Administration 797-1030
Budget & Finance 797-1050
Development Services 797-1111
Engineering 797-1113
Fire Department 797-1211
Human Resources 797-1010

Parks & Recreation 797-1145
Police Department 693-8200
Public Works 797-1240
Town Clerk's Office 797-1023
Utilities 433-4000

Town of Davie 6591 Orange Drive Davie, Florida 33314-3399 (954) 797-1000

PARADE PERMIT APPLICATION

Date 11-6-02

Organization Forest Ridge Holly day Parade

Address Forest Ridge (City) Davie (State) FL (Zip) 33328

Name of Representative(s) Gloria J. Hood Phone Number 954-473-2629

Address 3156 Peachtree Circle (City) Davie (State) FL (Zip) 33328

Number of Parade Entrants 50 Number of Spectators Expected 500

Date of Parade Dec. 7, 2002 Hours of Parade 1 till 2 pm to 2 pm

Route of Parade Forest Ridge entrance on To Forest Ridge Boulevard to old Orchard Boulevard then Back to entrance. Less than Two mikes.

Applicant's Signature Gloria J. Hood

Date of Council Meeting _____ Approved _____ Denied _____

This application will be reviewed by a staff committee and if warranted, there may be a possibility of a service fee due to the size/extent of the event.

NOTE: Per Section 21-4 of the Town's Code, the Town Council shall be sole authority for the approval of permits to conduct parades on or about the Town's public rights-of-way. The civic organization making application to conduct such parade shall have the sole responsibility and prerogative to determine who the participants and or participating organizations shall be. Permits shall be granted subject to federal, State and Town of Davie laws.

THE TOWN OF DAVIE REQUIRES A CERTIFICATE OF INSURANCE OF NO LESS THAN $1,000,000 NAMING THE TOWN OF DAVIE AS AN ADDITIONAL INSURED

Client#: 31276 FORM

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY) 10/25/02

PRODUCER
Advanced Insurance Underwriters
Ravenswood Office Center
5201 Ravenswood Rd., Ste 107
Ft Lauderdale, FL 33312

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

INSURED
Forest Ridge Master HOA, Inc.
C/O Continental Property Managers
2950 N. 28th Terrace
Hollywood, FL 33020

INSURERS AFFORDING COVERAGE

INSURER A: Philadelphia Indemnity Co.
INSURER B: Travelers Casualty & Surety Co.
INSURER C:
INSURER D:
INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO-JECT LOC	PHPK020679	04/29/02	04/29/03	EACH OCCURRENCE	$1,000,000
					FIRE DAMAGE (Any one fire)	$100,000
					MED. EXP. (Any one person)	$5,000
					PERSONAL & ADV INJURY	$1,000,000
					GENERAL AGGREGATE	$2,000,000
					PRODUCTS - COMP/OP AGG	$2,000,000
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	$
					BODILY INJURY (Per person)	$
					BODILY INJURY (Per accident)	$
					PROPERTY DAMAGE (Per accident)	$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT	$
					OTHER THAN AUTO ONLY: EA ACC	$
					AGG	$
	EXCESS LIABILITY OCCUR CLAIMS MADE DEDUCTIBLE RETENTION $				EACH OCCURRENCE	$
					AGGREGATE	$
						$
						$
						$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS / OTH-ER	
					E.L. EACH ACCIDENT	$
					E.L. DISEASE - EA EMPLOYEE	$
					E.L. DISEASE - POLICY LIMIT	$
B	OTHER Fidelity	023BY10331063 4BCM	05/26/02	05/26/03	$50,000/$0 Deductible	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
** COVERAGE FOR COMMON AREAS ONLY **

Town of Davie is listed as Additional Insured
RE: Holly Day Parade for December 7th, 2002

CERTIFICATE HOLDER | ADDITIONAL INSURED; INSURER LETTER:

Town of Davie
6591 Orange Dr
Davie, FL 33314

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Marlotte Floyd

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IMPORTANT

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

If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

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