

HILLIARD TOWN COUNCIL MEETING

Hilliard Town Hall / Council Chambers
15859 West County Road 108
Post Office Box 249
Hilliard, FL 32046

TOWN COUNCIL MEMBERS

John P. Beasley, Mayor
Kenny Sims, Council President
Lee Pickett, Council Pro Tem
Joe Michaels, Councilman
Jared Wollitz, Councilman
Dallis Hunter, Councilman

ADMINISTRATIVE STAFF

Lisa Purvis, Town Clerk
Cory Hobbs, Interim Public Works Director
Gabe Whittenburg, Parks & Rec Director

TOWN ATTORNEY

Christian Waugh

AGENDA

THURSDAY, MARCH 06, 2025, 7:00 PM

NOTICE TO PUBLIC

Anyone wishing to address the Town Council regarding any item on this agenda is requested to complete an agenda item sheet in advance and give it to the Town Clerk. The sheets are located next to the printed agendas in the back of the Council Chambers. Speakers are respectfully requested to limit their comments to three (3) minutes. A speaker's time may not be allocated to others.

PLEDGE OF CIVILITY

WE WILL BE RESPECTFUL OF ONE ANOTHER
EVEN WHEN WE DISAGREE.

WE WILL DIRECT ALL COMMENTS TO THE ISSUES.

WE WILL AVOID PERSONAL ATTACKS.

"Politeness costs so little." – ABRAHAM LINCOLN

CALL TO ORDER

PRAYER & PLEDGE OF ALLEGIANCE

ROLL CALL

REGULAR MEETING

ITEM-1 Additions/Deletions to Agenda

ITEM-2 Town Council approval of the Kynex, Inc. contract with both the Town of Hilliard and the Town of Callahan splitting the cost, to be held at the Northeast Florida Fairgrounds on July 4, 2025, and a Council Member to be appointed as liaison.
John P. Beasley – Mayor

ITEM-3 Town Council approval of the Wall Event Expenditure for the General Liability insurance of the Vietnam's Voices – Traveling Memorial Wall, with The Evanston Insurance Company in the amount of \$3,385.00.
Alicia Head – Public Information Officer & Event Coordinator

ITEM-4 Town Council approval of the Minutes for the February 13, 2025, Workshop, and the February 20, 2025, Workshop & Regular Meeting.
Lisa Purvis, MMC – Town Clerk

ITEM-5

Town Council approval of PQH Group, Payable through February 19, 2025,
Project Name: Hurricane Shelter / Community Center Project in the amount of
\$11,000.00.

FDEM 100% GRANT FUNDED PROJECT LUMP SUM CONTRACT \$572,000

ADDED ITEMS**ADDITIONAL COMMENTS**

PUBLIC

MAYOR & TOWN COUNCIL

ADMINISTRATIVE STAFF

TOWN ATTORNEY

ADJOURNMENT

The Town may take action on any matter during this meeting, including items that are not set forth within this agenda.

TOWN COUNCIL MEETINGS

The Town Council meets the first and third Thursday of each month beginning at 7:00 p.m., unless otherwise scheduled. Meetings are held in the Town Hall Council Chambers located at 15859 West County Road 108. Video and audio recordings of the meetings are available in the Town Clerk's Office upon request.

PLANNING & ZONING BOARD MEETINGS

The Planning & Zoning Board meets the first Tuesday of each month beginning at 7:00 p.m., unless otherwise scheduled. Meetings are held in the Town Hall Council Chambers located at 15859 West County Road 108. Video and audio recordings of the meetings are available in the Town Clerk's Office upon request.

MINUTES & TRANSCRIPTS

Minutes of the Town Council meetings can be obtained from the Town Clerk's Office. The Meetings are usually recorded but are not transcribed verbatim for the minutes. Persons requiring a verbatim transcript may make arrangements with the Town Clerk to duplicate the recordings, if available, or arrange to have a court reporter present at the meeting. The cost of duplication and/or court reporter will be at the expense of the requesting party.

TOWN WEBSITE & YOUTUBE MEETING VIDEO

The Town's Website can be access at www.townofhilliard.com.

Live & recorded videos can be accessed at www.youtube.com search - Town of Hilliard, FL.

ADA NOTICE

In accordance with Section 286.26, Florida Statutes, persons with disabilities needing special accommodations to participate in this meeting should contact the Town Clerk's Office at (904) 845-3555 at least seventy-two hours in advance to request such accommodations.

APPEALS

Pursuant to the requirements of Section 286.0105, Florida Statutes, the following notification is given: If a person decides to appeal any decision made by the Council with respect to any matter considered at such meeting, he or she may need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence upon which the appeal is to be based.

PUBLIC PARTICIPATION

Pursuant to Section 286.0114, Florida Statutes, effective October 1, 2013, the public is invited to speak on any "proposition" before a board, commission, council, or appointed committee takes official action regardless of whether the issue is on the Agenda. Certain exemptions for emergencies, ministerial acts, etc. apply. This public participation does not affect the right of a person to be heard as otherwise provided by law.

EXPARTE COMMUNICATIONS

Oral or written exchanges (sometimes referred to as lobbying or information gathering) between a Council Member and others, including staff, where there is a substantive discussion regarding a quasi-judicial decision by the Town Council. The exchanges must be disclosed by the Town Council so the public may respond to such exchanges before a vote is taken.

2025 HOLIDAYS

TOWN HALL OFFICES CLOSED

1. Martin Luther King, Jr. Day	Monday, January 20, 2025
2. Memorial Day	Monday, May 26, 2025
3. Independence Day	Friday, July 4, 2025
4. Labor Day	Monday, September 1, 2025
5. Veterans Day	Tuesday, November 11, 2025
6. Thanksgiving Day	Thursday, November 27, 2025
7. Friday after Thanksgiving Day	Friday, November 28, 2025
8. Christmas Eve	Wednesday, December 24, 2025
9. Christmas Day	Thursday, December 25, 2025
10. New Year's Eve	Wednesday, December 31, 2025
11. New Year's Day	Thursday, January 1, 2026



AGENDA ITEM REPORT

TOWN OF HILLIARD, FLORIDA

TO: Town Council Regular Meeting Meeting Date: March 6, 2025

FROM: ***John P. Beasley – Mayor***

SUBJECT: Town Council approval of the Kynex, Inc. contract with both the Town of Hilliard and the Town of Callahan splitting the cost, to be held at the Northeast Florida Fairgrounds on July 4, 2025, and a Council Member to be appointed as liaison.

BACKGROUND:

For the past few years, Hilliard has partnered with the Town of Callahan to have a joint firework display at the Northeast Fairgrounds. The contract for fireworks is an annual budget item and half of the cost of the display needs to be approved by the Hilliard Town Council.

Mayor Beasley has been the liaison with the Town of Callahan in years past but will not be able to take the lead for the Town this year.

FINANCIAL IMPACT:

Show Total Amount - \$45,000

Distribution of Cost – Town of Hilliard and Town of Callahan split half of the total show cost paying \$22,500 each.

A deposit will need to be paid in advance totaling \$11,250.

RECOMMENDATION:

Town Council approval of the Kynex, Inc. contract with both the Town of Hilliard and the Town of Callahan splitting the cost, to be held at the Northeast Florida Fairgrounds on July 4, 2025, and a Council Member to be appointed as liaison.



CONTRACT FOR FIREWORKS DISPLAY

Sponsors	: Town of Hilliard
Contact	: John Beasley
Date of Display	: July 4th, 2025
Location	: Northeast Florida Fairgrounds
Time	: 9:15pm
Duration	: 25 Minutes
Show Price	: \$22,500
Deposit	: \$11,250
Remarks	:
Rain Date	: July 5th, 2025

We the undersigned, being interested in a fireworks display for the Town of Hilliard agree to pay a price of \$22,500 for the display agreed upon, which will be furnished by KYNEX, Inc.

The undersigned, intending to be legally bound, agree as follows:

1. Sponsor to make a deposit payment of 50% of the contact price upon signing of contract, but no later than 30 days prior to display.
2. In the event Sponsor shall fail to pay any sum when due under the terms of this contract, Sponsor shall pay, in addition to such amount, interest rate of 1½% per month on the unpaid amount from the original due date. Sponsor does further agree that it shall pay KYNEX's reasonable attorney's fees and court costs in the event KYNEX shall commence suit or incur fees to compel Sponsor to pay any sums due hereunder or otherwise as a result of Sponsor's default of any of the terms and provisions herein contained.
3. SPONSOR'S AGENT: John Beasley be designated as Sponsor's agent to whom all questions and inquiries shall relay all questions and inquiries. Sponsor's agent shall be the only agent of sponsor authorized to request rescheduling of the delivery and exhibition of the fireworks on the part of the sponsor.
4. If event is on land, sponsor to furnishing police and/or crowd security personnel, provide proper parking supervision, and insure adequate patrol of the safety zone as marked and secured by the sponsor until KYNEX Inc. advises that it is no longer necessary.
5. If event is over water, KYNEX Inc. will be responsible for marine permit, and for control of safety zone.
6. KYNEX Inc. reserves the right to stop the display in the event persons, vehicles, or animals enter the secured safety zone and security is unable or unwilling to remove them and enforce the safety regulations.

7. KYNEX Inc. will furnish all applicable licenses, permits and \$3,000,000 liability insurance and pyrotechnicians for your electronically fired display.
8. **NOTE:** In accordance with local regulations and ordinances, fireworks displays shall not take place later than 10:30pm unless approval is obtained from the governing authority. The restrictions shall not be applicable with regards to holidays such as December 31, January 1, or other national holidays. If for some reason, shoot time does not occur before the allotted time and shoot is canceled due to local authority or expiration of permit, Sponsor is liable for full payment of display.
9. Hold harmless KYNEX Inc. from any claims that do not directly relate to damages produced by its staff, equipment, or pyrotechnic material.
10. CREDITS: As a material inducement to KYNEX agreeing to enter into this agreement, Sponsors shall give KYNEX program credit as sole fireworks supplier and producer in all press releases, advertising, and any other program announcements, printed or otherwise.
11. If show is canceled, sponsor is responsible for any permit, fire watch, or barge/tug fees, if applicable. Additionally, Sponsor will be responsible for load in/ load out expenses not to exceed 50% of the budget. If show is stopped while in progress for any reason, Sponsor will still be responsible for contract amount minus the cost of material not discharged.
12. If winds exceed 20 miles per hour, fireworks display will be postponed to an agreed date between Sponsor and KYNEX Inc.
13. Rain date policy is as follows: postponement time is **11:30am** day of display.
14. If the delivery and/or exhibition of the fireworks are postponed by reason of inclement weather, it shall be re-scheduled to the Inclement Weather Date set forth by Sponsor.
15. **IMPORTANT NOTE:** Items listed in this proposal assume a firing area that conforms to NFPA Code 1123-2014, which states that there must be at least 70 feet per inch of shell diameter between firing site and any spectators, cars, or buildings. This program requires a safety zone that has a radius of **560** feet because of the inclusion of **8 inch** shells. Adjustments will be made to the content of this program if necessary to conform to NFPA 1123-2014.

***KYNEX Inc., upon acceptance of this contract in writing, agrees to fulfill the contract in a workmanlike and professional manner.*

Date

Sponsor





HILLIARD & CALLAHAN

INTRO

KYNEX inc is a pyrotechnic art and entertainment company whose purpose is to bring world-class fireworks displays and pyrotechnics to North Florida and South Georgia. Built by pyrotechnicians with decades of experience, we specialize in fireworks displays including Independence Day and New Year's Eve celebrations, weddings, corporate events, and special occasions of every kind. We can also provide water-based and choreographed displays. We can build a custom display that meets your vision, budget, and venue.



HILLIARD & CALLAHAN

TEAM

James Kyne

President and Head Pyrotechnician

James Kyne, brings over 20 years of pyrotechnic experience to KYNEX inc. He served 4 years in the U.S. Marine Corps where he served as a demolition and explosives expert. James is also an artist in many of the other arts and brings his artistic eye to fireworks as the creative mind behind the show design.

Marty Brown

Director of Sales and Logistics

A U.S. Army veteran, Marty brings decades of sales and pyrotechnics experience to the company.

Leonard Mowry

Pyrotechnician

A retired firefighter, Leonard Mowry has over 30 years of experience in the pyrotechnic industry including roles as a fire inspector and trainer. He is also the former President of Mowry Explosives, Inc. and has directed numerous fireworks displays and pyrotechnic effects for movies. In addition, Leonard is our safety and training instructor.



HILLIARD & CALLAHAN

PHILOSOPHY

Pyrotechnics are an art form, and fireworks are much more than just pretty explosions in the sky. We view fireworks as our paint and the night sky as our canvas. Our trained pyrotechnicians share in this vision and know how to utilize this artistic medium to achieve desired pyrotechnic effects to engage and impress any audience.

We also value our small company size and remain focused not on growing as large as we can but on delivering the best quality fireworks and shows to the North Florida and Southern Georgia region. This makes each and every show from the largest to the smallest extremely important, and keeps our talent level very high. Each of our technicians are experts in the field of pyrotechnics and are personally trained by company owner James Kyne and training instructor Leonard Mowry.



HILLIARD & CALLAHAN

OUR SHOWS

Our show begins with an opening of medium to large shells, multiple cakes, and loud reports to bring the attention to the audience that the show has begun. The opening barrage gracefully transitions into the main body which is the majority of the show.

Our main body has medium to large shells, with emphasis on symmetry and being able to let each firework display itself and its beauty. We use varying sizes and types of color shells to layer both horizontally and vertically to paint the picture with fire in the sky.

Finally our show will end with a very intense finale of small to medium shells, cakes, and reports. Depending on the option chosen we will utilize three to five firing positions on the finale, all with identical shells for symmetry and to spread the effects across a wider part of the sky. Our finales use half of the total shows display shells and lasts a fraction of the entire show duration. This produces some of the best finales in the industry and the lasting impression that the audience will never forget. The finale will fill the night sky with color shells and reports with an intense pace without being repetitive and keeping the audience on the edge of their seat.

Our display price includes everything needed for a show, a trained technician to provide the display, liability insurance with the sponsor and city as named insureds and certificate holders, workman's compensation insurance, professional delivery of pyrotechnics, and all permitting needed. Each of our shows are electronically fired with the latest state of the art firing systems.

HILLIARD & CALLAHAN



JULY 4th, 2025 INDEPENDENCE DAY FIREWORKS DISPLAY

Towns of Hilliard & Callahan

25 Minutes

\$45,000



MINIMUM SHELL COUNT

Opening

3" | 30

4" | 36

5" | 24

6" | 9

Main Body

3" | 30

4" | 252

5" | 180

6" | 18

Finale

3" | 720

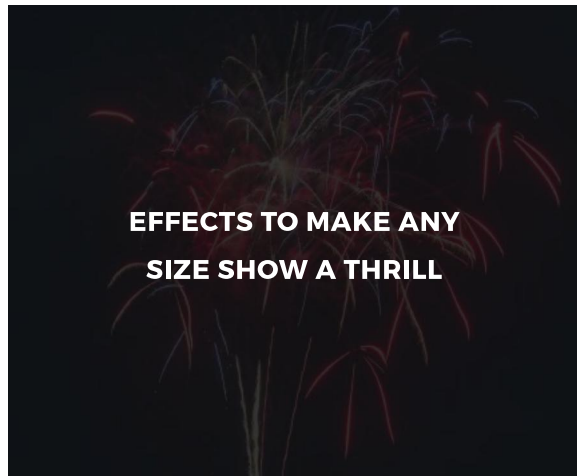
4" | 72

5" | 60

6" | 9

Total Display Shells | 1440

EFFECTS

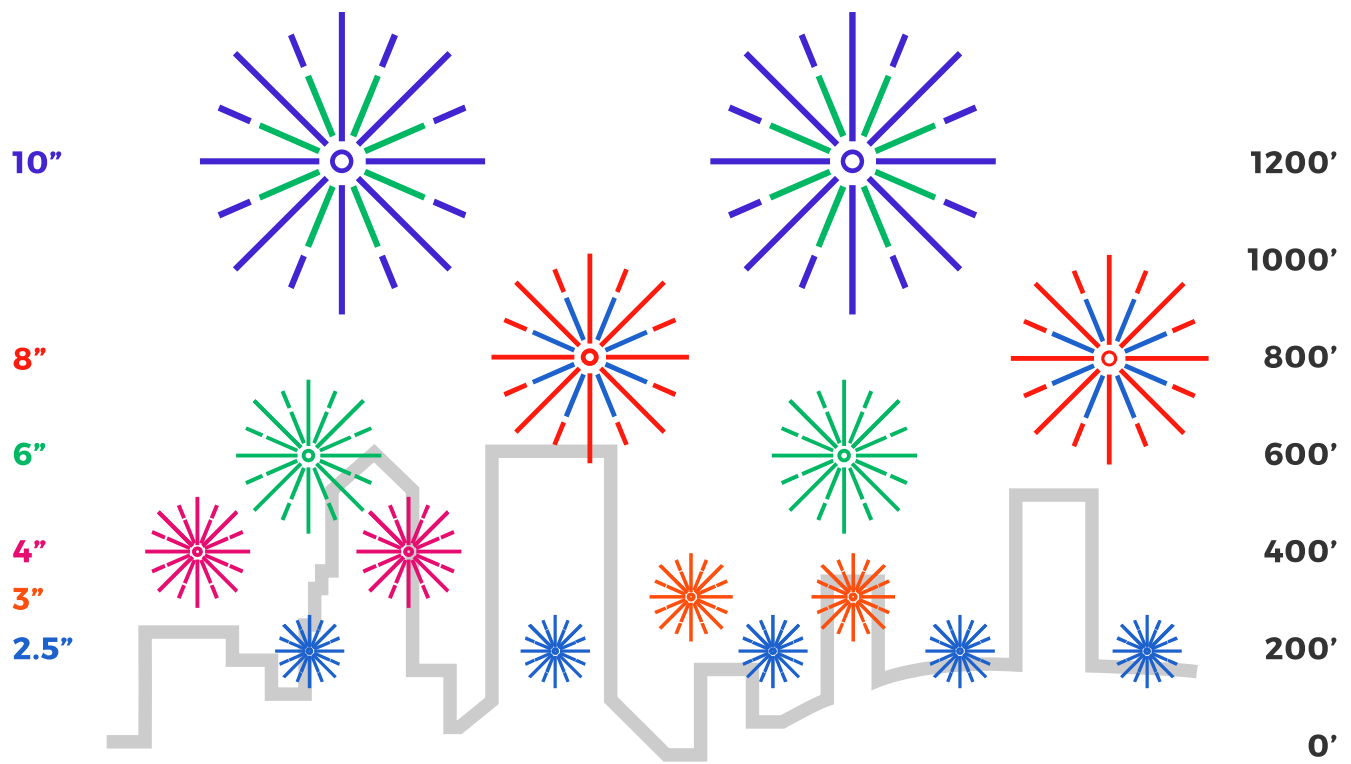


**EFFECTS TO MAKE ANY
SIZE SHOW A THRILL**



Peony	The base of all fireworks, a spherical break of colored stars, or points of light. Can have multiple pedal layers on larger shells.
Chrysanthemum	A spherical break of stars with a small trail of color behind them, can also have a smaller inner pedal break called a pistil.
Brocade	A chrysanthemum with a thick glittering tail.
Dahlia	A spherical break of fewer but larger colored stars.
Palm	Large tailed stars, with a rising effect trunk, can also have reports making it a coconut tree.
Crossette	A peony shell that the stars break and cross each other.
Salute	Loud report that can also have a titanium flash
Willow	A chrysanthemum like shell that have tailed stars that glow until almost reaching the ground.
Horse Tail	Similar to a willow that has a weaker break to make the stars form a long horse tail shape, also called a waterfall.
Pattern Shells	Shells that break into shapes, smiley faces, hearts, saturn, rings, and others.
Cakes	A box of preloaded shells fused together to be shot in rapid succession.
Aquatic Cakes	Cakes that first fire shells into a body of water and then the main effect erupts out of the water, or glows on the surface.
Single Shot Proximate Audience	A tube with a single effect loaded into it to be used for choreography, similar to a sinngle tube in a cake or a candle with one effect.

SHELL HEIGHT DIAGRAM





AGENDA ITEM REPORT

TOWN OF HILLIARD, FLORIDA

TO: Town Council Regular Meeting Meeting Date: March 6, 2025

FROM: ***Alicia Head – Public Information Officer & Event Coordinator***

SUBJECT: Town Council approval of the Wall Event Expenditure for the General Liability insurance of the Vietnam's Voices – Traveling Memorial Wall, with The Evanston Insurance Company in the amount of \$3,385.00.

BACKGROUND:

This insurance is necessary according to the Rental Agreement with the Northeast Florida Fair Association.

FINANCIAL IMPACT:

\$3,385.00 – Premium with TRIA

\$3,235.00 – Premium without TRIA

RECOMMENDATION:

Town Council approval of the Wall Event Expenditure for the General Liability insurance of the Vietnam's Voices – Traveling Memorial Wall, with The Evanston Insurance Company in the amount of \$3,385.00.

Insured: Town of Hilliard

Insurer: Evanston Insurance Company

Coverage: Commercial General Liability
Vietnam's Voices Traveling Memorial Wall
GL for Rental Agreement
543378 US-1, Callahan FL 32011

Limit of General Liability: \$1,000,000 Each Occurrence
\$2,000,000 General Aggregate
Included Products/Completed Operations Aggregate
\$1,000,000 Personal and Advertising Injury
\$100,000 Fire Damage (any one fire)
\$5,000 Medical Payments (any one person)

Policy Term: 4/17/2025 – 4/22/2025
Inception and expiration dates at 12:01 AM Standard Time at the address of the Named Insured as stated herein

Conditions: Exclusions: Nuclear Energy Liability; New Entities; Employment-Related Practices; Total Pollution; Terrorism; Continuous or Progressive Injury or Damage; Animals and Pests; Assault or Battery; Aircraft, Auto or Watercraft; Employer's Liability and Bodily Injury to Contractors, Subcontractors, or Independent Contractors; Communicable Disease; Cyber Incident, Data Compromise, and Violation of Statutes Related to Personal Data; Liquor Liability; All-Terrain Vehicles, Snowmobiles and Other Off-Road Vehicles; Use and Sale of Firearms; Abuse or Molestation; Fireworks, Pyrotechnics or Flashboxes; Entertainers, Participants and Equipment; Aircraft and Hot Air Balloon Rides, Demonstrations and Shows; Unscheduled Amusement Devices and Rides; Marijuana; Hallucinogen

Deductible: \$0

Additional Insured(s): Vietnam and All Veterans of Brevard, Inc.
Northeast Florida Fair Association
Nassau County School Board
Nassau County Board of County Commissioners

Subject to no losses
Subject to General Liability for Rental Agreement
Subject to no food or drinks for sale
Subject to no fee to visit the memorial
100% Fully Earned Premium
100% Minimum & Deposit
No Flat Cancellation
OCCURRENCE FORMAT
This Quote Expires: **3/19/2025**
Required to bind coverage:
Completed, signed and dated applications
Completed, signed and dated terrorism form
Other terms, conditions and exclusions as described in policy

Premium:	\$3,035.00	Premium
	\$ 150.00	Terrorism (TRIA)
	\$ 200.00	Policy Fee
	\$3,385.00	Total Premium with TRIA
	\$3,235.00	Total Premium without TRIA

Payment Terms: Will invoice – Due within 10 days of invoice date
(If full premium payment is not received by the due date indicated on the invoice, the policy is subject to cancellation for non-payment of premium by the insurer.)

The Evanston Insurance Company is an approved, non-licensed insurer in the State of Florida. It is not subject to the Guaranty Fund. The A.M. Best rating is A XV.



FLORIDA COMMERCIAL INSURANCE APPLICATION

APPLICANT INFORMATION SECTION

DATE (MM/DD/YYYY) **ITEM-3**
02/21/2025

AGENCY Florida League of Cities, Inc. PO Box 538135 Orlando FL 32853-8135		CARRIER		NAIC CODE
		COMPANY POLICY OR PROGRAM NAME		PROGRAM CODE
		POLICY NUMBER		
CONTACT NAME: Melissa Solis		UNDERWRITER		UNDERWRITER OFFICE
PHONE (A/C, No, Ext): (800) 445-6248 x1831				
FAX (A/C, No): (407) 425-9378				
E-MAIL ADDRESS: msolis@flcities.com				
CODE:	SUBCODE:	STATUS OF TRANSACTION		<input checked="" type="checkbox"/> QUOTE <input type="checkbox"/> ISSUE POLICY <input type="checkbox"/> RENEW
				BOUND (Give Date and/or Attach Copy):
				CHANGE DATE TIME AM PM
				CANCEL
AGENCY CUSTOMER ID:				

LINES OF BUSINESS

INDICATE LINES OF BUSINESS	PREMIUM		PREMIUM		PREMIUM
<input type="checkbox"/> BOILER & MACHINERY	\$		<input type="checkbox"/> CRIME	\$	
<input type="checkbox"/> BUSINESS AUTO	\$		<input type="checkbox"/> CYBER AND PRIVACY	\$	
<input type="checkbox"/> BUSINESS OWNERS	\$		<input type="checkbox"/> FIDUCIARY LIABILITY	\$	
<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	\$		<input type="checkbox"/> GARAGE AND DEALERS	\$	
<input type="checkbox"/> COMMERCIAL INLAND MARINE	\$		<input type="checkbox"/> LIQUOR LIABILITY	\$	
<input type="checkbox"/> COMMERCIAL PROPERTY	\$		<input type="checkbox"/> MOTOR CARRIER	\$	
<input type="checkbox"/> TRUCKERS	\$		<input type="checkbox"/> UMBRELLA	\$	
<input type="checkbox"/> YACHT	\$			\$	

ATTACHMENTS

<input type="checkbox"/> ACCOUNTS RECEIVABLE / VALUABLE PAPERS	<input type="checkbox"/> ELECTRONIC DATA PROCESSING SECTION	<input type="checkbox"/> PROFESSIONAL LIABILITY SUPPLEMENT
<input type="checkbox"/> ADDITIONAL INTEREST SCHEDULE	<input type="checkbox"/> GLASS AND SIGN SECTION	<input type="checkbox"/> RESTAURANT / TAVERN SUPPLEMENT
<input type="checkbox"/> ADDITIONAL PREMISES INFORMATION SCHEDULE	<input type="checkbox"/> HOTEL / MOTEL SUPPLEMENT	<input type="checkbox"/> STATEMENT / SCHEDULE OF VALUES
<input type="checkbox"/> APARTMENT BUILDING SUPPLEMENT	<input type="checkbox"/> INSTALLATION / BUILDERS RISK SECTION	<input type="checkbox"/> STATE SUPPLEMENT (If applicable)
<input type="checkbox"/> CONDO ASSN BYLAWS (for D&O Coverage only)	<input type="checkbox"/> INTERNATIONAL LIABILITY EXPOSURE SUPPLEMENT	<input type="checkbox"/> VACANT BUILDING SUPPLEMENT
<input type="checkbox"/> CONTRACTORS SUPPLEMENT	<input type="checkbox"/> INTERNATIONAL PROPERTY EXPOSURE SUPPLEMENT	<input type="checkbox"/> VEHICLE SCHEDULE
<input type="checkbox"/> COVERAGES SCHEDULE	<input type="checkbox"/> LOSS SUMMARY	
<input type="checkbox"/> DEALERS SECTION	<input type="checkbox"/> OPEN CARGO SECTION	
<input type="checkbox"/> DRIVER INFORMATION SCHEDULE	<input type="checkbox"/> PREMIUM PAYMENT SUPPLEMENT	

POLICY INFORMATION

PROPOSED EFFECTIVE DATE 04/17/2025	PROPOSED EXPIRATION DATE 04/22/2025	BILLING PLAN <input type="checkbox"/> DIRECT <input checked="" type="checkbox"/> AGENCY	PAYMENT PLAN	METHOD OF PAYMENT	AUDIT	DEPOSIT \$	MINIMUM PREMIUM \$	POLICY PREMIUM \$
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APPLICANT INFORMATION

NAME (First Named Insured) AND MAILING ADDRESS (including ZIP+4) Town of Hilliard PO Box 249 Hilliard FL 32046		GL CODE	SIC	NAICS	FEIN OR SOC SEC #
		BUSINESS PHONE #: 904.845.3555			
		WEBSITE ADDRESS https://www.townofhilliard.com/			
<input type="checkbox"/> CORPORATION	<input type="checkbox"/> JOINT VENTURE	<input type="checkbox"/> NOT FOR PROFIT ORG	<input type="checkbox"/> SUBCHAPTER "S" CORPORATION	<input checked="" type="checkbox"/> Governmental municipality	
<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> LLC NO. OF MEMBERS AND MANAGERS: _____	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> TRUST		
NAME (Other Named Insured) AND MAILING ADDRESS (including ZIP+4)		GL CODE	SIC	NAICS	FEIN OR SOC SEC #
		BUSINESS PHONE #:			
		WEBSITE ADDRESS			
<input type="checkbox"/> CORPORATION	<input type="checkbox"/> JOINT VENTURE	<input type="checkbox"/> NOT FOR PROFIT ORG	<input type="checkbox"/> SUBCHAPTER "S" CORPORATION		
<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> LLC NO. OF MEMBERS AND MANAGERS: _____	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> TRUST		
NAME (Other Named Insured) AND MAILING ADDRESS (including ZIP+4)		GL CODE	SIC	NAICS	FEIN OR SOC SEC #
		BUSINESS PHONE #:			
		WEBSITE ADDRESS			
<input type="checkbox"/> CORPORATION	<input type="checkbox"/> JOINT VENTURE	<input type="checkbox"/> NOT FOR PROFIT ORG	<input type="checkbox"/> SUBCHAPTER "S" CORPORATION		
<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> LLC NO. OF MEMBERS AND MANAGERS: _____	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> TRUST		
DEFINITIONS: GL CODE: General Liability Code SIC: Standard Industrial Classification NAICS: North American Industry Classification System SOC SEC #: Social Security Number FEIN: Federal Employer Identification Number LLC: Limited Liability Corporation					

CONTACT INFORMATION

AGENCY CUSTOMER ID: _____

ITEM-3

CONTACT TYPE: Town Clerk		CONTACT TYPE:	
CONTACT NAME: Lisa Purvis		CONTACT NAME:	
PRIMARY PHONE # <input type="checkbox"/> HOME <input checked="" type="checkbox"/> BUS <input type="checkbox"/> CELL	SECONDARY PHONE # <input type="checkbox"/> HOME <input type="checkbox"/> BUS <input type="checkbox"/> CELL	PRIMARY PHONE # <input type="checkbox"/> HOME <input type="checkbox"/> BUS <input type="checkbox"/> CELL	SECONDARY PHONE # <input type="checkbox"/> HOME <input type="checkbox"/> BUS <input type="checkbox"/> CELL
904.845.3555			
PRIMARY E-MAIL ADDRESS: lpurvis@townofhilliard.com		PRIMARY E-MAIL ADDRESS:	
SECONDARY E-MAIL ADDRESS:		SECONDARY E-MAIL ADDRESS:	

PREMISES INFORMATION (Attach ACORD 823 for Additional Premises, if applicable)

LOC #	STREET	Northeast Florida Fairgrounds		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
		543378 US-1		INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	Callahan	STATE: FL	OUTSIDE	<input checked="" type="checkbox"/> TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	Nassau	ZIP: 32011				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:							ANY AREA LEASED TO OTHERS? Y / N
LOC #	STREET			CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
				INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:		STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:		ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:							ANY AREA LEASED TO OTHERS? Y / N
LOC #	STREET			CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
				INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:		STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:		ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:							ANY AREA LEASED TO OTHERS? Y / N
LOC #	STREET			CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
				INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:		STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:		ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:							ANY AREA LEASED TO OTHERS? Y / N
DEFINITIONS: LOC #: Location Number # FULL TIME EMPL: Number Full Time Employees SQ FT: Square Feet							
BLD #: Building Number # PART TIME EMPL: Number Part Time Employees							

NATURE OF BUSINESS

<input type="checkbox"/> APARTMENTS	<input type="checkbox"/> CONTRACTOR	<input type="checkbox"/> MANUFACTURING	<input type="checkbox"/> RESTAURANT	<input type="checkbox"/> SERVICE	<input type="checkbox"/>	DATE BUSINESS STARTED (MM/DD/YYYY)
<input type="checkbox"/> CONDOMINIUMS	<input type="checkbox"/> INSTITUTIONAL	<input type="checkbox"/> OFFICE	<input type="checkbox"/> RETAIL	<input type="checkbox"/> WHOLESALE	<input type="checkbox"/>	

DESCRIPTION OF PRIMARY OPERATIONS

AGREEMENT: The Town of Hilliard Florida will host the Vietnam's Voices – Traveling Memorial Wall, from April 17 thru April 21, 2025, at the Northeast Florida Fairgrounds. The Town of Hilliard Florida is responsible for any damages to the facility, EMS, security, crowd control, traffic control, restroom janitorial duties and supplies, and any other requirements or duties associated with his event. The fairgrounds facilities must be left in the condition as found including disposal of any waste or garbage generated by the event. No Alcohol, Drugs, Profanity, Racing, or Reckless Behavior is allowed on the premises.

RETAIL STORES OR SERVICE OPERATIONS % OF TOTAL SALES:	INSTALLATION, SERVICE OR REPAIR WORK %	OFF PREMISES INSTALLATION, SERVICE OR REPAIR WORK %
---	--	---

DESCRIPTION OF OPERATIONS OF OTHER NAMED INSURED

ADDITIONAL INTEREST (Provide only the necessary data) Attach ACORD 45 for more Additional Interests, if applicable

INTEREST	NAME AND ADDRESS RANK:	EVIDENCE: <input checked="" type="checkbox"/> CERTIFICATE <input type="checkbox"/> POLICY <input type="checkbox"/>	SEND BILL	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED	Vietnam and All Veterans of Brevard, Inc. 3682 N Wickam Road B-1 209 Melbourne FL 32935			LOCATION:	BUILDING:
<input type="checkbox"/> BREACH OF WARRANTY				VEHICLE:	BOAT:
<input type="checkbox"/> CO-OWNER				AIRPORT:	AIRCRAFT:
<input type="checkbox"/> EMPLOYEE AS LESSOR				ITEM CLASS:	ITEM:
<input type="checkbox"/> LEASEBACK OWNER	REFERENCE / LOAN #:	INTEREST END DATE:		ITEM DESCRIPTION	
<input type="checkbox"/> LENDER'S LOSS PAYABLE	LIEN AMOUNT:	PHONE (A/C, No, Ext):		FAX (A/C, No):	
REASON FOR INTEREST:	E-MAIL ADDRESS:				



AGENCY CUSTOMER ID: _____

ITEM-3

DATE (MM/DD/YYYY)

02/27/2025

ADDITIONAL INTEREST SCHEDULE

AGENCY Florida League of Cities, Inc.		CARRIER		NAIC CODE
POLICY NUMBER	EFFECTIVE DATE 04/17/2025	NAMED INSURED(S) Town of Hilliard		

ADDITIONAL INTEREST (Not all fields apply to all scenarios - provide only the necessary data)

INTEREST <input checked="" type="checkbox"/> ADDITIONAL INSURED <input type="checkbox"/> BREACH OF WARRANTY <input type="checkbox"/> CO-OWNER <input type="checkbox"/> EMPLOYEE AS LESSOR <input type="checkbox"/> LEASEBACK OWNER <input type="checkbox"/> LENDER'S LOSS PAYABLE <input type="checkbox"/> LIENHOLDER		NAME AND ADDRESS RANK: Northeast Florida Fair Association 543378 US-1 Callahan FL 32011		EVIDENCE: <input checked="" type="checkbox"/> CERTIFICATE <input type="checkbox"/> POLICY <input type="checkbox"/> SEND BILL <input type="checkbox"/>	INTEREST IN ITEM NUMBER LOCATION: BUILDING: VEHICLE: BOAT: AIRPORT: AIRCRAFT: SCHED #: ITEM: ITEM CLASS: ITEM DESCRIPTION	
REASON FOR INTEREST:				E-MAIL ADDRESS:		
INTEREST <input checked="" type="checkbox"/> ADDITIONAL INSURED <input type="checkbox"/> BREACH OF WARRANTY <input type="checkbox"/> CO-OWNER <input type="checkbox"/> EMPLOYEE AS LESSOR <input type="checkbox"/> LEASEBACK OWNER <input type="checkbox"/> LENDER'S LOSS PAYABLE <input type="checkbox"/> LIENHOLDER		NAME AND ADDRESS RANK: Nassau County School Board 1201 Atlantic Avenue Fernandina Beach FL 32034		EVIDENCE: <input type="checkbox"/> CERTIFICATE <input type="checkbox"/> POLICY <input type="checkbox"/> SEND BILL <input type="checkbox"/>	INTEREST IN ITEM NUMBER LOCATION: BUILDING: VEHICLE: BOAT: AIRPORT: AIRCRAFT: SCHED #: ITEM: ITEM CLASS: ITEM DESCRIPTION	
REASON FOR INTEREST:				E-MAIL ADDRESS:		
INTEREST <input checked="" type="checkbox"/> ADDITIONAL INSURED <input type="checkbox"/> BREACH OF WARRANTY <input type="checkbox"/> CO-OWNER <input type="checkbox"/> EMPLOYEE AS LESSOR <input type="checkbox"/> LEASEBACK OWNER <input type="checkbox"/> LENDER'S LOSS PAYABLE <input type="checkbox"/> LIENHOLDER		NAME AND ADDRESS RANK: Nassau County Board of County Commissioners 96135 Nassau Place Suite 5 Yulee FL 32097		EVIDENCE: <input type="checkbox"/> CERTIFICATE <input type="checkbox"/> POLICY <input type="checkbox"/> SEND BILL <input type="checkbox"/>	INTEREST IN ITEM NUMBER LOCATION: BUILDING: VEHICLE: BOAT: AIRPORT: AIRCRAFT: SCHED #: ITEM: ITEM CLASS: ITEM DESCRIPTION	
REASON FOR INTEREST:				E-MAIL ADDRESS:		
INTEREST <input type="checkbox"/> ADDITIONAL INSURED <input type="checkbox"/> BREACH OF WARRANTY <input type="checkbox"/> CO-OWNER <input type="checkbox"/> EMPLOYEE AS LESSOR <input type="checkbox"/> LEASEBACK OWNER <input type="checkbox"/> LENDER'S LOSS PAYABLE <input type="checkbox"/> LIENHOLDER		NAME AND ADDRESS RANK:		EVIDENCE: <input type="checkbox"/> CERTIFICATE <input type="checkbox"/> POLICY <input type="checkbox"/> SEND BILL <input type="checkbox"/>	INTEREST IN ITEM NUMBER LOCATION: BUILDING: VEHICLE: BOAT: AIRPORT: AIRCRAFT: SCHED #: ITEM: ITEM CLASS: ITEM DESCRIPTION	
REASON FOR INTEREST:				E-MAIL ADDRESS:		
INTEREST <input type="checkbox"/> ADDITIONAL INSURED <input type="checkbox"/> BREACH OF WARRANTY <input type="checkbox"/> CO-OWNER <input type="checkbox"/> EMPLOYEE AS LESSOR <input type="checkbox"/> LEASEBACK OWNER <input type="checkbox"/> LENDER'S LOSS PAYABLE <input type="checkbox"/> LIENHOLDER		NAME AND ADDRESS RANK:		EVIDENCE: <input type="checkbox"/> CERTIFICATE <input type="checkbox"/> POLICY <input type="checkbox"/> SEND BILL <input type="checkbox"/>	INTEREST IN ITEM NUMBER LOCATION: BUILDING: VEHICLE: BOAT: AIRPORT: AIRCRAFT: SCHED #: ITEM: ITEM CLASS: ITEM DESCRIPTION	
REASON FOR INTEREST:				E-MAIL ADDRESS:		

GENERAL INFORMATION

AGENCY CUSTOMER ID: _____

ITEM-3

EXPLAIN ALL "YES" RESPONSES

1a. IS THE APPLICANT A SUBSIDIARY OF ANOTHER ENTITY ?

N

PARENT COMPANY NAME

RELATIONSHIP DESCRIPTION

% OWNED

1b. DOES THE APPLICANT HAVE ANY SUBSIDIARIES?

N

SUBSIDIARY COMPANY NAME

RELATIONSHIP DESCRIPTION

% OWNED

2. IS A FORMAL SAFETY PROGRAM IN OPERATION?

Y

☐ SAFETY MANUAL☐ SAFETY POSITION☐ MONTHLY MEETINGS☐ OSHA☐

3. ANY EXPOSURE TO FLAMMABLES, EXPLOSIVES, CHEMICALS?

N

4. ANY OTHER INSURANCE WITH THIS COMPANY? (List policy numbers)

N

LINE OF BUSINESS

POLICY NUMBER

LINE OF BUSINESS

POLICY NUMBER

5. ANY POLICY OR COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE PRIOR THREE (3) YEARS FOR ANY PREMISES OR OPERATIONS? (Missouri Applicants - Do not answer this question)

N

☐ NON-PAYMENT☐ AGENT NO LONGER REPRESENTS CARRIER☐☐ NON-RENEWAL☐ UNDERWRITING☐ CONDITION CORRECTED (Describe):

6. ANY PAST LOSSES OR CLAIMS RELATING TO SEXUAL ABUSE OR MOLESTATION ALLEGATIONS, DISCRIMINATION OR NEGLIGENT HIRING?

N

7. DURING THE LAST FIVE YEARS (TEN IN RI), HAS ANY APPLICANT BEEN INDICTED FOR OR CONVICTED OF ANY DEGREE OF THE CRIME OF FRAUD, BRIBERY, ARSON OR ANY OTHER ARSON-RELATED CRIME IN CONNECTION WITH THIS OR ANY OTHER PROPERTY?
(In RI, this question must be answered by any applicant for property insurance. Failure to disclose the existence of an arson conviction is a misdemeanor punishable by a sentence of up to one year of imprisonment).

N

8. ANY UNCORRECTED FIRE AND/OR SAFETY CODE VIOLATIONS?

N

OCCUR DATE

EXPLANATION

RESOLUTION

RESOLVE DATE

9. HAS APPLICANT HAD A FORECLOSURE, REPOSSESSION, BANKRUPTCY OR FILED FOR BANKRUPTCY DURING THE LAST FIVE (5) YEARS?

N

OCCUR DATE

EXPLANATION

RESOLUTION

RESOLVE DATE

10. HAS APPLICANT HAD A JUDGEMENT OR LIEN DURING THE LAST FIVE (5) YEARS?

N

OCCUR DATE

EXPLANATION

RESOLUTION

RESOLVE DATE

11. HAS BUSINESS BEEN PLACED IN A TRUST? NAME OF TRUST:

N

12. ANY FOREIGN OPERATIONS, FOREIGN PRODUCTS DISTRIBUTED IN USA, OR US PRODUCTS SOLD / DISTRIBUTED IN FOREIGN COUNTRIES?
(If "YES", attach ACORD 815 for Liability Exposure and/or ACORD 816 for Property Exposure)

N

13. DOES APPLICANT HAVE OTHER BUSINESS VENTURES FOR WHICH COVERAGE IS NOT REQUESTED?

N

14. DOES APPLICANT OWN / LEASE / OPERATE ANY DRONES? (If "YES", describe use)

N

15. DOES APPLICANT HIRE OTHERS TO OPERATE DRONES? (If "YES", describe use)

N

REMARKS / PROCESSING INSTRUCTIONS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

PRIOR CARRIER INFORMATION

AGENCY CUSTOMER ID: _____

ITEM-3

YEAR	CATEGORY	GENERAL LIABILITY	AUTOMOBILE	PROPERTY	OTHER:
	CARRIER	New			
	POLICY NUMBER				
	PREMIUM	\$	\$	\$	\$
	EFFECTIVE DATE				
	EXPIRATION DATE				
	CARRIER				
	POLICY NUMBER				
	PREMIUM	\$	\$	\$	\$
	EFFECTIVE DATE				
	EXPIRATION DATE				
	CARRIER				
	POLICY NUMBER				
	PREMIUM	\$	\$	\$	\$
	EFFECTIVE DATE				
	EXPIRATION DATE				
	CARRIER				
	POLICY NUMBER				
	PREMIUM	\$	\$	\$	\$
	EFFECTIVE DATE				
	EXPIRATION DATE				

LOSS HISTORY



Check if none (Attach Loss Summary for Additional Loss Information)

ENTER ALL CLAIMS OR LOSSES (REGARDLESS OF FAULT AND WHETHER OR NOT INSURED) OR OCCURRENCES THAT MAY GIVE RISE TO CLAIMS FOR THE LAST _____ YEARS

TOTAL LOSSES: \$

DATE OF OCCURRENCE	LINE	TYPE / DESCRIPTION OF OCCURRENCE OR CLAIM	DATE OF CLAIM	AMOUNT PAID	AMOUNT RESERVED	SUBRO-GATION Y / N	CLAIM OPEN Y / N

REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required, if applicable)

SIGNATURE

PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT OR OTHER INVESTIGATIVE REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU IN CONNECTION WITH THIS APPLICATION FOR INSURANCE AND SUBSEQUENT AMENDMENTS AND RENEWALS. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION. CREDIT SCORING INFORMATION MAY BE USED TO HELP DETERMINE EITHER YOUR ELIGIBILITY FOR INSURANCE OR THE PREMIUM YOU WILL BE CHARGED. WE MAY USE A THIRD PARTY IN CONNECTION WITH THE DEVELOPMENT OF YOUR SCORE. YOU MAY HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND REQUEST CORRECTION OF ANY INACCURACIES. YOU MAY ALSO HAVE THE RIGHT TO REQUEST IN WRITING THAT WE CONSIDER EXTRAORDINARY LIFE CIRCUMSTANCES IN CONNECTION WITH THE DEVELOPMENT OF YOUR CREDIT SCORE. THESE RIGHTS MAY BE LIMITED IN SOME STATES. PLEASE CONTACT YOUR AGENT OR BROKER TO LEARN HOW THESE RIGHTS MAY APPLY IN YOUR STATE OR FOR INSTRUCTIONS ON HOW TO SUBMIT A REQUEST TO US FOR A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING PERSONAL INFORMATION.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE ENQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print) Christopher Krepcho	STATE PRODUCER LICENSE NO (Required in Florida) W237716
APPLICANT'S SIGNATURE	DATE	NATIONAL PRODUCER NUMBER



AGENCY CUSTOMER ID: _____

ITEM-3

COMMERCIAL GENERAL LIABILITY SECTION

DATE (MM/DD/YYYY)

02/27/2025

AGENCY Florida League of Cities, Inc.		CARRIER	NAIC CODE
POLICY NUMBER	EFFECTIVE DATE 04/17/2025	APPLICANT / FIRST NAMED INSURED Town of Hilliard	

IMPORTANT - If CLAIMS MADE is checked in the COVERAGE / LIMITS section below, this is an application for a claims-made policy.
Read all provisions of the policy carefully.

COVERAGES		LIMITS	
<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GENERAL AGGREGATE \$ 2,000,000	PREMIUMS	
<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE	LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> LOCATION	PREMISES/OPERATIONS	
<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROTECTIVE	<input type="checkbox"/> PROJECT <input type="checkbox"/> OTHER:		
DEDUCTIBLES	PRODUCTS & COMPLETED OPERATIONS AGGREGATE \$ 2,000,000	PRODUCTS	
<input type="checkbox"/> PROPERTY DAMAGE \$	PERSONAL & ADVERTISING INJURY \$ 1,000,000	OTHER	
<input type="checkbox"/> BODILY INJURY \$	EACH OCCURRENCE \$ 1,000,000	TOTAL	
<input type="checkbox"/> PER CLAIM PER OCCURRENCE	DAMAGE TO RENTED PREMISES (each occurrence) \$ 100,000		
	MEDICAL EXPENSE (Any one person) \$ 5,000		
	EMPLOYEE BENEFITS \$ Excluded		
	\$		

OTHER COVERAGES, RESTRICTIONS AND/OR ENDORSEMENTS (For hired/non-owned auto coverages attach the applicable state Business Auto Section, ACORD 137)

APPLICABLE ONLY IN WISCONSIN: IF NON-OWNED ONLY AUTO COVERAGE IS TO BE PROVIDED UNDER THE POLICY:

1. UM / UIM COVERAGE ☐ IS ☐ IS NOT AVAILABLE. 2. MEDICAL PAYMENTS COVERAGE ☐ IS ☐ IS NOT AVAILABLE.**SCHEDULE OF HAZARDS (ACORD 211, Schedule of Hazards, may be attached if more space is required)**

LOC #	HAZ #	CLASS CODE	PREMIUM BASIS	EXPOSURE	TERR	RATE		PREMIUM	
						PREM / OPS	PRODUCTS	PREM / OPS	PRODUCTS
		43424		3,000					
CLASSIFICATION DESCRIPTION									
GL for Rental Agreement - Exhibitions - outside - no stadiums or grandstands									
LOC #	HAZ #	CLASS CODE	PREMIUM BASIS	EXPOSURE	TERR	RATE		PREMIUM	
						PREM / OPS	PRODUCTS	PREM / OPS	PRODUCTS
CLASSIFICATION DESCRIPTION									
LOC #	HAZ #	CLASS CODE	PREMIUM BASIS	EXPOSURE	TERR	RATE		PREMIUM	
						PREM / OPS	PRODUCTS	PREM / OPS	PRODUCTS
CLASSIFICATION DESCRIPTION									
LOC #	HAZ #	CLASS CODE	PREMIUM BASIS	EXPOSURE	TERR	RATE		PREMIUM	
						PREM / OPS	PRODUCTS	PREM / OPS	PRODUCTS
CLASSIFICATION DESCRIPTION									
RATING AND PREMIUM BASIS (P) PAYROLL - PER \$1,000/PAY (C) TOTAL COST - PER \$1,000/COST (U) UNIT - PER UNIT (S) GROSS SALES - PER \$1,000/SALES (A) AREA - PER 1,000/SQ FT (M) ADMISSIONS - PER 1,000/ADM (T) OTHER									

CLAIMS MADE (Explain all "Yes" responses)

EXPLAIN ALL "YES" RESPONSES	Y / N
1. PROPOSED RETROACTIVE DATE:	
2. ENTRY DATE INTO UNINTERRUPTED CLAIMS MADE COVERAGE:	
3. HAS ANY PRODUCT, WORK, ACCIDENT, OR LOCATION BEEN EXCLUDED, UNINSURED OR SELF-INSURED FROM ANY PREVIOUS COVERAGE?	
4. WAS TAIL COVERAGE PURCHASED UNDER ANY PREVIOUS POLICY?	

EMPLOYEE BENEFITS LIABILITY

1. DEDUCTIBLE PER CLAIM: \$	3. NUMBER OF EMPLOYEES COVERED BY EMPLOYEE BENEFITS PLANS:
2. NUMBER OF EMPLOYEES:	4. RETROACTIVE DATE:

ACORD 126 (2016/09)

Attach to ACORD 125 © 1993-2016 ACORD CORPORATION. All rights reserved.

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CONTRACTORS

AGENCY CUSTOMER ID: _____

ITEM-3

EXPLAIN ALL "YES" RESPONSES (For all past or present operations)

1. DOES APPLICANT DRAW PLANS, DESIGNS, OR SPECIFICATIONS FOR OTHERS?

N

2. DO ANY OPERATIONS INCLUDE BLASTING OR UTILIZE OR STORE EXPLOSIVE MATERIAL?

N

3. DO ANY OPERATIONS INCLUDE EXCAVATION, TUNNELING, UNDERGROUND WORK OR EARTH MOVING?

N

4. DO YOUR SUBCONTRACTORS CARRY COVERAGES OR LIMITS LESS THAN YOURS?

N

5. ARE SUBCONTRACTORS ALLOWED TO WORK WITHOUT PROVIDING YOU WITH A CERTIFICATE OF INSURANCE?

N

6. DOES APPLICANT LEASE EQUIPMENT TO OTHERS WITH OR WITHOUT OPERATORS?

N

DESCRIBE THE TYPE OF WORK SUBCONTRACTED

\$ PAID TO SUB-
CONTRACTORS:% OF WORK
SUBCONTRACTED:# FULL-
TIME STAFF:# PART-
TIME STAFF:**PRODUCTS / COMPLETED OPERATIONS**

PRODUCTS	ANNUAL GROSS SALES	# OF UNITS	TIME IN MARKET	EXPECTED LIFE	INTENDED USE	PRINCIPAL COMPONENTS

EXPLAIN ALL "YES" RESPONSES (For all past or present products or operations) PLEASE ATTACH LITERATURE, BROCHURES, LABELS, WARNINGS, ETC.

Y / N

1. DOES APPLICANT INSTALL, SERVICE OR DEMONSTRATE PRODUCTS?

N

2. FOREIGN PRODUCTS SOLD, DISTRIBUTED, USED AS COMPONENTS? (If "YES", attach ACORD 815)

N

3. RESEARCH AND DEVELOPMENT CONDUCTED OR NEW PRODUCTS PLANNED?

N

4. GUARANTEES, WARRANTIES, HOLD HARMLESS AGREEMENTS?

N

5. PRODUCTS RELATED TO AIRCRAFT/SPACE INDUSTRY?

N

6. PRODUCTS RECALLED, DISCONTINUED, CHANGED?

N

7. PRODUCTS OF OTHERS SOLD OR RE-PACKAGED UNDER APPLICANT LABEL?

N

8. PRODUCTS UNDER LABEL OF OTHERS?

N

9. VENDORS COVERAGE REQUIRED?

N

10. DOES ANY NAMED INSURED SELL TO OTHER NAMED INSUREDS?

N

ADDITIONAL INTEREST / CERTIFICATE RECIPIENT

ACORD 45 attached for additional names

INTEREST	NAME AND ADDRESS RANK: _____	EVIDENCE: <input checked="" type="checkbox"/> CERTIFICATE	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED	Vietnam and All Veterans of Brevard, Inc. 3682 N Wickam Road B-1 209 Melbourne FL 32935		LOCATION:	BUILDING:
<input type="checkbox"/> EMPLOYEE AS LESSOR			ITEM CLASS:	ITEM:
<input type="checkbox"/> LENDER'S LOSS PAYABLE			ITEM DESCRIPTION	
<input type="checkbox"/> LIENHOLDER				
<input type="checkbox"/> LOSS PAYEE				
<input type="checkbox"/> MORTGAGEE	REFERENCE / LOAN #:			

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES (For all past or present operations)				Y / N
1. ANY MEDICAL FACILITIES PROVIDED OR MEDICAL PROFESSIONALS EMPLOYED OR CONTRACTED?				N
2. ANY EXPOSURE TO RADIOACTIVE/NUCLEAR MATERIALS?				N
3. DO/HAVE PAST, PRESENT OR DISCONTINUED OPERATIONS INVOLVE(D) STORING, TREATING, DISCHARGING, APPLYING, DISPOSING, OR TRANSPORTING OF HAZARDOUS MATERIAL? (e.g. landfills, wastes, fuel tanks, etc)				N
4. ANY OPERATIONS SOLD, ACQUIRED, OR DISCONTINUED IN LAST FIVE (5) YEARS?				N
5. DO YOU RENT OR LOAN EQUIPMENT TO OTHERS?				N
EQUIPMENT		TYPE OF EQUIPMENT		INSTRUCTION GIVEN (Y/N)
		SMALL TOOLS	LARGE EQUIPMENT	
		SMALL TOOLS	LARGE EQUIPMENT	
6. ANY WATERCRAFT, DOCKS, FLOATS OWNED, HIRED OR LEASED?				N
7. ANY PARKING FACILITIES OWNED/RENTED?				Y
8. IS A FEE CHARGED FOR PARKING?				N
9. RECREATION FACILITIES PROVIDED?				Y
10. ARE THERE ANY LODGING OPERATIONS INCLUDING APARTMENTS? (If "YES", answer the following):				N
# APTS	TOTAL APT AREA Sq. Ft.	DESCRIBE OTHER LODGING OPERATIONS		
11. IS THERE A SWIMMING POOL ON PREMISES? (Check all that apply)				N
<input type="checkbox"/> APPROVED FENCE	<input type="checkbox"/> LIMITED ACCESS	<input type="checkbox"/> DIVING BOARD	<input type="checkbox"/> SLIDE	<input type="checkbox"/> ABOVE GROUND
<input type="checkbox"/> IN GROUND	<input type="checkbox"/> LIFE GUARD			
12. ARE SOCIAL EVENTS SPONSORED?				Y
13. ARE ATHLETIC TEAMS SPONSORED?				N
TYPE OF SPORT	CONTACT SPORT (Y/N)	AGE GROUP	TYPE OF SPORT	CONTACT SPORT (Y/N)
		<input type="checkbox"/> 13 - 18		
		<input type="checkbox"/> 12 & UNDER		
EXTENT OF SPONSORSHIP:		EXTENT OF SPONSORSHIP:		
14. ANY STRUCTURAL ALTERATIONS CONTEMPLATED?				N
15. ANY DEMOLITION EXPOSURE CONTEMPLATED?				N

GENERAL INFORMATION (continued)

AGENCY CUSTOMER ID: _____

ITEM-3

EXPLAIN ALL "YES" RESPONSES (For all past or present operations)

16. HAS APPLICANT BEEN ACTIVE IN OR IS CURRENTLY ACTIVE IN JOINT VENTURES?

N

17. DO YOU LEASE EMPLOYEES TO OR FROM OTHER EMPLOYERS?

N

LEASE TO	WORKERS COMPENSATION COVERAGE CARRIED (Y/N)	LEASE FROM	WORKERS COMPENSATION COVERAGE CARRIED (Y/N)

18. IS THERE A LABOR INTERCHANGE WITH ANY OTHER BUSINESS OR SUBSIDIARIES?

N

19. ARE DAY CARE FACILITIES OPERATED OR CONTROLLED?

N

20. HAVE ANY CRIMES OCCURRED OR BEEN ATTEMPTED ON YOUR PREMISES WITHIN THE LAST THREE (3) YEARS?

N

21. IS THERE A FORMAL, WRITTEN SAFETY AND SECURITY POLICY IN EFFECT?

Y

22. DOES THE BUSINESSES' PROMOTIONAL LITERATURE MAKE ANY REPRESENTATIONS ABOUT THE SAFETY OR SECURITY OF THE PREMISES?

N

REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

SIGNATURE

Applicable in AL, AR, DC, LA, MD, NM, RI and WV: Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CO: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in FL and OK: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)*. *Applies in FL Only.

Applicable in KS: Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

Applicable in KY, NY, OH and PA: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

Applicable in ME, TN, VA and WA: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

Applicable in NJ: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in OR: Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PR: Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print) Christopher Krepcho	STATE PRODUCER LICENSE NO (Required in Florida) W237716
APPLICANT'S SIGNATURE	DATE	NATIONAL PRODUCER NUMBER



Evanston Insurance Company
Markel American Insurance Company
Markel Insurance Company

ITEM-3

SPECIAL EVENT SUPPLEMENT

(Include Acord application)

APPLICANT INFORMATION:

Applicant's Name: Town of Hilliard Location Address: Northeast Florida Fairgrounds
Mailing Address: PO Box 249 543378 US-1
Hilliard FL 32046 Callahan FL 32011

A. Description Of Event (attach any flyers, brochures, etc.):

AGREEMENT: The Town of Hilliard Florida will host the Vietnam's Voices – Traveling Memorial Wall, from April
17 thru April 21, 2025, at the Northeast Florida Fairgrounds.

1. Maximum daily attendance: 3,000 Total attendance: 15,000 Sales: \$ 0
2. Length of event: 5 days Estimated age group of audience: From 0 to 100
3. Number of Participants: Unknown
4. Do participants sign waiver of liability agreements? ☐ Yes ☒ No

B. Applicants Experience in conducting events of this similar nature:

Yes

1. Has this event been held before? ☐ Yes ☒ No
If yes, how many years? _____

C. Rides:

1. Will rides be provided? ☐ Yes ☒ No
If yes, type of rides: _____
2. Do rides have signs clearly marking age, height, and size limitations? ☐ Yes ☐ No

D. Entertainment:

1. Will live entertainment be provided? ☐ Yes ☒ No
If yes, please describe: _____
2. If a concert, type of music: ☐ Classical ☐ Jazz ☐ Rap ☐ Blue Grass ☐ Country/Western
☐ Gospel ☐ Gothic ☐ R & B ☐ Hard Rock ☐ Heavy Metal
☐ Alternative ☐ Hip hop ☐ Other: _____

3. If fireworks are planned, is pyrotechnician licensed and insured? ☐ Yes ☐ No
4. Does applicant obtain a certificate naming him as an additional insured? ☐ Yes ☐ No
5. Distance between fireworks staging area and audience? _____
6. Spectators allowed in fireworks staging area? ☐ Yes ☐ No

E. Security: (indicate type and number of each)

- ☐ Independent security company _____ ☒ Off-duty police as needed ☐ Employed security _____
- ☒ Chaperons 50
1. Is there a written emergency plan in the event of an accident? ☒ Yes ☐ No
2. Does independent security company provide a certificate of insurance? ☐ Yes ☐ No

F. Stadiums:

1. Are bleachers or platforms to be used? ☐ Yes ☒ No
 If yes, type: ☐ Portable ☐ Permanent Back and side railings provided? ☐ Yes ☐ No
 Construction: ☐ Wood ☐ Steel ☐ Concrete Height in feet: _____'
 Age of bleachers or platform: _____
2. Are patrons protected from and warned against potential flying objects? ☐ Yes ☐ No
3. Are patrons allowed on the field, track, or pit area? ☐ Yes ☐ No
4. Is public address system clearly audible in all parts of the facility? ☐ Yes ☐ No
5. Is there a backup electrical supply for lighting and the public address system? ☐ Yes ☐ No

G. Traffic Control:

1. Who is responsible for crowd and traffic control? NCSO - Nassau County Sheriff's Office
2. Are parking areas smooth with clearly marked parking areas and exit roads? ☒ Yes ☐ No
3. Is parade route able to handle size and height of floats and are cross streets barricaded? ☐ Yes ☐ No

H. Liquor:

1. Is liquor to be served by applicant? ☐ Yes ☒ No
 If yes, please explain: _____
2. Does applicant want: ☐ Host liquor ☐ Liquor Liability (available in selected states only)
3. Is liquor to be served by others? ☐ Yes ☒ No
 If yes, please explain: _____

I. First Aid:

1. Will first aid facilities be provided at the event? ☒ Yes ☐ No
 If yes, please describe Medical Reserve Corp
 If yes, who will be in charge of the facilities? ☐ Doctors ☐ Nurses ☒ Others: All Healthcare

2. If applicant is the sponsor, does the operator have liability insurance?

☒ Yes ☐ No

If yes, name of insurance carrier: Florida Municipal Insurance Trust (FMIT)

Policy limits of liability: \$ 1,000,000

J. Hold-harmless Agreements:

1. Is applicant held harmless by others?

☒ Yes ☐ No

2. Does applicant agree to hold any third party harmless?

☐ Yes ☒ No

If yes, who? _____

3. Do independent contractors and vendors provide proof of General Liability coverage, including products?

☒ Yes ☐ No

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature

Producer's Signature

Date



**EVANSTON INSURANCE COMPANY
POLICYHOLDER DISCLOSURE
NOTICE OF TERRORISM INSURANCE COVERAGE**

Date: February 28, 2025

Policyholder/Applicant Name: Town of Hilliard

Policy Number (if applicable):

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, you have a right to purchase insurance coverage for losses resulting from acts of terrorism, *as defined in Section 102(1) of the Act*: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security, and the Attorney General of the United States to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 85% THROUGH 2015; 84% BEGINNING ON JANUARY 1, 2016; 83% BEGINNING ON JANUARY 1, 2017; 82% BEGINNING ON JANUARY 1, 2018; 81% BEGINNING ON JANUARY 1, 2019 AND 80% BEGINNING ON JANUARY 1, 2020 OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

**SELECTION OR REJECTION OF TERRORISM INSURANCE COVERAGE
PLEASE "X" ONE OF THE BOXES BELOW AND TAKE THE ACTION INDICATED.**

<input type="checkbox"/>	I hereby elect to purchase terrorism coverage for a prospective premium of \$ <u>150.00</u>
<input type="checkbox"/>	I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.

Policyholder/Applicant Signature

Print Name

Date

HILLIARD TOWN COUNCIL MEETING

Hilliard Town Hall / Council Chambers
15859 West County Road 108
Post Office Box 249
Hilliard, FL 32046

TOWN COUNCIL MEMBERS

John P. Beasley, Mayor
Kenny Sims, Council President
Lee Pickett, Council Pro Tem
Joe Michaels, Councilman
Jared Wollitz, Councilman
Dallis Hunter, Councilman

ADMINISTRATIVE STAFF

Lisa Purvis, Town Clerk
Cory Hobbs, Interim Public Works Director
Gabe Whittenburg, Parks & Rec Director

TOWN ATTORNEY

Christian Waugh

MINUTES

THURSDAY, FEBRUARY 13, 2025, 6:00 PM

CALL TO ORDER

PRAYER & PLEDGE OF ALLEGIANCE

ROLL CALL

PRESENT

Mayor John Beasley
Council President Kenny Sims
Council Pro Tem Lee Pickett
Councilman Jared Wollitz
Councilman Joe Michaels
Town Clerk Lisa Purvis
Interim Public Works Director Cory Hobbs

ABSENT

Councilman Dallis Hunter
Parks & Recreation Director Gabe Whittenburg
Town Attorney Christian Waugh

WORKSHOP

ITEM-1 Town Council to review and discuss with Hilliard Aviation, Inc. President the extensions of Exclusive Land Use Lease to support capital investments and plans to create a new LLC for Airport Operations.

Lisa Purvis, MMC – Town Clerk

Mike Swain of Hilliard Aviation, Inc. explains the extensions of exclusive land use leases to support capital investments.

The Town Council questions the low rental rates.

Mr. Swain discusses Rick Oreair, a member of Hilliard Aviation, Inc., as he is wanting to install hydraulic doors in his hangar.

The Town Council expresses opposition to any lease extensions but states that any new agreement involving the formation of a new LLC would require review by the Town Attorney.

ITEM-2 Town Council to review and discuss the rules and procedures for quasi-judicial hearings adopted by the Planning & Zoning Board.

Lee Anne Wollitz – Land Use Administrator

The Town Council does not desire to implement any new rules or procedures at this time.

ITEM-3 Town Council to review and discuss the hours of construction limitations within the Town limits.

Lee Anne Wollitz – Land Use Administrator

The Town Council asks the Planning & Zoning Board to review construction hours for ongoing developments. Future developments will be evaluated during the initial workshop. As stated in the Town manual, the current working hours are from dawn to dusk.

ITEM-4 Town Council to review and discuss the St. Mary's River Management Committee Annual Report.

Lee Anne Wollitz – Land Use Administrator

Land Use Administrator Lee Anne Wollitz states that the committee is seeking landowners adjacent to the St. Mary's River within the Hilliard zip code to join the committee and contribute to their annual report.

ITEM-5 Town Council to review and discuss the Sponsorship Agreement with the Nassau County Board of County Commissioners and the Amelia Island Convention & Visitors Bureau for the Vietnam Voices Traveling Memorial Wall.

Alicia Head – Public Information Officer & Event Coordinator

Public Information Officer & Event Coordinator Alicia Head explains and advises that Nassau County will also need to be insured.

ITEM-6 Town Council to review and discuss updates regarding the Vietnam Traveling Memorial Wall for the Vietnam's Voices event.

Alicia Head – Public Information Officer & Event Coordinator

Public Information Officer & Event Coordinator Alicia Head updates the Town Council on the Vietnam Traveling Memorial Wall for the Vietnam's Voices event. Key highlights included:

- Ensuring a check ready for the wall manager on April 17, 2025
- Plans to purchase banners and essential supplies
- Contributions from the VFW Auxiliary
- Numerous volunteer opportunities
- Vietnam Veterans Dinner
- Tentative event itinerary
- Event layout
- Opening Day Ceremony

- ITEM-7 Town Council to review and discuss the updated Parks & Recreation Fees for Resolution 2021-10.

Gabe Whittenburg – Parks & Recreation Director

The item is tabled until the March 13, 2025, workshop.
Sponsorships with designated levels will be included on updated Fees Resolution.

- ITEM-8 Town Council to review and discuss the Rural Counties Day Trip on March 20, 2024, to the Capitol to join the Nassau County Economic Development Board and the Town of Callahan.

Lisa Purvis, MMC – Town Clerk

Public Information Officer & Event Coordinator Alicia Head asks about obtaining items for the table at Rural Counties Day.
Land Use Administrator Lee Anne Wollitz is requested to inquire about using the church's van.
The Town Council discusses the possibility of purchasing a new tent.
Town Clerk Lisa Purvis to reach out to the FAA regarding swag for the table.

- ITEM-9 Town Council to review and discuss the need to increase the hours for the Land Use Administrator.

Lee Anne Wollitz – Land Use Administrator

The Town Council considers increasing the Land Use Administrator's hours from 20 to 30 per week.
The item will be added to either the February 20, 2025 agenda or the March 6, 2025, agenda.
Land Use Administrator Lee Anne Wollitz informs the Town Council that both developments have requested to be removed from the February 20, 2025, agenda.

- ITEM-10 Town Council to review and discuss the Public Works Director position vacancy.

Lisa Purvis, MMC – Town Clerk

Item to be added to the March 13, 2025, agenda to address the current applications, as well as a discussion regarding an additional Public Works Department employee.

ADDITIONAL COMMENTS

Mayor Beasley reminds all of the HAC Meeting on February 24, 2025, at 6:00 p.m.

ADJOURNMENT

Motion to adjourn at 7:20 p.m.

Motion made by Council President Sims, Seconded by Councilman Michaels.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Michaels

Approved this _____ day of _____, _____ by the Hilliard Town Council,
Hilliard, Florida.

Kenneth A. Sims, Sr.
Council President

ATTEST:

Lisa Purvis
Town Clerk

APPROVED:

John P. Beasley
Mayor

HILLIARD TOWN COUNCIL MEETING

Hilliard Town Hall / Council Chambers
15859 West County Road 108
Post Office Box 249
Hilliard, FL 32046

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Joe Michaels, Councilman
Jared Wollitz, Councilman
Dallis Hunter, Councilman

ADMINISTRATIVE STAFF

Lisa Purvis, Town Clerk
Cory Hobbs, Interim Public Works Director
Gabe Whittenburg, Parks & Rec Director

TOWN ATTORNEY

Christian Waugh

MINUTES

THURSDAY, FEBRUARY 20, 2025, 6:00 PM

CALL TO ORDER

PRAYER & PLEDGE OF ALLEGIANCE

ROLL CALL

PRESENT

Council President Kenny Sims
Council Pro Tem Lee Pickett
Councilman Jared Wollitz
Councilman Dallis Hunter
Councilman Joe Michaels
Land Use Administrator Lee Anne Wollitz
Interim Public Works Director Cory Hobbs

ABSENT

Mayor John Beasley
Town Clerk Lisa Purvis
Parks & Recreation Director Gabe Whittenburg
Town Attorney Chrisitan Waugh

WORKSHOP

ITEM-1 Town Council to review and discuss the growth that the Town of Hilliard is currently experiencing with Mr. Jim Hanson, Senior Advisor with Florida City and County Management Association.
Lisa Purvis, MMC – Town Clerk

Jim Hanson, Senior Advisor with the Florida City and County Management Association, presents a PowerPoint to the Town Council on growth management, highlighting the following key points:

- He supports Florida city managers and municipalities in staff regulation.
- Emphasizes that growth cannot be stopped, but it can be controlled and shaped for the future.
- Suggesting that the Town could address issues more effectively with a different form of government.

- Infrastructure maintenance options include expanding water department trunk lines, installing sewer pipe liners, and implementing mapping and grading for a resurfacing plan.
- Growth-related challenges include capacity concerns for water and sewer, streets, parks, and the environment.
- Raises the possibility of establishing a Chamber of Commerce.
- Emphasizes the importance of defining community character and increasing public engagement in the decision-making process.

Jim Hanson recommends the following to the Town Council:

- Initiate public workshops to engage citizens in discussions on growth options.
- Transition to a Council/Manager form of government, which is 10% more cost-efficient than other government structures.
- Leverage resources such as the Northeast Florida Regional Planning Council and Nassau County.

Town Council Responses:

Council President Sims notes that a ballot referendum would be required to amend the Town Charter to allow for a Council/Manager form of government. Council Pro Tem Pickett raises concerns about funding availability and questioned how these changes could be implemented without sufficient financial resources.

ADJOURNMENT

Motion to adjourn at 6:55 p.m.

Motion made by Councilman Wollitz, Seconded by Councilman Hunter.

Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

Approved this _____ day of _____, _____ by the Hilliard Town Council, Hilliard, Florida.

Kenneth A. Sims, Sr.
Council President

ATTEST:

Lisa Purvis
Town Clerk

APPROVED:

John P. Beasley
Mayor

HILLIARD TOWN COUNCIL MEETING

Hilliard Town Hall / Council Chambers
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Lisa Purvis, Town Clerk
Cory Hobbs, Interim Public Works Director
Gabe Whittenburg, Parks & Rec Director

TOWN ATTORNEY

Christian Waugh

MINUTES

THURSDAY, FEBRUARY 20, 2025, 7:00 PM

NOTICE TO PUBLIC

Anyone wishing to address the Town Council regarding any item on this agenda is requested to complete an agenda item sheet in advance and give it to the Town Clerk. The sheets are located next to the printed agendas in the back of the Council Chambers. Speakers are respectfully requested to limit their comments to three (3) minutes. A speaker's time may not be allocated to others.

PLEDGE OF CIVILITY

WE WILL BE RESPECTFUL OF ONE ANOTHER
EVEN WHEN WE DISAGREE.
WE WILL DIRECT ALL COMMENTS TO THE ISSUES.
WE WILL AVOID PERSONAL ATTACKS.
"Politeness costs so little." – ABRAHAM LINCOLN

CALL TO ORDER

PRAYER & PLEDGE OF ALLEGIANCE

ROLL CALL

PRESENT

Mayor John Beasley (LATE: 7:20 p.m.)
Council President Kenny Sims
Council Pro Tem Lee Pickett
Councilman Jared Wollitz
Councilman Dallis Hunter
Councilman Joe Michaels

PROCLAMATIONS

ITEM-1 Town Council to designate March 3, 2025, through March 9, 2025, as "Flood Awareness Week" in the Town of Hilliard.

John P. Beasley – Mayor

Council President Sims proclaims March 3, 2025, through March 9, 2025, as "Flood Awareness Week" in the Town of Hilliard.

REGULAR MEETING

ITEM-2 Additions/Deletions to Agenda

ITEM-4 Interim Public Works Director Cory Hobbs requests Item to be deleted from the agenda.

ITEM-15 Interim Public Works Director Cory Hobbs requests to add item to the agenda for the termination of Public Works Department employee

Motion made by Councilman Wollitz, Seconded by Council Pro Tem Pickett.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

ITEM-3 Town Council approval for the Capital Budget Expenditure for Fire Hydrant Flow Test with W.W. Gay in the amount of \$11,616.00 **Cory Hobbs – Interim Public Works Director**

Motion made by Council Pro Tem Pickett, Seconded by Councilman Hunter.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

ITEM-4 Town Council approval of the update on old Town Hall and Volunteer Fire Department Generator Project. **Cory Hobbs – Interim Public Works Director**

Item deleted for this agenda.

ITEM-5 Town Council to set the Annual Joint Workshop with the Nassau County School Board for Monday, March 3, 2025, at 6:00 p.m. **Lisa Purvis, MMC – Town Clerk**

Motion to set the Annual Joint Workshop with the Nassau County School Board for Monday, March 3, 2025, at 6:00 p.m.

Motion made by Councilman Wollitz, Seconded by Councilman Hunter.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

ITEM-6 Town Council approval of the Northeast Florida Fair Association Rental Agreement for the hosting of the Vietnam's Voices Traveling Memorial Wall from April 17 through April 21, 2025, at the Northeast Florida Fair Grounds. **Alicia Head – Public Information Officer & Event Coordinator**

Motion made by Council Pro Tem Pickett, Seconded by Councilman Wollitz.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

ITEM-7 Town Council update regarding Public Hearing & Regular Meeting action on Ordinance No. 2024-13, was postponed / tabled at the applicant's request on January 16, 2025. The applicant has now requested to withdraw the application

for consideration.

Lee Anne Wollitz- Land Use Administrator

Motion made by Councilman Wollitz, Seconded by Council Pro Tem Pickett.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

- ITEM-8 Town Council update regarding Public Hearing & Regular Meeting action on Ordinance No. 2024-14, was postponed / tabled at the applicant's request on January 16, 2025. The applicant has now requested to withdraw the application for consideration.

Lee Anne Wollitz- Land Use Administrator

Motion made by Council Pro Tem Pickett, Seconded by Councilman Wollitz.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

- ITEM-9 Town Council approval of the FY 2025 Revenues and Expenditures Report for the period ending December 30, 2024.

Lisa Purvis, MMC – Town Clerk

Motion made by Councilman Hunter, Seconded by Councilman Wollitz.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

- ITEM-10 Town Council to approve increase in the hours for the Land Use Administrator from 20 to 30 office hours per week.

Lee Anne Wollitz – Land Use Administrator

Motion made by Council Pro Tem Pickett, Seconded by Councilman Hunter.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

- ITEM-11 Town Council approval of the Minutes for the February 6, 2025, Regular Meeting.

Lisa Purvis, MMC – Town Clerk

Motion made by Councilman Hunter, Seconded by Councilman Michaels.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

- ITEM-12 Town Council approval of Alberre Appraisal Group, Payable through January 10, 2025, Project Name: Acquire Land on the North Side at Hilliard Airpark in the amount of \$3,200.00.

FDOT PTGA 100% GRANT FUNDED PROJECT LUMP SUM GRANT \$464,000

Motion made by Council Pro Tem Pickett, Seconded by Councilman Michaels.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

- ITEM-13 Town Council approval of PQH Group, Payable through January 22, 2025, Project Name: Hurricane Shelter / Community Center Project in the amount of

\$11,000.00.

FDEM 100% GRANT FUNDED PROJECT LUMP SUM CONTRACT \$572,000

Motion made by Council Pro Tem Pickett, Seconded by Councilman Wollitz.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

- ITEM-14 Town Council approval of Island Hopper Home Repairs, Payable through February 3, 2025, Project Name: Gym Maintenance in the amount of \$5,000.00.
CAPITAL FUNDED PROJECT LUMP SUM CONTRACT \$36,750

Motion made by Council Pro Tem Pickett, Seconded by Councilman Hunter.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

ADDED ITEMS

- ITEM-15 Town Council approval of the termination of Phillip Bouchillon in the Public Works Technician position effective February 18, 2025.
Cory Hobbs – Interim Public Works Director

Motion made by Council Pro Tem Pickett, Seconded by Councilman Michaels.
Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

ADDITIONAL COMMENTS

PUBLIC

Susan McClain, 37847 Henry Smith Road, Hilliard, expresses concern about potential flooding due to the proposed development adjacent to her property.

Orin McClain, 37847 Henry Smith Road, Hilliard, emphasizes that the Town should be managed like a business, with unnecessary matters set aside. He further notes that Town Council members are elected by the citizens. Additionally, he raises concerns about the zoning of his property and stresses the need for ditch maintenance before the development begins.

MAYOR & TOWN COUNCIL

Councilman Wollitz, states that the wife of a Volunteer Firefighter has passed away and asks everyone to keep the family in their prayers. He also reports that the Fire Department has completed all hose testing over the past month. Additionally, he requests prayers for Town Clerk Lisa Purvis and Councilman Hunter's wife as they recover. He clarifies that the ditches on Henry Smith Road are maintained by the Nassau County, meaning the Town has no authority to clean them.

Councilman Michaels, commends Parks & Recreation Director Gabe Whittenburg, stating that the department is thriving with sports activities.

Councilman Hunter, shares that he is working on scheduling a meeting with the Airpark to address concerns discussed over the past several months and expects to provide an update soon. He also asks the Land Use Administrator to give an update on Tompkins Preserve.

Mayor Beasley, apologizes for his tardiness, citing heavy traffic from Orlando. He thanks Council President Sims for leading the meeting and encourages everyone to attend Food Truck Friday on February 28, 2025.

ADMINISTRATIVE STAFF

PRESENT:

Interim Public Works Director Cory Hobbs
Land Use Administrator Lee Anne Wollitz

ABSENT:

Town Clerk Lisa Purvis
Parks & Recreation Director Gabe Whittenburg

Interim Public Works Director Cory Hobbs, announces that Henry Smith Road will be repaved at the contractor's expense, as the original paving did not meet Nassau County's standards and requirements.

Land Use Administrator Lee Anne Wollitz, reports that she and Councilman Hunter met with those overseeing the Tompkins Preserve Project. She explains that the completed flow testing did not meet the Town's standards, leading her to send proposals to the project's engineer. He has inquired about the necessity of completing additional utility projects in advance, which may require a complete redesign of their plans. As a result, the developers have requested that the Town temporarily pause the project. She expects to have an update at the beginning of next week.

Councilman Hunter, emphasizes that projects of this nature are not finalized during Public Hearings, as extensive work is required throughout the process. He recalls for the workshop held earlier tonight with a retired city manager who summed it up well, stating that while growth is inevitable, it is the Town's responsibility to ensure developments adhere to established standards.

TOWN ATTORNEY

Town Attorney Christian Waugh, announces that the Geiger property at the Airpark has officially closed and is now owned by the Town. He adds that they are in the final stages of litigation, working on a case to quiet the title and resolve outstanding issues, along with a motion for summary judgment.

ADJOURNMENT

Motion to adjourn at 7:26 p.m.

Motion made by Council President Sims, Seconded by Councilman Wollitz.

Voting Yea: Council President Sims, Council Pro Tem Pickett, Councilman Wollitz, Councilman Hunter, Councilman Michaels

Approved this _____ day of _____, _____ by the Hilliard Town Council, Hilliard, Florida.

Kenneth A. Sims, Sr.
Council President

ATTEST:

Lisa Purvis
Town Clerk

APPROVED:

John P. Beasley
Mayor

INVOICE FOR PROFESSIONAL SERVICES

ITEM-5

PROJECT: Town of Hilliard Hurricane Shelter
Hilliard, FL

DATE: 02/19/25

INVOICE NO. 24022-2

TO: Lisa Purvis - Christian Waugh
Town of Hilliard
PO Box 249
Hilliard, FL 32046

PROJECT NO. 24022

lpurvis@townofhilliard.com
waughlaw@townofhilliard.com

IN ACCORDANCE WITH THE AGREEMENT DATED

11/7/24

THERE IS DUE AT THIS TIME FOR PROFESSIONAL SERVICES AND REIMBURSABLE ITEMS ON THE ABOVE PROJECT, FOR THE PERIOD ENDING

02/19/25

THE SUM OF

DOLLARS \$ \$11,000.00

THE ABOVE AMOUNT SHALL BECOME DUE AND PAYABLE

30

DAYS FROM THE DATE HEREOF.

INTEREST ON OVERDUE ACCOUNTS SHALL ACCRUE AT 1.5% PERCENT PER Month

THE PRESENT STATUS OF THE ACCOUNT IS AS FOLLOWS:

Fee	\$572,000.00
Reimbursables	\$0.00
Total Fee	<u>\$572,000.00</u>

Fee Earned	\$22,000.00
Invoiced to Date	\$11,000.00

Total Amount Due this Invoice	\$11,000.00
--------------------------------------	--------------------

Summary:

Inv 24022-1-Jan	\$11,000.00
Inv 24022-2-Feb	\$11,000.00
Total Amount Outstanding:	<u>\$22,000.00</u>

Invoice Reviewed and Approved by:


Aldo Minozzi, AIA, Vice President**PQH**
GROUP4141 Southpoint Dr. E. #200
Jacksonville, Florida 32216
904 - 224 - 0001
FAX - 224 - 0023www.pqh.com

INVOICE FOR PROFESSIONAL SERVICES

ITEM-5

Project: Town of Hilliard Hurricane Shelter
Hilliard, FL

To:
Town of Hilliard
PO Box 249
Hilliard, FL 32046

Invoice Date: 02/19/25

Invoice Number: 24022-2

Project Number: 24022

TOTAL AMOUNT DUE
THIS INVOICE: \$11,000.00

SERVICE RENDERED	TOTAL FEE	% COMPLETE	TOTAL DUE TO DATE	PREVIOUSLY INVOICED	AMOUNT DUE
Site Assess & Prelim Design	22,000.00	100%	22,000.00	11,000.00	11,000.00
Schematic Design	30,000.00	0%	0.00	0.00	0.00
Design Development 30%	60,000.00	0%	0.00	0.00	0.00
Const. Documents 60%	76,000.00	0%	0.00	0.00	0.00
Const. Documents 90%	76,000.00	0%	0.00	0.00	0.00
Const. Documents 100%	40,000.00	0%	0.00	0.00	0.00
Bidding/Permitting	16,000.00	0%	0.00	0.00	0.00
Construction Observation	48,000.00	0%	0.00	0.00	0.00
Project Punch & Closeout	8,000.00	0%	0.00	0.00	0.00
Interior Design; Finish Selection	15,000.00	0%	0.00	0.00	0.00
Topo/Boundary Survey	8,000.00	0%	0.00	0.00	0.00
Geotechnical Engineering Rpt	8,000.00	0%	0.00	0.00	0.00
Civil Engineering	75,000.00	0%	0.00	0.00	0.00
Landscaping	15,000.00	0%	0.00	0.00	0.00
Design Contingency Allowance	75,000.00	0%	0.00	0.00	0.00
Previous Reimbursables	0.00	0%	0.00	0.00	0.00
Reimbursables this invoice x 1.15	0.00	0%	0.00	0.00	0.00
TOTAL	\$572,000.00	4%	\$22,000.00	\$11,000.00	\$11,000.00