

CONTRACT, LEASE, AGREEMENT CONTROL FORM

Date: 08/18/2014

Contract/Lease Control #: L14-0407-AP

Bid #:

Contract/Lease Type: LEASE

Award To/Lessee: VERIZON WIRELESS

Owner/Lessor: OKALOOSA COUNTY

Effective Date: 08/05/2014

Term: 08/04/2019 W/4-FIVE YR RENEWALS

Description of Contract/Lease: SPACE AT 1001 AIRPORT ROAD DAP

Department: AP

Department Monitor: HARMAN

Monitor's Telephone #: 850-651-7160

Monitor's FAX # or E-mail: SHARMAN@CO.OKALOOSA.FL.US

Closed: _____

cc: Finance Department Contracts & Grants Office



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
08/19/2021

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 have ADDITIONAL INSURED provisions or 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).

PRODUCER Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME: _____	
	PHONE (A/C, No. Ext): (866) 283-7122	FAX (A/C, No.): (800) 363-0105
E-MAIL ADDRESS: _____		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: AIU Insurance Company		19399
INSURER B: National Union Fire Ins Co of Pittsburgh		19445
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 570088877982 **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,

INSUR	LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	SUBROGATION WAIVED	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	Limits shown are as requested	
								LIMITS	
B	X	COMMERCIAL GENERAL LIABILITY			1728890	06/30/2021	06/30/2022	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$2,000,000
	X	XCU Coverage is included						MED EXP (Any one person)	\$10,000
		GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$1,000,000
	X	POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE	\$2,000,000
		OTHER:						PRODUCTS - COM/PROP AGG	\$2,000,000
B		AUTOMOBILE LIABILITY			4594298	06/30/2021	06/30/2022	COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000
B	X	ANY AUTO			AOS	06/30/2021	06/30/2022	BODILY INJURY (Per person)	
B		OWNED AUTOS ONLY			4594299	06/30/2021	06/30/2022	BODILY INJURY (Per accident)	
B		HIRED AUTOS ONLY			MA	06/30/2021	06/30/2022	PROPERTY DAMAGE (Per accident)	
B		SCHEDULED AUTOS			4594300	06/30/2021	06/30/2022		
B		NON-OWNED AUTOS ONLY			VA	06/30/2021	06/30/2022		
		See Next Page							
		UMBRELLA LIAB						EACH OCCURRENCE	
		EXCESS LIAB						AGGREGATE	
		DED							
		RETENTION							
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			16393209	06/30/2021	06/30/2022	X PER STATUTE	
A		ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER (Mandatory in NH)			AOS	06/30/2021	06/30/2022	E.L. EACH ACCIDENT	\$1,000,000
		If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	16393206			E.L. DISEASE-EA EMPLOYEE	\$1,000,000
					CA			E.L. DISEASE-POLICY LIMIT	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 RE: Northwest Florida Regional Airport Das, Location Code: 274867. Lease No. L14-0412-AP Okaloosa County Board of County Commissioners is included as an Additional Insured with respect to Named Insured parties listed herein waive all rights against the 0 damages to the extent these damages are covered by the workers' Co by written contract between the parties.

CONTRACT#: L14-0407-AP
VERIZON WIRELESS
SPACE AT 1001 AIRPORT ROAD DAP
EXPIRES: 08/04/2019 W/4 5 YR RENEWALS

CERTIFICATE HOLDER Okaloosa County Board of County Commissioners Attn: Destin-Fort Walton Beach Airport Administration 1701 State Road 85 N. Eglin AFB FL 32542-1498 USA	CANCEL SHOULD DATE THIS CERTIFICATE BE CANCELLED? _____
	AUTHORIZED REPRESENTATIVE <i>Aon Risk Services Northeast Inc</i>

AGENCY CUSTOMER ID: 570000027366

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED Verizon Wireless, LLC	
POLICY NUMBER See Certificate Numbe 570088877982			
CARRIER See Certificate Numbe 570088877982	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER	
INSURER	
INSURER	
INSURER	

ADDITIONAL POLICIES

If a policy below does not include limit information, refer to the corresponding policy on the ACORD certificate form for policy limits.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
	AUTOMOBILE LIABILITY				(MM/DD/YYYY)		
B				4594301 NH - Primary	06/30/2021	06/30/2022	
B				4594302 NH - Excess	06/30/2021	06/30/2022	
	WORKERS COMPENSATION						
A		N/A		16393207 NY	06/30/2021	06/30/2022	
A		N/A		16393208 MA, ND, OH, WI, WY	06/30/2021	06/30/2022	
A		N/A		16393205 NJ, TX, VA	06/30/2021	06/30/2022	



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
12/23/2020

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 have ADDITIONAL INSURED provisions or 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).

PRODUCER Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105
	E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Verizon Wireless, LLC 1095 Avenue of the Americas New York NY 10036 USA	INSURER A: National Union Fire Ins Co of Pittsburgh	19445
	INSURER B: AIU Insurance Company	19399
	INSURER C: American Home Assurance Co.	19380
	INSURER D: New Hampshire Insurance Company	23841
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 570085371462 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.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> XCU Coverage is Included GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER			GL1728890	06/30/2020	06/30/2021	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$2,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
A	AUTOMOBILE LIABILITY			CA 4594298	06/30/2020	06/30/2021	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000
A	<input checked="" type="checkbox"/> ANY AUTO			AOS CA 4594299	06/30/2020	06/30/2021	BODILY INJURY (Per person)
A	<input type="checkbox"/> OWNED AUTOS ONLY			MA CA 4594300	06/30/2020	06/30/2021	BODILY INJURY (Per accident)
A	<input type="checkbox"/> HIRED AUTOS ONLY			VA	06/30/2020	06/30/2021	PROPERTY DAMAGE (Per accident)
A	<input type="checkbox"/> ONLY			See Next Page	06/30/2020	06/30/2021	
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC045886576	06/30/2020	06/30/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH
C	ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input checked="" type="checkbox"/> N	N/A	AOS WC045886575 CA	06/30/2020	06/30/2021	E.L EACH ACCIDENT \$1,000,000 E.L DISEASE-EA EMPLOYEE \$1,000,000 E.L DISEASE-POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 RE: Destin-Fort Walton Beach Airport IDAS, Location Code: 274869, Lease No. L14-0407-AP. Okaloosa County Board of County Commissioners is included as an Additional Insured with respect to the General Liability policy. where permitted by law, the Named Insured parties listed herein waive all rights against the Okaloosa County Board of County Commissioners for recovery of damages to the extent these damages are covered by the workers' Compensation policy referenced herein and, as further limited by written contract between the parties.

CERTIFICATE HOLDER Okaloosa County Board of County Commissioners Attn: Destin-Fort Walton Beach Airport Administration 1701 State Road 85 N. Eglin AFB FL 32542-1498 USA	CANCELLATION 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

Holder Identifier : L14-0407-AP

Certificate No : 570085371462





ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED Verizon Wireless, LLC	
POLICY NUMBER See Certificate Number: 570085371462			
CARRIER See Certificate Number: 570085371462	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER	
INSURER	
INSURER	
INSURER	

ADDITIONAL POLICIES If a policy below does not include limit information, refer to the corresponding policy on the ACORD certificate form for policy limits.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
	AUTOMOBILE LIABILITY						
A				CA 4594301 NH - Primary	06/30/2020	06/30/2021	
A				CA 4594302 NH - Excess	06/30/2020	06/30/2021	
	WORKERS COMPENSATION						
B		N/A		WC045886579 NY	06/30/2020	06/30/2021	
B		N/A		WC045886577 FL	06/30/2020	06/30/2021	
D		N/A		WC045886578 MA, ND, OH, WI, WY	06/30/2020	06/30/2021	
B		N/A		WC045886574 NJ, TX, VA	06/30/2020	06/30/2021	



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
06/18/2019

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PRODUCER Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105		
	E-MAIL ADDRESS:		
INSURED Verizon Wireless, LLC 1095 Avenue of the Americas New York NY 10036 USA	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: National Union Fire Ins Co of Pittsburgh		19445
	INSURER B: New Hampshire Insurance Company		23841
	INSURER C: AIU Insurance Company		19399
	INSURER D: American Home Assurance Co.		19380
	INSURER E: Illinois National Insurance Co		23817
INSURER F:			

Holder Identifier :

COVERAGES **CERTIFICATE NUMBER: 570076870300** **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. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> XCU Coverage is Included GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		GL6412251	06/30/2019	06/30/2020	EACH OCCURRENCE: \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence): \$2,000,000 MED EXP (Any one person): \$10,000 PERSONAL & ADV INJURY: \$1,000,000 GENERAL AGGREGATE: \$2,000,000 PRODUCTS - COMP/OP AGG: \$2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION					EACH OCCURRENCE AGGREGATE
B D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N N/A	WC014649148 AOS WC014649146 CA	06/30/2019	06/30/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT: \$1,000,000 E.L. DISEASE-EA EMPLOYEE: \$1,000,000 E.L. DISEASE-POLICY LIMIT: \$1,000,000

Certificate No : 570076870300

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Destin Executive Airport DAS (Verizon Site Name: Destin-Ft. Walton Beach Airport DAS), Location Code: 247869, Site Address: 1001 Airport Road, Destin, FL 32541. Okaloosa County is included as an Additional Insured with respect to the General Liability policy.

LH-0407-AP

CERTIFICATE HOLDER Okaloosa County 5479-A Old Bethel Road Crestview FL 32536 USA	CANCELLATION 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 <i>Aon Risk Services Northeast, Inc.</i>



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
08/19/2017

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PRODUCER Aon Risk Services Northeast, Inc. New York NY Office 199 Water Street New York NY 10038-3551 USA	CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105	
	E-MAIL ADDRESS:	
INSURED Verizon Communications Inc. 1095 Avenue of the Americas New York NY 10036 USA	INSURER(S) AFFORDING COVERAGE	
	INSURER A: National Union Fire Ins Co of Pittsburgh NAIC # 19445	
	INSURER B: New Hampshire Ins Co 23841	
	INSURER C: American Home Assurance Co. 19380	
	INSURER D: Illinois National Insurance Co 23817	
	INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER: 570067000845** **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. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Standard Contractual Liability <input checked="" type="checkbox"/> X,C,U Not Excluded GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			GL5196564	06/30/2017	06/30/2018	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMP/OP AGG \$1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION						EACH OCCURRENCE AGGREGATE
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WC063724385 AOS WC063724388 MN	06/30/2017	06/30/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 RE: Contract No. NG125054, Site Name: Northwest Florida Regional Airport, Site Address: 1701 State Road 85 North, Eglin AFB, FL 32542, Location Code: 274867. Northwest Florida Regional Airport is included as Additional Insured with respect to the General Liability policy.

Contract # L14-0407-AP
VERIZON WIRELESS
SPACE AT 1001 AIRPORT RD DAP
EXPIRES: 08/04/2019 W/ 4 FIVE YR RENEWALS

CERTIFICATE HOLDER

CANCELLATI

Northwest Florida Regional Airport
 Attn: Sunil Harman
 1701 State Road 85 North
 Eglin Air Force Base FL 32542-1498 USA

SHOULD ANY EXPIRATION D. POLICY PROVIS

AUTHORIZED REPRESENTATIVE

Aon Risk Services Northeast, Inc.

Holder Identifier :

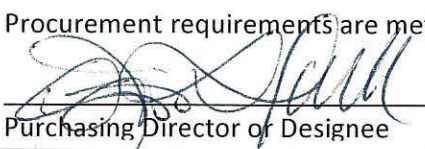
Certificate No : 570067000845

CONTRACT & LEASE INTERNAL COORDINATION SHEET

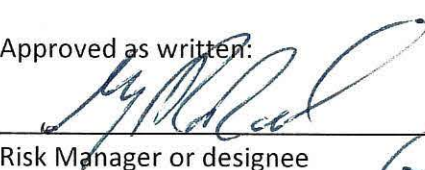
Contract/Lease Number: L14-0407-AP Tracking Number: 999-14
Contractor/Lessee Name: Verizon Wireless Grant Funded: YES ___ NO X
Purpose: Repeaters @ Duster AP
Date/Term: 9/30/18
Amount: 0
Department: AP
Dept. Monitor Name: Dorman / Miner
Document has been reviewed and includes any attachments or exhibits.

1. GREATER THAN \$50,000
2. GREATER THAN \$25,000
3. \$25,000 OR LESS

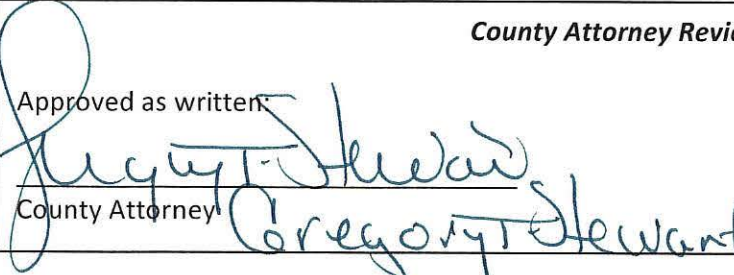
843-14 **Purchasing Review**

Procurement requirements are met:

Purchasing Director or Designee Joanne Kubili Date: 6-19-14

Risk Management Review

Approved as written:

Risk Manager or designee Gary Rhea Date: 6/20/14

County Attorney Review

Approved as written:

County Attorney Gregory T. Stewart Date: 6-23-14

Interim

Following Okaloosa County approval:

Contracts & Grants

Document has been received:

Contracts & Grants Manager Date: _____

To Dave 6/23/14

[View assistance for SAM.gov](#)

Search Results

Current Search Terms: verizon*

Your search for "VERIZON*" returned the following results...

Notice: This printed document represents only the first page of your SAM search results. More results may be available. To print your complete search results, you can download the PDF and print it.

Entity	Verizon Deutschland GmbH	Status: Active
DUNS: 332603174	NCAGE Code: DP050	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 07/29/2015	Delinquent Federal Debt? No	
Entity	VERIZON COMMUNICATIONS INC.	Status: Active
DUNS: 107212169	CAGE Code: 3L9T7	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 05/14/2015	Delinquent Federal Debt? No	
Entity	VERIZON COMMUNICATIONS INC.	Status: Active
DUNS: 107212169	CAGE Code: 3HMR4	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 05/14/2015	Delinquent Federal Debt? No	
Entity	VERIZON COMMUNICATIONS INC.	Status: Active
DUNS: 107212169	CAGE Code: 3L7L6	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 05/14/2015	Delinquent Federal Debt? No	
Entity	VERIZON NETWORK INTEGRATION CORP	Status: Active
DUNS: 847073335	CAGE Code: 1UP50	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 07/14/2015	Delinquent Federal Debt? No	
Entity	Verizon Wireless of the East LP	Status: Active
DUNS: 118509103	CAGE Code: 73X29	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 04/17/2015	Delinquent Federal Debt? Yes What is this?	
Entity	Alltel Communications, LLC	Status: Active
DUNS: 043562859	CAGE Code: 701H0	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 10/24/2014	Delinquent Federal Debt? No	
Entity	CELLCO PARTNERSHIP	Status: Active
DUNS: 968904698	CAGE Code: 1HWU7	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 07/19/2015	Delinquent Federal Debt? No	
Entity	Verizon Virginia Inc.	Status: Active
DUNS: 007941081	CAGE Code: 2D490	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 05/14/2015	Delinquent Federal Debt? No	
Entity	Verizon Virginia Inc.	Status: Active
DUNS: 007941081	CAGE Code: 1MTS9	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 05/14/2015	Delinquent Federal Debt? No	

Glossary

- [Search Results](#)
- Entity
- Exclusion
- [Search Filters](#)
- By Record Status
- By Functional Area - Entity Management
- By Functional Area - Performance Information

SAM | System for Award Management 1.0

IBM v1.1972.20140711-1717

Note to all Users: This is a Federal Government computer system. Use of this system constitutes consent to monitoring at all times.



IN BUILDING RADIO DISTRIBUTION AGREEMENT

This Agreement ("Agreement") is made as of August 5, 2014 ("Effective Date") between **Okaloosa County Board of County Commissioners**, whose principal place of business is 302 N. Wilson St. - Suite 302 Crestview, FL 32536 ("Licensor"), and **Verizon Wireless Personal Communications LP**, a Delaware limited partnership, d/b/a Verizon Wireless, whose principal place of business is One Verizon Way, Mail Stop 4AW100, Basking Ridge, New Jersey 07920, ("Licensee").

1. License. Licensor hereby licenses to Licensee certain spaces on and within Licensor's premises at 1001 Airport Road, Destin, Okaloosa County, Florida 32541 (the "Premises") for the installation of microcell(s), rerad(s) or other similar or comparable in-building radio-distribution devices ("IBRDs") and the installation of antennas serving such IBRDs ("IBRD Antennas") together with a space for cables, fibers or the equivalent connecting such IBRDs and IBRD Antennas, whether through conduit or otherwise. The IBRDs and IBRD Antennas and the connecting cables, fibers or equivalent and any other related equipment installed hereunder are the "IBRD System" or the "System". The IBRD System components and design principles are described on Exhibit A. Any microcells, cable runs or other aspects of the IBRD System installed by Licensee shall be for Licensee's exclusive use only. Licensee may replace and augment the IBRDs, IBRD Antennas and other portions of the IBRD System with similar or comparable equipment and modify any frequencies upon which such equipment operate as needed to provide in-building coverage in keeping with the design principles in Exhibit A.

2. Construction, Installation, Maintenance & Interference. All construction, installation and maintenance shall be performed by Licensee or its contractors in a safe manner consistent with current wireless industry engineering and construction standards and practices, and in accordance with Licensor's construction and contractors' rules (which are attached as Exhibit B), lien-free. Licensee, with Licensor's cooperation as or if needed, shall obtain all required governmental and quasi-governmental permits, licenses, approvals, and authorizations. Licensee agrees to only install radio equipment of the type and frequency that will not cause measurable interference to the equipment of Licensor or other tenants of the Premises existing as of the date this Agreement. Should Licensee's equipment cause measurable interference, and provided Licensor gives written notice, Licensee will take all steps necessary to correct and eliminate the interference. Licensor agrees that it and/or any other tenant of the Premises (current or future) will install only such radio equipment that is of the type and frequency that will not cause measurable interference to the existing equipment of the Licensee. Should Licensor's or another tenants' equipment cause measurable interference with Licensee, and provided Licensee gives written notice to Licensor of it, Licensor will take all steps necessary to correct and eliminate the interference, including causing other tenants of the Premises causing such

LEASE # L14-0407-AP
VERIZON WIRELESS
SPACE AT 1001 AIRPORT ROAD DAP
EXPIRES: 08/04/2019 W/4-FIVE YR
RENEWALS

interference to correct and eliminate the interference. The parties acknowledge that there will not be an adequate remedy at law for non-compliance with the provisions of this paragraph and therefore, either party shall have the right to specifically enforce the provisions of this paragraph in a court of competent jurisdiction.

3. Power. Licensor will supply electrical power in quality, quantity, and levels currently available at the Premises, and customary for the operation of similar IBRD Systems, at Licensor's cost. Notwithstanding the foregoing, no interruption or discontinuance of such electrical power will render Licensor liable to Licensee for damages or relieve Licensee of any of its obligations hereunder, except as such results from the acts or omissions of the Licensor.

4. Ownership & Control. The IBRD System is personal property of the Licensee and the Licensee at all times owns and controls the IBRD System. Licensor and Licensee agree, and Licensor shall so inform, any purchaser or mortgagee of the Premises, of this Agreement and that all equipment forming a part of the IBRD System, including, without limitation, all IBRDs, IBRD Antennas and cables, wires or equivalent connecting the same installed by or on behalf of Licensee shall be and remain the property of Licensee under all circumstances, under Licensee's exclusive control, free and clear of any liens or encumbrances other than those permitted by Licensee, and shall be deemed to be and remain personal property and not part of the real estate on which the same are located. Without limitation on any other rights of Licensee, such equipment may be removed by Licensee upon expiration or cancellation of the term of this Agreement, as the same may be from time to time extended or renewed, or upon earlier termination, for whatever reason and Licensee shall have 90 days after such expiration or termination to accomplish such removal. Licensee shall restore any areas of Licensor's premises damaged by such removal, except normal wear and tear.

5. Consideration. In consideration for the rights granted herein, Licensor's premises will receive the benefits of enhanced wireless communications arising from operation of the IBRD System. The design, construction, equipment, installation and maintenance of the IBRD System shall be at Licensee's sole cost.

6. Access. Licensor agrees to provide Licensee, its employees and/or agents access to the Premises twenty-four hours a day, seven days a week for the purpose of design, construction, installation, upgrading, maintenance and repair of the IBRD System, and testing of the radio frequency coverage of the area.

7. Term; Default; Termination.

The term of this Agreement shall be five years with four automatic 5-year renewal terms, unless the Licensor or Licensee terminates it at the end of the then current term by giving the other Party written notice of intent to terminate at least six (6) months prior to the end of the then current term. The Agreement will commence on the first day of the month following full execution.

In the event Licensor or Licensee defaults in the performance of any of its covenants or obligations hereunder and such default continues for a period of thirty (30) days after written notice thereof from the non-defaulting Party (unless the nature of the event takes longer to cure and the defaulting Party commences a cure within the time period and diligently pursue it), the non-defaulting Party may thereafter terminate this Agreement by written notice to the defaulting Party. Upon any such termination, Licensee shall remove the IBRD System and repair or restore any damage to Licensor's premises resulting therefrom, normal wear and tear excepted. This Agreement may only be terminated in accordance with its terms.

8. Indemnification, Insurance, Waiver of Consequential Damages. Licensor and Licensee each agree that at its own cost and expense, each will maintain commercial general liability insurance with limits not less than \$1,000,000 for injury to or death of one or more persons in any one occurrence and \$500,000 for damage or destruction to property in any one occurrence. Licensor and Licensee each agree that it will include the other Party as an additional insured. Licensor agrees that Licensee may self insure. The foregoing notwithstanding, whether the cause of any damage, loss or liability is insurable, insured or not insured, foreseen or unforeseen, in no event shall either party be responsible or liable to the other party for anticipatory profits or any indirect, special, incidental or consequential damages of any kind or nature arising directly or indirectly in connection with the construction, use or operation of the Premises or the exercise of any rights related thereto, whether based on an action or claim in contract or tort, including negligence, strict liability or otherwise.

9. Quiet Enjoyment. Licensor covenants that Licensee, upon performing all the covenants shall peaceably and quietly have, hold and enjoy the Premises and Licensor further covenants that Licensor is seized of good and sufficient title and interest to the Premises and has full authority to enter into this Agreement.

Licensor represents, warrants and covenants that if Licensor possesses the Premises pursuant to a lease, it is not in default under its lease with the owner of the Premises, the term of such lease extends to the Term of this Agreement with any and all renewal terms, and no approvals from the owner of the Premises is required for this Agreement to be implemented in its entirety.

10. Assignment. This Agreement may be assigned by either party to its principal, affiliates, subsidiaries of its principal or to any entity which acquires all or substantially all of its assets in the applicable Federal Communications

Commission license area by reason of a merger, acquisition or other business reorganization without the consent of the other party. As to other parties, any sale, assignment or transfer by either party must be with the written consent of the other party, such consent not to be unreasonably withheld.

11. Notices & Contacts. All notices hereunder must be in writing and shall be sent certified mail, return receipt requested, to the Licensor's address set forth in the first paragraph of this Agreement for Licensor and to Verizon Wireless Personal Communications LP d/b/a Verizon Wireless, 180 Washington Valley Road, Bedminster, New Jersey 07921 Attention: Network Real Estate for Licensee.

12. Title and Environmental Representations and Warranties Except as disclosed to and acknowledged in writing by Licensee, Licensor represents and warrants that (i) no lead paint, asbestos or other hazardous substance as defined by any applicable state, federal or local law or regulation, is present at any Premises; and (ii) Licensor owns or leases the Premises or otherwise has the right to grant the license and has obtained all required consents or approvals from any landlord, mortgagee or other person or entity ("Party In Interest") having an interest therein. At its sole discretion, Licensee may cease installation or operation of in-building equipment, until such times as Licensor corrects any condition that would be a breach of the above representations and warranties.

13. Miscellaneous. This Agreement contains all agreements, promises and understandings between the Licensor and the Licensee regarding this transaction, and no oral agreement, promises or understandings shall be binding upon either the Licensor or the Licensee in any dispute, controversy or proceeding. This Agreement may not be amended or varied except in a writing signed by all parties. This Agreement shall extend to and bind the heirs, personal representatives, successors and assigns hereto. The failure of either party to insist upon strict performance of any of the terms or conditions of this Agreement or to exercise any of its rights hereunder shall not waive such rights and such party shall have the right to enforce such rights at any time. This Agreement and the performance thereof shall be governed interpreted, construed and regulated by the laws of the state in which the Premises is located without reference to its choice of law rules.

Signatures to Follow

IN WITNESS WHEREOF, the parties hereto have set their hands, intending to be bound, as of the Effective Date.

Okaloosa County Board of County Commissioners
LICENSOR

Attest: Gary J. Stanford
Name: Gary J. Stanford
Title: Deputy Clerk of Circuit Court, Okaloosa County, Florida



By: Charles K. Windes, Jr.
Name: Charles K. Windes, Jr.
Title: Chairman
Date: 8/7/14



WITNESS

Verizon Wireless Personal Communications LP d/b/a Verizon Wireless
LICENSEE

M. Kiss
Name: M. Kiss
Kim Ulrich
Name: Kim Ulrich

By: Aparna Khurjekar
Name: Aparna Khurjekar
Title: Area Vice President Network
Date: 8.16.14

Exhibit A

IBRD System components/design principles

One (1) repeater to be installed in a closet in the "Regal building"; one (1) repeater to be installed in a closet in the "Destin Jet building"

Exhibit B
Licensors's construction and contractors' rules
(N/A)