

SUGGESTED AGENDA

TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS
PERRY, FLORIDA

MONDAY, DECEMBER 10, 2018
6:00 P.M.

201 E. GREEN STREET
TAYLOR COUNTY ADMINISTRATIVE COMPLEX
OLD POST OFFICE

REGULAR MEETING

NOTICE IS HEREBY GIVEN, PURSUANT TO FLORIDA STATUTES 286.0105, THAT ANY PERSONS DECIDING TO APPEAL ANY MATTER CONSIDERED AT THIS MEETING WILL NEED A RECORD OF THE MEETING AND 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.

ANY PERSON WISHING TO ADDRESS THE BOARD REGARDING AN AGENDAED ITEM WILL BE GIVEN THREE (3) MINUTES FOR COMMENT. A COMMENTER MAY ONLY SPEAK ONE (1) TIME FOR EACH AGENDAED ITEM.

1. Prayer
2. Pledge of Allegiance
3. Approval of Agenda

BIDS/PUBLIC HEARINGS:

4. THE BOARD TO HOLD A PUBLIC HEARING, SET FOR THIS DATE AT 6:00 P.M., OR AS SOON THEREAFTER AS POSSIBLE, ON THE PASSAGE OF A PROPOSED ORDINANCE TO AMEND THE TAYLOR COUNTY CODE OF ORDINANCES, REGARDING DEFINITIONS OF AGGRESSIVE DOG AND PROVOKED DOG (COUNTY ORDINANCE NO. 98-6).

CONSENT ITEMS:

5. APPROVAL OF MINUTES OF SEPTEMBER 13 AND 18, 2018 AND NOVEMBER 14 AND 15, 2018 (NOVEMBER MINUTES ARE OUT OF MEETING ORDER, AS THEY NEED TO BE APPROVED IN ORDER TO COMPLY WITH A PUBLIC RECORDS REQUEST) .
6. EXAMINATION AND APPROVAL OF INVOICES.
7. THE BOARD TO CONSIDER ADOPTION OF RESOLUTIONS TO REFLECT UNANTICIPATED MONIES IN THE GENERAL FUND AND THE MSTU FUND, AS AGENDAED BY DANNIELLE WELCH, COUNTY FINANCE DIRECTOR.
8. THE BOARD TO CONSIDER APPROVAL OF HANGAR LEASE AGREEMENT AT PERRY-FOLEY AIRPORT FOR BIG TOP MANUFACTURING, AS AGENDAED BY JAMI BOOTHBY, GRANTS COORDINATOR.
9. THE BOARD TO CONSIDER APPROVAL OF T-HANGAR LEASE AGREEMENT AT PERRY-FOLEY AIRPORT FOR JOHN GENTRY, AS AGENDAED BY THE GRANTS COORDINATOR.
10. THE BOARD TO CONSIDER APPROVAL OF REQUEST TO REMOVE SURPLUS COUNTY ASSETS, AS AGENDAED BY THERESA COPELAND, IT DIRECTOR.
11. THE BOARD TO CONSIDER APPROVAL OF CORRECTED LETTER FOR DISTRIBUTION OF FUNDS FOR THE EDWARDS MEMORIAL JUSTICE ASSISTANCE GRANT FOR THE TAYLOR COUNTY SHERIFF'S OFFICE DRUG TASK FORCE, AS AGENDAED BY SARAH WEIRICK, 911 COORDINATOR.

PUBLIC REQUESTS:

12. THOMAS EARL PADGETT TO APPEAR TO DISCUSS PRELIMINARY APPLICATION FOR RESIDENTIAL SOLID WASTE SERVICES PERMIT.
13. BISH CLARK TO APPEAR TO DISCUSS POSSIBLE REQUEST FOR EASEMENT THROUGH COUNTY PROPERTY AT DARK ISLAND BOAT RAMP.

CONSTITUTIONAL OFFICERS/OTHER GOVERNMENT UNITS:

14. THE BOARD TO CONSIDER THE APPOINTMENT OF ONE (1) MEMBER TO THE BIG BEND WATER AUTHORITY (BBWA) BOARD OF DIRECTORS, AS AGENDAED BY MARK REBLIN, GENERAL MANAGER.
15. STEPHEN BROWNING AND JAMES DRIGGERS, FLORIDA DEPARTMENT OF TRANSPORTATION (FDOT), TO APPEAR TO PRESENT THE FALL UPDATE.

COUNTY STAFF ITEMS:

16. THE BOARD TO CONSIDER APPROVAL OF THE INVITATION TO BID, WORK WRITE UP/BID FORMS, ADVERTISING FOR THE REHABILITATION OF THREE (3) HOMES AND THE DEMOLITION AND CONSTRUCTION OF TWO (2) HOMES THROUGH THE SHIP PROGRAM, AS AGENDAED BY THE GRANTS COORDINATOR.
17. THE BOARD TO CONSIDER APPROVAL OF BID DOCUMENTS/ADVERTISING FOR THE LEASING OF 80 +/- ACRES TO BE HARVESTED AS HAY AT THE PERRY-FOLEY AIRPORT, AS AGENDAED BY THE GRANTS COORDINATOR.
18. THE BOARD TO CONSIDER APPROVAL OF REQUEST TO FULLY FUND THE BIG BEND TRANSIT "IN TOWN" SHUTTLE DURING THE HOLIDAYS, AS AGENDAED BY THE GRANTS COORDINATOR.

GENERAL BUSINESS:

19. THE BOARD TO DISCUSS THE TAYLOR COUNTY SPORTS COMPLEX PARK RULES, AS AGENDAED BY CHAIRMAN FEAGLE.
20. THE BOARD TO DISCUSS AMENDED DRAFT BOARD CALENDAR FOR FY 2018/2019, AS AGENDAED BY CHAIRMAN FEAGLE.
21. THE BOARD TO DISCUSS SCHEDULING A PLANNING RETREAT, AS AGENDAED BY CHAIRMAN FEAGLE.

COUNTY ATTORNEY ITEMS:

22. THE BOARD TO REVIEW AND CONSIDER APPROVAL OF THE EMPLOYMENT CONTRACT WITH LAWANDA PEMBERTON, ACTING COUNT ADMINISTRATOR.

COUNTY ADMINISTRATOR ITEMS:

23. THE BOARD TO CONSIDER APPROVAL OF SECOND AMENDMENT TO THE MEMORANDUM OF UNDERSTANDING WITH THE UNIVERSITY OF FLORIDA, FOR THE CONTINUED PLACEMENT OF THE MARINE AGENT IN TAYLOR COUNTY, AS AGENDAED BY LAWANDA PEMBERTON, ACTING COUNTY ADMINISTRATOR.
24. THE ACTING COUNTY ADMINISTRATOR TO DISCUSS INFORMATIONAL ITEMS.
25. COMMENTS AND CONCERNS FROM THE PUBLIC FOR NON-AGENDAED ITEMS:
26. BOARD INFORMATIONAL ITEMS:

Motion to Adjourn

FOR YOUR INFORMATION:

- THE AGENDA AND ASSOCIATED DOCUMENTATION, IF APPLICABLE, IS AVAILABLE TO THE PUBLIC ON THE FOLLOWING WEBSITE: www.taylorcountygov.com
- IF YOU ARE A PERSON WITH A DISABILITY WHO NEEDS ANY ACCOMODATION IN ORDER TO PARTICIPATE IN THIS PROCEEDING, YOU ARE ENTITLED, AT NO COST TO YOU, TO THE PROVISION OF CERTAIN ASSISTANCE. PLEASE CONTACT LAWANDA PEMBERTON, ACTING COUNTY ADMINISTRATOR, 201 E. GREEN STREET, PERRY, FLORIDA, 850-838-3500, EXT. 7, WITHIN TWO (2) WORKING DAYS OF THIS PROCEEDING.
- ANY PERSON WISHING TO ADDRESS THE BOARD REGARDING AN AGENDAED OR NON-AGENDAED ITEM WILL BE GIVEN THREE (3) MINUTES FOR COMMENT.
- BALLOTS USED TO APPOINT CITIZENS TO ADVISORY COMMITTEES AND ADVISORY BOARDS ARE AVAILABLE FOR PUBLIC INSPECTION AFTER THE MEETING AND ARE RETAINED AS PART OF THE PUBLIC RECORD.

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ORDINANCE NO. _____

AN ORDINANCE OF THE BOARD OF COUNTY COMMISSIONERS OF TAYLOR COUNTY, FLORIDA WHICH AMENDS THE TAYLOR COUNTY CODE OF ORDINANCES, ARTICLE I SECTION 14-1 DEFINITIONS OF AGGRESSIVE DOG AND PROVIDES A DEFINITION OF PROVOKED DOG; PROVIDING FOR SEVERABILITY AND PROVIDING AN EFFECTIVE DATE.

WHEREAS, the Board of County Commissioners have found that the Definitions of Aggressive dog and Provoked dog should be defined.

IT IS THEREFORE ORDAINED BY THE BOARD OF COUNTY COMMISSIONERS OF TAYLOR COUNTY, FLORIDA THAT:

Section 1. That the Definition of Aggressive Dog is amended to:
Aggressive Dog shall mean any dog that has been declared aggressive as a result of an investigation and determination from animal control because the dog:

1. Has severely injured or killed a domestic animal, fowl, or livestock while off the owner's property.
2. Has, when unprovoked, chased or approached a person or another animal upon the streets, sidewalks or any public grounds in a menacing fashion or apparent attitude of attack, provided that such actions are attested to in a sworn statement by one or more persons and dutifully investigated by animal control.

Section 2. The Definition of a *Provoked Dog* is one that has been teased, irritated, abused or induced to bother or attack a person or another animal by a person.

Section 3. Severability. If any section, portion or phrase of this Ordinance is ruled invalid or unconstitutional by any court of competent jurisdiction the remainder of this Ordinance shall remain in full force and effect.

Section 4. Effective Date. This Ordinance shall take effect immediately upon receipt of official acknowledgement from the Office of the Secretary of State of Florida that this Ordinance has been filed in said office.

PASSED and ADOPTED in regular session by the Board of County Commissioners of Taylor County, Florida, on this ____ day of _____, 2018.

BOARD OF COUNTY COMMISSIONERS
TAYLOR COUNTY, FLORIDA

PAM FEAGLE, Chairperson

ATTEST

ANNIE MAE MURPHY,
Clerk of Court

**NOTICE (PURSUANT TO FLORIDA
STATUTE 125.66)**

Notice is hereby given that the Board of County Commissioners of Taylor County, Florida, will hold a Public Hearing on the passage of a proposed Ordinance to amend the Taylor County Code of Ordinances, Article I Section 14-1, regarding Definitions of Aggressive Dog and Provoked Dog. The Public Hearing shall be held at the Board of County Commission Meeting Room, Taylor County Courthouse Annex, Old Post Office Building in Perry, Florida, at the regular Board meeting on **MONDAY, DECEMBER 10, 2018, at 6:00 P.M., or as soon thereafter as possible.** The title of the proposed Ordinance is:

**AN ORDINANCE OF THE BOARD OF COUNTY
COMMISSIONERS OF TAYLOR COUNTY, FLORIDA
WHICH AMENDS THE TAYLOR COUNTY CODE OF
ORDINANCES, ARTICLE I SECTION 14-1 DEFINITIONS OF
AGGRESSIVE DOG AND PROVIDES A DEFINITION OF
PROVOKED DOG; PROVIDING FOR SEVERABILITY AND
PROVIDING AN EFFECTIVE DATE.**

The proposed Ordinance may be inspected by the public at the office of the Clerk of Court, located in the Taylor County Courthouse, Perry, Florida.

All members of the public are welcome to attend. Notice is further hereby given, pursuant to Florida Statute 286.0105, that any person or persons deciding to appeal any matter considered at this Public Hearing will need a record of the hearing and 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.

DATED this **16TH** day of **November, 2018**, by **ANNIE MAE MURPHY**, Clerk of the Circuit Court and Clerk to the Board of County Commissioners of Taylor County, Florida.

**LEGAL SECTION
WED. 11/21/18
I ISSUE
BILL T.C.B.C.C**

7

R E S O L U T I O N

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the **GENERAL FUND** for the fiscal period ending September 30, 2019, to be in excess of the advertised budget.

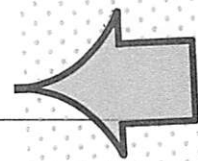
BE IT RESOLVED that the listed receipts and appropriations be added to, included in and transferred to the **GENERAL FUND** budget for the fiscal year ending September 30, 2019.

<u>Amount</u>	<u>Account</u>	<u>Account Name</u>
Revenue:		
\$10,342	001-3342007	911 Rural County Maintenance(Fall)Grant
Expenditures:		
\$10,342	0255-54630	R&M - Office Machine/Equipment

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 10th day of December, 2018 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2019 with a motion by Commissioner _____, seconded by Commissioner _____, and carried unanimously.

Annie Mae Murphy, Clerk-Auditor

Chairman



**SIGN
& DATE**

New Grant Awarded for 2019 FY - 2018 Fall Grant



Florida E911 Board
4030 Esplanade Way
Tallahassee, FL 32399-0950
Tel: 850-922-7451
Fax: 850-488-9837

https://www.dms.myflorida.com/business_operations/telecommunications/enhanced_911

November 19, 2018

Taylor County Board of County Commissioners
ATTN: Finance & Accounting
P.O. Box 620
Perry, FL 32348

FEID #: 59-6000879

Subject: Fall 2018 Rural County - Reimbursement Grant Program

Dear Taylor County Board of County Commissioners:

The State of Florida E911 Board would like to congratulate you on your grant award for E911 revenue funds to improve the E911 system serving your county. According to the Fall 2018 Cycle Rural County - Reimbursement Grant Program terms and conditions, grant funds shall be provided on a cost reimbursement basis.

In accordance with the Rural County - Reimbursement Application Section 8.0, Financial and Administrative Requirements, subsection 8.1 states that grant funds be provided on a cost reimbursement basis. Subsection 8.3 states that upon written request and accompanying documentation justifying the need, a county may receive a payment of funding with a completed Expenditures Reporting Form, with the vendor invoice, and county certification that the specific grant items including all tasks and deliverables included in the funding request are complete. Within 45 days of transfer of funding or the check date, the county shall submit verification of payment to the vendor.

The following provides details concerning the Fall 2018 grant(s) to Taylor County:

<u>Grant Number</u>	<u>CSFA #</u>	<u>Amount Requested</u>	<u>Amount Approved</u>	<u>Purpose</u>
18-11-14	72.001	\$10,342.00	\$10,342.00	
			\$10,342.00	E911 ALI Database and UPS Maintenance
Total Grant Awards:			\$10,342.00	

Board Members: Laurene J. Anderson • Carolyn Dill-Collier • Chesley Dillon • Benjamin S. Guthrie
David A. Konuch • Matthew E. Matney • Tomer Nadler • Christie A. Pontis • Ira U. Pyles • Casey E. Reed

Separate interest-bearing accounting is required for the receipt and expenditure of all E911 grant revenues. Reimbursement request(s) shall include only expenditures claimed against the specific grant number awarded and include verification copies of purchase orders and paid vouchers, invoices and copies of checks or journal transfers.

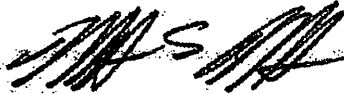
The Florida Single Audit Act was established by the 1981 Legislature in Section 215.97, Florida Statutes, which became effective on July 1, 2000. All E911 grant funding is subject to the Florida Single Audit Act; acceptance of these funds signifies your acceptance of the requirement to comply with the Florida Single Audit Act.

The Board as an awarding agency and the County as a recipient must comply with the requirements of this Act. Please reference Sections 5, 6 and 7 of the Florida Single Audit Act at the following web site address:

<https://apps.fldfs.com/fsaa/statutes.aspx>

The Board thanks you for your interest in 911 and improving public safety in Florida and your commendable efforts towards enhancing your 911 system. It is our hope that your county continues to ensure further public safety advancements in Florida.

Sincerely,

A handwritten signature in black ink, appearing to read 'MM', with a stylized flourish extending to the right.

Matthew Matney, Chief
Bureau of Public Safety - E911

MM/KR

cc: Taylor County 911 Coordinator

911 Rural County Maint Reimbursement Grant Dept. #0255

Revenue	Department of Management Services For upkeep and maintenance of 911 systems in rural areas	\$10,342.00
Total Revenue		\$10,342.00

911 Rural County Maint Reimbursement Grant Dept. #0255

Expenditures		
54630	R&M OFFICE MACHINES/EQUIP Cost associated with repair & maint. of 911	\$10,342.00
Total Expenditures		\$10,342.00

11/20/18
Sarah Wenzel

RESOLUTION

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the **MSTU FUND** for the fiscal period ending September 30, 2019, to be in excess of the advertised budget.

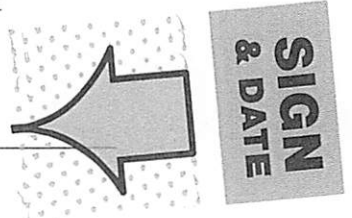
BE IT RESOLVED that the listed receipts and appropriations be added to, included in and transferred to the **MSTU FUND** budget for the fiscal year ending September 30, 2019.

<u>Amount</u>	<u>Account</u>	<u>Account Name</u>
Revenue:		
\$1,400	107-3699021	Misc - SCBA Refills
Expenditures:		
\$1,400	0192-54620	County Fire Department - R&M Equipment

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 10th day of December, 2018 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2019 with a motion by Commissioner _____, seconded by Commissioner _____, and carried unanimously.

Annie Mae Murphy, Clerk-Auditor

Chairman



Non-budgeted funds received from Georgia Pacific - for air fills provided by Taylor County Fire Department

GP Cellulose, LLCPO Box 61270
Phoenix, AZ 85082-1270VENDOR NUMBER
G194551DATE
11-22-2018CHECK NUMBER
494509

DATE	INVOICE #	GROSS AMOUNT	DISCOUNT	NET AMOUNT	VOUCHER #	PO #	CNTR#
11/16/18	111618	1,400.00	.00	1,400.00			00287268
TOTALS		1,400.00	.00	1,400.00			

Detach check along this perforation.

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to approve Hangar Lease Agreement at Perry-Foley Airport for Big Top Manufacturing.

Meeting Date:

December 10, 2018

Statement of Issue:

Board to approve Hangar Lease Agreement at Perry-Foley Airport for Big Top Manufacturing.

Recommendation:

Approve Hangar Lease Agreement

Fiscal Impact:

\$ This hangar leases for \$343.00 per month plus tax

Budgeted Expense:

Yes

☐

No

☐

N/A

X

Submitted By:

Jami Boothby, Grants Coordinator

Contact:

Jami Boothby

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Big Top Manufacturing is requesting a renewal of a hangar lease agreement at the Perry-Foley Airport for a two year period. This hangar leases for \$343.00 per month plus tax.

Options:

1. Approve the lease agreement.

2. Deny the lease agreement.

Attachments:

1. Lease Agreement for Big Top Manufacturing.

2. _____



TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk
Post Office Box 620
Perry, Florida 32348
(850) 838-3506 Phone
(850) 838-3549 Fax

LAWANDA PEMBERTON, County Administrator
201 East Green Street
Perry, Florida 32347
(850) 838-3500, extension 7 Phone
(850) 838-3501 Fax

CONRAD C. BISHOP, JR., County Attorney
Post Office Box 167
Perry, Florida 32348
(850) 584-6113 Phone
(850) 584-2433 Fax

Perry-Foley Airport Corporate Lease Agreement Ramp Space for Shade Hangar

This **Ramp Space for Shade Hangar Agreement** (the "Agreement") entered into as of this 30th day of November, 2018 by and between **Board of County Commissioners of Taylor County, Florida** ("Lessor") and **Big Top Manufacturing** ("Lessee") in Consideration of the mutual covenants and agreements herein mentioned to be performed by the respective parties, and in consideration of the rental herein after designated to be paid, Lessor hereby leases, rents, lets and demises unto Lessee, its successors, grantees and assigns, and Lessee does hereby hire and rent the below described property:

1. **Ramp Space for Shade Hangar:**

Lessor hereby leases to Lessee an area of 4,900 square feet for the use of parking and tie down space located at Perry-Foley Airport, 517 Industrial Park Drive Perry, Florida 32348. The aircraft shade hangar, hereinafter called the "Hangar," erected in this location will be purchased by the Lessee. The Hangar shall be used and occupied by Lessee solely for the storage of aircraft which will be stored in the shade hangar as listed in "Attachment A". Lessee will inform Lessor immediately if there are changes to "Attachment A". Exception will be granted for aircraft owned by a customer/client of Big Top Manufacturing, Inc. and for medical transport aircraft and/or helicopters for a period of no more than seven (7) days.

2. **Term:**

The term of this agreement shall be a two (2) year period, commencing on the 30th day of November, 2018 Payable on the 1st day of each month, during the term of this lease. This lease agreement may be renewed for additional terms.

3. **Rent:**

Lessee shall pay the Lessor \$0.07 per square foot for Lessee Owned Hangar and additional parking and aircraft ramp space. Lease shall be for 4,900 sq. ft x \$0.07 = \$343.00 x .07% tax = \$367.00 per month, payable in advance by the first day of each month. This rate shall be reviewed annually by the Airport Manager, Airport Advisory Committee, and the Taylor County Board of Commissioners. The rental rates shall be re-determined based on the change in the Consumer Price Index, as published by the United States Department of Commerce. Subsequent to such review, the monthly rental rate may be changed upon thirty days (30) notice to the Lessee. If the Lessee makes any monthly payments more than ten days (10) after the payment is due and owing, the Airport Manager reserves the right to assess one and one-half percent (1 ½%) charge per month (annualized rate of 18%) beginning with the eleventh (11th) day after payment is due. All rate changes will be approved by the Taylor County Board of Commissioners. In the event that the termination of the term with respect to any of the particular premises, facilities, rights, licenses, services or privileges as herein provided falls on any date other than the first day or last day of a calendar month, the applicable rentals, fees and charges for that month shall be paid for said month on a pro rata basis according to the number of days in that month during which the particular premises, facilities, rights, licenses, services or privileges were enjoyed. Checks shall be made payable to the Taylor County Board of Commissioners and mailed or delivered to the Airport Manager at 401 Industrial Park Drive, Perry, Florida 32348.

4. **Hangar Relocation:**

In the event there is a need to relocate the Hangar to a different location on the airport ramp, a suitable location will be provided and at least a 160 day notification will be given. The subsequent relocation will be paid for by the Lessor which would include the cost of any disassembly, ramp repairs, new site preparation, and re-assembly. Hangar relocation will only be requested in an emergency situation if requested prior to the end of lease or point of renewal.

5. **First Right of Refusal:**

In the event the Lessee decides to sell the Hangar, the Lessor will have the right to purchase the hangar at the fair market value. If the parties are unable to agree on fair market value then an independent appraiser shall be appointed to render an opinion of fair market value. If the parties

cannot agree on an appraiser, one shall be appointed by the Circuit Court in and for Taylor County, Florida.

6. Manner of Giving Notice:

Notice given pursuant to the provisions of the Lease, or necessary to carry out its provisions, shall be in writing and delivered personally to the person whom the notice is to be given, or mailed postage prepaid addresses to such person. Lessor's address for this purpose is 401 Industrial Park Drive Perry, Fl. 32348.

7. Termination:

This Lease may be terminated if the Lessee does not pay the monthly rent installment or by decision of the Taylor County Board of Commissioners. A written notice shall be given thirty (30) days before termination. If the Lease is terminated for non payment, it is the Lessee's responsibility to remove the Hangar from the Lessor's property.

8. Obligations of the Lessee:

- a. **Storage:** The Shade Hangar shall be used only for storage of the Aircraft or owners vehicle(s) while aircraft is in use as identified in "Attachment A".
- b. **Building Maintenance and Repair:** The Lessee shall maintain the Shade Hangar in a neat and orderly condition, and shall keep the Hangar floor clean of oil, grease, and other toxic chemicals. No corrosive, explosive, or flammable materials will be stored within or about the Hangar. No boxes, crates, rubbish, paper or other litter that could cause or support combustion shall be permitted within or about the Hangar. No installation of equipment or alterations of structure except as authorized by the Airport Manager. The Lessee shall be responsible for all damage to the leased premises caused by the Lessee's negligence or abuse. Lessee shall make no structural, electrical, or other modifications to the premises without first obtaining written Lessor's permission and obtaining a permit, if required.
- c. **Use of Hangar:** Shade Hangars are for storage of aircraft only, or owner vehicle(s) when aircraft(s) are in use. Maintenance and repairs of aircraft may be conducted on site; however the shade hangars may not be used as a maintenance repair shop on a regular basis. Other than preventative maintenance performed by an owner, maintenance must be completed by a licensed A. & P. or I.A. mechanic. Storage of boats, campers, or other non-aviation items may be only allowed with the permission of the Airport Manager and/or the County

Administrator or their designed representative. Lessee shall be permitted to perform in their leased Hangar; only the work is specifically authorized under **Federal Aviation Regulations, Part 43, Appendix A, Paragraph C, Preventative Maintenance**, or as otherwise provided by Federal Aviation Regulations, subject to approval by the County's Fire Official.

- d. Commercial Activity: Commercial activity may be conducted on site directly related to Big Top Manufacturing, Inc. Commercial activity not related to Big Top Manufacturing, Inc. is not permissible. In accordance with F.A.A. and T.S.A. regulations, the Lessee shall be allowed to invite an A. & P. or I.A. mechanic to perform commercial maintenance on the Lessees' personal aircraft. Lessee shall control the conduct and demeanor of its employees and invitees, and of those doing business with it, in and around the Hangar, and shall take all steps necessary to remove persons whom Lessor may, for good and sufficient cause, deem objectionable. In utilizing the Hangar during the term of this Agreement, Lessee agrees to and shall comply with all applicable ordinances, rules and regulations established by Federal, State or Local government agency or by the Lessor.
- e. Lessee may not lease shade hangar space to current (as of date of lease agreement execution) lessee's of t-hangars and/or shade hangars at Perry Foley Airport without prior written consent of Lessor.
- f. If Perry Foley Airport has shade or t-hangar lease space available, Lessee may not lease to potential airport Lessee's.
- g. Environmental Laws:
 - 1. Notwithstanding any other provision of this Agreement, and in addition to any and all other Agreement requirements, and any other covenants and warranties of Lessee, Lessee hereby expressly warrants, guarantees, and represents to Lessor, upon which Lessor expressly relies, that Lessee is aware of Federal, State, regional, and local governmental laws, ordinances, regulations, orders and rules, without limitation, which govern or which apply to the direct or indirect results and impacts to the environment and natural resources due to, or in any way resulting from, the conduct by Lessee of its operations pursuant to or upon the Premises. Lessee expressly represents, covenants, warrants, guarantees, and agrees that they shall comply with all applicable Federal, State, regional and local laws, regulations, and ordinances protecting the environment

and natural resources including, but not limited to the Federal Clean Water Act, Safe Drinking Water Act, Clean Air Act, Resource Conservation Recovery Act, Comprehensive Environmental Response, Compensation and Liability Act of 1980 ("Superfund"), and all rules and regulations promulgated or adopted there under as same may from time to time be amended. Lessees agree to keep themselves informed of future changes in the existing environmental laws.

2. Lessee hereby expressly agrees to indemnify and hold Lessor harmless from and against any and all liability for fines and physical damage to property or injury or deaths to persons, including reasonable expense and attorney's fees, arising from or resulting out of, or in anyway caused by, Lessee's failure to comply with any and all applicable Federal, State, and local laws, ordinances, regulations, rulings, orders and standards, now or hereafter, promulgated for the purpose of protecting the environment. Lessee agrees to cooperate with any investigation or inquiry by any governmental agency regarding possible violation of any environmental law or regulation.

h. Fire and Building Codes/Extinguisher:

The Lessee shall maintain at all times, in the Hangar, an approved ten pound dry chemical fire extinguisher suitable for use on Type "A", "B", and "C" fires with current inspection certificate from an approved fire equipment company or local Fire Inspector affixed at all times.

i. Regulatory Review:

Copies of the above regulations can be viewed at the Airport Manager's office.

9. Sublease/Assignments:

Lessee agrees not to assign this Agreement without prior written approval of Lessor.

10. Insurance:

Lessee agrees to maintain, at its own expense, for the benefit of itself and Lessor as so-insured, insurance of such types and in such amounts as may be approved by Lessor, insuring against liability for damage or loss to the aircraft or other property, and against liability for personal injury or death, arising from acts or omissions of Lessee, its agents and employees. Such policy or policies shall contain a provision whereby Lessee's insurer waives any rights of subrogation against Lessor, its agents and employees and providing that Lessor, its agents and employees must receive at least ten

days (10) prior written notice of any cancellation of Lessee's insurance coverage. Prior to the commencement of the Agreement, Lessee shall deliver to Lessor certificates or binders evidencing the existence of the insurance. The Lessee shall also be responsible for providing proof of insurance at the beginning of the renewal period of his/her insurance policy and the insurance policy has remained in force. If the Lessee fails to provide or is unable to provide proof of the insurance at any time, the Lessor shall have the authority to terminate the Lease Agreement. Every aircraft owned or operated by any Lessee and/or user of a T-Hangar shall have insurance coverage in amounts not less than the following:

- a. Bodily Injury - \$50,000 and
- b. Property Damage - \$500,000 per accident.
- c. Claims payable by occurrence.

11. Indemnity-Force Majeure:

Lessee agrees to release, indemnify and hold Lessor, its officers and employees harmless from and against any and all liabilities, damages, business interruptions, delays, losses, claims, judgments of any kind whatsoever, including all cost. The Lessor shall, at its option, and without further notice, have the right to terminate the Agreement. Lessee expressly waives the service of any notice, attorneys' fees, and expenses incidental thereto, which may be suffered by, or charges to, Lessor by reason of any loss of or damage to any property or injury to or death of any persons arising out of or by reason of any breach, violation or non-performance by Lessee or its servants, employees or agents or any covenant or condition of the Agreement or by any act or failure to act of those persons. Lessor shall not be liable for its failure to perform this Agreement or for any loss, injury, damage or delay of any nature whatsoever resulting there from caused by any Act of God, fire, flood, accident, strike, labor dispute, riot, insurrection, war or any other cause beyond Lessor's control. Lessor may suspend general aviation operation, as necessary in support of emergency operations requiring airport participation.

12. Disclaimer of Liability:

Lessor hereby disclaims, and Lessee hereby releases Lessor from, any and all liability, whether in contract or tort (including strict liability and negligence) for any loss, damage or injury of any nature whatsoever sustained by Lessee, its employees, agents or invitees during the term of this Agreement, including but not limited to loss, damage or injury to the aircraft or other property of Lessee that may

be located or stored in the Shade Hangar, unless such loss, damage or injury is caused by Lessor's gross negligence. The parties hereby agree that under no circumstances shall Lessor be liable for indirect, consequential, special or exemplary damages, whether in contract or tort (including strict liability and negligence), such as but not limited to, loss of revenue of anticipated profits or other damage related to the leasing of the Hangar under this Agreement. Changes or amendments to this Disclaimer shall be requested in writing and submitted to the Perry-Foley Airport Advisory Committee for approval or disapproval. A change or amendment to this Disclaimer that is approved by the Perry-Foley Airport Advisory Committee will be submitted to the Taylor County Board of County Commissioners for legal counsel review and subsequent approval or disapproval by the Taylor County Board of County Commissioners.

13. Default:

This Agreement shall be breached if:

1. Lessee shall default in the payment of any rental payment hereunder.
2. Lessee shall default in the performance of any other covenant herein and such default shall continue for five (5) days after receipt by Lessor or notice thereof from Lessor.
3. A petition is filled by or against Lessee under the Bankruptcy Act or any amendment thereto (including a petition for reorganization or any agreement);
4. Lessee against his/her property for the benefit of their creditors; or
5. Lessor determines after a reevaluation the Lessee is not compliance with the terms of the Lease on a routine/consistent basis.

In the event of any breach of this Agreement of Lessee, Lessor shall, at its option, and without further notice, have the right to terminate this Agreement and to remove the aircraft and any other property of Lessee from the Hangar using such force as may be necessary, without being deemed guilty of trespass, breach of peace or forcible entry and detainer, and Lessee expressly waives the service of any notice. Exercise by Lessor of either or both of the rights specified above shall not prejudice Lessor's right to pursue any other legal remedy available to Lessor in law or equity including, but not limited to, court costs and attorneys' fees for bringing legal action against the Lessee.

Governing Law:

This Agreement shall be construed in accordance with the laws of Florida.

14. Relationship of Parties:

The relationship between Lessor and Lessee shall always and only be that of Lessor and Lessee. Lessee shall never at any time during the term of this Agreement become the agent of Lessor, and Lessor shall not be responsible for the acts or omissions of Lessee or its agents.

15. Appurtenant Privileges:

a. Use of Airport Facilities:

Lessee shall be entitled, in common with others so authorized, to use all of the facilities and improvements of a public nature which now are or may hereafter be connected with the Airport, including use of landing areas, runways, taxiways, navigational aids, terminal facilities, and aircraft parking areas designated by the Lessor.

16. Maintenance of Airport Facilities:

Lessor shall maintain all public and common or joint use areas of the Airport, including Air Operations Area, in good repair, and shall make such repairs, replacements or additions thereof as are required and necessary for the safe and efficient operation of the Airport.

- a. Airspace and Approaches: Lessor reserves the right to take any action it considers necessary to protect the airspace and approaches of the Airport against obstruction, together with the right to prevent Lessee from erecting; or permitting to be erected, or locating any building, object, or structure on leased premises or adjacent to the Airport, which in the opinion of the Lessor, would limit the usefulness of the Airport or constitute a hazard to aircraft.

17. Nonexclusive Rights:

Notwithstanding anything herein contained that may be, or appear to be, to the contrary, it is expressly understood and agreed that the rights granted under this Agreement are nonexclusive and the Lessor herein reserves the right to grant similar privileges to another Lessee or other Lessees on other parts of the Airport.

18. Remedies Cumulative:

The rights and remedies with respect to any of the terms and conditions of this Agreement shall be cumulative and not exclusive, and shall be in addition to all other rights and remedies.

19. Notice:

Any notice given by one party to another in connection with this Agreement shall be in writing and shall be sent by certified or registered mail, return receipt requested:

1. If to Lessor Representative, address to:

Airport Manager

Ward Ketring

401 INDUSTRIAL PARK DR

PERRY, FL. 32348

2. If to Lessee, address to:

Jeffrey F Meerschman
Big Top Manufacturing, Inc.
President
3255 U.S Hwy 19 N, Perry, FL 32347

Notices shall be deemed to have been received on the date of receipt as shown on the return receipt.

20. Integration:

This Agreement constitutes the entire Agreement between parties, and as of its effective date supersedes all prior independent agreements between parties related to the leasing of the Hangar.

Any change or modification hereof must be in writing signed by both parties.

21. Waiver:

The waiver by either party of any covenant or condition of this Agreement shall not thereafter preclude such party from demanding performance in accordance with the terms hereof.

22. Entire Agreement:

This Agreement constitutes the entire understanding between the parties, and as of its effective date; supersedes all prior or independent agreements between parties covering the subject matter hereof.

Any change or modification must be in writing, signed by both parties.

23. Severability:

If a provision hereof shall be finally declared void or illegal by any court or administrative agency having jurisdiction, the entire Agreement shall not be void, but the remaining provision shall continue in effect as nearly as possible in accordance with the original intent of the parties.

24. Successors Bound:

This Agreement shall be binding on and shall insure to the benefit of the heirs, legal representatives, and successors of the parties hereto.


25. Venue: Venue of any litigation as a result of this lease shall be exclusively in Taylor County, Florida.

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

Lessor: Taylor County Board of County Commissioners, Florida

By: _____

Title: Airport Manager/Director

Lessee: 

By: Big Top Manufacturing, Inc.

Title: President

By: _____
Attested by Annie Mae Murphy Clerk of Court

By: _____
County Administrator or
Chairman of the Board of Commissioners

ATTACHMENT A

ADDITIONAL AIRCRAFT WHICH ARE AUTHORIZED TO USE LEASED SHADE HANGAR SPACE
AND/OR PARKING SPACE LEASED BY BIG TOP MANUFACTURING, INC.

Make/Model/Color: _____

Registration No. _____

Make/Model/Color _____

Registration No. _____

Make/Model/Color _____

Registration No. _____

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to approve T-Hangar Lease Agreement at Perry-Foley Airport for John Gentry.

Meeting Date:

December 10, 2018

Statement of Issue: Board to approve T-Hangar Lease Agreement at Perry-Foley Airport for John Gentry.

Recommendation: Approve T-Hangar Lease Agreement.

Fiscal Impact: \$ T-Hangars lease for \$160.00 plus tax per month.

Budgeted Expense: Yes ☐ No ☐ N/A ☒

Submitted By: Jami Boothby, Grants Coordinator

Contact: Jami Boothby

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: Mr. John Gentry is requesting to lease a T-Hangar at the Perry-Foley Airport for a one year period. The T-Hangars lease for \$160.00 plus tax per month.

Options:

1. Approve the T-Hangar Lease Agreement.
2. Deny the T-Hangar Lease Agreement.

Attachments: 1. T-Hangar Lease Agreement

2. _____



TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk
Post Office Box 620
Perry, Florida 32348
(850) 838-3506 Phone
(850) 838-3549 Fax

LAWANDA PEMBERTON, County Administrator
201 East Green Street
Perry, Florida 32347
(850) 838-3500, Extension 107 Phone
(850) 838-3501 Fax

CONRAD C. BISHOP, JR., County Attorney
Post Office Box 167
Perry, Florida 32348
(850) 584-6113 Phone
(850) 584-2433 Fax

Perry-Foley Airport Hangar Lease Agreement

This **HANGAR LEASE AGREEMENT** (the "Agreement") entered into as of this 1ST day of December, 2018 by and between **Board of County Commissioners of Taylor County, Florida** ("Lessor") and **JOHN GENTRY** ("Lessee") in Consideration of the mutual covenants and agreements herein mentioned to be performed by the respective parties, and in consideration of the rental herein after designated to be paid, Lessor hereby leases, rents, lets and demises unto Lessee, its successors, grantees and assigns, and Lessee does hereby hire and rent the below described property:

1. **Lease of the Hangar:**

Lessor hereby leases to Lessee Hangar# 1 (the "Hangar") located at Perry-Foley Airport, 517 Industrial Drive Perry, Florida 32348 the Hangar shall be used and occupied by Lessee solely for the storage of the following described aircraft:

Make/Model/Color: To Be Purchased

Registration No. TBD (the "Aircraft"), or any other similar aircraft owned or leased by Lessee (the "Substitute Aircraft"), provided Lessee has obtained the written consent of Lessor to store the substitute Aircraft in the Hangar, all provision of this Agreement applicable to the Aircraft shall also be applicable to the Substitute Aircraft.

2. **Term:**

The term of this agreement shall commence on the 1ST day of December, 2018, and shall continue in effect from month to month, being automatically renewed each month, unless terminated under the terms of this Agreement. However, the Lessor shall have the unilateral, right to reevaluate the lease agreement every ninety days (90) to assess the Lessee's compliance with the lease. The period of the Hangar Lease Agreement is one (1) year.

3. **Rent:**

For the use of the Hangar, Lessee shall pay the Lessor the amount of **\$171.20** per month, payable in advance before the first day of each month. This rate shall be reviewed annually by the Airport Manager, and the Airport Advisory Committee the rental rates shall be re-determined based on the change in the Consumer Price Index, all products as published by the United States Department of Commerce. Subsequent to such review, the monthly rental rate may be charged upon thirty days (30) notice to the Lessee. If the Lessee makes any monthly payments more than ten days (10) after the payment is due and owing, the Airport Manager reserves the right to assess one and one-half percent (1 ½%) charge per month (annualized rate of 18%) beginning with the eleventh (11th) day after payment is due. All rate changes will be approved by the Taylor County Board of Commissioners. In the event that the termination of the term with respect to any of the particular premises, facilities, rights, licenses, services or privileges as herein provided falls on any date other than the first day or last day of a calendar month, the applicable rentals, fees and charges for that month shall be paid for said month on a pro rata basis according to the number of days in that month during which the particular premises, facilities, rights, licenses, services or privileges were enjoyed. Checks shall be made payable to: Taylor County Board of Commissioners and mailed or delivered to the Airport Manager at 511 Industrial Park Drive, Perry, Florida 32348.

4. **Service Provided:**

Aircraft T-Hangar defined.

- a. A Group III Aircraft T-Hangar cluster of limited size, in which light aircraft are stored in separate areas, and in which limited, non-hazardous, preventative maintenance operations [see Florida Fire Code, NFPA 409, Appendix A] may be performed,
- b. For Group III Aircraft T-Hangars, partitions separating aircraft storage areas from other areas shall have at least a 2-hour fire resistance rating for every 3,000 square feet with openings between single fire areas protected by listed fire doors having a fire resistance rating of at least 1 ½ hours.
- c. Limited preventative maintenance operations [see Florida Fire Code, NFPA 409, Appendix A] may be performed in Group III Aircraft T-Hangars. Since hazardous operations are not allowed, Group III Aircraft T-Hangars shall be provided fire protection with portable fire extinguishers as specified in Florida Fire Code, NFPA 409 and paragraph 5-9.2.

- d. Exit and access requirement for Group III Aircraft T-Hangars shall comply with Florida Fire Code, NFPA 409, Appendix A, and paragraph 5-8.

Lessor Requirements. Lessor will maintain the structural components of the Hangar, including doors and door mechanisms, and Lessor will provide lights, water, electricity and normal building maintenance without additional cost to Lessee, provided, however, that Lessor reserves the right to assess and additional fee for consumption of utilities by Lessee beyond normal requirements as determined by Lessor.

5. Obligations of the Lessee:

- a. Storage: The Hangar shall be used only for storage of the above-identified Aircraft or owners vehicle while aircraft is in use.
- b. Building Maintenance and Repair: The Lessee shall maintain the Hangar in a neat and orderly condition, and shall keep the Hangar floor clean of oil, grease, and other toxic chemicals. No corrosive, explosive, or flammable materials will be stored within or about the Hangar. No boxes, crates, rubbish, paper or other litter that could cause or support combustion shall be permitted within or about the Hangar. No installation of equipment or alterations of structure except as authorized by the Airport Manager. The Lessee shall be responsible for all damage to the leased premises caused by the Lessee's negligence or abuse. The Lessee shall also be responsible for all damage to property, real or personal, located on or about the leased premises damaged as a result of the Lessee's negligence or abuse. In the event the Lessee does not promptly repair any damaged premises, or property, for which the Lessee is responsible, the Lessor reserves the right to make such repairs, at the Lessee's expense, which shall become due and payable as part of the Lessee's rent on the next monthly billing cycle. All repairs, maintenance, or improvements shall be accomplished in accordance with Building/Fire Codes. Lessee shall make no structural, electrical, or other modifications to the premises without first obtaining written Lessor's permission and obtaining a permit, if required.
- c. Use of Hangar: T-Hangars are for storage of aircraft only, and they are not to be used as workshops, repair shops or maintenance shops. Painting and major aircraft repairs therein are prohibited. Storage of boats, campers, or other non-aviation items may be only allowed with the permission of the Airport Manager and/or the County Administrator or their designed representative. Lessee shall be permitted to perform in their leased Hangar, only the work is

specifically authorized under **Federal Aviation Regulations, Part 43, Appendix A, Paragraph C, Preventative Maintenance**, as modified and included herein as Attachment A to this lease, or as otherwise provided by Federal Aviation Regulations, subject to approval by the County's Fire Official.

- d. Commercial Activity: Lessee shall conduct no commercial activity of any kind whatsoever in, from or around the Hangar. No maintenance on the Aircraft shall be performed in the Hangar without the prior written approval of Lessor, except such maintenance as would normally be performed by an aircraft owner without the benefit of a Licensed A. & P. aircraft mechanic. Upon notification of the Airport Manager and in accordance with F.A.A. and T.S.A. regulations, the Lessee shall be allowed to invite an A. & P. or I.A. mechanic to perform commercial maintenance on the Lessees' personal aircraft. Lessee shall take such steps so as to ensure that the performance of such maintenance work shall not damage the Hangar. Lessee shall control the conduct and demeanor of its employees and invitees, and of those doing business with it, in and around the Hangar, and shall take all steps necessary to remove persons whom Lessor may, for good and sufficient cause, deem objectionable. In utilizing the Hangar during the term of this Agreement, Lessee agrees to and shall comply with all applicable ordinances, rules and regulations established by Federal, State or Local government agency or by the Lessor.

e. Environmental Laws:

1. Notwithstanding any other provision of this Agreement, and in addition to any and all other Agreement requirements, and any other covenants and warranties of Lessee, Lessee hereby expressly warrants, guarantees, and represents to Lessor, upon which Lessor expressly relies, that Lessee is aware of Federal, State, regional, and local governmental laws, ordinances, regulations, orders and rules, without limitation, which govern or which apply to the direct or indirect results and impacts to the environment and natural resources due to, or in any way resulting from, the conduct by Lessee of its operations pursuant to or upon the Premises. Lessee expressly represents, covenants, warrants, guarantees, and agrees that they shall comply with all applicable Federal, State, regional and local laws, regulations, and ordinances protecting the environment and natural resources including, but not limited to the Federal Clean Water Act, Safe Drinking Water Act, Clean Air Act, Resource Conservation Recovery Act, Comprehensive

Environmental Response, Compensation and Liability Act of 1980 ("Superfund"), and all rules and regulations promulgated or adopted there under as same may from time to time be amended. Lessees agree to keep themselves informed of future changes in the existing environmental laws.

2. Lessee hereby expressly agrees to indemnify and hold Lessor harmless from and against any and all liability for fines and physical damage to property or injury or deaths to persons, including reasonable expense and attorney's fees, arising from or resulting out of, or in anyway caused by, Lessee's failure to comply with any and all applicable Federal, State, and local laws, ordinances, regulations, rulings, orders and standards, now or hereafter, promulgated for the purpose of protecting the environment. Lessee agrees to cooperate with any investigation or inquiry by any governmental agency regarding possible violation of any environmental law or regulation.

f. Fire and Building Codes/Extinguisher:

Other applicable guidance is contained in NFPA 409 and the Florida Building Codes which can be viewed in the office of the Airport Manager, and Taylor County Building and Planning Office. The Lessee shall maintain at all times, in the Hangar, an approved ten pound dry chemical fire extinguisher suitable for use on Type "A", "B", and "C" fires with current inspection certificate from an approved fire equipment company or local Fire Inspector affixed at all times.

g. Access:

The Lessee shall be given a Hangar key from the Airport Manager or their designate representative with one (1) key and the master key to be retained by the Lessor. The Lessor, local fire official, or on-site Facility Manager, designated by the Lessor reserves the right at any time to enter the hangar for security, fire, or other inspections. If any deficiency in compliance with this Agreement is found, including any fire or hazard which could cause an accident hazard, Lessee shall be so informed, and shall within five (5) days of notice rectify the hazard.

h. Termination:

On the termination of this Agreement, by expiration or otherwise, Lessee shall immediately surrender possession of the Hangar and shall remove the Aircraft and all other property there from, leaving the Hangar in the same condition as when received, ordinary wear and tear

expected. Lessee shall be liable for any and all damage to the Hangar caused by Lessee's use, including but not limited to bent, stained or corroded, interior walls, damage to unsealed floors due to fuel oil spillage, or doors damaged due to Lessee's improper or negligent operation.

i. **Regulatory Review:**

Copies of the regulations outlined in Section 5 Obligations of the Lessee can be viewed at the Airport Manager's office.

6. **Sublease/Assignments:**

Lessee agrees not to sublease the Hangar to or assign this Agreement without prior written approval of Lessor. The parking of aircraft not owned or leased by Lessee in the Hangar shall constitute a sublease.

7. **Condition of Premises:**

Lessee shall accept the Hangar in its present condition without any liability or obligation on the part of Lessor to make any alterations, improvements or repairs of any kind on or about said Hangar.

8. **Alterations:**

Lessee covenants and agrees not install any fixtures or make any alterations, additions, or improvements to the Hangar without the prior written approval of Lessor. All fixtures installed or improvements made in the Hangar shall become Lessor's property and shall remain in the Hangar at the termination of this Agreement, however terminated, without compensation or payment to Lessee.

9. **Insurance:**

Lessee agrees to maintain, at its own expense, for the benefit of itself and Lessor as so-insured, insurance of such types and in such amounts as may be approved by Lessor, insuring against liability for damage or loss to the aircraft or other property, and against liability for personal injury or death, arising from acts or omissions of Lessee, its agents and employees. Such policy or policies shall contain a provision whereby Lessee's insurer waives any rights of subrogation against Lessor, its agents and employees and providing that Lessor, its agents and employees must receive at least ten days (10) prior written notice of any cancellation of Lessee's insurance coverage. Prior to the commencement of the Agreement, Lessee shall deliver to Lessor certificates or binders evidencing the existence of the insurance showing Taylor County Board of County Commissioners as a named insured on the liability policy. The Lessee shall also be responsible for providing proof of insurance at the beginning of the renewal period of his/her insurance policy and the insurance policy has remained

in force. If the Lessee fails to provide or is unable to provide proof of the insurance at any time, the Lessor shall have the authority to terminate the Lease Agreement. Every aircraft owned or operated by any Lessee and/or user of a T-Hangar shall have insurance coverage in amounts not less than the following:

- a. Bodily Injury - \$50,000 and
- b. Property Damage - \$500,000 per accident.
- c. Claims payable by occurrence.

10. Casualty:

In the event the Hangar or the means of access thereto, shall be damaged by fire or any other cause, the rent payable hereunder shall not abate provided that the Hangar is not rendered un-leaseable by such damage. If the Hangar is rendered un-leaseable and Lessor elects to repair the Hangar, the rent shall abate for the period during which such repairs are being made, provided the damage was not caused by the acts of omissions of Lessee, its employees, agents or invitees, in which case the rent shall not abate. If the Hangar is rendered un-leaseable and Lessor elects not to repair the Hangar, this Agreement shall terminate.

11. Indemnity-Force Majeure:

Lessee agrees to release, indemnify and hold Lessor, its officers and employees harmless from and against any and all liabilities, damages, business interruptions, delays, losses, claims, judgments of any kind whatsoever, including all cost. The Lessor shall, at its option, and without further notice, have the right to terminate the Agreement and to remove the Aircraft and any other property of Lessee from the hangar using such force as may be necessary, without being deemed guilty of trespass, breach of peace or forcible entry, Lessee expressly waives the service of any notice, attorneys' fees, and expenses incidental thereto, which may be suffered by, or charges to, Lessor by reason of any loss of or damage to any property or injury to or death of any persons arising out of or by reason of any breach, violation or non-performance by Lessee or its servants, employees or agents or any covenant or condition of the Agreement or by any act or failure to act of those persons. Lessor shall not be liable for its failure to perform this Agreement or for any loss, injury, damage or delay of any nature whatsoever resulting there from caused by any Act of God, fire, flood, accident, strike, labor dispute, riot, insurrection, war or any other cause beyond Lessor's control. Lessor may suspend hangar operation, as necessary in support of emergency operations requiring airport participation.

12. Disclaimer of Liability:

Lessor hereby disclaims, and Lessee hereby releases Lessor from, any and all liability, whether in contract or tort (including strict liability and negligence) for any loss, damage or injury of any nature whatsoever sustained by Lessee, its employees, agents or invitees during the term of this Agreement, including but not limited to loss, damage or injury to the aircraft or other property of Lessee that may be located or stored in the Hangar, unless such loss, damage or injury is caused by Lessor's gross negligence. The parties hereby agree that under no circumstances shall Lessor be liable for indirect, consequential, special or exemplary damages, whether in contract or tort (including strict liability and negligence), such as but not limited to, loss of revenue of anticipated profits or other damage related to the leasing of the Hangar under this Agreement. Changes or amendments to this Disclaimer shall be requested in writing and submitted to the Perry-Foley Airport Advisory Committee for approval or disapproval. A change or amendment to this Disclaimer that is approved by the Perry-Foley Airport Advisory Committee will be submitted to the Taylor County Board of County Commissioners for legal counsel review and subsequent approval or disapproval by the Taylor County Board of County Commissioners.

13. Default:

This Agreement shall be breached if:

1. Lessee shall default in the payment of any rental payment hereunder.
2. Lessee shall default in the performance of any other covenant herein and such default shall continue for five (5) days after receipt by Lessor or notice thereof from Lessor.
3. A petition is filed by or against Lessee under the Bankruptcy Act or any amendment thereto (including a petition for reorganization or any agreement);
4. Lessee against his/her property for the benefit of their creditors; or
5. Lessor determines after a reevaluation the Lessee is not compliance with the terms of the Lease on a routine/consistent basis.

In the event of any breach of this Agreement of Lessee, Lessor shall, at its option, and without further notice, have the right to terminate this Agreement and to remove the aircraft and any other property of Lessee from the Hangar using such force as may be necessary, without being deemed guilty of trespass, breach of peace or forcible entry and detainer, and Lessee expressly waives the service of any notice. Exercise by Lessor of either or both of the rights specified above shall not prejudice

Lessor's right to pursue any other legal remedy available to Lessor in law or equity including, but not limited to, court costs and attorneys' fees for bringing legal action against the Lessee.

14. Thirty (30) Day Termination:

Either party to this Agreement shall have the right, with or without cause, to terminate this Agreement by giving thirty days (30) prior written notice to the other party except as otherwise provided in this Agreement.

Governing Law:

This Agreement shall be construed in accordance with the laws of Florida.

15. Relationship of Parties:

The relationship between Lessor and Lessee shall always and only be that of Lessor and Lessee. Lessee shall never at any time during the term of this Agreement become the agent of Lessor, and Lessor shall not be responsible for the acts or omissions of Lessee or its agents.

16. Appurtenant Privileges:

a. Use of Airport Facilities:

Lessee shall be entitled, in common with others so authorized, to use all of the facilities and improvements of a public nature which now are or may hereafter be connected with the Airport, including use of landing areas, runways, taxiways, navigational aids, terminal facilities, and aircraft parking areas designated by the Lessor.

b. Maintenance of Airport Facilities:

Lessor shall maintain all public and common or joint use areas of the Airport, including Air Operations Area, in good repair, and shall make such repairs, replacements or additions thereof as are required and necessary for the safe and efficient operation of the Airport.

c. Airspace and Approaches: Lessor reserves the right to take any action it considers necessary to protect the airspace and approaches of the Airport against obstruction, together with the right to prevent Lessee from erecting; or permitting to be erected, or locating any building, object, or structure on leased premises or adjacent to the Airport, which in the opinion of the Lessor, would limit the usefulness of the Airport or constitute a hazard to aircraft.

17. Nonexclusive Rights:

Notwithstanding anything herein contained that may be, or appear to be, to the contrary, it is expressly understood and agreed that the rights granted under this Agreement are nonexclusive and

the Lessor herein reserves the right to grant similar privileges to another Lessee or other Lessees on other parts of the Airport.

18. Remedies Cumulative:

The rights and remedies with respect to any of the terms and conditions of this Agreement shall be cumulative and not exclusive, and shall be in addition to all other rights and remedies.

19. Notice:

Any notice given by one party to another in connection with this Agreement shall be in writing and shall be sent by certified or registered mail, return receipt requested:

1. If to Lessor Representative, address to:

PERRY – FOLEY AIRPORT

401 INDUSTRIAL PARK DR.

PERRY, FL. 32348

ATTN: MELODY COX

2. If to Lessee, address to:

John K Gentry
PO Box 1034
Perry FL 32348
850 672-0145

Notices shall be deemed to have been received on the date of receipt as shown on the return receipt.

20. Integration:

This Agreement constitutes the entire Agreement between parties, and as of its effective date supersedes all prior independent agreements between parties related to the leasing of the Hangar.

Any change or modification hereof must be in writing signed by both parties.

21. Waiver:

The waiver by either party of any covenant or condition of this Agreement shall not thereafter preclude such party from demanding performance in accordance with the terms hereof.

22. Entire Agreement:

This Agreement constitutes the entire understanding between the parties, and as of its effective date; supersedes all prior or independent agreements between parties covering the subject matter hereof. Any change or modification must be in writing, signed by both parties.

23. **Severability:**

If a provision hereof shall be finally declared void or illegal by any court or administrative agency having jurisdiction, the entire Agreement shall not be void, but the remaining provision shall continue in effect as nearly as possible in accordance with the original intent of the parties.

24. **Successors Bound:**

This Agreement shall be binding on and shall insure to the benefit of the heirs, legal representatives, and successors of the parties hereto.

25. **Venue:** Venue of any litigation as a result of this lease shall be exclusively in Taylor County, Florida.

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

Lessor: **Taylor County Board of County Commissioners, Florida**

By: Wade F. K...

Title: **Airport Director or Airport Manager**

Lessee: John K. Gentry

By: John K. Gentry

Title: Owner

By: _____
Attested by: Annie Mae Murphy- Clerk of Court

By: _____
County Administrator or
Chairman of the Board of Commissioners

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

THE BOARD TO APPROVE A REQUEST TO REMOVE SURPLUS COUNTY ASSETS FROM COUNTY INVENTORY, AS AGENDAED BY THERESA COPELAND, I.T. DIRECTOR

Meeting Date:

DECEMBER 10, 2018

Statement of Issue:

BOARD TO APPROVE DISPOSITIONS OF ASSETS FROM CURRENT COUNTY INVENTORY

Recommendation:

APPROVAL OF LISTED DISPOSITIONS TO BE REMOVED

Fiscal Impact:

\$

Budgeted Expense:

Yes ☐

No ☐

N/A ☐

Submitted By:

THERESA COPELAND, I.T. DIRECTOR

850-838-3500 EXT. 108

Contact:

THERESA.COPELAND@TAYLORCOUNTYGOV.COM

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:**Options:**

1. APPROVE OR DISAPPROVE

2.

Attachments:

1. DISPOSITIONS ATTACHED

2.

County Removal List

BCC #

ACCOUNT #

3964

4088

4162

0283

4182

4182-001

4780

4886

5024

5024-001

5479

6122

6312

6378

6658

6872

6952

6953

6954

7118

7331

7331-001

7332

7338

7339

7367

7378

7384

7385

7456

7494

7505

7562

9103

9103-001



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

3964
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
Metal building	cap building/airport	
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. Mincey
Department Head

Chairman Signature

Tal [Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

4088
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
10 x 12 concrete building	salem tower	
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

O. Mincey
Department Head

Chairman Signature
Tail
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: Ext.
Department Name

DEPT 0283
Number

DATE: 11/26/18

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

BCC # 4162 1944

Name of Item <u>Gas Wall Heater</u>	Room #	Make <u>BANTAM Rannai</u>
Model <u>REH-18-N</u>	Year <u>?</u>	Serial Number <u>85-07 005999</u>
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) no longer working

Location: (required) Office

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

4182
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item siren warning system	Room # school district	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

O. Mincy
Department Head

Chairman Signature
Tal
County Administrator Approval

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

4182-001

Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item solar power panels	Room # school district	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date

C. Mincy
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

4780
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item warn winch system	Room #	Make
Model	Year	Serial Number ph09c7-4114
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. Mickey
Department Head

Chairman Signature
Tailor
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS
FROM: Emergency Mgt DEPT 0224 Clerk Asset Number: 4886 Board Asset Number: 4886
Department Name Number DATE: _____

To Whom It May Concern:
The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
fixed site satellite antenna	courthouse roof	
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. M. Hay
Department Head

Chairman Signature
T. J. Hay
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

5024

Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item winch and kit/labour	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. Mincy
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

5182-001
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item canvas bimini top	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: <u>Surplus</u>	
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required) <u>No longer needed by the Sheriff Dept, who now oversees this department 0224</u>	
Location: (required) _____	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____	
<u>C. Mincy</u> Department Head	<u>T. J. [Signature]</u> Chairman Signature <u>[Signature]</u> County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

5479
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item ac intercom 4 way comm	Room #	Make
Model	Year	Serial Number 2500402
Other Description: luther turner		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. Mincey
Department Head

Chairman Signature
Teddy
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS
FROM: Emergency Mgt DEPT 0224 Clerk Asset Number: 6122 Board Asset Number: 6122
Department Name Number DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item extendo bed 90	Room #	Make
Model	Year	Serial Number e3182
Other Description: luther turner		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. Mincey
Department Head

Chairman Signature
Teddy
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

6312

Board Asset Number:

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item generac generator 15kw	Room #	Make
Model	Year	Serial Number 3911984
Other Description: si-county tower		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. Minney
Department Head

Chairman Signature
Ted R. [Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

6378
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item repeater	Room #	Make
Model	Year	Serial Number 81550061
Other Description: beaches		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: <u>Surplus</u>	
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required) <u>No longer needed by the Sheriff Dept, who now oversees this department 0224</u>	
Location: (required) _____	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____	
<u>C. M. McCoy</u> Department Head	<u>T. J. [Signature]</u> Chairman Signature County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

6658
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item trailer	Room #	Make
Model	Year	Serial Number 5kneb16285g003775
Other Description: cap building		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. M. McCoy
Department Head

Chairman Signature
Teddy
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

6872
Board Asset Number: _____

FROM: Library GRANTS
Department Name

DEPT 0430
Number

DATE: 8/30/2018

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item SECURTY SYSTEM	Room #	Make
Model	Year	Serial Number
Other Description: THIS ITEM WAS NOT FUNCTIONING CORRECTLY, AND THE VENDOR NO LONGER SUPPORTED THE PRODUCT, WE HAD NO USAGE FOR IT.		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) ITEM WAS NON FUNCTIONING AND NOT NEEDED

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. M. Ho
Department Head

Chairman Signature
Tailor
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

6952
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

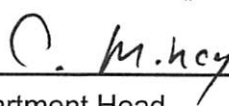
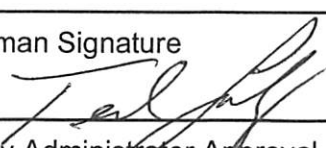

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

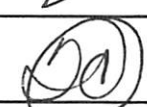
IDENTIFICATION DATA

Name of Item	Room #	Make
lcd tv		
Model	Year	Serial Number
		g2whw91
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: <u>Surplus</u>
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.
Explanation for Disposal: (required) <u>No longer needed by the Sheriff Dept, who now oversees this department 0224</u>
Location: (required) _____
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____
<div> Department Head</div> <div> Chairman Signature  County Administrator Approval</div>

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

6953
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
lcd tv		
Model	Year	Serial Number
		23whw91
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. Mincy
Department Head

Chairman Signature
Talbot
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

6954
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
lcd tv		
Model	Year	Serial Number
		c3whw91
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. Ming
Department Head

Chairman Signature
Teal
County Administrator Approval

Date Removed From Asset Records

Da
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7118
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item convertible seat/day bed	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. Mincy
Department Head

Chairman Signature
Ted P.
County Administrator Approval

Date Removed From Asset Records

Shawna Copeland
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7331
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item generator	Room # .	Make
Model	Year	Serial Number nj38673u096351v
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. M. Key
Department Head

Chairman Signature
T. J. Key
County Administrator Approval

Date Removed From Asset Records

50
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7331-001
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item electrical work	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. Mincy
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7332
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item computer	Room #	Make
Model	Year	Serial Number 7z102q1
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. Minney
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records

Da
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7338
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item generator	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

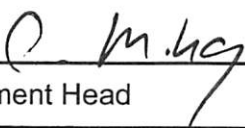
Type of Disposition: Surplus

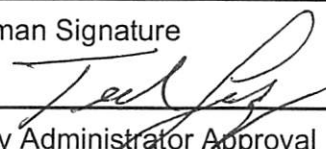
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**


Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

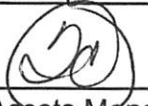
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature


County Administrator Approval

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7339
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item network storage server	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. Mincy
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7367
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item procure switch	Room #	Make
Model	Year	Serial Number cn051xjo4d
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. M. McCoy
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7372
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
id printer		
Model	Year	Serial Number
		c19063
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____
Date

C. M. Hay
Department Head

Chairman Signature
Ted
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7384
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item repeater	Room #	Make
Model	Year	Serial Number 512inj0683
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

C. M. Key
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records



Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7385
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item repeater	Room #	Make
Model	Year	Serial Number 512inj0664
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. M. McCoy
Department Head

Chairman Signature
Tal P. [Signature]
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7456
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
mtr 3000 base station		
Model	Year	Serial Number
		512inyo127
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

G. M. Hay
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7494
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
arcgis licensing		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. Mincey
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records



Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7505
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
interactive whiteboard		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____
Date

C. Milroy
Department Head

Chairman Signature _____
Taylor
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

7562
Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item desktop computer	Room #	Make
Model	Year	Serial Number 66hbx12
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. McKay
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

9103-000

Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item fence @ eoc building	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. Milroy
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

9103-001

Board Asset Number: _____

FROM: Emergency Mgt
Department Name

DEPT 0224
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item completion of fence	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) No longer needed by the Sheriff Dept, who now oversees this department 0224

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

C. M. McCoy
Department Head

Chairman Signature _____
County Administrator Approval _____

Date Removed From Asset Records

(Signature)
Fixed Assets Manager

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Corrected amounts on 51% letter for JAGC Grant for the Taylor County Sheriff's Office Drug Task Force.

Meeting Date:

December 10, 2018

Statement of Issue: After submission of the grant application it was discovered that there was a

Calculation error and the amounts were off by \$3.00

Recommendation: Sign Corrected letter

Fiscal Impact:

\$ 19,987.50
~~10,988.00~~

Budgeted Expense: Yes ☐ No ☐ N/A ☒

Submitted By:

Sarah Weirick

Contact:

850-838-1104, sarah.weirick@taylorsheriff.org

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: This letter was previously approved on October 1, 2018 and then
re-approved on November 5, 2018 with corrected distribution of funds with the TCSO getting
\$19989.00 and the Perry Police Department getting \$19,989.00, however that was over the total
allocated amount of \$39,975.00 for the county by \$3.00. FDLE has requested that the letters be
corrected before proceeding.

Options:

1. _____
2. Corrected Letter

Attachments:

1. _____
2. _____



TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk
Post Office Box 620
Perry, Florida 32348
(850) 838-3506 Phone
(850) 838-3549 Fax

LAWANDA PEMBERTON, County Administrator
201 East Green Street
Perry, Florida 32347
(850) 838-3500, extension 7 Phone
(850) 838-3501 Fax

CONRAD C. BISHOP, JR., County Attorney
Post Office Box 167
Perry, Florida 32348
(850) 584-6113 Phone
(850) 584-2433 Fax

December 10, 2018

Ms. Rona Kay Credit
Administrator
Office of Criminal Justice Grants
Florida Department of Law Enforcement
2331 Phillips Road
Tallahassee, FL 32308

Dear Ms. Credit,

In compliance with State of Florida Rule 11D-9, F.A.C., the Taylor County Board of County Commissioners approves the distribution for \$39,975.00 (total allocation available) of the Federal Fiscal Year 2018 for the Edwards Memorial Grant/Justice Assistance Grant (JAG) Program funds for the following projects within Taylor County.

<u>Sub Grantee</u> <u>City or County</u>	<u>Title of Project</u> <u>Taylor County</u>	<u>Dollar Amount</u> <u>(Federal Funds)</u>
Taylor County	Taylor County Drug Task Force	\$19,987.50
City of Perry	PD Narcotics Unit	\$19,987.50

Respectfully,

Pam Feagle
Chairman



**APPLICATION FOR
RESIDENTIAL SOLID WASTE HAULING SERVICES
PERMIT**

This application form must be completed by each applicant that wishes to obtain a permit from Taylor County for residential solid waste hauling services.

An applicant must provide the county with all of the information and documents requested in Section 1-19 below, including the application that is described below. An applicant may attach additional sheets of paper to this application form, if necessary. Applicant must show residency in Taylor County, Florida for the past five (5) years.

1. Applicant Information

Please provide the name, address and telephone number of the Applicant.

Name of Applicant: Thomas Earl Padgett

Mailing Address: 16441 West Royal Oak Dr., Perry, FL 32348

Email Address: epnvnol@gmail.com

Telephone No.: 386-688-2113

2. Applicant's Authorized Representative.

Please provide the name, address and telephone number of the Applicant.

Name of Representative: _____

Mailing Address: _____

Email Address: _____

Telephone No.: _____

3. Type of Business Entity.

Please state whether the Applicant is an individual, a corporation, a partnership, or other type of entity.

Individual LLC

4. Applicant's Principals.

If the applicant is a corporation, partnership or other business entity, please provide the name, address, and title of the Applicant's majority shareholder and each person that is a principal officer (e.g., Chief Executive Officer; President; Vice-President; Chief Operating Officer; etc.).

Name: Thomas Earl Padgett (Owner)

Address: 16441 West Royal Oak Drive, Perry, FL 32348

Title: Owner

5. Applicant's Managers.

Please provide the name, address, and telephone number of each person that will serve as the Applicant's local manager (i.e., the person that will be responsible for performing or supervising the Residential Solid Waste Hauling Services for the Applicant).

Name: N/A

Address: _____

Title: _____

6. Proof of Good Standing.

If the Applicant is a corporation, please provide proof that the corporation is in good standing in the State of Florida.

7. Authorization to do Business in Florida.

If the Applicant is not a Florida corporation, please provide proof that the Applicant is authorized to do business in Florida.

8. Fictitious Name.

If the Applicant is operating under a fictitious name, please provide information demonstrating that the fictitious name is properly registered by the Applicant.

9. Applicant's Experience.

- (a) Please provide a summary of the Applicant's experience with regard to the collection of Residential Solid Waste.
- (b) Provide a complete list of all of the communities in Florida and other states (but not more than ten (10) communities) where the Applicant has provided solid waste collection services in the last five (5) years.

- (c) For each community listed in Section 9(b) above, please provide the name, address and telephone number of a reference (i.e., a person employed by the local government in that community who can provide information concerning the quality of service by the Applicant).

10. Prior Enforcement Issues.

- (a) Please provide a complete list of all communities (if any) where the Applicant's permit, approval, franchise, or license to provide solid waste collection services was suspended or revoked.
- (b) Provide a complete list of all felony convictions, and misdemeanor convictions with the last five (5) years, involving the Applicant's collection, receiving, storing, separating, transportation, or disposal of solid waste. If the Applicant is not an individual, also provide a list of such convictions for the Applicant's majority shareholder, any person having a controlling interest in the Applicant, and each person that is an officer or partner of the Applicant.
- (c) Provide a complete list of all civil penalties and liquidated damages in excess of five thousand dollars (\$5,000.00) that were assessed against the Applicant by local, state, and federal governmental entities within the last five (5) years involving the collection, transportation, or disposal of solid waste.
- (d) With regard to Sections 10(a) through 10(c), above, provide any information concerning the convictions, penalties, liquidated damages, etc., that the Applicant believes will help the County understand the facts concerning those matters.

11. Potential Customers.

Please provide the name and address of each residence that will be provided Residential Solid Waste Hauling Services by the Applicant if this Application is approved. Please provide this information on the blank form that is attached hereto entitled "Taylor County Residential Solid Waste Hauling Application Response; Potential Customers, Paragraph 11; Potential Customers".

12. Vehicles, Equipment & Containers.

Please provide a list of the vehicles, equipment, and containers that will be used by the Applicant to provide Residential Solid Waste Hauling Services in the County. The list must identify the make, model, identification number, and year of each vehicle and piece of collection equipment. The list also must identify the size and type of each container that will be used by the Applicant. Please provide this information on the blank form that is attached hereto entitled "Taylor County Residential Solid Waste Hauling Application Response; Vehicles, Equipment and Containers, Paragraph 12; Vehicles Equipment & Containers". Also include the street address of the equipment yard(s) where the Applicant's vehicles, equipment, and containers are stored when they are not in use.

13. Insurance Requirements.

Please provide a properly executed Certificate of Insurance form demonstrating that the Applicant has the following types and amounts of insurance coverage's issued by an insurance company that is licensed to do business in the State of Florida, with an A.M. Best Rating of B+ or better, Class VII (or higher), or otherwise acceptable to the County, if the company is not rated by A.M. Best.

- (a) Comprehensive General Liability Insurance with a limit of a one million dollar (\$1,000,000) per occurrence and a one million dollar (\$1,000,000) general aggregate. This policy must include the

following coverage's: premises and operations liability, independent contractors, products and completed operations, personal injury, contractual liability, and fire damage.

- (b) Automotive Liability Insurance coverage providing a combined single limit of not less than five hundred thousand dollars (\$500,000) per occurrence. This policy must include the following coverage's: bodily injury and property damage including premises and operations.
- (c) Workers Compensation Insurance shall be provided for all of the Applicant's employees as required under Florida law (a Workers Compensation Exemption shall be acceptable with submittal of a signed "Hold Harmless, Release and Indemnity Agreement"); and
- (d) Employers Liability Insurance providing a single limit of not less than one million dollars (\$1,000,000); bodily injury by each accident, and providing a single limit of not less than one million dollars (\$1,000,000), bodily injury per each employee, and providing a single limit of not less than one million dollars (\$1,000,000) bodily injury by disease policy limit.

The certificate of insurance must demonstrate that the insurance coverage will be in effect for the term of the proposed Agreement. The certificate of insurance must name the County as an additional insured (except with regard to workers compensation and employees liability insurances).

The "certificate holder" box on the certificate of insurance shall read as follows:

Taylor County Board of County Commissioners
108 N. Jefferson Street
Perry, Florida 32347

14. Bond Requirements.

Please provide a performance bond in the amount of fifty thousand dollars (\$50,000). The bond must be attached hereto and is subject to review and approval of the County Attorney. The bond must be issued by a surety licensed to do business in the state of Florida

15. Other Information.

Please provide any other information the Applicant believes will demonstrate that:

- (a) The Applicant has the experience, personnel, equipment, and other resources necessary to provide Residential Solid Waste Hauling Services in Taylor County.
- (b) The Applicant has the capacity and willingness to comply with all applicable local, state, and federal laws; and
- (c) The award of a Permit to the Applicant will be in the public interest.

16. Permit Agreement.

Please sign and properly execute the "Permit Agreement for Residential Solid Waste Hauling Services" that is attached hereto.

17. Affidavit.

Please sign and properly execute the blank "Affidavit in support of Permit Application" that is attached hereto.

18. Effective Date of Permit Agreement.

Please identify the date when the Applicant wants its Permit to take effect.

19. Attachments.

All of the information and documents requested in paragraphs 1-18, above, must be attached to this Application and submitted to the Taylor County Solid Waste and Environmental Program Management.



**TAYLOR COUNTY RESIDENTIAL SOLID WASTE HAULING APPLICATION RESPONSE
POTENTIAL CUSTOMERS, PARAGRAPH 11; POTENTIAL CUSTOMERS**

Name: Areas of Leisure Retreats, Spring Warrior, Ocean Pond, Keaton Beach, Cedar Island,

Address: _____

Name: Dark Island, Bird Island, Steinhatchee - Points to increase as business grows.

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____



TAYLOR COUNTY RESIDENTIAL SOLID WASTE HAULING APPLICATION RESPONSE
VEHICLES, EQUIPMENT & CONTAINERS, PARAGRAPH 12; VEHICLES, EQUIPMENT & CONTAINERS

Type: Vehicle ☒ Equipment ☐ Container ☐

Make: Chevrolet Model: 4x4 Truck I.D. #: GHL Y31 Year: 1999

Type: Vehicle ☐ Equipment ☒ Container ☐

Make: Flat Bed Model: Trailer I.D. #: 1A920029133B19031 Year: 1992

Type: Vehicle ☐ Equipment ☐ Container ☒

Make: N/A Model: 80 Containers I.D. #: N/A Year: N/A

Type: Vehicle ☐ Equipment ☐ Container ☐

Make: _____ Model: _____ I.D. #: _____ Year: _____

Type: Vehicle ☐ Equipment ☐ Container ☐

Make: _____ Model: _____ I.D. #: _____ Year: _____

Type: Vehicle ☐ Equipment ☐ Container ☐

Make: _____ Model: _____ I.D. #: _____ Year: _____

Type: Vehicle ☐ Equipment ☐ Container ☐

Make: _____ Model: _____ I.D. #: _____ Year: _____

Type: Vehicle ☐ Equipment ☐ Container ☐

Make: _____ Model: _____ I.D. #: _____ Year: _____

Type: Vehicle ☐ Equipment ☐ Container ☐

Make: _____ Model: _____ I.D. #: _____ Year: _____

Type: Vehicle ☐ Equipment ☐ Container ☐

Make: _____ Model: _____ I.D. #: _____ Year: _____

Street Address of Equipment Yard for Storage of Vehicles, Equipment, and Containers.

Address: 16441 West Royal Oak Drive, Perry, FL 32348



ADDITIONAL INFORMATION 9(a) – 10(c)

Summary of Applicant's experience -
9(a):

List of Communities Where Solid Waste Collection Services Have Been Provided -
9(b):

N/A ☒

Other Community Reference - 9(c):

N/A ☒

Name:

Address:

Telephone No.:

Name:

Address:

Telephone No.:

List of Communities Where Permit was Suspended or Revoked -
10(a):

N/A ☒

List of all Felony and Misdemeanor Convictions in Five Years - 10(b):

N/A ☒

List of all Civil Penalties and Liquidated Damages > \$5,000 - 10(c):

N/A ☒



HOLD HARMLESS, RELEASE AND INDEMNITY AGREEMENT

COMES NOW, Thomas Earl Padgett, and after having obtained a State of Florida Worker's Compensation Certificate, a copy of which is attached hereto and marked Exhibit "A" and in consideration of Taylor County having accepted the said Worker's Compensation exemption and Taylor County having agreed for me to proceed with the following project, to-wit:

RESIDENTIAL SOLID WASTE HAULING SERVICES

1. I hereby agree to indemnify, hold harmless and defend Taylor County, Florida from any liability claim, demand, action, cause of action, suit, loss, damage, expense, cost attorney fee, settlement or judgment as a result of my being injured while performing the above project. I will not allow anyone to subcontract and no other person will be allowed on the job site.
2. I also hereby indemnify and release Taylor County, from any liability, claim, demand, action, cause of action, suit, loss, damage, expense, cost, settlement or judgment for any medical, dental, orthopedic, surgery or any rehabilitation or any expense as a result of any injury on said project.
3. I hereby release Taylor County from any liability of whatever kind or nature as a result of any injury on the above project.
4. I hereby agree that venue of any litigation, as a result of this Hold Harmless Release and Indemnity Agreement shall be exclusively in Taylor County, Florida and the laws of the State of Florida shall govern.
5. I hereby agree that I have relied on the legal advice of my attorney and that I fully understand this agreement and I have voluntarily executed same.

DONE AND EXECUTED this 28 day of November, 2018.

WITNESS:

Jeril Yanez

Salina Fails

Thomas E. Padgett

STATE OF FLORIDA
COUNTY OF TAYLOR

I hereby certify that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, Thomas E. Padgett, personally known to me (✓) produced identification () to be the individual described in and who executed the foregoing, and acknowledged before me that they executed the same freely and voluntarily for the purpose therein expressed.

Witness my hand and official seal this 28 day of Nov., 2018.



Marti Lee DC

NOTARY PUBLIC

My Commission Expires:

Accepted by Taylor County, Florida this _____ day of _____, 201____, by



PLEASE NOTE: NEW E-MAIL
pnewport@fairpoint.net

Newport Insurance Agency
P.O. Box 420
Perry, FL 32348
850-584-2909 X 300
From Fax # 584-6091



Date: 11/8/18 Time: 2:05 PM No. of Pages to Follow: 2

E-MAIL: epnewport@gmail.com

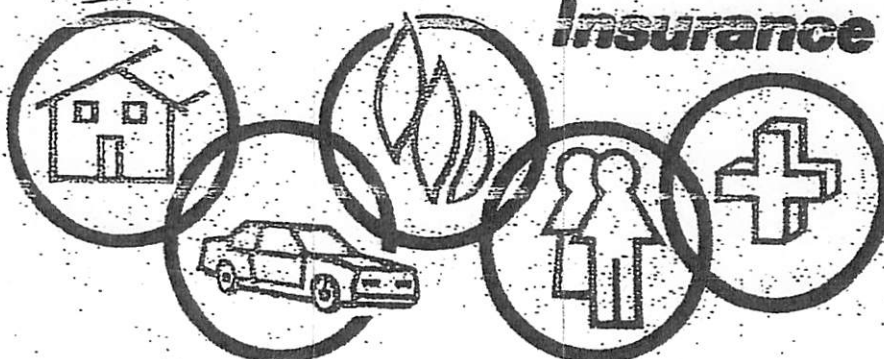
Company: _____

RE: Vehicle Quote

Notes: This is truck + Trailer Coverage

Thank You,

Debbie Newport, Agent



NEWPORT INS AGCY INC
PO BOX 420
PERRY, FL 32348

PROGRESSIVE
COMMERCIAL

Underwritten by:
Progressive Express Ins Company
November 7, 2018
Policy Period: Nov 7, 2018 - Nov 7, 2019
Page 1 of 2

THOMAS PADGETT
16441 E. ROYAL OAK DR
PERRY, FL 32348

Customer Phone number: 1-386-688-2113

Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from Progressive Express Ins Company, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through progressiveagent.com, your customized Web site. Claims service is available 24 hours a day, 7 days a week by calling 1-800-274-4499.

Policy information

Business type: Services
Sub business type: Services Not Otherwise Classified
Other: PICKS UP GARGAGE IN COUNTY

\$500,000

Quote for 12 month policy period

If you pay your premium in full, you will receive a discount as shown.

Total policy premium	\$975.00
Paid in full discount	-130.00
Policy premium if paid in full	\$845.00

Payment plans

Payment Method: 10 payments

Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment includes a \$1.00 service charge.

Payment plan	Total premium	Initial payment	Payments
11 Payments, 12.5% Down	\$975.00	\$121.88	10 payments of \$86.32
11 Payments, 16.67% Down	\$975.00	\$162.54	10 payments of \$82.25
10 Payments, 20.0% Down	\$975.00	\$195.00	9 payments of \$87.67
6 Pay, Seasonal, 20.0% Down	\$975.00	\$195.00	5 payments of \$157.00
10 Payments, 25.0% Down	\$975.00	\$243.75	9 payments of \$82.25
4 Pay, Seasonal, 25.0% Down	\$975.00	\$243.75	3 payments of \$244.75

Make payments by mail or at progressiveagent.com. Each payment includes a \$3.00 service charge.

Payment plan	Total premium	Initial payment	Payments
11 Payments, 12.5% Down	\$975.00	\$121.88	10 payments of \$88.32
11 Payments, 16.67% Down	\$975.00	\$162.54	10 payments of \$84.25
10 Payments, 20.0% Down	\$975.00	\$195.00	9 payments of \$89.67
6 Pay, Seasonal, 20.0% Down	\$975.00	\$195.00	5 payments of \$159.00
* 10 Payments, 25.0% Down	\$975.00	\$243.75	9 payments of \$84.25
4 Pay, Seasonal, 25.0% Down	\$975.00	\$243.75	3 payments of \$246.75
4 Pay, Quarterly, 25.0% Down	\$975.00	\$243.75	3 payments of \$246.75
1 Payment	\$845.00	\$845.00	None

Continued

2 Payments, 50.0% Down \$975.00 \$487.50 1 payment of \$490.50

To purchase insurance

Please review the information on your quote for accuracy; incomplete and inaccurate information could affect your rate. These rates are subject to verification of information. If you have any questions or would like to purchase a Progressive policy, please call me at 1-850-584-2909. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

Rated drivers

Failure to accurately and completely report all driver information may result in premium differences and service delays.

Name	Age	Marital status	Points	Additional information
THOMAS PADGETT	50	Single	0	

Outline of coverage

The policy limits shown for a vehicle may not be combined with the limits for the same coverage on another vehicle unless the policy contract or endorsements indicate otherwise.

Description	Limits	Deductible	Premium
Liability To Others			\$859
Bodily Injury and Property Damage Liability	\$500,000 combined single limit		
Basic Personal Injury Protection			116
Without Work Comp-Named Insured & Relatives	\$10,000 each person	\$0	

Total 12 month policy premium \$975.00

Auto coverage schedule

1. 1999 CHEVROLET C2500/K2500

VIN: 1GCGK29J0XF083646 Garaging Zip Code: 32348 Territory: 17 Radius: 100 miles
Personal use: Y Body type: P/U W/Ind Hitch Use class: C

Liability Premium	Liability	PIP	Auto Total
	\$842	\$114	\$956

2. 2015 CFG Trailer

VIN: 4C9VA1612F3269243 Garaging Zip Code: 32348 Territory: 17 Radius: 100 miles
Personal use: N Body type: Lg Utility Trlr Use class: S

Liability Premium	Liability	PIP	Auto Total
	\$17	\$2	\$19

Premium discount

Policy	Package



PLEASE NOTE: NEW E-MAIL
pnewport@fairpoint.net

Newport Insurance Agency
P.O. Box 420
Perry, FL 32348
850-584-2909 X 300
From Fax # 584-6091



Date: 11/9/18 Time: 1:00 PM No. of Pages to Follow: 2

E-MAIL: thoward.esq@gmail.com

Company: Trey Howard Lawyer

RE: Thomas Earl Padgett

Notes:

Trey
This is Earl's quote for Gen. Lin.
Been trying to send to his email all
mornings & not gone through. He
said send to you.

Thank You,

Phyllis Newport, Agent





To: Phyllis Newport
At: Newport Insurance Agency

November 9, 2018

Quote Summary

Based on the information provided, we are pleased to offer the following quote with Evanston Insurance Company. Evanston Insurance Company is a surplus lines insurer currently rated A XV by A.M. Best.

These terms are valid for thirty days from the date on this letter. Our quotation may differ from the terms requested in the submission. Please review our quotation carefully.

Named insured: Thomas Earl Padgett
Mailing Address: 16441 West Royal Oak Drive, Perry, FL 32348
Transaction number: 3121751

Company: Evanston Insurance Company
Term quoted: 11/09/2018 to 11/09/2019 (These dates may be amended at time of binding.)
Commission: 10.0%

Premium Summary

General liability	\$750	MP
-------------------	-------	----

Total Premium without TRIA	\$750	
----------------------------	-------	--

Taxes & Fees

Policy Fee	\$35.00
Surplus Lines Tax	\$39.25
Stamping Fee	\$0.79

Total amount due	\$825.04
------------------	----------

This quote is subject to the following:

- Receipt of a current completed, signed, and dated application.
- Receipt of 3-5 years currently valued loss runs is preferred. If that is not possible, a no known loss letter signed by the insured will suffice.
- A signed copy of the Terrorism disclosure, MKL Terr 4, is required to bind.



Thomas Earl Padgett
Transaction #: 3121751

General Liability Coverage

Limits of Insurance

General Aggregate Limit	\$2,000,000
Products/Completed Operations Aggregate Limit	Included
Personal/Advertising Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Damage to Premises Rented to You Limit	\$100,000
Medical Expense Limit (Any one person)	\$5,000

Deductible

\$500 BI / PD Combined Per claim

Location schedule

Loc	State - Territory	Address
1	FL - 006	16441 West Royal Oak Drive, Perry, FL 32348

Classification and premium

Loc	Class Code	Description	Rating Basis	Exposure	Rate	Premium
1	95233	Garbage, Ash or Refuse Collecting - excluding automobile bodily injury and property damage liability	Per \$1,000 of Payroll	16,700	25.44	\$425

Additional Coverages

Coverage	Limit	Qty.	Premium
Data Breach Coverage - Claims-Made (Claim Expenses Within Limit)	Each Claim (A,B,C) Aggregate Retro Date	\$25,000 \$25,000 Inception	n/a Included

Terrorism

The Terrorism Risk Insurance Act (TRIA), as amended, requires insurance companies to offer limited terrorism coverage. TRIA coverage will cost 3% of the GL premium, subject to a \$150 minimum.

If purchased, the CG 21 73 01 08 Exclusion of Certified Acts of Terrorism will be removed from your policy and the CG 21 70 01 08 Cap on Losses from Certified Acts of Terrorism will be added.

Total General Liability Premium (25% minimum earned) \$750 MP minimum and deposit

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Appoint/Approve Board Member to serve on the Big Bend Water Authority Board

Meeting Date:

December 10, 2018

Statement of Issue: Taylor County Commissioners need to appoint/approve a person to serve on the board for Big Bend Water Authority, located at 1313 1st Ave SE, Steinhatchee, FL, 32359

Mark Reblin, General Manager of Big Bend Water Authority, will be present at the meeting.

Recommendation:

Fiscal Impact:

\$

Budgeted Expense: Yes ☐

No ☒

N/A ☐

Submitted By:

Cindy Wood

Contact:

Mark Reblin or Cindy Wood

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

A copy of the advertisement placed in the Perry Newspaper has been attached. It was advertised in the November 28, 2018, edition as well as the November 30, 2018, edition.

Options:

1.

2.

Attachments:

1.

2.

(850) 838-6077. JM

HOUSE FOR RENT

3 bedroom, 1 bath in city limits. Workshop/garage, large yard. \$800 per month. \$800 security deposit. Pets extra. 1 year lease. Call (850) 443-9642. 11/21-11/30

SMALL CABIN off of Ma Dixon Rd. on 18+ acres for lease. (850) 838-6077. JM

TAKING APPLICATIONS for 105 Drew Street. 3 bedroom, 2 bath. Large yard and shed included. (850) 843-5815. 11/28-12/7

RV FOR RENT. \$125 per week. First, last plus \$100 security deposit = \$350 to move in. Includes electric, water, gas and satellite. Private property near sports complex. (850) 295-4786. 11/28-11/30

WOODRIDGE APARTMENTS
Accepting applications for 1, 2 and 3 BR HC and Non-HC accessible apartments. HUD vouchers considered. Call (850) 584-5668. 709 W. Church St., Perry, FL 32348. TDD 711. Equal Housing Opportunity. WA

FOR RENT. 3 bedroom, 2 bath. New flooring, new roof, central H/A. \$700 a month. \$600 security deposit. Allow one pet - \$250 pet deposit. Call Lee (850) 843-0568

Move in ready. Excellent condition. Delivered and set up. \$16,900. Appliances included. Call (850) 584-7094 or come see us - Perry Repo Outlet - at U.S. 19 South. EMHP

HOMES & REAL ESTATE



SURVEYED LOT FOR SALE IN PERRY.

0.27 acres. Corner of East Main St. and North Arena Ave. Price: \$5,200. Email: gszejner@verizon.net or call (570) 276-1486. 11/14-12/5

A TO Z FARM AND LAWN SERVICE

Complete Lawn Services
Licensed and Insured
Land clearing, dozer work, tree trimming/removal, dump truck services, harrowing, bush hog mowing, rake work, dirt leveling. Call (850) 838-5996 or (850) 584-7972. AZ

WALL-TO-WALL

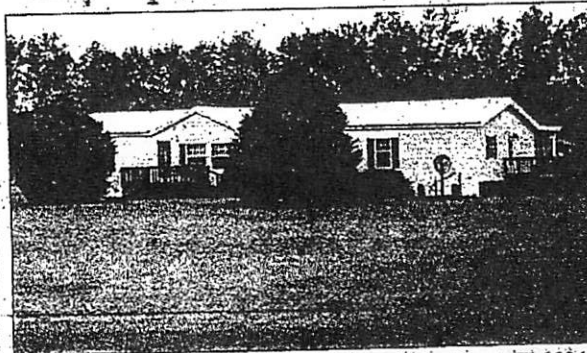
CARPET & UPHOLSTERY CLEANING

Mold Removal ~ Tile Floors ~ Pet Odors

TREE CAPITAL CLEANING

584-CLEAN (584-2532)

Amy Cope, Southern Properties LLC®



\$189,900

7139 Valhalla Ranch Dr., Perry, FL 32348

This 4 bedroom, 3 bath, 2,432 sq. ft. home sits on just over 5 fenced acres.

Check out my Facebook page to see a video!

Call me to schedule your tour today!



ADVANCED REFRIGERATION & AIR CONDITIONING is looking for people who are interested in a career in the HVAC industry. No experience necessary. Starting wage is \$14/hr. for people with no experience. Must have a clean driving record, valid drivers license, willing and able to perform hard work, be able to pass drug screening and criminal background check. Apply in person at 520 West Hampton Springs Ave. Email resumes and/or request an application by email to: adv_ref@fairpoint.net. ARA

Opportunity

TRUCK DRIVER/CDL & HAZ-MAT POSITION

PAID VACATION, HOLIDAY & SICK
HEALTH, DENTAL AND VISION
INSURANCE AVAILABLE

APPLY IN PERSON BETWEEN 8 A.M.-5 P.M.

WARE OIL & SUPPLY
2715 S BYRON BUTLER PARKWAY
PERRY, FL 32348
(850) 584-6666

BIG BEND WATER AUTHORITY ACCEPTING APPLICATIONS

BBWA is accepting applications for (1) two year term board member in Steinhatchee, FL. (Taylor County service area). Applicant must reside/homestead in the BBWA-Taylor County service area. This is a non-paying position.

Applications can be obtained at BBWA Office. Anyone interested please call Mark Reblin, BBWA General Manager, at 352-498-3576.

All applications must be completed and delivered to the Taylor County Administrator's Office, LaWanda Pemberton, 201 E Green St, Perry, FL, 32347. Applications must be received no later than December 3, 2018, at the close of the business day (5:00 p.m.).

Christian Village

Classifieds

Small ads...big deals!

CLASSIFIED ADS

Published each Wednesday and Friday.

Deadline for Wednesday: Monday by 5 p.m.

Deadline for Friday: Wednesday by 5 p.m.

Call (850) 584-5513 or email classifieds@perrynewspapers.com

YARD SALES



HUGE YARD SALE!!! Friday - Saturday (Nov. 30 - Dec. 1), 8 a.m. - 4 p.m. both days. 2212 Courtney Rd. Corner of Courtney Rd. and Wright Rd. Tools, furniture, jewelry, kitchen/garden, woodwork/craft items/supplies, ceramics, Christmas decorations; lots more. No early birds please.
11/28-11/30

MISCELLANEOUS



CAMPER TRAILER. 24', clean, metal roof, good for campsite, sm. ref., window A/C. \$1,500/OBO. (850) 838-5665.
11/28-11/30

WE BUY

Scrap Metal and Junk Cars.
(850) 838-5865.

FOR RENT



RV SPOTS available on Beach Rd. (850) 838-6077 JM

HOUSE FOR RENT

3 bedroom, 1 bath in city limits. Workshop/garage; large yard. \$800 per month. \$800 security deposit. Pets extra. 1 year lease. Call (850) 443-9842.

FOR RENT



BEAUTIFUL SPANISH STYLE HOME with South Florida open floor plan in Glenridge. The house opens up with lots of glass for an outdoor feel. 3 bedroom, 3 bath. \$1,200 per month. Great for entertaining! (850) 545-6642. MD

FOR RENT: One bedroom, one bath apartment. Utilities are included. No smoking, no pets. \$350 deposit. \$160 per week or \$635 per month. Call 850-363-8196.
11/14-12/7

2 BEDROOM APARTMENT available. Credit check required. Applications available at Ware Oil. Monday-Friday, 8 a.m. - 5 p.m., call (850) 584-6666.
WO

MOBILE HOMES



FOR SALE

A 1986 Kirkwood, 2 bedroom, 2 bath single-wide mobile home. Move in ready. Excellent condition. Delivered and set up. \$16,900. Appliances included. Call (850) 584-7094 or come see us - Perry Repo Outlet - at U.S. 19 South. EMHP

HOMES & REAL ESTATE



FOR SALE: 221 North between Shiloh Church Rd. and Cairo Parker Rd. 1 acre lots with paved roads. Owner financing available. Please call (386) 658-1346 or (850) 584-7466.
EF

HOME FOR SALE BY OWNER. \$38,000. 226 Noah Rd., Perry, Fla. Patricia Emrich, (850) 371-4328.
11/16-11/28

SERVICES



TALL TIMBER TREE SERVICE

- Stump Grinding
- Tree Trimming
- Tree Removal
- Tractor Work
- Bush Hogging
- Bucket Truck Use
- Land Clearing

Free Estimates *Great Rates*
Call today! (850) 838-5923. Mark A. Moneyhan, Licensed and Insured. Certified Quality Specialist.
9/7-12/28

SERVICES



JOE COXWELL WELDING LLC
Welding Fabrication & Repair
Mobile Service (850) 843-3500.
JC

HELP WANTED



TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS
Job Vacancy Announcement. The job description and our 2-step application process can be found on our website at www.taylorcountygov.com or in the lobby of the County Annex. Applicants must apply through Career Source. Taylor County is an EEO employer.
Road Maintenance Tech - full-time - 2 positions.
Concessions Worker - part-time - seasonal.
Veterans' Services Officer - part-time.
Firefighter/EMT - day shift.
Roll-off Site Attendant - call in. TCBC

HELP WANTED



OPEN POSITIONS AT BIG TOP MANUFACTURING

VINYL FAB
Must be able to read a tape measure to 1/4th. This job requires heavy lifting, reading sketches, and working with machines. Perfect attendance. There are (2) positions available.

STEEL FAB
Must have high school diploma or equivalent, be able to read a tape measure to 1/16th, should be proficient in math. There is only one (1) position available. Interested and qualified candidates must call at 850-584-7786 to make an appointment to apply for these positions. Only applicants with scheduled appointments will be considered. Big Top Mfg. - 3255 North US 19 Perry, FL
Equal Opportunity Employer
11/9-12/5 BT

HELP WANTED



FULL-TIME MAINTENANCE PERSON. Transportation furnished. Must have a current drivers license. Apply in person, 2715 S. Byron Butler Pkwy. Perry, Fla. (850) 584-6666 for appointment.
WO

HELP WANTED. Badcock & More. Set up/delivery. License required. Age 21 or older. Drug testing required.
BF

LEGALS



Notice is hereby given:
CANDIS COVERSON
Last known address of:
907 W Duval St
Perry, Florida 32348
DAVID MILES
Last known address of:
2911 Golf Course Rd
Perry, Florida 32348

→ Please see page 12

Employment Opportunity

TRUCK DRIVER/CDL & HAZ-MAT POSITION

850 838 3501

TO: LAWANDA PEMBERTON

FROM: MARK KEBLIN
Big Bend Water
STEINHARTREE

BIG BEND WATER AUTHORITY BOARD OF DIRECTORS APPLICATION

NAME: Wendell McKinnonMAILING ADDRESS: PO Box 751CITY: Steinhatchee STATE: FL FLORIDA ZIP: 32359HOME PHONE: 352-498-5452CELL
WORK PHONE: 407-908-8356EMAIL: wendellmckinnon@gmail.comEMPLOYER: NA

JOB TITLE: _____

NUMBER OF YEARS RESIDING IN TAYLOR COUNTY: 6 yrsREGISTERED VOTER IN TAYLOR COUNTY: YES: ☒ NO: ☐HOMESTEAD PROPERTY IN BBWA
SERVICE AREA YES: ☒ NO: ☐

Explain what knowledge or interest qualifies you for consideration for appointment to this Board. Attach additional sheets if needed.

See attached

I understand the duties and responsibilities of this Board and pledge that I will faithfully attend the meetings, carry out the duties of a Board member, and abide by all Board rules should I be appointed.

12-3-18

DATE

Wendell McKinnon

SIGNATURE

I have served on various community, county and state boards for many years before moving to Steinhatchee, FL.

City of Kissimmee Planning Board 9 years

Kissimmee City Commissioner 8 years 1998-2006

Osceola Council on Aging 8 years

Osceola Lake Advisory Board 4+ years

MetroPlan Orlando: board member 8 years, Chairman, Vice Chairman, Secretary/Treasurer

East Central Florida Regional Planning Council 8 years

State MPOAC Governing Board 2 years

Tri-County League of Cities Board; office of President 8 years

Florida League of Cities Board of Directors 2 years

Central Florida MPO Alliance

Osceola County LCAB Board 4+ years

Toho Water Authority Board 6 years

After Moving to Taylor County, Steinhatchee FL: I love this community and feel my previous experience could benefit the Big Bend Water Authority.

Big Bend Water Authority 1 year

**BIG BEND WATER AUTHORITY
CONTACT INFORMATION
2018-2019**

**VICE-CHAIR (DIXIE)
HOWARD HART
P O BOX 101
STEINHATCHEE, FL 32359
HOME: 352-498-3920
OFFICE: 352-498-7269
CELL: 352-542-4026
EMAIL: hlhart43@gmail.com**

**SEC/TREASURER: (DIXIE)
MARGARET CORBIN
336 SW 911 ST
STEINHATCHEE, FL 32359
PHONE: 352-356-1525
EMAIL:**

**COUNTY COMMISSIONER
W.C. MILLS (DIXIE)
P O BOX 2600
CROSS CITY, FL 32628
CELL: 352-356-0402
EMAIL: waltercmills@gmail.com**

**BBWA ATTORNEY
SNIFFEN & SPELLMAN, P.A.
MARK LOGAN
123 N MONROE ST
TALLAHASSEE, FL 32301
OFFICE: 850-205-1996
EMAIL: mlogan@sniffenlaw.com**

**CHAIRMAN: (TAYLOR)
CHARLES NORWOOD, JR
322 RIVERSIDE DR
STEINHATCHEE, FL 32359
HOME: 352-498-2414
WORK: 352-498-3008
CELL: 352-356-7129
EMAIL: Charlie@seahag.com**

**COUNTY COMMISSIONER
SEAN MURPHY (TAYLOR)**

**GENERAL MANAGER
MARK REBLIN
P O BOX 196
STEINHATCHEE, FL 32359
CELL: 352-356-1342
EMAIL: mreblin@msn.com**

**BBWA ENGINEER
MIKE MURPHY
TALLAHASSEE, FL 32308
PH: 850-545-9246
EMAIL:
mpmurphy1050@gmail.com**

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Fall County Commission Update from FDOT
Stephen Browning
James Driggers

MEETING DATE REQUESTED:

12-3-18

Statement of Issue: Fall County Commission Update from FDOT

Recommended Action:

Fiscal Impact:

Budgeted Expense:

Submitted By:

Contact: AMY TUCKER-BAULDREE

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments:

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Board to review and approve the Invitation to Bid and the Work Write-Up/Bid Forms for the rehabilitation of three homes and the demolition and construction of two homes through the SHIP Program.

Meeting Date:

December 10, 2018

Statement of Issue:

Board to review and approve the Invitation to Bid and Work Write-Up/Bid Forms for the rehabilitation of three homes and the demolition and construction of two homes through the SHIP Program.

Recommendation:

Approve the Invitation to Bid and Work Write-Up/Bid Forms.

Fiscal Impact:

\$ The proposed projects will be 100% grant funded.

Budgeted Expense:

Yes ☒ No ☐ N/A ☐

Submitted By:

Jami Boothby, Grants Coordinator

Contact:

Jami Boothby

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

The following homeowners have been qualified to receive assistance through the SHIP Housing Program:

SHIP REHABILITATION

Maxie Young	103 El Rancho Drive	Perry
Nathan Harris	207 W. Walnut Street	Perry
Terry Green	610 W. Colson Street	Perry

SHIP DEMOLITION AND CONSTRUCTION

Queen Simmons	106 Kennedy Street	Perry
Donald Pettitt	1202 S. Robin Street	Perry

The Bids will be received at the January 7, 2019 Board Meeting at 6:05 PM.

Options:

1. Approve the Invitation to Bid and Work Write-Up/Bid Forms.
2. Deny the Invitation to Bid and Work Write-Up/Bid Forms.

Attachments:

1. Invitation to Bid.
2. Work Write-Up/Bid Forms

PUBLIC NOTICE

INVITATION TO BID

**Housing Rehabilitation
State Housing Initiatives Partnership Program (SHIP)**

Taylor County Board of County Commissioners invites interested residential contractors to submit bids for the rehabilitation of three (3) single family houses, and the replacement of two (2) single family homes in the SHIP program.

SEALED Bids (Please submit one original and two copies) are to be submitted on or before January 4, at 4:00 PM to Annie Mae Murphy, Clerk of the Court (850) 838-3506. Bid envelopes are to be identified as SHIP 20197 ITB-001.

Hand Delivery: Annie Mae Murphy
Fed – X or UPS Clerk of the Court
 108 North Jefferson Street, Suite 102
 Perry, FL. 32347

Mail Delivery: Annie Mae Murphy
 Clerk of the Court
 108 North Jefferson Street, Suite 102
 Perry, FL. 32347

A Public Opening of the Bids is scheduled for January 7, 2019 at 6:05 PM at 201 East Green Street, Perry, Florida, 32347. Bids will be opened during a regularly scheduled Board of County Commissioners meeting.

A **MANDATORY** meeting to provide contractor orientation materials and visit the scheduled project will be held on December 13, 2018 at 10:30 am, located at 511 Industrial Park Drive, Perry, 32348. The meeting will take place in the airport terminal conference room. You must attend this meeting to receive the bid documents and attend the review of the projects. The visit to the projects will immediately follow the orientation meeting.

For contractors that have not been pre-approved, you may obtain a contractor application package by calling Government Services Group, Inc. at (352) 381-1975. Please bring your completed application package to the mandatory meeting on December 13, 2018.

WBE/MBE/DBE Firms are encouraged to participate. Taylor County is an Equal Opportunity Employer.

The Taylor County Board of Commissioners reserves the right to accept or reject any and/or all bids in the best interest of Taylor County.

TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS
Pam Feagle, Chair

**TAYLOR COUNTY
HOUSING REHABILITATION PROGRAM
WORK WRITE-UP/BID FORM**

Owner: Maxie Young

Address: 103 El Rancho Dr. – Perry, FL

Mailing Address: Same

Phone #: 850-584-
7301

Alternate Phone #:

Parcel # 03085-
000

The work write-up/bid form is a general outline of the work to be performed. Please refer to the project specification booklet for detailed instructions for each item noted below.

Item #	System	Description of Work	Location	Price
001	Floors	Replace any deteriorated floor decking and support members in master bathroom. Replace vinyl flooring in both bathrooms.		
002	Electrical	Install smoke detectors in hallways and bedrooms, hardwired in sequence with battery backup. Install GFCI receptacles in kitchen and bathrooms.	Various	
003	HVAC	Replace existing system with new Electric HVAC system with service to all habitable rooms. Include all ductwork, piping, electrical, return air vent, and registers for a complete new system. System must be Energy Star rated, minimum 15 SEER system.	All	
004	Plumbing	Have Septic tank pumped and inspected. Replace septic tank, drainfield installed in 2013 will probably pass inspection – if not, we will replace with alternate bid item. Replace kitchen sink faucet. Replace tub	Various	

Owner Signature _____

Co-Owner Signature _____

Contractor's Signature _____

		with new tile walk in shower with built in seat. Install handicap toilets in both bathrooms. Install 3 grab bars in hall bath and 1 grab bar in master bath – locations determined by homeowner.		
005	Windows	Replace one window in master bedroom.	All	

TOTAL BID > > > > > > > > > > > > > > > > _____

A. Alternate bid item: Replace drainfield only: _____

Owner Signature _____

Co-Owner Signature _____

Contractor's Signature _____

THIS PAGE MUST BE INCLUDED WITH THE BID FOR IT TO BE VALID

All work to be performed in a workman-like manner, in accordance with the Taylor County Housing Program Specifications, local codes, and manufacturer specifications. The contractor shall be responsible for repairs and/or reinstallations of materials/equipment/fixtures damaged or removed due to any work item contained herein. Contractors shall properly dispose of all fixtures, materials and other items removed from the dwelling unless otherwise specified herein. **All items must be cost itemized in the space provided or the bid will be rejected.**

Signature of contractor required at bottom of each page.

Work must be completed and approved within 60 days of the issuance of the Notice to Proceed.

The house is to be X occupied; vacant for 60 days.

I hereby certify that I am licensed by the State of Florida, Department of Business, and Professional Regulation, and that I am eligible to participate in the housing program. I also agree that change orders above the original contract amount shall only be paid for with housing program funds to correct documented code violations or to meet Section 8 Housing Quality Standards. Change orders must be approved by the homeowner or his representative, the contractor, and local government prior to any initiation of work based on that change order. Change orders must be recommended by the building department.

Company Name _____
Contractor's Name (Print Name) _____
Contractor's Signature _____
Contractor's Address _____
Contractor's License # _____
Contractor's Phone Number _____
Contractor's E-Mail Address _____

Owner Signature _____
Co-Owner Signature _____
Contractor's Signature _____

THIS PAGE MUST BE INCLUDED WITH THE BID FOR IT TO BE VALID

All work to be performed in a workman-like manner, in accordance with the Taylor County Housing Program Specifications, local codes, and manufacturer specifications. The contractor shall be responsible for repairs and/or reinstallations of materials/equipment/fixtures damaged or removed due to any work item contained herein. Contractors shall properly dispose of all fixtures, materials and other items removed from the dwelling unless otherwise specified herein. **All items must be cost itemized in the space provided or the bid will be rejected.** Signature of contractor required at bottom of each page.

Work must be completed and approved within 60 days of the issuance of the Notice to Proceed.

The house is to be X occupied; vacant for 60 days.

I hereby certify that I am licensed by the State of Florida, Department of Business, and Professional Regulation, and that I am eligible to participate in the housing program. I also agree that change orders above the original contract amount shall only be paid for with housing program funds to correct documented code violations or to meet Section 8 Housing Quality Standards. Change orders must be approved by the homeowner or his representative, the contractor, and local government prior to any initiation of work based on that change order. Change orders must be recommended by the building department.

Company Name _____
Contractor's Name (Print Name) _____
Contractor's Signature _____
Contractor's Address _____
Contractor's License # _____
Contractor's Phone Number _____
Contractor's E-Mail Address _____

Owner Signature _____
Co-Owner Signature _____
Contractor's Signature _____

**TAYLOR COUNTY
HOUSING REHABILITATION PROGRAM
WORK WRITE-UP/BID FORM**

Owner: Terry Green

Address: 610 W. Colson Street – Perry, FL

Mailing Address: Same

Phone #: 443-707-
9167

Alternate Phone #:

Parcel # 04702-
000

The work write-up/bid form is a general outline of the work to be performed. Please refer to the project specification booklet for detailed instructions for each item noted below.

Item #	System	Description of Work	Location	Price
001	Roof	Replace shingles, including all deteriorated roof decking and support members. Replace low slope roof with appropriate material, including all deteriorated roof decking and support members.	Roof	
002	Electrical	Install smoke detectors in hallways and bedrooms, hardwired in sequence with battery backup.	Various	
003	HVAC	Replace existing system with new Electric HVAC system with service to all habitable rooms. Include all ductwork, piping, electrical, return air vent, and registers for a complete new system. System must be Energy Star rated, minimum 15 SEER system. Replace existing heat/air window unit.	All	
004	Plumbing	Replace vent fan in hall bath. Replace tub stopper valve and escutcheon.	Hall Bath	

Owner Signature _____

Co-Owner Signature _____

Contractor's Signature _____

005	Windows	Replace two front windows, 1 side window, and 2 rear windows.	All	
006	Doors	Replace two front doors with new exterior pre-hung doors with Jamb Saver jambs. Include new hardware with deadbolts keyed alike.	Front	
007	Steps	Replace rear steps and handrails with new PT wood steps and handrails (unpainted).	Rear Steps	

TOTAL BID > > > > > > > > > > > > > > > > _____

Owner Signature _____

Co-Owner Signature _____

Contractor's Signature _____

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Signature of contractor required at bottom of each page.

Work must be completed and approved within 60 days of the issuance of the Notice to Proceed.

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Company Name _____
Contractor's Name (Print Name) _____
Contractor's Signature _____
Contractor's Address _____
Contractor's License # _____
Contractor's Phone Number _____
Contractor's E-Mail Address _____

Owner Signature _____
Co-Owner Signature _____
Contractor's Signature _____

Taylor County
HOUSING REHABILITATION PROGRAM
WORK WRITE-UP/BID FORM

Owner: Queen Simmons

Address: 106 Kennedy St. – Perry

Mailing Address: Same

Phone #: 850-838-2474

Parcel # 04995-000

Inspected Jay Moseley
By:

Date: 11-15-2018

The work write-up/bid form is a general outline of the work to be performed. Please refer to the project specification booklet for detailed instructions for each item noted below. This house has been determined to be un-repairable and will be demolished. A new house will be constructed in its place.

Item #	System	Description of Work	Location	Price
001	DEMOLITION	Demolition and safe, legal, disposal of all materials, and clean up of job site for the construction of the new house.	All	
002	SITEWORK	Provide boundary site survey and plan if required by building department. Preparation of site for new construction shall include all fill dirt required, grading, compacting, and testing necessary for this house including curb cuts, driveway aprons, and sod if required by code. Any site in a flood zone shall be constructed at least one foot above base flood elevation. The required certificate of elevation is the responsibility of the contractor, if property is located in the flood zone. Treat for termites prior to pouring slab.	All	
003	NEW STRUCTURE	The new house shall consist of the following: Minimum 1400 sq. ft, 4 bedrooms, one bath, and kitchen – living room combination. Materials shall be concrete slab-on-grade, wood frame walls with HardiePlank® or equivalent siding, and 25-year shingled roof with vented vinyl or aluminum soffits and approved roof vents. All plans and permitting shall be the responsibility of the contractor.	All	

Owners Signature

Co-Owners Signature

Contractor's Signature

Taylor County Housing Program Bid form

106 Kennedy St, Perry, FL

		Plans shall include a 20' X 14' parking pad with wheelchair ramp to front door.		
004	ELECTRICAL, APPLIANCES, AND HVAC	<p>Minimum 200 amp service and wiring to meet NEC. (Note: electric service shall be located on side or rear of house).</p> <p>Provide new 4 burner electric stove, new electric <i>Energy Star</i> rated water heater, vented range hood, all electrical fixtures (<i>Energy Star Rated</i>), switches, and other items necessary for a complete house in move-in condition. Provide new minimum 18 cu. ft. frost-free <i>Energy Star</i> rated refrigerator.</p> <p>HVAC system shall be new central electric heating system (minimum 15 SEER) with service to all habitable rooms. Include all ductwork, piping, electrical and other items necessary for a complete system.</p>	All	
005	INTERIOR	<p>Provide plaster or drywall walls, textured ceilings, new carpet in living room, bedrooms and hall, and vinyl flooring in kitchen and bathroom. All walls to be painted one color. Ceilings to be painted white. Insulate walls to minimum R-11, and ceilings to R-30. Provide certificate of insulation for walls and ceilings as part of the close out documentation.</p> <p>Include all interior and exterior doors necessary. <i>Energy Star Rated</i> Exterior doors shall include single cylinder deadbolts, keyed alike.</p>	All	
006	PLUMBING	<p>New plumbing fixtures shall include toilet with grab bars, walk in shower with built in seat (tile construction or pre-fabricated unit – homeowner to select type) and three grab bars (homeowner to select location), bathroom vanity and kitchen sink. Install washer and dryer hook-ups in enclosed space with louvered doors and utility shelving, and 2 exterior hose bibs. Connect to community water system if available, or existing well, after inspecting well for proper function. Provide pump out and inspection for existing septic system, or connect to city sewer system if available. If existing system cannot be re-used for new house, a change order will be necessary.</p>	All	
007	WINDOWS	Windows shall be <i>Energy Star Rated</i> vinyl or aluminum frame, single hung, double pane with screens. Number,	All	

Owners Signature

Co-Owners Signature

Contractor's Signature

Taylor County Housing Program Bid form

106 Kennedy St, Perry, FL

THIS PAGE MUST BE INCLUDED WITH THE BID FOR IT TO BE VALID

All work to be performed in a workman-like manner, in accordance with the Taylor County Housing Program Specifications, local codes, and manufacturer's specifications. The contractor shall be responsible for the repairs and/or reinstallation of materials/equipment/fixtures damaged or removed due to any work item contained herein. Contractors shall properly dispose of all fixtures, materials and other items removed from the dwelling unless otherwise specified herein. All items must be cost itemized in the space provided or the bid will be rejected. Contractor's signature needed at the bottom of each page.

Work must be completed and approved within 150 days of the issuance of the Notice to Proceed.
This house is to be vacant for 150 days.

I hereby certify that I am licensed by the State of Florida, Department of Business and Professional Regulation, and that I am eligible to participate in the housing program. I also agree that change orders above the original contract amount shall only be paid for with housing program funds to correct documented code violations or to meet Section 8 Housing Quality Standards. Change orders must be approved by the homeowner or his representative, the contractor, and local government prior to any initiation of work based on that change order. Contractors please sign bottom of each page.

Company Name _____
Contractor's Name (Print Name) _____
Contractor's Signature _____
Contractor's Address _____
Contractor's License # _____
Contractor's Phone Number _____
Contractor's E-Mail Address _____

Owners Signature

Co-Owners Signature

Contractor's Signature

Taylor County
HOUSING REHABILITATION PROGRAM
WORK WRITE-UP/BID FORM

Owner: Alfred Donald Pettitt

Address: 1202 S. Robin St. – Perry

Mailing Address: Same

Phone #: 850-584-2157

Parcel # 04670-000

Inspected Jay Moseley
By:

Date: 11-15-2018

The work write-up/bid form is a general outline of the work to be performed. Please refer to the project specification booklet for detailed instructions for each item noted below. This house has been determined to be un-repairable and will be demolished. A new house will be constructed in its place.

Item #	System	Description of Work	Location	Price
001	DEMOLITION	Demolition and safe, legal, disposal of all materials, and clean up of job site for the construction of the new house.	All	
002	SITEWORK	Provide boundary site survey and plan if required by building department. Preparation of site for new construction shall include all fill dirt required, grading, compacting, and testing necessary for this house including curb cuts, driveway aprons, and sod if required by code. Any site in a flood zone shall be constructed at least one foot above base flood elevation. The required certificate of elevation is the responsibility of the contractor, if property is located in the flood zone. Treat for termites prior to pouring slab.	All	
003	NEW STRUCTURE	The new house shall consist of the following: Minimum 1000 sq. ft, 2 bedrooms, one bath, and kitchen – living room combination. Materials shall be concrete slab-on-grade, wood frame walls with HardiePlank® or equivalent siding, and 25-year shingled roof with vented vinyl or aluminum soffits and approved roof vents. All plans and permitting shall be the responsibility of the contractor.	All	

Owners Signature

Co-Owners Signature

Contractor's Signature

Taylor County Housing Program Bid form

1202 S. Robin St, Perry, FL

		Plans shall include a 20' X 14' parking pad with wheelchair ramp to front door.		
004	ELECTRICAL, APPLIANCES, AND HVAC	<p>Minimum 200 amp service and wiring to meet NEC. (Note: electric service shall be located on side or rear of house).</p> <p>Provide new 4 burner electric stove, new electric <i>Energy Star rated</i> water heater, vented range hood, all electrical fixtures (<i>Energy Star Rated</i>), switches, and other items necessary for a complete house in move-in condition. Provide new minimum 18 cu. ft. frost-free <i>Energy Star rated</i> refrigerator.</p> <p>HVAC system shall be new central electric heating system (minimum 15 SEER) with service to all habitable rooms. Include all ductwork, piping, electrical and other items necessary for a complete system.</p>	All	
005	INTERIOR	<p>Provide plaster or drywall walls, textured ceilings, new carpet in living room, bedrooms and hall, and vinyl flooring in kitchen and bathroom. All walls to be painted one color. Ceilings to be painted white. Insulate walls to minimum R-11, and ceilings to R-30. Provide certificate of insulation for walls and ceilings as part of the close out documentation.</p> <p>Include all interior and exterior doors necessary. <i>Energy Star Rated</i> Exterior doors shall include single cylinder deadbolts, keyed alike.</p>	All	
006	PLUMBING	New plumbing fixtures shall include toilet with grab bars, walk in shower with built in seat (tile construction or pre-fabricated unit – homeowner to select type) and three grab bars (homeowner to select location), bathroom vanity and kitchen sink. Install washer and dryer hook-ups in enclosed space with louvered doors and utility shelving, and 2 exterior hose bibs. Connect to community water system if available, or existing well, after inspecting well for proper function. Provide pump out and inspection for existing septic system, or connect to city sewer system if available. If existing system cannot be re-used for new house, a change order will be necessary.	All	
007	WINDOWS	Windows shall be <i>Energy Star Rated</i> vinyl or aluminum frame, single hung, double pane with screens. Number,	All	

Owners Signature

Co-Owners Signature

Contractor's Signature

Taylor County Housing Program Bid form

1202 S. Robin St, Perry, FL

THIS PAGE MUST BE INCLUDED WITH THE BID FOR IT TO BE VALID

All work to be performed in a workman-like manner, in accordance with the Taylor County Housing Program Specifications, local codes, and manufacturer's specifications. The contractor shall be responsible for the repairs and/or reinstallation of materials/equipment/fixtures damaged or removed due to any work item contained herein. Contractors shall properly dispose of all fixtures, materials and other items removed from the dwelling unless otherwise specified herein. **All items must be cost itemized in the space provided or the bid will be rejected. Contractor's signature needed at the bottom of each page.**

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Company Name _____
Contractor's Name (Print Name) _____
Contractor's Signature _____
Contractor's Address _____
Contractor's License # _____
Contractor's Phone Number _____
Contractor's E-Mail Address _____

Owners Signature

Co-Owners Signature

Contractor's Signature

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Board to review and approve bid documents for the leasing of 80 ± acres to be harvested for as hay at the Perry-Foley Airport.

Meeting Date:

December 10, 2018

Statement of Issue: Board to review and approve bid documents for the leasing of 80 ± acres to be harvested as hay at the Perry-Foley Airport.

Recommendation: Approve bid documents for the harvesting of hay at the Perry-Foley Airport.

Fiscal Impact: \$ The annual amount currently being received for the lease is \$6,960.00

Budgeted Expense: Yes ☐ No ☐ N/A ☒

Submitted By: Jami Boothby, Grants Coordinator

Contact: Jami Boothby

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The current contract for the harvesting of hay at Perry-Foley Airport is expiring In March 2019. 80 ± acres have been harvested since 2001 for additional income for the Airport/County. The acreage is currently being leased for \$6,960.00 annually. The annual payment is due by September 30 each year.

Options:

1. Approve the bid documents.
2. Deny the bid

Attachments: 1. Notice of Request for Bids

2. Bid Documents



TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk
Post Office Box 620
Perry, Florida 32348
(850) 838-3506 Phone
(850) 838-3549 Fax

LAWANDA PEMBERTON, County Administrator
201 East Green Street
Perry, Florida 32347
(850) 838-3500, extension 7 Phone
(850) 838-3501 Fax

CONRAD C. BISHOP, JR., County Attorney
Post Office Box 167
Perry, Florida 32348
(850) 584-6113 Phone
(850) 584-2433 Fax

NOTICE OF REQUEST FOR BIDS

The Taylor County Board of County Commissioners is soliciting bids for **THE LEASING OF EIGHTY (80) ± ACRES TO BE HARVESTED AS HAY AT PERRY – FOLEY AIRPORT, PERRY FLORIDA.**

Qualified firms or individuals desiring to provide the requested services must submit their bid package in an envelope or similar package marked **“Sealed bids for “THE LEASING OF EIGHTY (80) ± ACRES TO BE HARVESTED AS HAY AT PERRY – FOLEY AIRPORT, PERRY FLORIDA.”** to the Clerk of Court, 1st Floor Courthouse, 108 North Jefferson Street, Perry, Florida 32347 to arrive no later than **4:00 PM**, local time, on **January 18, 2019**. **All bids MUST have name and mailing address clearly shown on the outside of the envelope or package when submitted.** Bids will be opened and respondents announced at **9:00 AM January 22, 2019** local time, or as soon thereafter as practical, at Taylor County Administrative Complex, 201 East Green Street, Perry, Florida 32347.

The County reserves the right, in its sole absolute discretion, to reject any or all bids, to cancel or withdraw this bid at any time waive any irregularities in the bid process. The County reserves the right to award any contract(s) to the bidder/respondent which it deems to offer the best overall service, therefore, the County is not bound to award any contract(s) based on the quoted price. The County, in its sole and absolute discretion, also reserves the right to waive minor defects in the process and to accept the bid deemed to be in the County's best interest. The County, in its sole and absolute discretion, also reserves the right to assign a local business preference in the amount of five percent (5%) of the bid price. **No faxed bids will be accepted.**

For additional information and bid package contact:

Ward Ketrang
Airport Manager
511 Industrial Park Drive
Perry, FL 32348
(850)838-3519
airport@taylorcountygov.com

OR

Jami Boothby
Grants Coordinator
401 Industrial Park Drive
Perry, FL 32348
(850)838-3553
grants.assist@taylorcountygov.com

BID PACKAGES MAY ALSO BE OBTAINED FROM www.taylorcountygov.com

BY ORDER OF THE BOARD OF COUNTY COMMISSIONERS, Taylor County Florida

GENERAL BID INFORMATION

1. Bid documents shall be obtained from Ward Ketring, Airport Manager at Perry Foley Airport, 511 Industrial Park Drive, Perry, FL 32348 Telephone (850) 838-3519 or airport@taylorcountygov.com. or Jami Boothby, Grants Coordinator at 401 Industrial Park Drive, Perry, FL 32348 Telephone (850)838-3553 or grants.assist@taylorcountygov.com. Documents may also be obtained from www.taylorcountygov.com.
2. Bids **MUST** be submitted to the Clerk of Court, 1st Floor Courthouse, 108 North Jefferson Street Perry FL 32347, to arrive no later than **4:00 PM, local time, January 18, 2019.**
3. Bids **MUST** be in a sealed envelope plainly marked on the outside: **Sealed for bid for leasing of eighty (80) ± acres to be harvested as hay at Perry – Foley Airport.**
4. **All bids MUST have a name and mailing address shown on the outside of the envelope or package when submitted.**
5. Bids that are not delivered to the physical address of the Clerk of Court prior to the specified time will not be considered and **will be returned to the responder unopened.**
6. Once opened, no bid may be withdrawn prior to the Board of County Commissioners action without written consent of the Clerk of Court.
7. Responders must complete and furnish with their bid, the Florida Public Entity Crimes Statement as required by F.S. 287.133(3)(a).
8. Bids shall be received and respondents announced on January 22, 2019 at 9:00 AM or as soon thereafter as practical, at the Taylor County Administrative Complex 201 East Green Street, Perry, Florida 32347.
9. The Taylor County Board of County Commissioners reserves the right, in its sole absolute discretion, to reject any or all bids, to cancel or withdraw this bid at any time waive any irregularities in the bid process. The County reserves the right to award any contract(s) to the bidder/respondent which it deems to offer the best overall service, therefore, the County is not bound to award any contract(s) based on the quoted price. The County, in its sole and absolute discretion, also reserves the right to waive minor defects in the process and to accept the bid deemed to be in the County's best interest. The County, in its sole and absolute discretion, also reserves the right to assign a local business preference in the amount of five percent (5%) of the bid price, pursuant to Taylor County Ordinance No. 2003-12.
10. It is the responsibility of the responders to fully understand and follow all contract expectations.
11. All proposals submitted require General Liability and Workmen's Compensation Insurance, and must include a Certificate of Insurance showing \$1,000,000.00 liability insurance coverage, listing Taylor County as an additional insured, or sworn statement from an insurance agent, verifying that if the prospective respondent is awarded the bid, a Certificate of Insurance will be issued to the successful respondent within thirty (30) days of the acceptance of the proposal, in the amount stated. Also include the Declaration Page from the insurance policy, showing Workmen's Compensation Insurance on all employees working on the project. Any respondent who does not furnish the required insurance documents within thirty (30) days after the bid award, is hereby advised that the bid will be given to the next highest respondent who meets all proposal specifications. Workmen's Compensation exemptions will be accepted upon providing a current Florida Workman's Compensation Exemption Certificate, and a signed Taylor County Workmen's Compensation Hold Harmless and Indemnity Agreement. Every employee must be listed on the Exemption Certificate. Any responder, who does not furnish the required insurance documents, will not be considered and the bid will be disqualified.

12. The Taylor County Board of County Commissioners **Does Not Accept Faxed Bids.**
13. Responders who elect to send sealed bids Overnight Express or Federal Express, must send the to the physical address of: Clerk of Court, 1st Floor Courthouse, 108 North Jefferson Street Perry FL 32347.
14. For additional information, contact:

Ward Ketring
Airport Manager
511 Industrial Park Drive
Perry, FL 32348
(850)838-3519
airport@taylorcountgov.com

or

Jami Boothby
Grants Coordinator
401 Industrial Park Drive
Perry, FL 32348
(850)838-3553
grants.assist@taylorcountygov.com

BIDDER INFORMATION

1. Proposal: The bidder's proposal shall include the amount the bidder will pay per acre to lease 80 ± acres at Perry – Foley Airport to be harvested for hay on annual basis.

The bidder must lease all 80 ± acres. The acreage will not be divided into parcels.

2. Bid Form: The bidder is required to complete the Bid Form in its entirety.

SCOPE OF WORK

The contractor shall provide all equipment and materials in strict accordance with the specification of the County and other documents herein mentioned which are a part of this Contract in connection with the following:

"THE LEASING OF EIGHTY (80) ± ACRES TO BE HARVESTED AS HAY AT PERRY – FOLEY AIRPORT."

The eighty (80) ± acre field was planted at the Perry – Foley Airport in March of 2001.

Hay is typically harvested in early June or late May, again in early August and again in early October as weather permits. It is the successful bidder's option to harvest hay either as rolls or square bales.

Field can be inspected weekdays by appointment by contacting Ward Ketring at 850-838-3519 or at airport@taylorcountygov.com.

The successful bidder is required to fertilize the eighty (80) ± acres at each hay cutting. The successful bidder is required to provide the County all information as to the type of fertilization and micro nutrients used at each cutting. Non-compliance with these requirements is grounds for contract termination.

Successful bidder will provide weed control at rate and times to maintain or improve stand purity. Bidder will have all materials and rates and application technologies approved by the County prior to application. Non-compliance with these requirements is grounds for contract termination.

Bid will be awarded according to maximum revenue generated for the County.

Payment for each crop year will be due by September 30 of each year. The eighty (80) ± acres is being leased at _____ per acre for a total annual payment of _____.

2019 lease payment is due by 9/30/2019.

2020 lease payment is due by 9/30/2020.

2021 lease payment is due by 9/30/2021.

2022 lease payment is due by 9/30/2022.

2023 lease payment is due by 9/30/2023.

This agreement will be for a period of five (5) years.

If for some reason the successful bidder is unable to fertilize and harvest hay for an entire season the annual lease fee is still due to the County unless there is prior written consent from the Taylor County Board of Commissioners.

The successful bidder may not sub-lease the acreage.

The successful bidder may only use the land leased for the harvesting of hay.

Hay needs to be removed from the field within 30 days of baling.



TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk
Post Office Box 620
Perry, Florida 32348
(850) 838-3506 Phone
(850) 838-3549 Fax

LAWANDA PEMBERTON, County Administrator
201 East Green Street
Perry, Florida 32347
(850) 838-3500, extension 7 Phone
(850) 838-3501 Fax

CONRAD C. BISHOP, JR., County Attorney
Post Office Box 167
Perry, Florida 32348
(850) 584-6113 Phone
(850) 584-2433 Fax

PROJECT IDENTIFICATION: THE LEASING OF EIGHTY (80) ± ACRES TO BE HARVESTED AS HAY AT PERRY – FOLEY AIRPORT.

THIS BID IS SUBMITTED TO:

Clerk of Courts, Taylor County
1st Floor Courthouse
108 N. Jefferson Street
Perry, Florida 32347

BID FORM

1. The undersigned BIDDER proposes and agrees, if this Bid is accepted, to enter into an agreement with OWNER in the form included in the Contract documents to lease 80 ± to be harvested as hay and to perform and furnish all work as specified or indicated in the Contract Documents for the Bid Price and within the Bid Terms in this Bid and in accordance with the other terms and conditions of the Contract Documents.
2. BIDDER accepts all of the terms and conditions of the Advertisement of Invitation to Bid and Instructions to Bidders, including without limitation those dealing with the disposition of Bid security. BIDDER will sign and deliver the required number of counterparts of the Agreement and other documents required by the Bidding Requirements within three (3) days after the date of OWNER'S Notice of Award.
3. In submitting this Bid, BIDDER represents, as more fully set forth in the Agreement, that:
 - (a) BIDDER has examined and carefully studied the Bidding Documents and the following Addenda receipt of all which is hereby acknowledged.
 - (b) BIDDER has visited the site and become familiar with and satisfied as to the general, local and site conditions that may affect cost, progress, performance and furnishing of the Work.
 - (c) BIDDER is familiar with and is satisfied as to all federal, state and local laws and regulations that may affect cost, progress, performance and furnishing of the Work.
 - (d) BIDDER is aware of the general nature of Work to be performed by Owner at the site that relates to Work for which this Bid is submitted as indicated in the Contract Documents.
 - (e) BIDDER has correlated the information known to BIDDER, information and observations obtained from visits to the site, reports and drawings identified in the Contract documents and all additional examinations, investigations observations, tests, studies and data with the Contract Documents.
 - (f) This Bid is genuine and not made in the interest of, or on behalf of any undisclosed person, firm or corporation and submitted in conformity with any agreement or rules of any group, association, organization or corporation to refrain from bidding; and BIDDER has not sought by collusion to obtain for itself any advantage over any other bidder or over Owner.

4. BIDDER agrees to the following Scope of Work schedule:

Payment for lease will be due by September 30 of each year.

2019 lease payment is due by 9/30/2019.

2020 lease payment is due by 9/30/2020.

2021 lease payment is due by 9/30/2021.

2022 lease payment is due by 9/30/2022.

2023 lease payment is due by 9/30/2023.

5. Successful bidder will need to provide payment to the Taylor County Board of Commissioners in one annual payment.
6. BIDDER agrees that the Work will be completed in accordance with the General Conditions (see Scope of Work for details) on or before the dates or within the number of calendar days indicated in the Agreement. BIDDER accepts the provisions of the Agreement as to liquidated damages in the event of failure to complete the Work within the time specified in the Agreement.
7. Communications concerning this Bid shall be addressed to:

WARD KETRING (850)838-3519
airport@taylorcountygov.com
Perry – Foley Airport
511 Industrial Park Drive
Perry, Florida 32348

8. Terms used in this Bid which are defined in the Standard General Conditions or Instructions will have the meaning indicated in the Standard General Conditions or Instructions.

9. **BIDDER AGREES TO LEASE. 80 ± ACRES AT AN ANNUAL LEASE COST OF _____**
PER ACRE TOTAL COST OF ANNUAL LEASE _____
(This **MUST** be filled out by Bidder.)

SUBMITTED on _____, 20____

IF BIDDER IS:

AN INDIVIDUAL:

By _____ (seal)
Individual's Name

Doing business as _____

Business address _____

Telephone No.: _____

A PARTNESHIP:

By: _____ (seal)
Firm Name

General Partner: _____

Business Address: _____

Telephone No.: _____

A CORPORATION:

By: _____ (seal)

State of Incorporation: _____

By: _____ (seal)
Name of Person Authorized to Sign

(Corporate Seal) _____
Title

Attest: _____ As Secretary

Business Address: _____

Telephone No.: _____

Date of Qualification To Do Business Is: _____

BID CHECKLIST

Check Items Included:

- _____ 1. Required proposal/bid information referenced above.
- _____ 2. Certification of Liability Insurance or Agent Statement as outlined in the General Considerations **(MUST BE INCLUDED)**.
- _____ 3. Declaration Page from Workmen's Compensation Insurance OR a Florida Worker's Compensation Exemption Certificate with an executed Hold Harmless Release and Indemnity Agreement.
- _____ 4. Public Entity Crimes Affidavit, signed and notarized, as required by Chapter 287.133(3)(a) **(AFFIDAVIT ENCLOSED)**.

Checklist must be included with the bid.

**SWORN STATEMENT UNDER SECTION 287.133(3)(a),
FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES**

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER
AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted with Bid, Proposal or Contract No. _____
for _____
2. This sworn statement is submitted by _____
(Name of entity submitting sworn statement)

Whose business address is _____
_____ and

(if applicable) its Federal Employer Identification Number (FEIN) is _____,
(If entity has no FEIN, include the Social Security Number of the individual signing this sworn
statement: _____.)
3. My name is _____ and my relationship to the entity
named above is _____.
4. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
5. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court or record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
6. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
 - A. A predecessor or successor of a person convicted of a public entity crime: or
 - B. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.
7. I understand that a "person" as defined in Paragraph 287.133(1)(g)€, Florida Statutes, means any natural person or entity organized under the laws of any state or the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provisions of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are in the management of an entity.

8. Based on information and belief, the statement, which I have marked below, is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies)

- _____ Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, and agents who are in the management of the entity, nor affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.
- _____ The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, and agents who are in the management of an entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989 AND (Please indicate which additional statement applies.)
- _____ There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)
- _____ The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing office of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)
- _____ The person or affiliate has not been placed on the convicted vendor list. (Please describe any action taken by or pending with the Department of General Services.)

(Signature)

(Date)

STATE OF _____

COUNTY OF _____

PERSONALLY APPEARED BEFORE ME, the undersigned authority, _____,
(Name of individual signing)

who, after first being sworn by me, affixed his/her signature in the space provided above on this _____

day of _____, _____.

NOTARY PUBLIC

My commission expires: _____

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Requesting Board approval for the Board to fully fund the Big Bend Transit "in town" shuttle during the holidays from December 10, 2018 to January 4, 2019.

Meeting Date:

December 10, 2018

Statement of Issue: Requesting Board to approve fully funding the Big Bend Transit "in town" shuttle from December 10, 2018 to January 4, 2019.

Recommendation: **Approve fully funding the "in town" shuttle from December 10, 2018 to January 4, 2019.**

Fiscal Impact: \$ Funding the shuttle for this period will have an approximated cost of \$350. There is sufficient funding in the Big Bend Shuttle budget (0423) to cover this cost.

Budgeted Expense: Yes ☒ No ☐ N/A ☐

Submitted By: Jami Boothby, Grants Coordinator

Contact: Jami Boothby

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: For the past five years the Board has approved fully funding the "in town" shuttle during the holiday season. This program has been very successful with substantially increased ridership of the shuttle during this period. The County has received a \$250.00 donation from Mr. Conrad Bishop to fund the holiday shuttle again this year. There are sufficient funds in the Big Bend Shuttle budget to cover the remaining cost.

Attachment: 1. N/A

2.



(19)

TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS TAYLOR COUNTY SPORTS COMPLEX

Greg "Boo" Mullins – RECREATION COORDINATOR

ANNIE MAE MURPHY, Clerk
Post Office Box 620
Perry, Florida 32348
(850) 838-3506 - Phone
(850) 838-3549 - Fax

Ted Lakey County Administrator
201 East Green Street
Perry, Florida 32347
(850) 838-3500, ext. 7 - Phone
(850) 838-3501 - Fax

CONRAD C. BISHOP, JR., County Attorney
Post Office Box 167
Perry, Florida 32348
(850) 584-6113 - Phone
(850) 584-2433 - Fax

Taylor County Sports Complex

Park Rules

I agree to enforce the rules of Taylor County Sports Complex, as stated below and in addition to the Field Use Agreement, during the event or season for which I/Organization am responsible. I further acknowledge that I/Organization am responsible for keeping the Taylor County Sports Complex clean and free of debris.

1. No tobacco products, alcoholic beverages, firearms or illegal substances allowed on the premises.
2. Children under the age of 16 shall be supervised by an adult at all times.
3. Shirts, shoes, and shorts or pants must be worn at all times.
4. No bicycles, motorcycles or automobiles allowed outside of the roadway and parking areas.
5. No skateboards, scooters, or radio controlled devices allowed.
6. No pets allowed unless required for ADA assistance.
7. Camping or leaving vehicles on the premises overnight is prohibited.
8. Be responsible, courteous and place all trash in receptacles.
9. Enjoy your visit and notify staff in the event of an emergency.
10. **NO Outside Food or Beverage Allowed.**

Name of Organization: _____

Signature of Organization Representative: _____

Date: _____

Board Calendar for FY 2019

PROPOSED BOARD MEETING DATES

1st meeting of the month 6:00 pm
2nd meeting of the month 9:00 am

PROPOSED BOARD WORKSHOP DATES

All workshops 6:00 pm

December 10, 2018
January 7, 2019 and January 22, 2019
February 4, 2019 and February 19, 2019
March 4, 2019 and March 19, 2019
April 1, 2019 and April 16, 2019
May 6, 2019 and May 21, 2019
June 3, 2019 and June 18, 2019
July 8, 2019 and July 23, 2019
August 5, 2019 and August 20, 2019
September 3, 2019 and September 17, 2019
October 7, 2019 and October 22, 2019
November 4, 2019 and November 19, 2019
December 9, 2019

December No workshop scheduled
January 10, 2019
February 7, 2019
March 7, 2019
April 11, 2019
May 9, 2019
June 13, 2019
July 11, 2019
August 8, 2019
September 12, 2019
October 10, 2019
November 14, 2019
December-No workshop scheduled

HOLIDAYS

Christmas Eve and Day 2018
New Years Day
Martin Luther King Jr. Day
Good Friday
Memorial Day
Independence Day
Labor Day
Veterans Day
Thanksgiving Holidays
Christmas Eve and Day

DATE OBSERVED

December 24 (Monday and December 25 (Tuesday)
January 1 (Tuesday)
January 21 (Monday)
April 19 (Friday)
May 27 (Monday)
July 4 (Thursday)
September 2 (Monday)
November 11 (Monday)
November 28 (Thursday) November 29 (Friday)
December 24 (Tuesday) and December 25(Wednesday)

As of December 10, 2018

23

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

The Board to consider approval of the Second Amendment to the Memorandum of Understanding with the University of Florida for continued placement of the Marine Agent in Taylor County.

Meeting Date Requested:**December 10, 2018**

Statement of Issue: The original MOU was effected January 1, 2017 and ended September 30, 2017. The first amendment to that MOU ended September 30, 2018 This amendment will extend the MOU until September 30, 2019.

Recommended Action: Approve amendment

Fiscal Impact: \$26,142.67 for FY 2018-2019

Budgeted Expense: Yes

Submitted By: LaWanda Pemberton, Acting County Administrator

Contact: 838-3500 x 7

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments: MOU
First Amendment to MOU
Second Amendment to MOU

MEMORANDUM OF UNDERSTANDING

THIS MEMORANDUM OF UNDERSTANDING FOR EXTENSION SERVICES is entered into January 1, 2017 between Taylor County, a political subdivision of the State of Florida, hereinafter referred to as "COUNTY," and the University of Florida, Board of Trustees, hereinafter referred to as "UNIVERSITY."

WITNESSETH

WHEREAS, under the laws of the State of Florida and the Smith-Lever Act of May 8, 1914 (38 Statute 372), the University of Florida is charged with the dissemination of information on agriculture, family life, horticulture, natural resources, Sea Grant, and youth development through its Cooperative Extension Service to the public in the State of Florida; and

WHEREAS, this function is performed through the Extension Service-United States Department of Agriculture and State staff of Extension Specialist and resident Extension workers in the State; and

WHEREAS, the UNIVERSITY is responsible for planning and implementing educational programs for growers, families, homeowners, and young people within the COUNTY; and

WHEREAS, said programs will be developed and implemented in the COUNTY by Extension Agents employed by the UNIVERSITY to work directly with local advisory committees and COUNTY personnel; and

WHEREAS, the Extension Agents will utilize appropriate Extension personnel from the UNIVERSITY and educational methods including the program development process, area subject matter information and other materials or methods as deemed necessary by Extension Agents in various program areas to conduct the aforesaid education programs.

NOW, THEREFORE, in consideration of the mutual covenants and provisions contained herein, the parties hereto agree as follows:

ARTICLE I PURPOSE

The Florida Extension Service was established as an integral part of the Institute of Food and Agricultural Sciences (IFAS), University of Florida, for the public purpose of "extending" research-based educational information from the University to the people of the State of Florida on subjects relating to agriculture, aquaculture, family and consumer sciences, 4-H youth development, environmental horticulture, natural resources, Sea Grant, energy and other programs deemed necessary. The Florida Extension Service makes the findings of research in these areas available to the people of Florida through the University of Florida, IFAS, Extension Service, in partnership with the Florida Counties Boards of County Commissioners.

To assure that educational programs meet the needs of local clientele, and comply with Section 1004.37 of the Florida Statutes, it is essential that the UNIVERSITY and COUNTY identify respective responsibilities.

This Memorandum of Understanding (hereinafter referred to as "AGREEMENT") establishes the respective responsibilities of the UNIVERSITY, through the Institute of Food and Agricultural Sciences, Extension Service and the COUNTY. The purpose of this AGREEMENT is to specify the terms under which the UNIVERSITY and the COUNTY will contribute to personnel, educational, technical and research information to Extension Service in the COUNTY.

ARTICLE II **GOALS AND OBJECTIVES**

This AGREEMENT covers the UF/IFAS Extension Agent- Marine position in the Taylor County Extension Office (herein referred to as "Extension Agent- Florida Sea Grant Marine Agent.").

ARTICLE III **RESPONSIBILITIES**

1) Responsibilities of UNIVERSITY

- a) With respect to the Extension Agent- Marine, UNIVERSITY shall:
 - i) Establish minimum employment requirements and qualifications for Extension Agent- Florida Sea Grant Marine Agent.
 - ii) Recruit, interview and screen candidates for employment Extension Agent- Florida Sea Grant Marine Agent.
 - iii) Employ Extension Agent in accordance with the provisions of Section 1004.37, Florida Statutes, and under such terms and conditions as the UNIVERSITY deems appropriate, and provide workers compensation insurance as required.
 - iv) Establish the total amount of the starting base salaries of Extension Agent- Florida Sea Grant Marine Agent.
 - v) Pay Extension's proportionate share of the salaries and fringe benefits of Extension Agent- Florida Sea Grant Marine Agent as more specifically set out in Section IV and Exhibit A.
 - vi) Determine the total dollar amount of any cost-of-living, merit, bonuses, and rank promotion salary increases.

2) Responsibilities of COUNTY.

- a) With respect to broad program authorization, all Extension programs within the COUNTY are subject to the COUNTY authorization and approval. Substantive program changes (additions, deletions, etc.) are subject to COUNTY approval prior to implementation.
- b) With respect to Extension Faculty, the COUNTY shall:
 - i) Participate in the administration of the cooperative extension services in accordance with the provisions of Section 1004.37, Florida Statutes.
 - ii) Pay the County's proportionate share of the salaries and fringe benefits of the Extension Faculty as more specifically set out in Article IV and Exhibit A.
- c) With respect to management and administration, the COUNTY shall:

- i) Review and consider the annual departmental budget requests from UNIVERSITY and take action thereon as the COUNTY may deem appropriate.
 - ii) Provide and maintain office space, support personnel, equipment, supplies, utilities, demonstration materials, and funding and/or vehicles for official county travel (both in-county and out-of-county), and other operational needs for the Extension Agent – Florida Sea Grant Marine Agent as the COUNTY may deem appropriate.
- 3) General Provisions:
 - a) Management and Administration:
 - i) Extension Faculty shall follow COUNTY policies relative to office hours and holidays.
 - ii) COUNTY shall allow Extension Agent – Florida Sea Grant Marine Agent access to appropriate COUNTY owned facilities and COUNTY owned vehicles in accordance with COUNTY policies and procedures.
 - iii) All Extension Faculty appointments will be made cooperatively in accordance with Section 1004.37, Florida Statutes.
 - iv) UNIVERSITY and the COUNTY will cooperate in coordinating Equal Employment Opportunity plans for Extension Agent – Florida Sea Grant Marine Agent.
 - v) The County Extension Director is responsible for operating this department under the joint direction of the COUNTY or designee and the UNIVERSITY's Dean of Extension or designee.
 - vi) The Extension Agent –Florida Sea Grant Marine Agent shall follow COUNTY fiscal processes and policies for COUNTY operating funds.
 - vii) The Extension Agent –Florida Sea Grant Marine Agent will be permitted to charge appropriate fees to Extension program participants. These fees will be retained by UNIVERSITY Extension for use in program development and support, agent training, professional presentations, professional membership, reference materials and minor equipment purchases.
 - viii) The UNIVERSITY has determined that the Extension Agent –Florida Sea Grant Marine Agent, an employee of the UNIVERSITY is a professional employee exempt from the provisions of the Fair Labor Standards Act.

ARTICLE IV

FUNDING AND PAYMENTS

- 1) The COUNTY agrees to pay the UNIVERSITY sums as indicated in Exhibit A towards salary expenses. This total sum represents the COUNTY'S share of funding Extension employee's salary and fringe benefits as outlined in Exhibit A. It is understood that no amount of funds specified hereto above should be used for payment of salaries or any other expenses of state personnel other than the Extension Agent- Florida Sea Grant Marine Agent. This agreement is cost reimbursable.
- 2) Salary outlined in Exhibit A will be modified and submitted to the COUNTY annually by the UNIVERSITY. Exhibit A is an estimate of projected salary expenses for the year and shall not require a separate written addendum to this agreement in order to implement annual changes in salaries and related fringe benefits. Salary dollar figures in Exhibit A will be submitted annually to the COUNTY for review and approval by the following time table:

Proposed Annual Budget by April 15th – UNIVERSITY will include proposed figures for the COUNTY to begin its budget process.

Annual Budget Request by July 1st – UNIVERSITY will make necessary adjustment to Exhibit A figures as needed and submit a final budget request to COUNTY for approval.

- 3) The UNIVERSITY will not charge Facilities and Administrative costs to the COUNTY.
- 4) Payments shall be made on a quarterly basis as invoiced by the UNIVERSITY. The quarterly payments shall be in the amount as indicated on Exhibit A, and will be due within 30 days of receiving the quarterly invoices in January, April, July and October.
Taylor County Board of County Commissioners
(Insert Address)
- 5) The policies established by the UNIVERSITY in administering leave, including annual, sick, civil, holiday and military leave, and regarding payment of unused annual and sick leave upon separation, shall apply.
- 6) The COUNTY may elect to pay an annual salary supplement to extension personnel. The COUNTY shall fund 100% of the salary supplement, including salaries, fringe benefits, and worker's compensation, and will pay this sum to the UNIVERSITY during the COUNTY's quarterly payment as indicated in Exhibit A. Any salary supplement will be included in the annual County Budget Report that is sent to the UNIVERSITY each year. Upon receipt, if needed, the UNIVERSITY will update the salary projections in an updated Exhibit A and adjust the quarterly billings to accommodate the salary supplement.

ARTICLE V

PERIOD OF CONTRACT – RENEWAL – MODIFICATION

This AGREEMENT shall be effective as of ~~the January 1, 2017~~ September 30, 2017 and shall continue through September 30, 2017 unless modified or terminated earlier. At the time of expiration, this Agreement will be updated as needed and resigned by both parties. This AGREEMENT may be modified at any time by mutual consent of both parties herein above. Salary dollar figures in Exhibit A will be submitted annually to the COUNTY for review and approval by the following time table:

ARTICLE VI

MAINTENANCE OF RECORDS

Both parties will keep adequate records and supporting documentation applicable to this contractual matter. Said records and documentation will be retained by the UNIVERSITY for a minimum of five (5) years from the date of termination of this contract. Each party to this AGREEMENT or their authorized representatives shall have reasonable and timely access to such records of each other party to this AGREEMENT for public records and audit purposes during the term of the AGREEMENT and for five (5) years following the termination of this AGREEMENT. If an auditor employed by the COUNTY or Clerk determines that monies paid to the UNIVERSITY pursuant to this AGREEMENT were spent for purposes not authorized by this AGREEMENT, the UNIVERSITY shall repay the monies together with

interest calculated pursuant to Sec. 55.03, FS, running from the date the monies were paid to the UNIVERSITY.

ARTICLE VII

LIABILITY

The UNIVERSITY assumes any and all risks of personal injury and property damage attributable to the negligent acts of omissions of the UNIVERSITY and the officers, employees, servants and agents thereof while acting within the scope of their employment by the UNIVERSITY. The COUNTY assumes any and all risks of personal injury and property damage attributable to the negligent acts of omissions of the COUNTY and the officers, employees, servants and agents thereof while acting within the scope of their employment by the COUNTY. UNIVERSITY, as a state agency, warrants and represents that it is self-funded for liability insurance, both public and property, with said protection being applicable to the UNIVERSITY's officers, employees, servants and agents while acting within the scope of their employment by the UNIVERSITY. The COUNTY warrants and represents that it is self-funded for liability insurance, both public and property with such protection being applicable to officers, employees, servants and agents while acting within the scope of their employment by the COUNTY. UNIVERSITY and COUNTY further agree that nothing contained herein shall be construed or interpreted as (1) denying to either party any remedy or defense available to such party under the laws of the State of Florida; (2) the consent of the UNIVERSITY, State of Florida, or its agents, agencies, and subdivisions, to be sued; or (3) a waiver of sovereign immunity of the UNIVERSITY, State of Florida, or its agents, agencies, and subdivisions, beyond the waiver provided in section 768.28, Florida Statutes.

ARTICLE VIII

CONTRACTUAL REQUIREMENTS

- 1) **Governing Law, Venue, Interpretation, Costs, and Fees:** This AGREEMENT shall be governed by and construed in accordance with the laws of the State of Florida applicable to contracts made and to be performed entirely in the State.
- 2) **Binding Effect.** The terms, covenants, conditions and provisions of this AGREEMENT shall bind and inure to the benefit of the COUNTY and UNIVERSITY and their respective legal representatives, successors, and assigns.
- 3) **Nondiscrimination.** The COUNTY and UNIVERSITY agree that there will be no discrimination against any person, and it is expressly understood that upon a determination by a court of competent jurisdiction that discrimination has occurred, this AGREEMENT automatically terminates without any further action on the part of any party, effective the date of the court order. The COUNTY and UNIVERSITY agree to comply with all Federal and Florida statutes, and all local ordinances, as applicable, relating to nondiscrimination. **Covenant of No Interest.** The COUNTY and UNIVERSITY covenant that neither presently has any interest, and shall not acquire any interest, which would conflict in any manner or degree with its performance under this AGREEMENT, and that only interest of each is to perform and receive benefits as recited in this AGREEMENT.
- 4) **Code of Ethics.** The COUNTY and UNIVERSITY agree that their respective officers and employees are required to comply with the standards of conduct for public officers and employees as delineated

in Section 112.313, Florida Statutes, regarding, but not limited to, solicitation or acceptance of gifts; doing business with one's agency; unauthorized compensation; misuse of public position, conflicting employment or contractual relationship; and disclosure or use of certain information.

- 5) **No Solicitation/Payment.** The COUNTY and UNIVERSITY warrant that, in respect to itself, it has neither employed nor retained any company or person, other than a bona fide employee working solely for it, to solicit or secure this AGREEMENT and that it has not paid or agreed to pay any person, company, corporation, individual or firm, other than a bona fide employee working solely for it, any fee, commission, percentage, gift or other consideration contingent upon one resulting from the award or making of this AGREEMENT. For the breach or violation of the provision, the University agrees that the COUNTY shall have the right to terminate this AGREEMENT without liability and at its discretion, to offset from monies owed, or otherwise recover, the full amount of such fee, commission, percentage, gift, or consideration.
- 6) **Public Access.** The COUNTY and UNIVERSITY shall allow and permit reasonable access to, and inspection of, all documents, papers, letters or other materials in its possession or under its control subject to the provisions of Chapter 119, Florida Statutes, and made or received by the COUNTY and UNIVERSITY in conjunction with this Agreement; and either party shall have the right to unilaterally cancel this AGREEMENT upon violation for this provision by the other.
- 7) **Non-Waiver of Immunity.** Notwithstanding the provisions of Sec. 768.28, Florida Statutes, the participation of the COUNTY and UNIVERSITY in this AGREEMENT and the acquisition of any commercial liability insurance coverage, self-insurance coverage or local government liability insurance pool coverage shall not be deemed a waiver of immunity to the extent of liability coverage, nor shall any contract entered into by the COUNTY be required to contain any provision for waiver.
- 8) **Privileges and Immunities.** All of the privileges and immunities for liability, exemptions from laws, ordinances, and rules and pensions and relief, disability, workers' compensation and other benefits which apply to the activity of officers, agents, or employees of any public agents or employees of any public agents when performing their respective functions under this AGREEMENT within the territorial limits of the COUNTY shall apply to the same degree and extent to the performance of such functions and duties of such officers, agents, volunteers, or employees outside the territorial limits of the COUNTY.
- 9) **Legal Obligations and Responsibilities: Non-Delegation of Constitutional or Statutory Duties.** This AGREEMENT is not intended to, nor shall it be construed as, relieving any participating entity from any obligation or responsibility imposed upon the entity by law. Further, this AGREEMENT is not intended to, nor shall it be construed as, authorizing the delegation of the constitutional or statutory duties of the either party, except to the extent permitted by the Florida constitution, state statute and case law.
- 10) **Non-Reliance by Non-Parties.** No person or entity shall be entitled to rely upon the terms, or any of them, of this AGREEMENT to enforce or attempt to enforce any third-party claim or entitlement to or benefit of any service or program contemplated hereunder, and the COUNTY and UNIVERSITY agree that neither the COUNTY nor the UNIVERSITY or any agent, officer or employee of either shall have the authority to inform, counsel, or otherwise indicate that any particular individual or group of individuals, entity or entities, have entitlements or benefits under this AGREEMENT separate and apart, inferior to or superior to the community in general or for the purposes contemplated in this AGREEMENT.

- 11) **No Personal Liability.** No covenant or agreement contained herein shall be deemed to be a covenant or agreement of any member, officer, agent or employee of the COUNTY in his or her individual capacity, and no member, officer, agent or employee of the COUNTY shall be liable personally on this AGREEMENT or be subject to any personal liability or accountability by reason of the execution of this AGREEMENT.
- 12) **Execution in Counterparts.** This AGREEMENT may be executed in any number of counterparts, each of which shall be regarded as an original, all of which taken together shall constitute one and the same instrument and any of the parties hereto may execute this AGREEMENT by signing any such counterpart.
- 13) **Section Headings.** Section headings have been inserted in this AGREEMENT as a matter of convenience of reference only, and it is agreed that such section heading are not a part of this AGREEMENT and will not be used in the interpretation of any provision of this AGREEMENT.

ARTICLE IX **NOTICES**

Any notice, request, demand, consent approval or other communication required or permitted by this AGREEMENT shall be given or made in writing and shall be served (as elected by the party giving such notice) by one of the following methods: a) hand delivery to the other party; b) delivery by commercial overnight courier service; or c) mailed by registered or certified mail (postage prepaid), return receipt requested. For the purposes of notice the addresses are:

To County:

Dustin Hinkle,
Co Administrator
Taylor County
201 E Green Street
Perry FL 32347

To University:

UNIVERSITY OF FLORIDA
Division of Sponsored Research
219 Grinter Hall, PO Box 115500
Gainesville, FL 32611-5500

And copied to

UNIVERSITY OF FLORIDA
IFAS County Operations
1062 McCarty Hall D, PO Box 110220
Gainesville, FL 32611-0220

This AGREEMENT shall be effective on January 1, 2017
APPROVED BY:


FOR COUNTY:



Board of County Commissioners Representative

12/13/2016
DATE

APPROVED AS TO FORM AND LEGALITY:



County Attorney

12/1/16
DATE

FOR THE UNIVERSITY:

University of Florida

DATE

Taylor County - Florida Sea Grant Marine Agent - Grant
FY 2017 Summary
Salary Projection 10/1/2016 - 9/30/2017
11/21/2016

Payroll Due from County for FY 2017

Blanco, Victor 16,469.08

Total payroll Due: 16,469.08

Estimated budget Schedule:	
January 10, 2017	4,117.27
April 10, 2017	4,117.27
July 10, 2017	4,117.27
October 10, 2017	4,117.27
Total:	16,469.08

*Agreement is cost reimbursable, so amounts indicated could vary.

Please remit invoices to:

Taylor County - Florida Sea Grant Marine Agent - Grant
 Salary Details
 Salary Projection 10/1/16-9/30/2017

10/1/16-9/30/17

		State	County	Total	3% Inflation
Blanco, Victor	Percentage	80.000%	20.000%	100.00%	
	Salary	50,400.00	12,600.00	\$63,000.00	
Faculty Pool Rate	Pooled Fringe	13,557.60	3,389.40	16,947.00	
	25.90%				
	Grand Totals	63,957.60	15,989.40	79,947.00	
Exempt					
Blanco, Victor	Annual \$63,000.00			15,989.40	16,469.08
				Total	\$ 16,469.08

***FY 17: 70% State & 30% County

**FIRST AMENDMENT TO
MEMORANDUM OF UNDERSTANDING
between
Florida Cooperative Extension Service,
Institute of Food and Agricultural Services,
University of Florida
and
the Board of County Commissioners of
Taylor County, Florida**

THIS FIRST AMENDMENT, to the Memorandum of Understanding is made this _____ day of September, 2017 between Taylor County, a political subdivision of the State of Florida (County) and the University of Florida Board of Trustees (University).

WHEREAS, the County and University entered into a Memorandum of Understanding (MOU) effective January 1, 2017 providing for the operation of the Florida Cooperative Extensions Service Program; and

WHEREAS, the term of the existing MOU ends September 30, 2017; and

WHEREAS, the County and University would like to continue the education extension service provided by the University in a manner that will require revision of the existing agreement as contemplated in the Original MOU adopted January 1, 2017; and

WHEREAS, the MOU is subsequently amended to address issues related to providing for employees, funding and administrative rules regulating the Florida Cooperative Extension Service Program in Taylor County; and

WHEREAS, in order to avoid a break in the services provided by the University and allow for the adoption of a new MOU as required, the County and University find it reasonable and appropriate to extend the existing MOU until September 30, 2018.

NOW, THEREFORE, in consideration of the mutual promises and agreements set forth in the existing MOU and this Amendment, the parties hereby agree as follows.

Article VI of the MOU, which support the UF/IFAS Extension Agent-Marion position in Taylor County Extension Office, titled "Period of Contract-Renewal-Modification" shall be revised to the following:

This AGREEMENT shall be effective as of October 1st, 2017 and shall continue through September 30, 2018, unless modified or terminated earlier. At the time of expiration, this AGREEMENT may be updated as needed and resigned by both parties. This AGREEMENT may be modified at any time by mutual consent of both parties herein above.

IN WITNESS WHEREOF, the parties hereto have caused this amendment to be executed the day, month and year aforesaid.

Attest:

TAYLOR COUNTY:

CLERK OF COURT

**BOARD OF COUNTY COMMISSIONERS
OF TAYLOR COUNTY, FLORIDA**

DEPUTY CLERK

CHAIRMAN

Approved as to Form:

Office of County Attorney

UNIVERSITY OF FLORIDA,

Division of Sponsored Programs

BY: _____

**FIRST AMENDMENT TO
MEMORANDUM OF UNDERSTANDING
between
Florida Cooperative Extension Service,
Institute of Food and Agricultural Services,
University of Florida
and
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Taylor County, Florida**

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WHEREAS, the term of the existing MOU ends September 30, 2017; and

WHEREAS, the County and University would like to continue the education extension service provided by the University in a manner that will require revision of the existing agreement as contemplated in the Original MOU adopted January 1, 2017; and

WHEREAS, the MOU is subsequently amended to address issues related to providing for employees, funding and administrative rules regulating the Florida Cooperative Extension Service Program in Taylor County; and

WHEREAS, in order to avoid a break in the services provided by the University and allow for the adoption of a new MOU as required, the County and University find it reasonable and appropriate to extend the existing MOU until September 30, 2018.

NOW, THEREFORE, in consideration of the mutual promises and agreements set forth in the existing MOU and this Amendment, the parties hereby agree as follows.

Article VI of the MOU, which support the UF/IFAS Extension Agent-Marion position in Taylor County Extension Office, titled "Period of Contract-Renewal-Modification" shall be revised to the following:

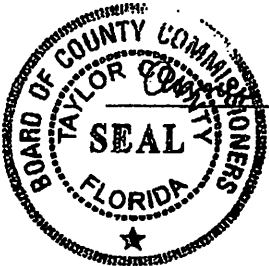
This AGREEMENT shall be effective as of October 1st, 2017 and shall continue through September 30, 2018, unless modified or terminated earlier. At the time of expiration, this AGREEMENT may be updated as needed and resigned by both parties. This AGREEMENT may be modified at any time by mutual consent of both parties herein above.

IN WITNESS WHEREOF, the parties hereto have caused this amendment to be executed the day, month and year aforesaid.

Attest:

TAYLOR COUNTY:

CLERK OF COURT



Wm Murphy
CLERK

BOARD OF COUNTY COMMISSIONERS
OF TAYLOR COUNTY, FLORIDA

Malcolm V. Page
Vice CHAIRMAN

Approved as to Form:

Carol G. Baskin
Office of County Attorney

UNIVERSITY OF FLORIDA,

Division of Sponsored Programs

BY: Brenda Cox Digitally signed by Brenda Cox
Date: 2017.11.21 09:01:27 -05'00'

Exhibit "A" - PROPOSED Budget

Marine Agent - Taylor County
Summary
Projection 10/01/2016 - 9/30/2019
Prepared 12/6/2016

Salary Due From County By FY - Marine TACO

FY 2017 **	10/01/16 - 09/30/17	16,469.08
FY 2018 **	10/01/17 - 09/30/18	25,423.15
FY 2019 **	10/01/18 - 09/30/19	26,142.67

Total : \$ 68,034.90

Projected Payment Schedule*	FY2017	FY2018	FY2019	Total
January 10	4,117.27	6,355.79	6,535.67	
April 10	4,117.27	6,355.79	6,535.67	
July 10	4,117.27	6,355.79	6,535.67	
October 10	4,117.27	6,355.79	6,535.67	
Total :	16,469.08	25,423.16	26,142.68	68,034.92

Please remit invoices to:

* The above is a payment guideline, this is a cost reimbursable contract.

**UF will only release budget for the current year. Future fiscal year budget releases may be different than what appears above.

**SECOND AMENDMENT TO
MEMORANDUM OF UNDERSTANDING
between
Florida Cooperative Extension Service,
Institute of Food and Agricultural Services,
University of Florida
and
the Board of County Commissioners of
Taylor County, Florida**

THIS FIRST AMENDMENT, to the Memorandum of Understanding is made this _____ day of September, 2018 between Taylor County, a political subdivision of the State of Florida (County) and the University of Florida Board of Trustees (University).

WHEREAS, the County and University entered into a Memorandum of Understanding (MOU) effective January 1, 2017 providing for the operation of the Florida Cooperative Extensions Service Program; and

WHEREAS, the term of the existing MOU ends September 30, 2018; and

WHEREAS, the County and University would like to continue the education extension service provided by the University in a manner that will require revision of the existing agreement as contemplated in the Original MOU adopted January 1, 2017; and

WHEREAS, the MOU is subsequently amended to address issues related to providing for employees, funding and administrative rules regulating the Florida Cooperative Extension Service Program in Taylor County; and

WHEREAS, in order to avoid a break in the services provided by the University and allow for the adoption of a new MOU as required, the County and University find it reasonable and appropriate to extend the existing MOU until September 30, 2019.

NOW, THEREFORE, in consideration of the mutual promises and agreements set forth in the existing MOU and this Amendment, the parties hereby agree as follows.

Article VI of the MOU, which support the UF/IFAS Extension Agent-Marion position in Taylor County Extension Office, titled "Period of Contract-Renewal-Modification" shall be revised to the following:

This AGREEMENT shall be effective as of October 1st, 2018 and shall continue through September 30, 2019, unless modified or terminated earlier. At the time of expiration, this AGREEMENT may be updated as needed and resigned by both parties. This AGREEMENT may be modified at any time by mutual consent of both parties herein above.

IN WITNESS WHEREOF, the parties hereto have caused this amendment to be executed the day, month and year aforesaid.

Attest:

TAYLOR COUNTY:

CLERK OF COURT

BOARD OF COUNTY COMMISSIONERS
OF TAYLOR COUNTY, FLORIDA

DEPUTY CLERK

CHAIRMAN

Approved as to Form:

Office of County Attorney

UNIVERSITY OF FLORIDA,

Division of Sponsored Programs

BY: _____