GOLDEN BEACH, FLORIDA

RESOLUTION NO. 1835.07

A RESOLUTION OF THE TOWN COUNCIL OF THE TOWN OF GOLDEN BEACH, FLORIDA, AUTHORIZING AND APPROVING RENEWAL OF THE FLOOD INSURANCE POLICY WITH AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA; PROVIDING FOR IMPLEMENTATION; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, on April 12, 2007, the Town of Golden Beach (the "Town") flood insurance policy with American Bankers Insurance Company of Florida will expire; and

WHEREAS, the flood insurance policy provides coverage for the Guardhouse/Police Substation and bathhouses located at the Beach Pavilion and Tweddle Park; and

WHEREAS, the Town Council finds that the renewal of the flood insurance policy pursuant to the Flood Insurance Renewal Invoice attached as Exhibit "A" is in the best interest of the Town.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF GOLDEN BEACH, FLORIDA, AS FOLLOWS:

Section 1. Recitals Adopted. That each of the above-stated recitals is hereby adopted and confirmed.

Section 2. Authorization. That the renewal of the flood insurance policy and payment of \$3,870.00 to American Bankers Insurance Company, for the following coverage amounts, in accordance with the Flood Insurance Renewal Invoice, a copy of which is attached hereto and incorporated herein, is hereby authorized and approved:

| | Building | Contents |
|---------------------------|--------------------|-------------|
| Police Substation | \$ <u>2,176.00</u> | Unavailable |
| Rear Maintenance Building | \$ <u>1,694.00</u> | Unavailable |

Section 3. Implementation. That the Mayor and Town Manager are authorized to take any and all action which is necessary to implement this Resolution.

Section 4. Effective Date. That this Resolution shall be effective immediately upon adoption.

Sponsored by Town Administration.

The Motion to adopt the foregoing Resolution was offered by <u>Mayor Singer</u>, seconded by <u>Councilmember Einstein</u> and on roll call the following vote ensued:

| Mayor Singer | | <u>Aye</u> |
|------------------------|---|------------|
| Vice Mayor Bernstein | | <u>Aye</u> |
| Councilmember Einstein | | <u>Aye</u> |
| Councilmember Lusskin | | Aye |
| Councilmember Rojas | 2 | <u>Aye</u> |

PASSED AND ADOPTED by the Town Council of the Town of Golden Beach, Florida, this

 8^{th} day of March, 2007.

ATTEST:

MAYOR OLENN SINGER

ELIZABETH SEWELL TOWN CLERK

APPROVED AS TO FORM AND LEGAL SUFFICIENCY:

TOWN ATTORN

AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA FLOOD INSURANCE RENEWAL INVOICE

THIS FLOOD INSURANCE POLICY EXPIRES AT 12:01 A.M. ON: 4/12/2007

Agency #: 7063420

Policy#: 1011167596

INSURED PROPERTY LOCATION:

INTERSECTION OF A1A AND STRAND

GUARD HOUSE

GOLDEN BEACH FL 33160

DATE ISSUED: 2/01/2007

FLORIDA LEAGUE OF CITIES, INC.

PO BOX 530065

ORLANDO FL 32853

(407)425-9142

Special Instructions:

PAYOR IS: INSURED

TOWN OF GOLDENBEACH

GOLDEN BEACH FL 33160

ONE GOLDEN BEACH DR

SEE REVERSE SIDE OF BILL FOR IMPORTANT MESSAGES
OPTION CURRENT COVERAGE OPTION INCREASED COVERAGE

| 0. 1.0 | J. (| | | | | | |
|--------|---------------------|--------------|--------------------|---|---------------------|--------------|-------------------|
| | COVERAGE | DEDUCTIBLE | PREMIUM | | COVERAGE | DEDUCTIBLE | PREMIUM |
| | Building 400,000 | Building 500 | Yr \$2,176.00 | В | Building 440,000 | Building 500 | 1Yr \$2,284.00 |
| | Coments 100,000 | Contents 500 | * NOT * AVAILABLE | | Contents 105,000 | Coments 500 | * NOT * AVAILABLE |

MAXIMUM COVERAGE AVAILABLE THROUGH THE NATIONAL FLOOD INSURANCE PROGRAM:

BUILDING:

500,000

CONTENTS:

500,000

PAYOR'S COPY RETAIN TOP PORTION FOR YOUR RECORDS

| FLOOD INSURANC | | | | E RENEWAL INVOICE | | | | | |
|--------------------------------|---|--------------------------|--------------------|---------------------------------------|---------------------------------------|----------------------|--------------------|--|--|
| POLICY #: 1011167596 OPTION A | | 10AN#: | | EXPIRATION DATE: 4/12/2007 | | DATE ISSUED: 2/01/20 | | | |
| | | | COVERAGE | OPTION B | | COVERAGE | | | |
| THREE YEAR: | \$2,176.00 N/A | Cont | 400,000 100,000 | ONE YEAR: THREE YEAR: | \$2,284.00 N/A | Bldg Cont | 440,000 105,000 | | |
| Check desired owith check or n | coverage & return bott noney order made paya | om section c able to: | of notice | ، مدمند م رسو مورون | INSURED NAME & M | AILING ADDRESS | | | |
| FLOOD INS | BANKERS INSU SURANCE PROCE | | | ONE GO | F GOLDENBEA LDEN BEACH BEACH FL | | ; ; | | |
| PO BOX 84 | 37 PHIA, PA 1910 | 1-8437 | | GOLDEN | BEACH FL | 33160 | | | |
| | orrigos withi D | COMENT | | i i i i i i i i i i i i i i i i i i i | r fold, staple, or | WRITE BELOW | THIS LINE | | |

AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA FLOOD INSURANCE RENEWAL INVOICE

THIS FLOOD INSURANCE POLICY EXPIRES AT 12:01 A.M. ON: 4/12/2007

Agency #: 7063420

Policy #: 1011167593

INSURED PROPERTY LOCATION:

13 GOLDEN BEACH DR

BATH HOUSE - TWEEDLE PARK GOLDEN BEACH FL 33160

DATE ISSUED: 2/01/2007

FLORIDA LEAGUE OF CITIES, INC.

PO BOX 530065

ORLANDO FL 32853

(407)425-9142

PAYORIS: INSURED

PAYOR NAME & MAILING ADDRESS TOWN OF GOLDENBEACH ONE GOLDEN BEACH DR 33160 GOLDEN BEACH FL

Special Instructions:

SEE REVERSE SIDE OF BILL FOR IMPORTANT MESSAGES OPTION

CURRENT COVERAGE

OPTION .

INCREASED COVERAGE

| i . | COVERAGE | DEDUCTIBLE | PREMIUM | | COVERAGE | DEDUCTIBLE | PREMIUM |
|-----|--------------------|-----------------|----------------------|---|--------------------|-----------------|-------------------|
| | Building 61,000 | Building 500 | 1 Yr \$722.00 | R | Building 67,100 | Building 500 | 1 Yr \$789.00 |
| | Contents 4,900 | Contents 500 | * NOT * AVAILABLE | | Contents 5,100 | Contents 500 | * NOT * AVAILABLE |

MAXIMUM COVERAGE AVAILABLE THROUGH THE NATIONAL FLOOD INSURANCE PROGRAM:

BUILDING:

500,000

CONTENTS:

500,000

PAYOR'S COPY RETAIN TOP PORTION FOR YOUR RECORDS

| DET ACTIVIE | FI. | LOOD INSURANC | DETACTION. | | | | |
|-----------------------------------|---|--------------------------|--------------------------|---------------------------------------|-----------------|-----------------|--|
| ропсул: 101116 | 67593 LO | AN #: | EXPIRATION DA | EXPIRATION DATE: 4/12/2007 | | 2/01/2007 | |
| OPTION A | | COVERAGE | | OPTION B | | COVERAGE | |
| THREE YEAR: | \$722.00 N/A | Cont 4,900 | ONE YEAR: THREE YEAR: | \$789.00 N/A | Bldg Cont | 67,100 5,100 | |
| Check desired co with check or mo | verage & return bottom s oncy order made payable | section of notice to: | | INSURED NAME & M | IAILING ADDRESS | | |
| | BANKERS INSURAN JRANCE PROCESSI 37 | | ONE GO | F GOLDENBEA LDEN BEACH BEACH FL | DR | 1 | |
| PHILADELPH | HIA, PA 19101-8 | | DO 5 07 | LEOLD STAPLE OR | WOITE RELOW | THIS LINE | |

AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA FLOOD INSURANCE RENEWAL INVOICE

THIS FLOOD INSURANCE POLICY EXPIRES AT 12:01 A.M. ON: 4/12/2007

Agency #: 7063420

33160

Policy #: 1011167594

INSURED PROPERTY LOCATION:

399 OCEAN BLVD

SOUTH BATHHOUSE ON THE EEACH

GOLDEN BEACH FL 33160

DATE ISSUED: 2/01/2007

PO BOX 530065

ORLANDO FL 32853

(407)425-9142

Special Instructions:

PAYORIS: INSURED

TOWN OF GOLDENBEACH

ONE GOLDEN BEACH DR

GOLDEN BEACH FL

SEE REVERSE SIDE OF BILL FOR IMPORTANT MESSAGES

OPTION CURRENT COVERAGE OPTION INCREASED COVERAGE

| | COVERAGE | DEDUCTIBLE | PREMIUM | | COVERAGE | DEDUCTIBLE | PREMIUM |
|---|--------------------|-----------------|------------------------------|---|--------------------|-----------------|------------------------------|
| | Building 33,000 | Building 500 | 1 Yr \$486.00 | В | Building 36,300 | Building 500 | 1 Yr \$524.00 |
| • | Contents | Contents | 3 Yr * NOT * AVAILABLE | | Contents | Contents | 3 Yr * NOT * AVAILABLE |

MAXIMUM COVERAGE AVAILABLE THROUGH THE NATIONAL FLOOD INSURANCE PROGRAM:

BUILDING:

500,000

CONTENTS:

DO NOT FOLD, STAPLE, OR WRITE BELOW THIS LINE

500,000

PAYOR'S COPY RETAIN TOP PORTION FOR YOUR RECORDS

| FLOOD INSURANCE RENEWAL INVOICE | | | | OICE | DET ACH HERE | | |
|--|---------------------|---------------------------------------|--------------------------|-----------------------|----------------------|--------|--|
| рогису % 1011167594 | LOAN#: | | EXPIRATION DATE | 4/12/2007 | DATE ISSUED: 2/01/20 | | |
| OPTI | ON A | COVERAGE | | OPTION B | CO | VERAGE | |
| ONE YEAR: \$4 THREE YEAR: \$4 Check desired coverage | N/A Cont | | ONE YEAR: THREE YEAR: | \$524.00 N/A | Bldg Cont | 36,300 | |
| Check desired coverage a with check or money ord | er made payable to: | | ; | SURED NAME & M. | AILING ADDRESS | | |
| AMERICAN BANKE | | i i i i i i i i i i i i i i i i i i i | | GOLDENBEA | | ! | |
| FLOOD INSURANC PO BOX 8437 | | CENTER | | DEN BEACH BEACH FL | | | |
| PHILADELPHIA, | PA 19101-8437 | ļ | | | | 1 | |

RETURN WITH PAYMENT

AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA FLOOD INSURANCE RENEWAL INVOICE

THIS FLOOD INSURANCE POLICY EXPIRES AT 12:01 A.M. ON: 4/12/2007

Agency#: 7063420

Policy #: 1011167595

INSURED PROPERTY LOCATION:

399 OCEAN BLVD

NORTH BATHHOUSE ON THE BEACH

GOLDEN BEACH FL 33160 DATE ISSUED: 2/01/2007

FLORIDA LEAGUE OF CITIES, INC.

PO BOX 530065

ORLANDO FL 32853

(407)425 - 9142

PAYORIS: INSURED

TOWN OF GOLDENBEACH ONE GOLDEN BEACH DR GOLDEN BEACH FL 33160

Special Instructions:

SEE REVERSE SIDE OF BILL FOR IMPORTANT MESSAGES

OPTION CURRENT COVERAGE OPTION

INCREASED COVERAGE

| | COVERAGE | DEDUCTIBLE | PREMIUM | | COVERAGE | DEDUCTIBLE | PREMIUM |
|---|--------------------|-----------------|-----------------------------|---|-----------------|-----------------|-------------------|
| Δ | Building 33,000 | Building 500 | 1Yr \$486.00 | В | Building 36,300 | Building 500 | 1 Yr \$524.00 |
| | Contents | Contents | 3Yr * NOT * AVAILABLE | D | Contents | Contents | * NOT * AVAILABLE |

MAXIMUM COVERAGE AVAILABLE THROUGH THE NATIONAL FLOOD INSURANCE PROGRAM:

BUILDING:

500,000

CONTENTS:

500,000

PAYOR'S COPY RETAIN TOP PORTION FOR YOUR RECORDS

| FLOOD INSU | | INSURANCE | RENEWAL IN | DELACHUERE | | | |
|--|---|----------------------------|------------|--------------------------|------------------------------------|---------------|-----------|
| роцеут: 101116 | 7595 | LOAN #: | | EXPIRATION DAT | E: 4/12/2007 | DATE ISSUED: | 2/01/2007 |
| | OPTION A | | COVERAGE | | OPTION B | CO | VERAGE |
| ONE YEAR: THREE YEAR: | \$486.00 N/A | | 33,000 | ONE YEAR: THREE YEAR: | \$524.00 N/A | Bldg Cont | 36,300 |
| Check desired cor with check or mo: | verage & return bot ney order made pay | tom section o rable to: | f notice | D | RSURED NAME & MA | HLING ADDRESS | |
| | ANKERS INSU RANCE PROCE | | | ONE GOL | GOLDENBEA DEN BEACH BEACH FL | DR | |

RETURN WITH PAYMENT

PHILADELPHIA, PA 19101-8437

DO NOT FOLD, STAPLE, OR WRITE BELOW THIS LINE