



842 State Highway 20 East, Suite 110  
Freeport, FL 32439

Phone 850-267-1955

Facsimile 850-622-9133

## Walton County Planning and Development Services

### APPLICATION FOR OUTDOOR EVENTS

#### Application Package Contents

**ALL APPLICATIONS SHALL BE SUBMITTED USING THE ONLINE PORTAL**

<https://www2.citizenserve.com/waltonplanning>

#### **NOTICE TO ALL APPLICANTS**

You are required to submit this application to Planning and Development Services **AT LEAST FORTY-FIVE (45) DAYS PRIOR TO THE EVENT.** It can be delivered to: 842 State Highway 20 East Ste 110, Freeport, FL 32439. Your application will not be processed without ALL of the listed items on page 2 of this application. For any questions about this application please contact Planning and Development Services at (850) 267-1955. You will be required to attend an Outdoor Review Committee Meeting prior to approval.

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## INITIAL SUBMITTAL CHECKLIST

### APPLICATION FOR OUTDOOR EVENTS – INITIAL SUBMITTAL WILL INCLUDE THE FOLLOWING ITEMS

If any submittals do not meet these requirements, they will not be accepted

### Additional items may be required per LDC 1.13.00 (N)

*(Credit Cards Accepted or Check payable to Walton County)*

- ☐ Fee for Outdoor Event Application: \$100 per event
- ☐ Agent Affidavit
- ☐ Proof of Ownership
- ☐ Completed and Signed Application
- ☐ The name(s) of all persons promoting or conducting the outdoor event(s)
- ☐ The name(s) of all persons who will provide event-related services to the outdoor event, and executed copies of all contracts or agreements with such persons or groups (Example: Vendors)
- ☐ The exact date(s) and time(s) of commencement and the exact date(s) and time(s) of the conclusion of the event(s). **Also, state hours that live music or amplified noise will be performed.**
- ☐ A geographic description and scale map or plan of the site depicting the location of all required facilities. (See Sample)
- ☐ Original copy of Insurance Liability Certificate meeting all requirements of Ordinance and naming Walton County Board of County Commissioners as additional insured. (See Sample)
- ☐ A provision for security and traffic control. If the outdoor event requires services beyond those that are regularly provided by Walton County such as additional sheriff services, the number of officers to be retained and any associated fees shall be determined by the Sheriff's Office on a case-by-case basis.
- ☐ A provision for an emergency services plan with the level of service and associated fees being determined by the South Walton Fire District or the Walton County Fire Rescue and documented on a case by case basis by means of an Event Action Plan.
- ☐ The name(s), phone numbers, and e-mail addresses of on-site contact and back-up person(s) to contact during the event and after hours for emergency situations
- ☐ A provision for parking facilities, both on and off site. Such plan shall provide for on-site and off-site parking in areas clearly designated as parking areas, with appropriate lighting for safety shown. No parking shall be allowed on internal neighborhood streets unless duly authorized
- ☐ Any necessary temporary improvements, including signage, in the public right-of-way must have Walton County approval (contact Public Works for more information at 850-892-8108)
- ☐ Any county road closures must have Walton County Board of County Commissioners approval (contact WC Administration for more information at 850-892-8155).
- ☐ **Please note: A "Calendar of Events" needs only one application as long as the event is at the same place, time, and day throughout the calendar. For more information regarding Calendar of Events, please contact the Planning & Development Services at 850-267-1955.**

**Name of Event:** \_\_\_\_\_

**Date of Event:** \_\_\_\_\_ **Date of Application:** \_\_\_\_\_

**Applicant Information**

**Name:** \_\_\_\_\_

**If company or corporation, name of secretary or officer**

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Property Information**

**Legal Description:**

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**Parcel Identification Number(s) Obtained from Property Appraiser's Office:**

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**Driving directions to the site from the nearest major intersection:**

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**Property Owner Information (if different from applicant)**

**Name:** \_\_\_\_\_

**If company or corporation, name of secretary or officer**

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Fax Number** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Agent Information (if different from applicant)**

**Name:** \_\_\_\_\_

**If company or corporation, name of secretary or officer**

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Fax Number** \_\_\_\_\_

**Email:** \_\_\_\_\_

**FLORIDA STATUTES 837.06 – FALSE OFFICIAL STATEMENT**

Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

I have read and understand all the information provided in this application, the requirements listed within the application, and agree to provide the necessary information requested by Walton County. The information I have provided on this application is true and correct to the best of my knowledge.

**Applicant's Signature**

**Printed Name**

**Date**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**STATE OF** \_\_\_\_\_

**COUNTY OF** \_\_\_\_\_

**BEFORE ME, the undersigned Notary Public in and for said County and State, appeared**

\_\_\_\_\_, who is personally known to me or who has produced

\_\_\_\_\_ as identification, and who executed the foregoing instrument.

Given under my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**Signed Name of Notary Public**

\_\_\_\_\_

{Seal}

**Printed Name of Notary Public**

\_\_\_\_\_

**Commission Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Agent Affidavit / Special Power of Attorney**

STATE OF FLORIDA COUNTY OF WALTON

KNOW ALL MEN BY THESE PRESENTS, that I \_\_\_\_\_ am presently the owner and/or leaseholder of \_\_\_\_\_ and desiring to execute a Special Power of Attorney, have made, constituted and appointed, and by these presents do make, constitute and appoint \_\_\_\_\_ whose address is \_\_\_\_\_. County of \_\_\_\_\_, State of \_\_\_\_\_, my Attorney full power to act as my agent in the process of obtaining a variance pertaining to \_\_\_\_\_.

FURTHER, I do authorize the aforesaid Attorney-in-Fact to perform all necessary tasks in the execution of aforesaid authorization with the same validity as I could effect if personally present. Any act or thing lawfully done hereunder by the said attorney shall be binding on myself and my heirs, legal and personal representative, and assigns.

PROVIDED, however, that any and all transactions conducted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by the said attorney for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney and the designation "Attorney-in-Fact."

WITNESSES:

APPLICANT:

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned Notary Public in and for said County and State, appeared

\_\_\_\_\_, who is personally known to me or who produced \_\_\_\_\_ as identification, and who executed the foregoing instrument. Given under my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_

Printed Name of Notary Public

Signed Name of Notary Public

Commission  
Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

(SEAL)

# WALTON COUNTY ROADWAY ACTIVITIES APPLICATION

## ROAD CLOSURE REQUEST

*The Roadway Activity Permit shall be available on site at all times during the activity*  
Complete and submit to Walton County Public Works, 117 Montgomery Circle, DeFuniak Springs, FL 32435, for review and approval not less than 45 days prior to event

**ROAD CLOSURES WILL BE PLACED ON THE BOARD OF COUNTY COMMISSIONERS AGENDA FOR APPROVAL**

### Part 1: Applicant Details

Applicant Name: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact person during road closure: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

### Part 2: Event Name and Date of Event

\_\_\_\_\_ Date: \_\_\_\_\_

### Part 3: Details of Event on County Road to be Closed

Parade ☐ Marches ☐ Marathon ☐ Other ☐ \_\_\_\_\_

Name of County Road: \_\_\_\_\_

Part of the road to be used:

Lane(s) ☐ 1 or ☐ 2 Full Closure ☐ Half Road ☐ Full Road ☐

Other ☐ \_\_\_\_\_

Name/section of road to be used: from \_\_\_\_\_ Time: \_\_\_\_\_  
to \_\_\_\_\_ Time: \_\_\_\_\_

Name/section of road to be used: from \_\_\_\_\_  
to \_\_\_\_\_

Expected number of participants: 0-50 ☐ 51-100 ☐ 101-150 ☐ 151-300 ☐ 300+ ☐

## WALTON COUNTY ROADWAY ACTIVITIES APPLICATION ROAD CLOSURE REQUEST

*The Roadway Activity Permit shall be available on site at all times during the activity*  
Complete and submit to Walton County Public Works, 117 Montgomery Circle, DeFuniak Springs, FL 32435, for review and approval not less than 45 days prior to event

**ROAD CLOSURES WILL BE PLACED ON THE BOARD OF COUNTY COMMISSIONERS AGENDA FOR APPROVAL**

### Part 4: Attachments for agenda submission form

- ☐ Map of Section of Road to be closed
- ☐ Walton County Sheriff's Office approval
- ☐ Walton County SWFD or WCFR approval
- ☐ Traffic Maintenance Plan approval
- ☐ Letter of notification to relevant agencies and the response
- ☐ Letter/flyer to affected properties including list of all addresses
- ☐ Waste Management plan (trash pick-up)

### Part 5: Declaration

I/We have read and understood the Walton County Roadway Activities Policy and have satisfactorily addressed all the requirements contained within.

Name: \_\_\_\_\_  
Print

Name: \_\_\_\_\_  
Print

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

### Part 6: Walton County Board of Commissioners Approval

FOR OFFICIAL USE ONLY  
(Do not write in this box)

**"Approval Contingent Upon Meeting Any Recommendations of the Walton County Sheriff's Office, the South Walton Fire Department and the Walton County Fire Department."**

Approved by the Walton County Board of Commissioners this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

By: \_\_\_\_\_  
Chairman, Board of Commissioners  
Walton County, Florida



## WALTON COUNTY APPLICATION FOR EVENT SIGNAGE

*The Event Signage Permit shall be available on site at all times during the activity*

Complete and submit to Walton County Public Works, 117 Montgomery Circle, DeFuniak Springs, FL 32435, for review and approval not less than 45 days prior to event

### Part 1: Applicant Details

Applicant Name: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact person during event : \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

### Part 2: Event Name

\_\_\_\_\_ Date: \_\_\_\_\_

### Part 3: Location of County Right of way to be used:

Name of County Road(s) (rights of ways):  
\_\_\_\_\_  
\_\_\_\_\_

### Part 4: REGULATIONS FOR SIGNAGE IN COUNTY RIGHT OF WAY

All signage may be placed in the county right of way two days before the activity and must be removed two days after the activity. The signage can be no larger than 18" X 24" and must be placed with wire stakes. Signage must be professionally printed, painted or constructed. No hand lettered card board paper will be permitted. No more than (2) two signs temporarily displayed in right of way for each roadway requested above will be allowed.

I/We have read and understood the Regulations for Signage in the County Rights of Ways.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

### Part 5: Walton County Public Works Approval

FOR OFFICIAL USE ONLY

(Do not write in this box)

Approved by the Walton County Public Works Department this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

By: \_\_\_\_\_

Cindy Price, Executive Assistant  
Public Works Administration

## **WALTON COUNTY APPLICATION FOR EVENT SIGNAGE**

*The Event Signage Permit shall be available on site at all times during the activity*

Complete and submit to Walton County Public Works, 117 Montgomery Circle, DeFuniak Springs, FL 32435, for review and approval not less than 45 days prior to event



**MICHAEL A. ADKINSON, JR., SHERIFF**  
Office of the Sheriff, Walton County

**WALTON COUNTY SHERIFF'S OFFICE PERMIT RECOMMENDATION**

Organization Name: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Website: \_\_\_\_\_

Estimated/Anticipated Attendance per Day: \_\_\_\_\_

Event Date: \_\_\_\_\_ Duration of Event: \_\_\_\_\_ Date Application was Received: \_\_\_\_\_

Location of Event: \_\_\_\_\_

1. Will any public right of way be closed? ☐ Yes ☐ No ☐ N/A

2. Will any streets or lanes be blocked? ☐ Yes ☐ No ☐ N/A

If yes, has a permit been approved? ☐ Yes ☐ No

3. Will any alcohol be served? ☐ Yes ☐ No ☐ N/A

4. Will admission to the venue be charged? ☐ Yes ☐ No ☐ N/A

5. Is there a dedicated area for parking? ☐ Yes ☐ No ☐ N/A

6. Will the event be on the beach? ☐ Yes ☐ No ☐ N/A

7. Any volunteers? ☐ Yes ☐ No ☐ N/A If yes, how many? \_\_\_\_\_

Event Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please provide all documentation of the event to include flyers, operational plans, maps, etc.**

**This form and all supporting documentation must be submitted to the Sheriff's Office within 30 days of the event.**

Coordinator Signature: \_\_\_\_\_

**ADMINISTRATIVE USE ONLY**

Recommendation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Professional Standards Commander: \_\_\_\_\_

# **Policy for Outdoor Events Permits**

## **11/16/15**

(as approved by Wayne Dyess & Mac Carpenter)

### **Process for Outdoor Events Permits:**

- Applicant contacts Planning and Development Services to receive an application and check-list for an Outdoor Events Permit
- Applicant submits completed application, check-list, and payment to Planning representative at least 45 days in advance of the event
- Planning representative schedules a date and time for Applicant to meet with the Outdoor Review Committee (ORC)

ORC meets the first Monday of every month at 9:00 AM at the South Walton Annex

ORC consists of a representative from Planning, Public Works, Sheriff's Office and South Walton Fire District

- Planning representative sends each member of the ORC a copy of each completed application and agenda at least one week prior to the monthly meeting
- ORC meets with Applicants individually and reviews applications
- Sheriff's Office and SW Fire District submits their comments and recommendations to Applicants and notes such on the application
- If the event requires a road closure, the Applicant must submit a Maintenance of Traffic Plan (MOT) to Public Works for review and approval; once approved by Public Works, the Applicant must submit an Agenda Submission Form to Administration in order to be placed on a BCC Agenda to request BCC approval during a Regular Commission Meeting
- If the event requires signs to be placed on the County right-of-way, Applicant must receive approval from Public Works
- Once all requirements and recommendations have been met, a Planning representative issues a Permit to Applicant

(All applications involving signs on the County right-of-way and road closures for parades and races will be placed first on the meeting agenda.)

**ORDINANCE  
2008-29**

AN ORDINANCE OF WALTON COUNTY, FLORIDA, REPEALING ORDINANCE 1973-03 REQUIRING MUSICAL OR ENTERTAINMENT FESTIVALS TO BE PERMITTED AND CHAPTER FOUR OF THE WALTON COUNTY CODE OF ORDINANCES RELATING TO MUSIC AND ENTERTAINMENT FESTIVALS; PROVIDING FOR DEFINITIONS; PROVIDING FOR A PERMITTING SYSTEM FOR OUTDOOR EVENTS; PROVIDING FOR EXEMPTIONS; ESTABLISHING NEW REGULATIONS AND REVIEW OF OUTDOOR EVENTS; ESTABLISHING ADDITIONAL CONDITIONS AND FEES; REQUIRING LIABILITY INSURANCE; PROVIDING FOR PENALTIES, SEVERABILITY, AND AN EFFECTIVE DATE.

**WHEREAS**, the Legislature of the State of Florida has, in Chapter 125, F.S. delegated the responsibility to local governmental units to adopt regulations designed to promote the public health, safety, and general welfare of its citizens; and

**WHEREAS**, the Board of County Commissioners of Walton County ("Board") recognizes the need to update certain regulations relating to outdoor events in the unincorporated areas of Walton County; and

**WHEREAS**, the Board finds it is in the best interests of the health, safety and welfare of the people of Walton County ("County") to establish reasonable regulations for conducting outdoor events.

**NOW, THEREFORE, BE IT ORDAINED by the Board of County Commissioners of Walton County, Florida, that:**

**Section 1. Repeal and Create New Chapter 4.** Walton County Ordinance 1973-03, codified as Article II, Chapter 4 of the Walton County Code of Ordinances is hereby repealed in its entirety. A new Article II, Chapter 4 of the Walton County Code of Ordinances is hereby created to read:

**ARTICLE II. OUTDOOR EVENTS**

**Sec. 4-26. DEFINITIONS.**

The following words or phrases, when used in this Article shall have the meanings ascribed to them herein except where the context otherwise requires:

1. Outdoor event - shall mean any planned assemblage of the general public held outdoors within the unincorporated areas of Walton County for which admission is charged and/or booths are available for rent. Outdoor events may include, but not be limited to, contests, fairs, carnivals, festivals, concerts, seasonal or

annual events, competitions, car shows, art/craft shows, or other similar activities which meet the definition listed herein for outdoor events.

2. Calendar of events - means more than one outdoor event sponsored by the same individual or group, which occurs on the same site, more than one time during a calendar year, and which contains outdoor events similar in nature, with infrequent changes in detail.
3. Person - any natural person, firm, association, joint venture, partnership, estate, trust, business trust, fiduciary, corporation, and all other groups and combinations.
4. Temporary structures and facilities - includes, but is not limited to, sheds, booths, bleachers, canopies, tents, stages and fences, necessary site improvements and right-of-way agreements for temporary purposes during an event.

#### **Sec. 4.27. PERMITS.**

- A. **Required.** It shall be unlawful for any person to stage, promote or sell tickets to or conduct any outdoor event in Walton County without first obtaining a duly authorized outdoor event permit from the Walton County Code Enforcement Department (“Code Enforcement”).

All outdoor events shall be held in full compliance with the Walton County Land Development Code and all other applicable state and federal laws, ordinances and regulations. ‘Special Events’ (Outdoor Events) governed under the terms of the Beach Activities ordinance may be subject to different requirements.

- B. **Exemptions.** The following activities shall be exempt from the permitting requirements:

1. County sponsored or approved outdoor events held on county property;
2. Outdoor events sponsored or approved by the school board conducted on school board property or property under the control of the school board;
3. Religious, private school, political and other 501(c)(3) nonprofit organization outdoor events conducted on property owned or leased by those organizations and when no public (i.e., citizens of Walton County) liability exposure exists; and
4. Existing businesses or entities that have development order approval for outdoor events as an accessory use and when no public (i.e., citizens of Walton County) liability exposure exists.
5. Outdoor events that qualify for an exemption must comply with the provisions of the Fire, Life and Safety requirements and receive a certificate of exemption from the appropriate fire and rescue agency.

- C. **Application.** An application for an outdoor event (or calendar of events) shall be submitted to Code Enforcement at least forty-five (45) days in advance of the date of commencement of the outdoor event(s). Last minute events within an

approved calendar of events may be amended upon written notification to the Planning and Development Services Division. The application shall contain the following:

1. The name(s) of all persons promoting or conducting the outdoor event.
2. The name(s) of all persons who will provide event-related services to the outdoor event, and executed copies of all contracts or agreements with such persons or groups.
3. Proof of ownership of the property on which the outdoor event is being held or in the alternative proof of a contractual agreement to use the property of another.
4. The exact date and time of commencement and the exact date and time of the conclusion of the outdoor event.
5. A geographic description and scale map or plan of the outdoor event site depicting the location of all required facilities.
6. A provision for security and traffic control. If the outdoor event requires services beyond those that are regularly provided by Walton County such as additional sheriff services, the number of officers to be retained and any associated fees shall be determined by the Sheriffs Office on a case-by-case basis.
7. A provision for parking facilities, both on and off site. Such plan shall provide for on- and off-site parking in areas clearly designated as parking areas. No parking shall be allowed on internal neighborhood streets unless duly authorized.
8. Any necessary temporary improvements, including signage, in the public right-of-way.
9. A provision for an emergency services plan with the level of service and associated fees being determined by the South Walton Fire District or the Walton County Fire Rescue and documented on a case by case basis by means of an Event Action Plan.
10. The name(s), phone numbers, and e-mail addresses of onsite contact and back-up person(s) to contact during the event and after hours for emergency situations.

D. **Application review.** All applications for outdoor event permits shall be reviewed by the following departments/entities. The permit application will provide contact information for each of the following:

1. Planning and Development Services Division.
2. Engineering Department.
3. Code Enforcement Department.
4. Walton County Sheriffs Office.
5. South Walton Fire District or Walton County Fire Rescue.

E. **Establishment of additional conditions.** The County reserves the right to establish such additional conditions, criteria or detailed specifications for the

outdoor event permit as it may deem necessary to carry out the intent of this article, for the protection of the public health, safety and general welfare.

F. **Fees.** There shall be a nonrefundable fee of \$100.00 for obtaining an outdoor event permit. Additional fees may be assessed to cover the costs of any additional services beyond those that are regularly provided by Walton County.

G. **Liability insurance.** A written public liability insurance policy insuring the person, staging, promoting or conducting the outdoor event against any and all claims and demands made by any person for injuries received in connection with the staging, promoting, conducting or attendance of or at such outdoor event, written with limits of not less than \$300,000.00 for damage or injury to any one person for bodily injury or otherwise, plus \$25,000.00 for damages to property, and for not less than \$500,000.00 for damages incurred or claimed by more than one person for bodily injury or otherwise, plus \$50,000.00 for damage to property. Walton County shall be named as additional insured on all such policies. The original or duplicate of the policy shall be attached to the application for an outdoor event permit, together with adequate evidence that the premiums are paid.

#### **Sec. 4-28. Violations; penalties.**

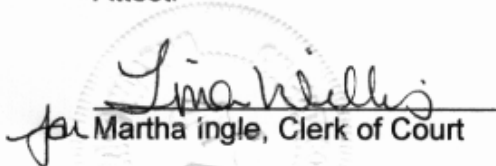
- A. Any person who violates any provision of this Article shall be subject to the penalties set forth in Chapter 1 Sections 1-6 of the Walton County Code of Ordinances.
- B. The County may revoke the outdoor event permit granted under this article upon the occurrence of any violation of this article.

**Section 2. Severability.** Should any word, phrase, sentence, or section of this ordinance be held by a court of competent jurisdiction to be illegal, void, unenforceable, or unconstitutional, then such shall be severed from this ordinance and the remainder of the ordinance shall remain in full force and effect.

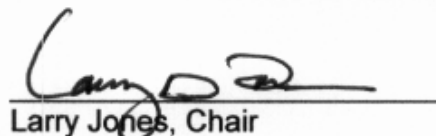
**Section 3. Effective date.** This ordinance shall become effective as provided by law.

PASSED AND DULY ADOPTED in regular session, by the Board of County Commissioners of Walton County, Florida, this 23<sup>rd</sup> day of September, 2008.

Attest:

  
Martha Ingle, Clerk of Court

BOARD OF COUNTY COMMISSIONERS  
OF WALTON COUNTY, FLORIDA

  
Larry Jones, Chair



## Geographic Map Sample



Client#: 17111

SOUTHWAL1

ACORD™

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/01/2018

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

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

<b>PRODUCER</b> <b>Bouchard Insurance (FTM)</b> <b>8191 College Parkway, Suite 202</b> <b>Fort Myers, FL 33919</b> <b>239 489-3232</b>	<b>CONTACT NAME:</b> Richard Caligiuri <b>PHONE (A/C, No, Ext):</b> 239 489-3232 <b>FAX (A/C, No):</b> 239 489-1084 <b>E-MAIL ADDRESS:</b> clcerts@bouchardinsurance.com <b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> American Alternative Ins Co <b>NAIC #</b> 19720 <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
<b>INSURED</b> <b>South Walton Fire District</b> <b>911 N County Highway 393</b> <b>Santa Rosa Beach, FL 32459</b>	

## COVERAGES

## CERTIFICATE NUMBER:

## REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> <b>CLAIMS-MADE</b> <input checked="" type="checkbox"/> <b>OCCUR</b>  <b>GEN'L AGGREGATE LIMIT APPLIES PER:</b> <input type="checkbox"/> <b>POLICY</b> <input type="checkbox"/> <b>PRO-JECT</b> <input type="checkbox"/> <b>LOC</b>	Y		VFISTR206562106	10/01/2017	10/01/2018	<b>EACH OCCURRENCE</b> \$1,000,000 <b>DAMAGE TO RENTED PREMISES (Ea occurrence)</b> \$1,000,000 <b>MED EXP (Any one person)</b> \$5,000 <b>PERSONAL &amp; ADV INJURY</b> \$1,000,000 <b>GENERAL AGGREGATE</b> \$3,000,000 <b>PRODUCTS - COM/PROP AGG</b> \$3,000,000  
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> <b>ANY AUTO</b> <input type="checkbox"/> <b>ALL OWNED AUTOS</b> <input type="checkbox"/> <b>SCHEDULED AUTOS</b> <input checked="" type="checkbox"/> <b>HIRED AUTOS</b> <input checked="" type="checkbox"/> <b>NON-OWNED AUTOS</b>  <b>UMBRELLA LIAB</b> <input type="checkbox"/> <b>OCCUR</b> <b>EXCESS LIAB</b> <input type="checkbox"/> <b>CLAIMS-MADE</b>  <b>DED</b> <input type="checkbox"/> <b>RETENTION \$</b> <input type="checkbox"/>	Y		VFISTR206562106	10/01/2017	10/01/2018	<b>COMBINED SINGLE LIMIT (Ea accident)</b> \$1,000,000 <b>BODILY INJURY (Per person)</b> \$ <b>BODILY INJURY (Per accident)</b> \$ <b>PROPERTY DAMAGE (Per accident)</b> \$  <b>EACH OCCURRENCE</b> \$ <b>AGGREGATE</b> \$  
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> <b>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?</b> <input type="checkbox"/> <b>Y/N</b> <b>(Mandatory in NH)</b> <b>If yes, describe under DESCRIPTION OF OPERATIONS below</b>		N/A				<b>WC STATU-TORY LIMITS</b> <input type="checkbox"/> <b>OTH-ER</b> <input type="checkbox"/> <b>E.L. EACH ACCIDENT</b> \$ <b>E.L. DISEASE - EA EMPLOYEE</b> \$ <b>E.L. DISEASE - POLICY LIMIT</b> \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

REF: On-Site Training w/ SWFD - TDC Building located at 24604 US Hwy 331 South, Santa Rosa Beach, FL

## CERTIFICATE HOLDER

## CANCELLATION

**Walton County Board of County Commissioners**  
**78 North Sixth Street**  
**De Funiak Springs, FL 32433**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*DA*

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