for the hours worked per week; and

WHEREAS, staff has recommended that the Mayor and City Council authorize the City Manager to execute the attached Host Agency Agreement with Evolving Lives, Inc. commencing upon execution.

NOW THEREFORE, BE IT RESOLVED BY THE MAYOR AND THE CITY COUNCIL OF THE CITY OF DORAL, FLORIDA, AS FOLLOWS:

<u>Section 1.</u> Recitals. The above recitals are confirmed, adopted, and incorporated herein and made a part hereof by this reference.

<u>Section 2.</u> Approval. That it approves and authorizes the City Manager to execute the attached Host Agency Agreement with Evolving Lives Inc., together with such

Res. No. 23-01

Page 2 of 3

non-material changes as may be subsequently agreed to by the City Manager and approved as to form and legal sufficiency by the City Attorney.

**Section 3. Authorization.** The City Manager is authorized to execute all necessary documents, upon the City Attorney's approval as to form and legal sufficiency, and to expend budgeted funds on behalf of the City in furtherance of this approval.

<u>Section 4.</u> <u>Implementation.</u> The City Manager and the City Attorney are hereby authorized to take such further action as may be necessary to implement the purpose and provisions of this Resolution.

<u>Section 5.</u> <u>Effective Date.</u> This Resolution shall become effective immediately upon its adoption.

Res. No. 23-01 Page **3** of **3** 

The foregoing Resolution was offered by Vice Mayor Pineyro who moved its adoption.

The motion was seconded by Councilmember Puig-Corve and upon being put to a vote, the vote was as follows:

Mayor Christi Fraga	Yes
Vice Mayor Rafael Pineyro	Yes
Councilwoman Digna Cabral	Yes
Councilwoman Maureen Porras	Yes
Councilman Oscar Puig-Corve	Yes

PASSED AND ADOPTED this 11 day of January 2023.

CHRISTI FRAGA, MAYOR

ATTEST:

CONNIE DIAZ, CMC

CITY CLERK

APPROVED AS TO FORM AND LEGAL SUFFICIENCY FOR THE USE AND RELIANCE OF THE CITY OF DORAL ONLY:

LUIS FIGUEREDO, ESQ.

CITY ATTORNEY

ACORD®

### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/31/2023

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.

ADDITIONAL INSURED

	ORIANI: II the certificate not				, ,			•	
	orsed. If SUBROGATION IS WA							endor	rsement. A
stat	ement on this certificate does not	confer rigi	hts to the certificate hold	der in lie	u of such e	ndorsement	(s).		
PRODU	CER			CONTACT NAME:					
	Hiscox Inc.			PHONE	(888)	202-3007	FAX		
	520 Madison Avenue			(A/C, No,	EXT): ` '		(A/C, No):		
	32nd Floor			E-MAIL ADDRESS	s: conta	ct@hiscox.co	om		
	New York, New York 10022				INS	SURER(S) AFFOR	RDING COVERAGE		NAIC#
				INSURER	A: Hisco	x Insurance (	Company Inc		10200
INSURE				INSURER	B:				
	Evolving Lives, Inc			INSURER	C :				
	24601 Packing House Rd. Homestead, FL 33032			INSURER	D :				
	Tiomostodd, i'r ddod			INSURER	E:				
				INSURER	F:				
COVE	ERAGES CEF	RTIFICATE	NUMBER:				REVISION NUMBER:		
THIS	S IS TO CERTIFY THAT THE POLICIES	S OF INSUE	RANCE LISTED BELOW HA'	VE BEEN	ISSUED TO	THE INSURE	D NAMED ABOVE FOR TH	HE POLI	ICY PERIOD
IND	CATED. NOTWITHSTANDING ANY R	EQUIREME	NT, TERM OR CONDITION	OF ANY	CONTRACT	OR OTHER I	DOCUMENT WITH RESPEC	CT TO V	WHICH THIS
CEF	RTIFICATE MAY BE ISSUED OR MAY	PERTAIN,	THE INSURANCE AFFORD	ED BY T	HE POLICIE	S DESCRIBE	D HEREIN IS SUBJECT TO	ALL T	HE TERMS,
EXC	LUSIONS AND CONDITIONS OF SUCH	POLICIES.	LIMITS SHOWN MAY HAVE	BEEN RE	DUCED BY	PAID CLAIMS.			
INSR LTR	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER		POLICY EFF MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
)	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$ 1,00	00,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,	,000
								\$ 5,00	00

LTR		TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S
	X	CLAIMS-MADE X OCCUR						EACH OCCURRENCE  DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 100,000
									\$ 5,000
Α			Υ		P100.181.671.3	03/31/2023	03/31/2024	PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
	Х	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ S/T Gen. Agg.
		OTHER:							\$
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
		ANY AUTO						BODILY INJURY (Per person)	\$
		ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
		HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
									\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
		DED RETENTION \$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY Y/N						PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$
	(Man	idatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$
	DES	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
DESC	RIPT	ION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD	101, Additional Remarks Schedule, may be	e attached if mor	e space is require	ed)	

CERTIFICATE HOLDER	CANCELLATION
Florida Department of Education, Division of Vocational 325 W Gaines Street Ste 1144 Tallassee, Fl 32399	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

ACORD

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

02/25/2022 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.

statement on this certificate does not (	rigitta	CO	NTACT	naoi sement	(3).		
Hiscox Inc.		l NA	ME:	000 000=	EAV		
520 Madison Avenue		(A/c	IAH	202-3007	FAX (A/C, No):		
32nd Floor		AD		ct@hiscox.co			
New York, New York 10022					RDING COVERAGE	NAIC#	
SURED		INS	URERA: HISCO	x Insurance	Company Inc	10200	
Evolving Lives, Inc		INS	URER B :				
24601 Packing House Rd.		INS	URER C :				
Homestead, FL 33032		INS	URER D :				
		INS	URER E :				
		INS	URER F:				
OVERAGES CER	TIFICATE N	UMBER:			REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY RESERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PERTAIN, THE POLICIES. LIM	INSURANCE AFFORDED	BY THE POLICIE  REDUCED BY	OR OTHER S DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPECT TO		
X COMMERCIAL GENERAL LIABILITY	INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
CLAIMS-MADE X OCCUR					EACH OCCURRENCE \$ 1,00 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100	00,000	
					MED EXP (Any one person) \$ 5,0	The state of the s	
	Y	P100.181.671.2	03/31/2022	03/31/2023		00,000	
GEN'L AGGREGATE LIMIT APPLIES PER:					Francisco de la companya del companya de la companya del companya de la companya	00,000	
X POLICY PRO- JECT LOC						Gen. Agg.	
OTHER:					\$	Gen. Agg.	
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT		
ANY AUTO					(Ea accident) \$ BODILY INJURY (Per person) \$		
ALL OWNED SCHEDULED AUTOS							
HIRED AUTOS NON-OWNED AUTOS					DDODEDTY DAMAGE		
ASTOS					(Per accident)		
UMBRELLA LIAB OCCUR					\$		
EXCESS LIAB CLAIMS-MADE					EACH OCCURRENCE \$		
DED RETENTION\$					AGGREGATE \$		
WORKERS COMPENSATION					S S S S S S S S S S S S S S S S S S S		
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE					PER OTH- STATUTE ER		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A				E.L. EACH ACCIDENT \$		
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$		
DESCRIPTION OF OFERATIONS BEIOW					E.L. DISEASE - POLICY LIMIT \$		
CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (ACORD 101,	Additional Remarks Schedule, ma	ly be attached if more	e space is require	ed)		
RTIFICATE HOLDER		CA	NCELLATION				
Florida Department of Education, Division of Vocationa 125 W Gaines Street Ste 1144 Fallassee, Fl 32399			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
	АИТ	AUTHORIZED REPRESENTATIVE					