RESOLUTION NO. 2018-03

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A RESOLUTION OF THE MAYOR AND VILLAGE COUNCIL OF THE VILLAGE OF PALMETTO BAY. FLORIDA, REGARDING PARKS AND RECREATION: **AUTHORIZING THE USE OF PALMETTO BAY PARK** AT NO COSTS ON FEBRUARY 24, 2018 TO THE CYSTIC FIBROSIS FOUNDATION - CURE CF MIAMI THE **PURPOSE** OF CONDUCTING **FOR FUNDRAISING** KICKBALL TOURNAMENT: AND PROVIDING AN EFFECTIVE DATE. (Sponsored by Administration)

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WHEREAS, the Cystic Fibrosis Foundation devoted approximately thirty-seven million dollars in 2016 researching treatments for Cystic Fibrosis complications; and

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WHEREAS, this organization is continually driving research to make a difference for people with Cystic Fibrosis; and

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WHEREAS, Cure CF Miami is a local organization dedicated to raising funds for the Cystic Fibrosis Foundation's efforts in developing treatments, and wishes to conduct a one-day fundraising kickball tournament at Palmetto Bay Park; and is requesting a waiver of all fees in utilization of the ballfields and associated amenities.

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NOW, THEREFORE, BE IT RESOLVED BY THE VILLAGE OF PALMETTO BAY, FLORIDA, THAT:

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<u>Section 1.</u> . The Cystic Fibrosis Foundation – Cure CF Miami is hereby authorized to use Palmetto Bay Park on February 24, 2018, for the purpose of conducting a fundraising kickball tournament, including scheduled games and associated activities.

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<u>Section 2.</u> Any and all established user fees are hereby waived, and the Cystic Fibrosis Foundation – Cure CF Miami shall have use of the needed park amenities on February 24, 2018 at no costs.

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Section 3. This Resolution shall take effect immediately upon its adoption.

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2	PASSED and ADOPTED this 8 th day of January, 2018.								
3	Attest:								
4 5	Allesi.								
6	DocuSigned by:	DocuSigned by:							
7	Missy Arocha	Bu Di							
8	Missy Arocha	Eügenereinn							
9	Village Clerk	Mayor							
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12	APPROVED AS TO FORM AND LE								
13 14	USE AND RELIANCE OF THE VI FLORIDA ONLY:	LLAGE OF PALMETTO BAY,							
15	I LONIDA ONLT.								
16	DocuSigned by:								
17	Dexter W. Whitinen								
18	Dexter W. Lehtinen								
19	Village Attorney								
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21	FINIAL VOTE AT ADOPTION								
22	FINAL VOTE AT ADOPTION:								
23 24	Council Member Karyn Cunningham	YES							
25	Council Member Raryii Cullilligilaili	125							
26	Council Member David Singer	YES							
27	-								
28	Council Member Larissa Siegel Lara	<u>YES</u>							
29									
30	Vice-Mayor John DuBois	<u>YES</u>							
31	Манал Билала Бійг	VEO							
32	Mayor Eugene Flinn	<u>YES</u>							

JERRY SOCHERMAN
Miami Dade Advisory Board, vice Chair
Cure CF Miami Foundation, Co-Founder
Great Strides Miami, Chair
Kick CF Miami, Chair
X86.255.0363
Jerry@CureCFMiami.org



Department of Parks and Recreation 9705 E. Hibiscus Street Palmetto Bay, FL 33157 305-259-1234 www.palmettobay-fl.gov

Facility Rental Agreement	Permit No
Applicant Information	
TOPA CONTROLLA	10/20/17
	10/34/1
0.00	State: 1 C
Phone: 786-355-0363 Email: 187	nya Curcimiamious
Facilities-Amenitics / Dates(s) Times(s) Requested:	7
Coral Reef Park: 7895 SW 152 Street, Palmetto Bay, FL 3	3157 • (305) 235-1593
	Oak Hammock #1 #2 #3 #4
	BarbequeVolleyball Courts
	_
Palmetto Bay Park: 17535 SW 95 Ave. Palmetto Bay. FL 3	1313/ • (303) 231-2/31
Recreation Room Pavilion N S Soccer Field Pho	
Ballfield (circle # 1 #2) #3 #4 #5 #6 Open/Field Ar	eaPersonal Barbeque
Date of Function: 2/34718 Times: 9 am/pm to	<u> </u>
Purpose of Event: CHARITY KICKBURL TOUCH HAVEN	
(childrens birthday party, etc.)	Attendance: 350
Assigned Vendors: Must provide information 2 weeks prior to Event date.	
Caterer*	
Amusement* (Bounce House, etc):	
Other*	
Powered by:generatorelectricity requested (*insurances requ	ired; see Rules & Regulations)
Accuracy of Application/Confirmation of Receipt of Governing Rules and Regulations	~
By signature below, I seknowledge that the information provided in this a	pplication is accurate; and
further, confirm that I have received a copy of the Village of Palmetto Bay	reservation policy specifying
rules and regulations required for use, and agree to read/review and fully s	bide by stated terms and
conditions. Signature of Applicanti Date:	(1/31/17)
Signature of Applicants Date:	
Rontal Fees and Deposits (to be completed by Parks & Recreation representative):	Fee Walved in accordance with Ord. 2012-19
Rental: \$ Tax: \$ Total: \$ / Credit Co	ardCheck#
Refundable clean-up/damage deposit: \$/_Credit CardChec	
	ck#Tax Exempt Y/N
	ar lax Exempt 1/N
Below For Official Use Only:	
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CYSTFIB-01



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/14/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

	DUCER		CONTACT Willis Towers Watson Certificate Center									
Will c/o	is of Pennsylvania, Inc. 26 Century Blvd . Box 305191	PHONE (A/C, No, Ext): (877) 945-7378 [A/C, No): (888) 467-2378 E-MAIL SS: Certificates@willis.com										
	shville, TN 37230-5191			INSURER(S) AFFORDING COVERAGE NAIC#								
		INSURER A : Great Northern Insurance Company						20303				
13161	I DEPT.	INSURER B : Federal Insurance Company						20281				
INSU	URED	INSURER C: American Guarantee and Liability Insurance Company 26247										
	Cystic Fibrosis Foundation											
6931 Arlington Road Bethesda, MD 20814			INSURER D :									
		INSURER E:										
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			TE NUMBER:	REVISION NUMBER:								
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.												
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	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				İ	- [E.L. DISEASE - EA I		•	1,000,000		
	If yes, describe under	ĺ					E.L. DISEASE - POL			1,000,000		
-	DÉSCRIPTION OF OPERATIONS below	-				+	LIL. DISEMSE - POL	LICI LIMII	-			
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Chapter: FLFL-29 Event Name: Celebrity Kickball Description of Event: Sports Tournament Event Date: 02/25/2017 Requisition Number: 265719 Village of Palmetto Bay is named as Additional Insured, ATIMA, for General Liability, per written contract or agreement.												
	RTIFICATE HOLDER	CANCELLATI	ON	.,				·······				
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
Village of Palmette Ray				AUTHORIZED REPI								
	Village of Palmetto Bay 9705 E. Hibiscus Street	Joseph & Shabek										

ACORD 25 (2016/03)

9705 E. Hibiscus Street Palmetto Bay, FL 33157

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