

TAB 3



SPECIAL FUNCTION PERMIT APPLICATION

EVENT NAME: 24TH Annual Walkathon
APPLICANT: Southeastern Guide Dogs, I
ADDRESS: 4210 77th St. East, Palmetto, FL 34221
CONTACT: Paula Best

EVENT DATE: 2/27/2010
EVENT TIME: 7:30 a.m.-1:00 p.m.
PHONE: 729-5665
PHONE: 729-5665 ext. 126

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: Event is held at the Manatee River Fair Assoc. and the walk goes out from there on the street of Palmetto. Please see the enclosed route map.

No City Services Required other than providing cones.

ANTICIPATED ATTENDANCE: Participation varies yearly and difficult to anticipate - approx. 1,000

CITY SERVICES REQUIRED: *We hire off-duty police for traffic and security

POLICE: Streets Blocked: _____ Traffic Control: X Security: X Other: _____
PUBLIC WORKS: Barricades: * _____ Clean-up: _____ Set-up: _____ Other: _____

*6 possibly to block an area at the fairgrounds

If a temporary restroom is utilized for a period greater than five (5) days, a Temporary Use Permit is required. Application is available at City Hall.

TEMPORARY RESTROOM FACILITIES: # of units: _____ N/A _____ # of days: _____

Proposed location(s): _____

INSURANCE REQUIREMENT: Insurance naming the City of Palmetto as an "Additional Insured" must be provided to the City Clerk ten (10) days prior to any event that is part of the Special Function Permit. **Please review Exhibit A for insurance coverage requirements.** ***WILL SUBMIT IN 2010 - NEW POLICY

- Copy of our current insurance attached

The Special Function Permit Application must be submitted to City Commission for approval at least 30 days prior to the event. Sale or consumption of alcoholic beverages on City property is strictly prohibited. If your event will include the use of loudspeakers, you may be required to apply for a Special Permit Exception to the City's Noise Ordinance (See Chapter 5-Amusements, of the City of Palmetto Code of Ordinances).

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PLEASE CONTINUE TO PAGE 2.

Special Function Permit Application
Page 2

EVENT: 24th Annual Walkathon


Event Date: 2/27/2010

HOLD HARMLESS AGREEMENT

Southeastern Guide Dogs, Inc. _____ agrees to indemnify and hold harmless the City of Palmetto
(Name of Organization/Person)

from any and all liability, defense costs, including other fees, loss or damage the City of Palmetto may
suffer as a result of claims, demands, costs, or judgments against it arising from
Southeastern Guide Dogs' _____ activities as indicated in the Special Function Application form.
(Name of Organization/Person)

I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL FUNCTION PERMIT APPLICATION
CONDITIONS AND INDEMNITY.



Permittee

CITY APPROVAL:

Public Works Director _____	Date <u>7-7-09</u>
Planning & Zoning _____	Date _____
Risk Management _____	Date <u>6/24/09</u>
Parks Department _____	Date <u>6/18/09</u>
Police Department _____	Date <u>7/7/09</u>
North River Fire _____	Date _____
APPROVED BY COMMISSION: _____	Date _____

Internal use only
Date Received: _____

Special Function Permit Application
Page 2

EVENT: 24th Annual Walkathon


Event Date: 2/27/2010

HOLD HARMLESS AGREEMENT

Southeastern Guide Dogs, Inc. _____ **agrees to indemnify and hold harmless the City of Palmetto**
(Name of Organization/Person)

from any and all liability, defense costs, including other fees, loss or damage the City of Palmetto may suffer as a result of claims, demands, costs, or judgments against it arising from Southeastern Guide Dogs' activities as indicated in the Special Function Application form.
(Name of Organization/Person)

I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL FUNCTION PERMIT APPLICATION CONDITIONS AND INDEMNITY.



Permittee

CITY APPROVAL:

Public Works Director _____

Date 2-2-09

Planning & Zoning _____

Date _____

Risk Management _____

Date 6/24/09

Parks Department _____

Date 6/10/09

Police Department _____

Date _____

North River Fire _____

Date 7/8/09

APPROVED BY COMMISSION: _____

Date _____

Internal use only
Date Received: _____



Southeastern Guide Dogs
Forward together.™

June 16, 2009

REQUEST FOR: SPECIAL FUNCTION PERMIT
City Of Palmetto

Dear Mayor and Council Members:

Southeastern Guide Dogs is requesting permission to conduct its **24th Annual Walkathon** in your city on Saturday, **February 27, 2010**. We expect approximately 1,000 – 1,300 participants for this exciting event!

We have held this event for many years and once again **Manatee River Fair Association and IMC Arena** will be utilized as the start and finish points. Registration begins at 7:30 a.m. and the walk will begin at 8:30 a.m. Although the walking portion of the event will be over no later than 10:30 a.m., the event at the arena will finish by 1:00PM.

Enclosed is a diagram of the route for your consideration and approval. This route leads through Palmetto Mobile Home Park. Many of the park residents are supporters and participate by walking and offering assistance for participants along the route.

Southeastern Guide Dogs will hire off-duty Palmetto Police to ensure the safety of all participants and maintain traffic control at key intersections. As in the past, the request will be for 6 to 8 officers. Along with the officers, we will have EMS bike riders and many rest areas offering water for our participants and canine friends. Lunch and entertainment at the arena is also planned for the walkers after completion of the walk.

Insurance will be covered by our carrier. We will provide you with a copy of this coverage when renewed at the end of January 2010. Enclosed is a copy of our current insurance. The only items we may need are some barricades to help block off the parking area at the fairgrounds for safety measures for our walkers.

We look forward to a continuing a positive relationship as members of the community and thank you for your consideration and past support of our event. I'd also like to encourage your participation in the event - please come and enjoy!

Sincerely,

Paula Best
Special Event Coordinator

Encls.

RECEIVED
JUN 17 2009
CITY PALMETTO

4210 77th Street East, Palmetto, FL 34221
941.729.5665 fax 941.729.6646 www.guidedogs.org



Full Member

FORWARD TOGETHER

23RD annual walkathon
Southeastern Guide Dogs

February 28, 2009

ROUTE—3 MILES

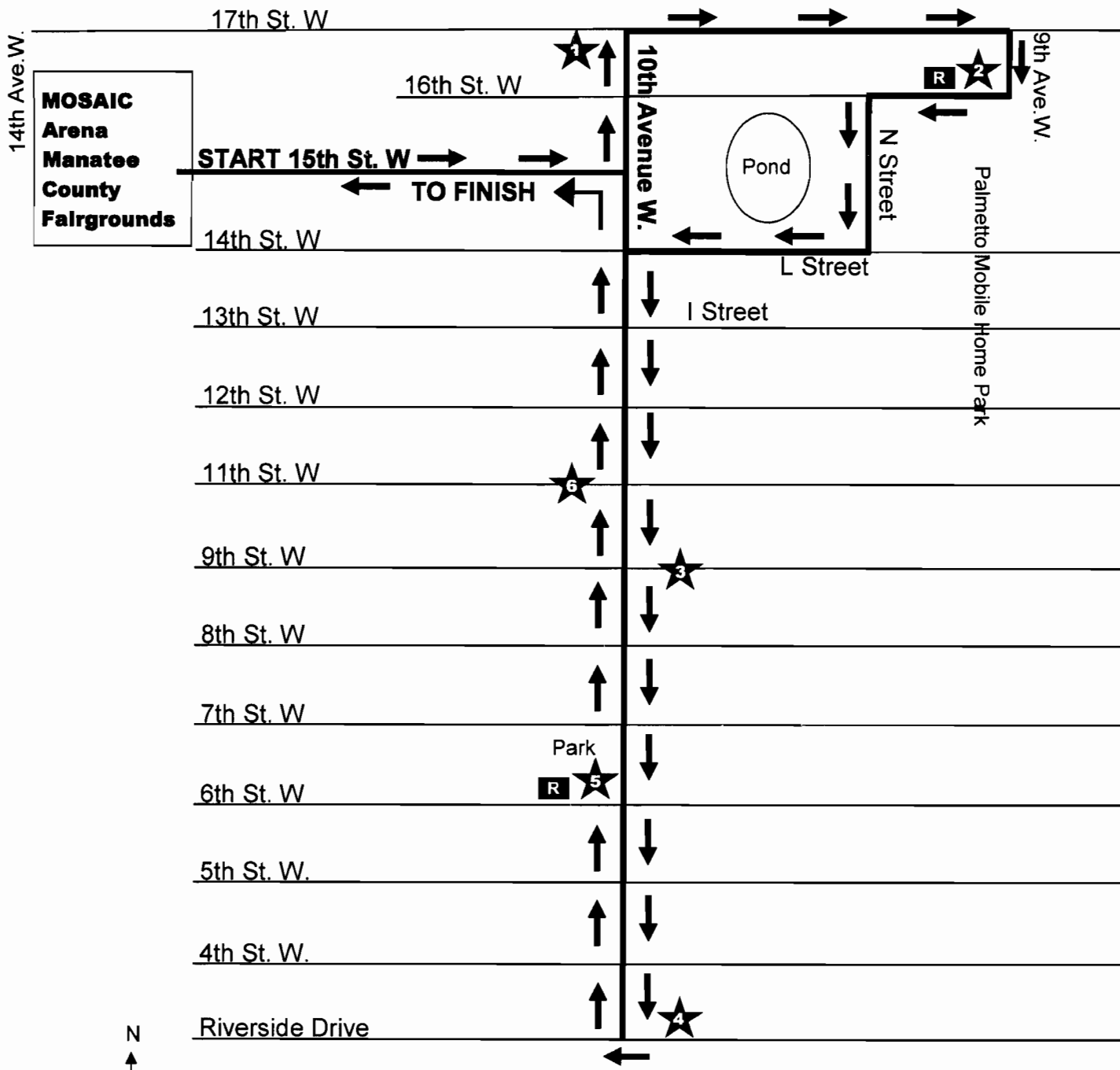
8:30—10:30 a.m.

Last walkers out at 10:00

Police & EMS bike team along the way for assistance.

Rest Stops along the way.

Map is not to scale.



MOSAIC
 Arena
 Manatee
 County
 Fairgrounds

START 15th St. W → → → → →
 ← ← ← ← ← TO FINISH

★ = Rest Stop

R = Restrooms

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/27/09

PRODUCER BB&T Wyman, Green & Blalock 1111 8th Avenue W P.O. Box 9029 Bradenton, FL 34205	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Southeastern Guide Dogs Inc. 4210 77th St. East Palmetto, FL 34221	INSURER A: Markel Insurance Company	38970
	INSURER B: FCCI Insurance Company	10178
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC.	8502SS260720	01/27/09	01/27/10	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$1,000,000 \$100,000 \$5,000 \$1,000,000 \$3,000,000 \$1,000,000
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	1002SS260721	01/27/09	01/27/10	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$1,000,000 \$ \$ \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EA ACC AGG	\$ \$ \$
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10000	4602SS260723	01/27/09	01/27/10	EACH OCCURRENCE AGGREGATE	\$6,000,000 \$6,000,000 \$ \$ \$
B	N	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	WC60610	01/01/09	01/01/10	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$500,000 \$500,000 \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER Southeastern Guide Dogs, Inc. 4210 77th Street East Palmetto, FL 34221	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE <i>Colbert Vayler</i>
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IMPORTANT

If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.



SPECIAL FUNCTION PERMIT APPLICATION

EVENT NAME: Wedding ceremony
APPLICANT: Becky Ivko
ADDRESS: 5936 Cypress Cir., B'ton 34202
CONTACT: Becky Ivko

EVENT DATE: Sat., March 27, 2010
EVENT TIME: 3:00-7:00
PHONE: 941-755-6304
PHONE: 941-704-1327

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.:
Wedding ceremony in grass field by memorial trees
COI - will be provided.

ANTICIPATED ATTENDANCE: 200

CITY SERVICES REQUIRED: No City Services Required
POLICE: Streets Blocked: _____ Traffic Control: _____ Security: _____ Other: _____
PUBLIC WORKS: Barricades: _____ Clean-up: _____ Set-up: _____ Other: _____

If a temporary restroom is utilized for a period greater than five (5) days, a Temporary Use Permit is required. Application is available at City Hall.

TEMPORARY RESTROOM FACILITIES: # of units: _____ # of days: _____
Proposed location(s): _____

INSURANCE REQUIREMENT: Insurance naming the City of Palmetto as an "Additional Insured" must be provided to the City Clerk ten (10) days prior to any event that is part of the Special Function Permit. **Please review Exhibit A for insurance coverage requirements.**

The Special Function Permit Application must be submitted to City Commission for approval at least 30 days prior to the event. Sale or consumption of alcoholic beverages on City property is strictly prohibited. If your event will include the use of loudspeakers, you may be required to apply for a Special Permit Exception to the City's Noise Ordinance (See Chapter 5-Amusements, of the City of Palmetto Code of Ordinances).

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PLEASE CONTINUE TO PAGE 2.**

Special Function Permit Application
Page 2

EVENT: Wedding ceremony Event Date: March 27, 2010

HOLD HARMLESS AGREEMENT

Becky Ivko agrees to indemnify and hold harmless the City of Palmetto
(Name of Organization/Person)

from any and all liability, defense costs, including other fees, loss or damage the City of Palmetto may suffer as a result of claims, demands, costs, or judgments against it arising from Becky Ivko's activities as indicated in the Special Function Application form.
(Name of Organization/Person)

I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL FUNCTION PERMIT APPLICATION CONDITIONS AND INDEMNITY.

Becky Ivko
Permittee

CITY APPROVAL:

Public Works Director	<u>Allen Lanning</u>	Date	<u>7-6-09</u>
Planning & Zoning	<u>N/A</u>	Date	
Risk Management	<u>[Signature]</u>	Date	<u>6/24/09</u>
Parks Department	<u>Geoffrey</u>	Date	<u>6/10/09</u>
Police Department	<u>[Signature]</u>	Date	<u>7/6/09</u>
North River Fire		Date	
APPROVED BY COMMISSION:		Date	

Internal use only Date Received: _____

Special Function Permit Application
Page 2

EVENT: Wedding ceremony Event Date: March 27, 2010

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Becky Ivko agrees to indemnify and hold harmless the City of Palmetto
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(Name of Organization/Person)

I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL FUNCTION PERMIT APPLICATION CONDITIONS AND INDEMNITY.

Becky Ivko
Permittee

CITY APPROVAL:

Public Works Director <u>Allen Luning</u>	Date <u>7-6-09</u>
Planning & Zoning <u>N/A</u>	Date _____
Risk Management <u>[Signature]</u>	Date <u>6/24/09</u>
Parks Department <u>Geoff Sayer</u>	Date <u>6/10/09</u>
Police Department _____	Date _____
North River Fire <u>[Signature]</u>	Date <u>7/8/09</u>
APPROVED BY COMMISSION: _____	Date _____

Internal use only
Date Received: _____

City of Palmetto Parks & Recreation Department 600 17 th Street West Palmetto, Florida 34221	Phone: (941) 721-2138 Fax: (941) 721-2139 E-Mail: pmartin@palmettofl.org
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CITY FACILITY RENTAL AGREEMENT

Please complete this Agreement with as much detail as possible. Return completed Agreement with ALL appropriate rental fees via mail to the address above or in person at 910 16th Street West.

Name of Applicant: Becky Ivko	Name of Organization n/a <input type="checkbox"/> For Profit <input type="checkbox"/> Not For Profit
---	---

Address: 5936 Cypress Circle	City: Bradenton	Zip Code: 34202
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Phone (daytime): 941-704-1327	Phone (evening): 941-704-1327	Phone (cell): 941-704-1327	E-Mail Address: bcharivko@aol.com
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Contact 1 (if other than applicant):	Phone (daytime):	Phone (evening):
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Contact 2 (if other than applicant):	Phone (daytime):	Phone (evening):
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Anticipated attendance:	Minimum 200	Maximum 200
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Date(s) of Use: March 27, 2010	Day(s) of week: Saturday
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Start time (include decorating/setup time): 3:00 p.m.	End time (include cleanup time): 7:00 p.m.
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Is this a fundraising event? Yes No
 Is an entry fee, ticket or registration fee required? Yes No
 Are any other fees associated with this event? Yes No
 If yes to any of the above, please explain how funds will be used.

Please check all that apply to this event:

Baby/Bridal Shower Birthday Party Church Function/Social Family Gathering/Reunion
 Field Use (Games or Practices) Field Use (Recreational) Meeting Picnic Clinic
 Political Function Tournament Wedding or Reception Youth League Meeting
 Electric (if available) Water (if available) Other (describe):

Building/Facilities & Rental Fees

Please check ALL facilities being requested for use and circle the application fees.

Sutton Park

<input checked="" type="checkbox"/> Pavilion	95 FEES: <u>\$65.00 First 3 Hours/ \$20.00 each additional hour</u>
<input type="checkbox"/> Pavilion Per Day	FEES: \$175.00 First Day/ <u>\$100.00 each additional day</u>
<input checked="" type="checkbox"/> Ball Field	35 FEES: <u>\$30.00 First 3 Hours/ \$ 5.00 each additional hour</u>
<input type="checkbox"/> Ball Field Per Day	FEES: \$55.00 All Day/\$45.00 each additional day
<input type="checkbox"/> Pavilion & Ball Field per Day	FEES: \$200.00 First Day/\$100.00 each additional day

Lamb Park

<input type="checkbox"/> Tennis Courts	FEES: \$20.00 First 3 Hours/ \$ 5.00 each additional hour
<input type="checkbox"/> Picnic Grounds	FEES: \$30.00 First 3 Hours/ \$ 5.00 each additional hour
<input type="checkbox"/> Celebration Center	FEES: \$90.00 First 3 Hours/ \$20.00 each additional hour
<input type="checkbox"/> Celebration Center	FEES: \$225.00 All Day/ \$150.00 each additional day

17th Street Park

<input type="checkbox"/> Pavilion	FEES: \$55.00 First 3 Hours/ \$15.00 each additional hour
<input type="checkbox"/> Pavilion	FEES: \$150.00 All Day/\$100.00 each additional day

Palmetto Historical Park

Carnegie Library

- Basement Floor Only
- Basement Floor & Grounds
- Chapel \$100.00 Security deposit

FEES: \$130.00 First 3 Hours/ \$40.00 each additional hour
 FEES: \$140.00 First 3 Hours/ \$45.00 each additional hour
 FEES: \$50.00 an hour

- Soccer Field

FEES: \$45.00 First 3 Hours/\$15.00 each additional hour

Riverside Park West

- Pavilion

FEES: \$60.00 First 3 Hours/\$20.00 each additional hour

Green Bridge Fishing Pier (Tournaments)

FEES: \$150.00 Per day
 FEES: \$200.00 Security deposit

NOTE: A SPECIAL FUNCTION PERMIT, CERTIFICATE OF INSURANCE NAMING THE CITY OF PALMETTO AS ADDITIONAL INSURED AND ADDITIONAL SECURITY DEPOSIT ALSO MAY BE REQUIRED PURSUANT TO CHAPTER 19, ARTICLE VI OF THE CITY CODE OF ORDINANCES. RENTAL OF CITY FACILITIES FOR MORE THAN FIVE (5) DAYS IN ANY THIRTY (30) DAY PERIOD SHALL REQUIRE CITY COMMISSION APPROVAL. FEES FOR LONG TERM RENTAL OF CITY FACILITIES SHALL BE BASED ON THE ADDITIONAL OPERATION AND MAINTENANCE COSTS INCURRED BY THE CITY IN CONNECTION WITH SUCH LONG TERM USE.

Security Deposit: \$50.00 per facility unless a different amount is specified above. This amount is payable at time of reservation and is refundable upon the completion of a favorable inspection. Up to 100% of the security deposit may be retained for damage and/or clean up if deemed necessary by management. In addition, the applicant shall be responsible for payment of cleaning/damage charges in excess of the security deposit.

Total Fees Enclosed: \$170.00 ^{\$120.00} Cash or Check #2773 for Rental Fees for Deposit(s) ^{\$50.00}
 A Drivers License # is required for ALL checks for the person whose name is on the check:
 State FL # I/20-550-55-245-0

Applicant fully understands that submittal of this application does not confirm my/our request and that **ALL Rental Fees and Taxes Must Be Included With This Application.** I/We further understand that ALL requests are subject to staff approval and are processed on a first come first served basis. Upon review, a designated staff member will notify me or one of my contacts regarding the status of this request and whether or not there is any additional information required, or if any rental fees and/or deposits still remain to be paid. I/We also acknowledge that I/We have received a copy, read, understand and fully agree to all of the items and terms outlined in the Facility Rental Agreement, including how to proceed in the event of any emergency needing immediate attention during the event. I/We further affirm that the information contained in this application is true and correct to the best of my/our knowledge.

Signature of Applicant: Rebecca A. Iuko Date: 6/14/09

Please make ALL checks payable to the City of Palmetto

FOR OFFICE USE ONLY

Date Rec'd:

Approved or Denied

Fees Collected:

Receipt #/s:

Palmetto Historical Commission

Palmetto Parks and Recreation Department

**CITY OF PALMETTO
FACILITY RENTAL AGREEMENT**

APPLICANT ACKNOWLEDGEMENT

The Applicant, Becky Ivko, hereby acknowledges and agrees to the following:

- All rental fees and taxes must be included with this application
- Submittal of the application does not confirm reservation dates
- Reservation requests are subject to City approval and are processed on a first come, first served basis
- Applicant has been provided with a copy of the City Facility Rental Rules and Regulations and agrees to abide by same

Applicant hereby affirms that the information contained in this application is true and correct, acknowledges receipt of a copy of the application, and agrees to all of the terms and conditions as outlined in the Facility Rental Agreement, including how to proceed in the event of an emergency during the event.

In the case of an emergency contact the Palmetto Police Department at 941-723-4587.

The applicant hereby agrees to indemnify and hold harmless the City of Palmetto (“City”), its agents and employees from any and all liability, defense costs, including other fees, loss or damage the City of Palmetto may suffer as a result of claims, demands, costs, or judgments against it arising from applicant’s activities listed in this City Facility Agreement.

The undersigned applicant certifies that he or she accepts responsibility on behalf of his/her organization / group and its guests for any damage or theft sustained by the City (premises, landscaping, equipment, furniture) because of occupancy of the City Facility by the organization. I have read and agree to comply with the rules and regulations stated in or incorporated into this rental agreement. The cost of any special cleaning or damage to the City Facility, equipment or grounds due to the scheduled activity or event will be deducted from the security deposit provided for herein. In the event that such costs exceed the amount of the security deposit, the undersigned agrees to be personally responsible for the payment to the City of any overages.

By: Becky Ivko

Print name: Becky Ivko

Date: 6/14/09

City Of Palmetto

06/17/09

2:55 PM

pmartin

SUTTON PARK-IVKO

RECEIPT NO:PR000581	AMOUNT
FMSD SUTTON PARK-IVKO	120.00
STNP	
FMSD DEPOSIT-IVKO	50.00
DPST	

PAYMENT RECEIVED	AMOUNT
CK 2773	170.00
TOTAL	170.00

CHAPMAN INSURANCE AGENCY

RECEIVED
JUN 24 2009
RISK MANAGEMENT
DEPARTMENT

Amendatory Endorsement

Policy Number-SSH7056544

Name- IVKO

Today's Date-06/19/2009

Endorsement-

Added as additional Insured-

City of Palmetto

600 17th St w.

Palmetto, FL 34221



ATTN: POLICY

CITY OF PALMETTO
600 17th ST W
PALM. 34221

3/27/2010

721-2199

WEDDING PARK
SUTTON
MEMORIAL TREE WALK
SEE GRADING

05076 N0804

P.A.S.S. Hotline: 800.782.2040 ext. 38442
www.provideforagents.com



SUNSHINE STATE INS. CO.
 PO BOX 391B
 SARASOTA, FLORIDA 34230-3918
 1-877-563-0150

HOMEOWNERS POLICY

POLICY NUMBER	POLICY PERIOD	
	From	To
SSH 7066544 00 28	03/25/2009 <small>12:01 a.m. at the residence premises.</small>	03/25/2010

NEW DECLARATION	Effective: 03/25/2009	Date Issued: 03/31/2009
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INSURED:	AGENT:	0000674
MICHAEL IVKO REBECCA IVKO 5936 95TH STREET CIR E BRADENTON FL 34202-9611 Telephone: 941-704-1045	RIP WEACHTER INS. AGCY, INC. 707 60TH ST CT E, SUITE D BRADENTON FL 34208 Telephone: 941-747-5995	
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:		
5936 95TH STREET CIR E		BRADENTON FL 34202-9611

Coverage is provided where premium and limit of liability is shown. Flood coverage is not provided by the company and is not a part of this policy.

SECTION I COVERAGE	LIMIT OF LIABILITY	DESCRIPTION	PREMIUMS
A. DWELLING	\$ 230,000.00		\$ 1,176.00
B. OTHER STRUCTURES	\$ 23,000.00		INCLUDED
C. PERSONAL PROPERTY	\$ 138,000.00		INCLUDED
D. LOSS OF USE	\$ 23,000.00		INCLUDED
SECTION II COVERAGE			
E. PERSONAL LIABILITY	\$ 300,000.00		\$ 18.00
F. MEDICAL PAYMENTS	\$ 1,000.00		INCLUDED
ANIMAL LIABILITY	\$ 25,000.00		INCLUDED
OPTIONAL COVERAGES			
LIMITED FUNGI, WET OR DRY ROT, OR BACTERIA COVERAGE	\$10,000/\$20,000/\$50,000		INCLUDED
LOSS ASSESSMENT COVERAGE	\$ 1,000.00		INCLUDED
ORDINANCE OR LAW COVERAGE	25% of Cov A		INCLUDED
WATER BACK-UP & SUMP OVERFLOW	\$5,000		\$ 25.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: \$ 1,317.42

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY.

FORMS AND ENDORSEMENTS		COUNTERSIGNED DATE <u>03/31/2009</u> BY <i>Elizabeth M. Zallner</i>
*HO-0003 (04/91) *OIRB11665 (07/07) *SSIC-10 (02/05) *SSIC-108 (07/08) Continued on Forms Schedule	*HO-0496 (04/91) *SSIC-0351 (03/05) *SSIC-101 (07/08) *SSIC-11 (07/97)	
ADDITIONAL INTERESTS		

SUNSHINE STATE INS. CO.
 PO BOX 3918
 SARASOTA, FLORIDA 34230-3918
 1-877-563-0150

HOMEOWNERS POLICY

POLICY NUMBER	POLICY PERIOD	
	From	To
SSH 7056544 00 28	03/25/2009 12:01 a.m. at the residence premises.	03/25/2010

NEW DECLARATION	Effective: 03/25/2009	Date issued: 03/31/2009
-----------------	-----------------------	-------------------------

INSURED:	AGENT:	0000674
MICHAEL IVKO REBECCA IVKO 5938 95TH STREET CIR E BRADENTON FL 34202-9611 Telephone: 941-704-1645	RIP WEACHTER INS. AGCY, INC. 707 60TH ST CT E, SUITE D BRADENTON FL 34208 Telephone: 941-747-5995	
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:		
5938 95TH STREET CIR E		BRADENTON FL 34202-9611

All other perils deductible: \$ 1,000.00 Premium: N/A
 Hurricane deductible: \$ 4,600.00 = 2%

SECTION I, SECTION II AND OPTIONAL PREMIUMS	\$ 1,219.00
2006 FL INSURANCE GUARANTY ASSOCIATION SPECIAL ASSESSMENT	\$ 9.00
EMERGENCY MANAGEMENT TRUST FUND SURCHARGE	\$ 2.00
MANAGING GENERAL AGENT (MGA) POLICY FEE	\$ 25.00
FL HURR CAT FUND EMERGENCY ASSESSMENT	\$ 12.00

2005 CITIZENS EMERGENCY ASSESSMENT	\$ 17.42
2007 FL INSURANCE GUARANTY ASSOCIATION ASSESSMENT	\$ 31.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$ 1,317.42

A rate adjustment of 0% of the wind premium is included to reflect building code grade in your area. Adjustments range from 2% surcharge to 27.3% credit.

A rate adjustment of 70% of the wind premium is included to reflect the windstorm mitigation features of your dwelling. Adjustments range from 0% to 89% credit subject to verification that your home meets the windstorm mitigation characteristics of the 2001 Florida Building Code.

NOTE: The portion of your premium for Hurricane Coverage is: \$ 449.00
 The portion of your premium for All Other Coverages is: \$ 868.42

FORM TYPE	HO-3	YEAR BUILT	1983	TOWN/ROW HOUSE	N
CONSTRUCT TYPE	F	CONSTRUCT SUPERIOR	N	NUMBER OF FAMILIES	1
TERRITORY	735	PROTECTION CLASS	05	HOME UPDATED	N
MUNICIPAL CODE	999	COUNTY CODE	41	PROT DEVICE/BURGLAR	N
PROT DEVICE/FIRE	N	PROT DEV/SPRINKLER	N	WIND/HAIL EXCLUSION	N
REPLACEMENT COST	Y	OCCUPANCY CODE	OWNER	USE CODE	P
FLOOD CREDIT	N	BUILDERS RISK CREDIT	N	APPROVED S/D	N

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.



SPECIAL FUNCTION PERMIT APPLICATION

EVENT NAME: WALK FOR LIFE '2009

EVENT DATE: 9-26-09

APPLICANT: MANATEE GLENS

EVENT TIME: 7am - 2pm

ADDRESS: 3916th Ave W Bradenton, FL 34205

PHONE: 941-782-4299

CONTACT: Nancy McCarty

PHONE: 782-4354

DETAILS OF FUNCTION: LOCATION, PARADE ROUTE, ETC.: Sutton Park
walk route attached

ANTICIPATED ATTENDANCE: 500 +

CITY SERVICES REQUIRED:
POLICE: Streets Blocked: Traffic Control: Security: _____ Other: _____
PUBLIC WORKS: Barricades: Clean-up: _____ Set-up: _____ Other: _____

If a temporary restroom is utilized for a period greater than five (5) days, a Temporary Use Permit is required. Application is available at City Hall.

TEMPORARY RESTROOM FACILITIES: # of units: _____ # of days: _____
Proposed location(s): _____

INSURANCE REQUIREMENT: Insurance naming the City of Palmetto as an "Additional Insured" must be provided to the City Clerk ten (10) days prior to any event that is part of the Special Function Permit. **Please review Exhibit A for insurance coverage requirements.**

The Special Function Permit Application must be submitted to City Commission for approval at least 30 days prior to the event. Sale or consumption of alcoholic beverages on City property is strictly prohibited. If your event will include the use of loudspeakers, you may be required to apply for a Special Permit Exception to the City's Noise Ordinance (See Chapter 5-Amusements, of the City of Palmetto Code of Ordinances).

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PLEASE CONTINUE TO PAGE 2.**

Special Function Permit Application
Page 2

EVENT: WALK FOR LIFE 2009 Event Date: 9-26-09

HOLD HARMLESS AGREEMENT

MANATEE GLENS agrees to indemnify and hold harmless the City of Palmetto
(Name of Organization/Person)

from any and all liability, defense costs, including other fees, loss or damage the City of Palmetto may suffer as a result of claims, demands, costs, or judgments against it arising from MANATEE GLENS's activities as indicated in the Special Function Application form.
(Name or Organization/Person)

I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL FUNCTION PERMIT APPLICATION CONDITIONS AND INDEMNITY.

Nancy McCaskey
Permittee

CITY APPROVAL:

Public Works Director	<u>Alfred King</u> (Ins has been provided)	Date	<u>7-14-09</u>
Planning & Zoning	<u>N/A</u>	Date	_____
Risk Management	<u>[Signature]</u>	Date	<u>7/10/09</u>
Parks Department	<u>[Signature]</u>	Date	<u>7/10/09</u>
Police Department	<u>[Signature]</u>	Date	<u>7/15/09</u>
North River Fire	_____	Date	_____
APPROVED BY COMMISSION:	_____	Date	_____

Internal use only
Date Received: _____

Special Function Permit Application
Page 2

EVENT: WALK FOR LIFE 2009 Event Date: 9-26-09

HOLD HARMLESS AGREEMENT

MANATEE GLENS agrees to indemnify and hold harmless the City of Palmetto
(Name of Organization/Person)

from any and all liability, defense costs, including other fees, loss or damage the City of Palmetto may suffer as a result of claims, demands, costs, or judgments against it arising from MANATEE GLENS's activities as indicated in the Special Function Application form.
(Name or Organization/Person)

I HAVE READ AND UNDERSTAND THE ABOVE SPECIAL FUNCTION PERMIT APPLICATION CONDITIONS AND INDEMNITY.

Nancy McCauley
Permittee

CITY APPROVAL:

Public Works Director <u>Alfred Lansing</u> (<u>Not has been</u> / <u>Provided</u>)	Date <u>7-14-09</u>
Planning & Zoning <u>N/A</u>	Date _____
Risk Management <u>[Signature]</u>	Date <u>7/12/09</u>
Parks Department <u>Geoff Seiden</u>	Date <u>7/10/09</u>
Police Department _____	Date _____
North River Fire <u>[Signature]</u>	Date <u>7/15/09</u>
APPROVED BY COMMISSION: _____	Date _____

Internal use only
Date Received: _____

Special Function Permit/Temporary Use Permit Application

Walk for Life 2009 (Suicide Prevention)
Manatee Glens

Saturday, September 26, 2009

Sutton Park

City services provided last year and requested by Manatee Glens again this year:

Park Rental (waive rental fee): Sutton Park Pavilion (\$65.00 rental fee)

Park Staff: Geoff Seger, Peggy Martin, Jimmy Michener and Jeff Scott – salaried employees will be volunteering their time to this event.

In Kind Services: Cones for road closures
 20 x 20 tent
 10 x 10 tents (4)
 tables (20)
 chairs (30)

Ins. Has been provided

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
REQUEST FOR TEMPORARY CLOSING/SPECIAL USE OF STATE ROAD

850-040-65
 MAINTENANCE
 03/06
 Page 1 of 2

- Instructions: 1. Obtain signatures of local law enforcement and city/county officials.
 2. This form must be submitted by the local governmental authority to FDOT to obtain written approval. Allow adequate time for the review.
 3. Attach any necessary maps or supporting documents.

NAME OF ORGANIZATION Manatee Glens		PERSON IN CHARGE Nancy McCarty		DATE 7/9/09
ADDRESS OF ORGANIZATION 391 6th Avenue West, Bradenton, FL 34205			TELEPHONE NUMBER 941-782-4299	
TITLE OF EVENT Walk For Life				
DATE OF EVENT 9/26/09	STARTING TIME OF EVENT 7am	DURATION OF EVENT (APPROX.) 6 hours	ACTUAL CLOSING TIME (INCLUDING SETTING UP BARRIERS, ETC.) 8:30am - 10:30am	
PROPOSED ROUTE (INCLUDE STATE ROAD NUMBER, SPECIFIC LOCATION, ETC. - INCLUDE MAPS) map attached				
DETOUR ROUTE (INCLUDE ALTERNATE ROUTES - INCLUDE MAPS)				
NAME OF DEPT. RESPONSIBLE FOR TRAFFIC CONTROL, ETC. (CITY POLICE, SHERIFF'S DEPT., FLORIDA HWY. PATROL, ETC.)(INCLUDE PRECINCT NO.) City of Palmetto Police Department				
SPECIAL CONDITIONS				
THIS SECTION IS TO BE COMPLETED WHEN PERMITTING SPECIAL USE OF A STATE ROAD FOR FILMING				
LICENSED PYROTECHNICS OPERATOR _____ LICENSE NO. _____				
APPROVAL OF LOCAL FIRE DEPARTMENT _____				
LIABILITY INSURANCE CARRIER _____ POLICY EFFECTIVE DATE _____				
COVERAGE AMOUNT _____ (\$1,000,000 MINIMUM)				
LENGTH OF COVERAGE _____ DAYS				
FEDERAL AVIATION ADMINISTRATION APPROVAL FOR LOW FLYING FILMING _____				
ADDITIONAL LIABILITY INSURANCE AMOUNT _____ (\$5,000,000 MINIMUM)				
TYPED NAME AND TITLE (INCLUDE BADGE NO IF APPROPRIATE)		SIGNATURE OF CHIEF OF LAW ENFORCEMENT AGENCY		DATE SIGNED
TYPED NAME AND TITLE OF CITY/COUNTY OFFICIAL		SIGNATURE OF CITY/COUNTY OFFICIAL		DATE SIGNED

The Permittee, shall indemnify, defend, and hold harmless the Department and all of its officers, agents, and employees from any claim, loss, damage, cost, charge, or expense arising out of any acts, actions, neglect, or omission by the Permittee, its agents, employees, or subcontractors during the performance of the Contract, whether direct or indirect, and whether to any person or property to which the Department or said parties may be subject, except that neither the Permittee nor any of its subcontractors will be liable under this Article for damages arising out of the injury or damage to persons or property directly caused or resulting from the SOLE negligence of the Department or any of its officers, agents or employees.

Contractor's obligation to indemnify, defend, and pay for the defense or at the Department's option, to participate and associate with the Department in the defense and trial of any damage claim or suit and any related settlement negotiations, shall be triggered by the Department's notice of claim for indemnification to Contractor. Contractor's inability to evaluate liability or its evaluation of liability shall not excuse Contractor's duty to defend and indemnify within seven days after such notice by the Department is given by registered mail. Only an adjudication or judgment after highest appeal is exhausted specifically finding the Department SOLELY negligent shall excuse performance of this provision by Contractor. Contractor shall pay all costs and fees related to this obligation and its enforcement by the Department. Department's failure to notify Contractor of a claim shall not release Contractor of the above duty to defend.

It is understood and agreed that the rights and privileges herein set out are granted only to the extent of the State's right, title, and interest in the land to be entered upon and used by the Permittee, and the Permittee will, at all times, assume all risk of and indemnify, defend and save harmless the State of Florida and the Department from and against any and all loss, damage, cost, or expense arising in any manner on account of the exercise or attempted exercises by said Permittee of the aforesaid rights and privileges.

During the event, all safety regulations of the Department shall be observed and the holder must take measures, including placing and display of safety devices, that may be necessary in order to safely conduct the public through the project area in accordance with the Federal Manual on Uniform Traffic Control Devices (MUTCD), as amended, and the Department's latest Roadway and Traffic Design Standards.

In case of non-compliance with the Department's requirements in effect as of the approved date of this permit, this permit is void and the facility will have to be brought into compliance or removed from the R/W at no cost to the Department.

Submitted by: Manatee Glens
Permittee

Man Ring
Signature and Title
President/CEO

Place Corporate
TONI FERNANDEZ
Comm# DD0876069
Expires 3/31/2013
Florida Notary Assn., Inc
Attested *[Signature]*

Department of Transportation Approval: This Request is Hereby Approved

Recommended for approval _____ Title _____ Date _____

Approved by: _____ Date _____
District Secretary or Designee

DISTRIBUTION: Original - Permittee
1st copy - District Maintenance Office
2nd copy - Local Maintenance Engineer

Manatee Glens 2009

Walk For Life

Sutton Park in Palmetto

The Walk Route- Starts at Sutton Park in Palmetto

South on 10th Ave. to Riverside Dr.,

East on Riverside Dr. to 8th Ave.

South on 8th Ave. across Green Bridge to 3rd Ave.

West on 3rd Ave. to 10th St.

North on 10th St. to Barcarrota Blvd.

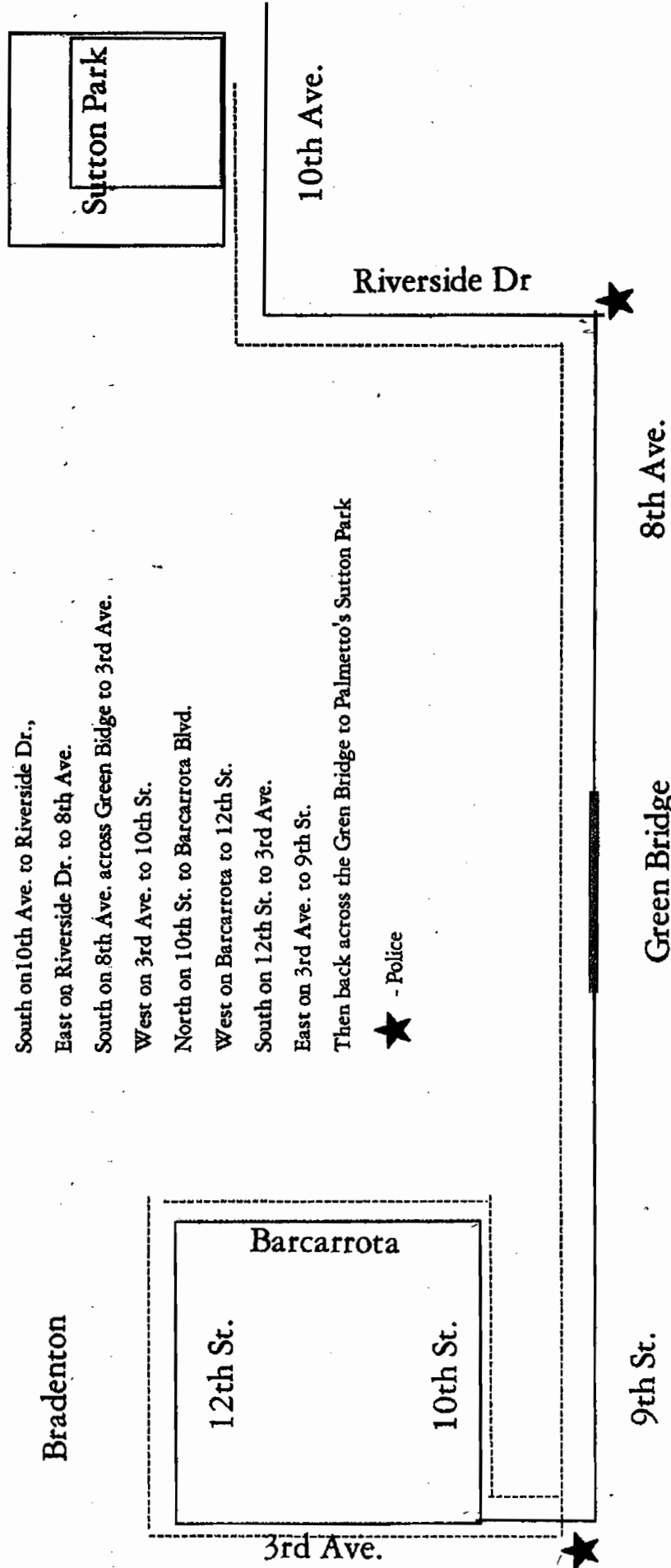
West on Barcarrota to 12th St.

South on 12th St. to 3rd Ave.

East on 3rd Ave. to 9th St.

Then back across the Green Bridge to Palmetto's Sutton Park

★ - Police



Bradenton

12th St.

10th St.

3rd Ave.

9th St.

8th Ave.

Green Bridge

South bound lane closed- Westside

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY):
6/24/2009

PRODUCER
NEGLEY ASSOCIATES
PO BOX 206
Cedar Grove, NJ 07009
(973)239 9107

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
Manatee Glens Corp.
P.O. Box 9478
Bradenton, FL 34206

INSURERS AFFORDING COVERAGE	NAIC#
INSURER A: Medical Health Risk Retention Group	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

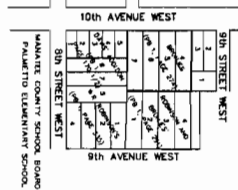
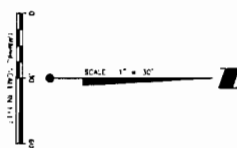
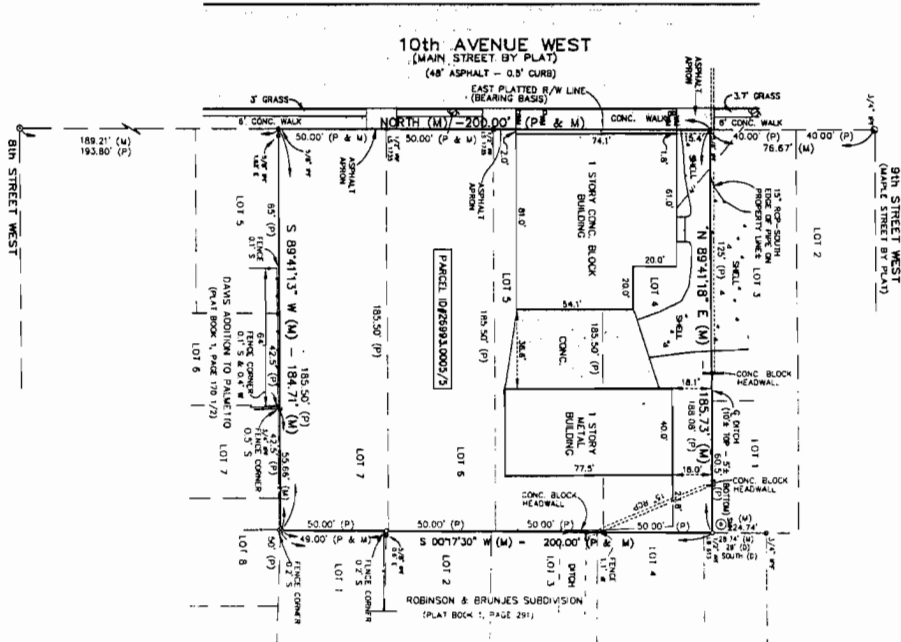
INSR LTR	ADDL INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMSMADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	CCL0001747	02/10/09	02/10/10	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADVN. LRY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
		AUTOMOBILE LIABILITY ANY AUTO ALLOWED AUTOS SCHEDULED AUTOS HIRED AUTOS NON OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EAACC \$ AGG \$
		EXCESS UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMSMADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WESTATL 5TH ER FL EACH ACCIDENT \$ FL DISEASE - EA EMPLOYEE \$ FL DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 RE: Special Event - "Annual Walk for Life" - September 26, 2009
 This certificate holder as shown below is an additional insured, but only with respect to the operations of Manatee Glens Corporation and the special event, "Walk for Life", to be held on September 26, 2009.

CERTIFICATE HOLDER
 City of Palmetto
 516 8th Ave., West
 Palmetto, FL 34221

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE

EXHIBIT A
SCHOOL BOARD CITY



DESCRIPTION:
LOTS 4, 5, 6 AND 7, BLOCK A, BRUNJES SUBDIVISION, AS PER PLAT RECORDS OF MANATEE COUNTY, FLORIDA.

NOTES:

1. REARINGS SHOWN HEREON REFER TO THE EAST RIGHT-OF-WAY LINE OF 10th AVENUE WEST BEING ASSUMED AS NORTH.
2. UNDERGROUND ENCROACHMENTS OR IMPROVEMENTS, OTHER THAN SHOWN, IF ANY, NOT LOCATED FOR PURPOSES OF THIS SURVEY.
3. THE SUBJECT LAND LIES IN ZONE "C" OF THE FLOOD INSURANCE RATE MAP (FIRM) COMMUNITY-PANEL NUMBER 120154-0003-C (FIRM NO. 0410) DATED 11/19/03). SUBJECT TO REVISIONS.
4. THIS SURVEY HAS BEEN PREPARED WITHOUT THE BENEFIT OF A PROFESSIONAL ENGINEER'S REVIEW AND THEREFORE THE SURVEYOR ASSUMES ALL RESPONSIBILITIES ON THE PROPERTY.
5. USE OF THIS SURVEY BY ANYONE OTHER THAN THOSE CENTERED HEREIN IS AT THEIR SOLE RISK WITHOUT LIABILITY TO THE SURVEYOR.
6. SUBJECT TO EASEMENTS, ENCROACHMENTS AND RESERVATIONS OF RECORD.
7. DESCRIPTION SHOWN HEREON WAS TAKEN FROM STA. 1147.97 PROPERTY DEED, AS RECORDED IN OFFICIAL RECORD BOOK 2135, FLORIDA.
8. THE SUBJECT LAND AS SHAPED CONTAINS 37,044 SQUARE FEET OR 0.85 ACRES, MORE OR LESS.

BOUNDARY SURVEY

MADE IN SECTION 14, TOWNSHIP 25 SOUTH, RANGE 17 EAST, MANATEE COUNTY, FLORIDA
FOR THE SCHOOL BOARD OF MANATEE COUNTY

BY: *[Signature]*
LEO MILLS & ASSOCIATES, INC.
REGISTERED PROFESSIONAL SURVEYOR
DATE OF SURVEY: 02-28-08

THE SURVEYOR HAS NOTED THE FOLLOWING:
NO ENCROACHMENTS OR IMPROVEMENTS WERE OBSERVED OR LOCATED FOR PURPOSES OF THIS SURVEY.

MANATEE COUNTY SCHOOL BOARD
PLATFILED SUBDIVISION

10th AVENUE WEST
8th STREET WEST
9th AVENUE WEST

LEO MILLS & ASSOCIATES, Inc.
REGISTERED PROFESSIONAL SURVEYOR
1000 N. GULF BLVD., SUITE 100, TAMPA, FL 33604
TEL: 813-281-1111 FAX: 813-281-1112
WWW.LEOMILLS.COM

PROJECT NO. 08-001
DATE: 02-28-08
SCALE: 1" = 30'

PURCHASE ORDER # 2485 08
D-28 # 5589