



Contractor/Vendor Gate Access Document Registration Procedures

Uploading required registration documents:

1. Once you have informed Fisher Island Community Associations Public Safety Department of your intent to register, you will be issued a "User name and Password".
2. Log on to www.gateaccess.net
3. Use drop down box to select community code FICA
4. Enter your user name
5. Enter your password
6. Log on
7. Select browse to locate your document to be uploaded
8. Select Upload
9. If you would like to view your PDF upload to ensure it has uploaded properly, select view PDF

Adding employees:

1. Select new
2. Enter last name/company
3. Enter first name
4. Select browse to locate your employees identification to be uploaded
5. Select browse to locate your employees Acknowledgement release of liability form to be uploaded
6. Select browse to locate your employees use of barge form to be uploaded
7. If you would like to view your PDF upload to ensure it has uploaded properly, select view PDF
8. Each time you add an employee, you must upload a revised employee roster

Deleting employees:

1. Next to the name you would like to remove, you will see a delete button



✓ CONTRACTORS/SUBCONTRACTORS CHECK LIST

ALL INFORMATION MUST BE SUBMITTED TO THE FISHER ISLAND PUBLIC SAFETY DEPARTMENT.
PLEASE SUBMIT ALL INFORMATION AHEAD OF SCHEDULE FOR REVIEW.

PLEASE SUBMIT ALL DOCUMENTS TO: bjoseph@fisherislandfica.com
cvalles@fisherislandfica.com

LICENSES & APPROVALS

- Copy of the Contractor/Qualified Business License.
- County Business Tax Receipt and or Occupational license, if no state license.
- Copy of the Business Certificate Of Competency (COC) (**if applicable**).
- Condominium Association Approval (**General Contractor only**).
- ACC Approval (**if applicable**).

INSURANCE

Fisher Island Community Association, Inc. (FICA) One Fisher Island Drive, Fisher Island, FL 33109 and the Condominium Association name where the work will be developed must be listed as “Additional Insured” on any project not on Club property. Any project on Club property requires that “Fisher Island Club” be listed as “Additional Insured”, as well as FICA. **This rule applies to subcontractors also.**

- General Liability insurance (minimum \$1,000,000).
- Workers Compensation insurance (minimum \$1,000,000 for General Contractor).
- Provide a **fully executed** copy of personnel leasing contract (**if applicable**).
- Automobile Liability insurance (\$100,000/\$300,000/\$100,000 per vehicle) or:
- Automobile Combined Single Limit \$1,000,000
- Workers Compensation insurance \$1,000,000 for General Contractors, \$100,000 for Subcontractors.
- Workers Compensation exemption certificate for company performing work (**if applicable**).

OTHERS

- Complete the FICA Public Safety Contractor/Subcontractor Registration Form. General Contractor will be issued a project number in order to request clearance for subcontractors/workers to the unit/job site if approved by the property owner.
- The name and contact information for the General Contractor/Subcontractor and all workers along with copies of vehicle registrations, driver licenses or valid identification.
- Use of Commercial Barge form must be signed by all employees.
- Acknowledgment, Release and Waiver of Liability must be signed by all employees.



CONTRACTOR / SUBCONTRACTOR REGISTRATION FORM

PLEASE PRINT

Company Name:		Unit Number:	
Contractor Name:	First: Last:	Password:	
Email Address:			
Contractor Lic. Number:			
Telephone Number:			
Cellular Number:			
Company Address:	Description of work to be performed:		
Does this representative have your authorization to clear other workers or vendors?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does this contractor have your authorization to remove construction related items?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Representatives name authorized to clear:			
Property Owner's/Host Name (Print):			
Property Owner's/Host Signature:			
<p>This form must be completed by the appropriate parties for registration with the Public Safety Department and submitted with the registration package to bjoseph@fisherislandfica.com and copy acusson@fisherislandfica.com. The registrant is responsible for keeping all documentation related to his/her project up to date.</p> <p>Projects are limited to 5 vehicles per day; Sub-Contracted companies are limited to one vehicle per day. Contractors registering more than 10 employees must use high capacity vehicles (8 or more passengers).</p> <p>For golf cart use on the island, carts must be properly registered and insured. For registration, please contact Betty Munoz bmunoz@fisherislandfica.com or 305-535-6063.</p> <p>Valid color copies of driver licenses must be provided to facilitate a nationwide background check. You will be notified when the employee is approved and added to your employee roster. DO NOT schedule your employees for access to Fisher Island until you have received acknowledgement that they are approved.</p>			
Contractors Signature:		Date:	



EMPLOYEE ROSTER

PLEASE PRINT

Company Name:		Unit #/Location:	
Employee Name:	First: Last:	Date of Birth:	
Driver License Number:		D. L. Exp. Date:	
Address:		City:	State:
Zip Code:		Telephone #:	
Vehicle Make:		Vehicle Model:	
Vehicle Color:		Vehicle Year:	
Vehicle License Plate #:		Vehicle Reg. Exp.:	
Employee Name:	First: Last:	Date of Birth:	
Driver License Number:		D. L. Exp. Date:	
Address:		City:	State:
Zip Code:		Telephone #:	
Vehicle Make:		Vehicle Model:	
Vehicle Color:		Vehicle Year:	
Vehicle License Plate #:		Vehicle Reg. Exp.:	
Employee Name:	First: Last:	Date of Birth:	
Driver License Number:		D.L. Exp. Date:	
Address:		City:	State:
Zip Code:		Telephone #:	
Vehicle Make:		Vehicle Model:	
Vehicle Color:		Vehicle Year:	
Vehicle License Plate #:		Vehicle Reg. Exp.:	
Employee Name:	First: Last:	Date of Birth:	
Driver License Number:		D.L. Exp. Date:	
Address:		City:	State:
Zip Code:		Telephone #:	
Vehicle Make:		Vehicle Model:	
Vehicle Color:		Vehicle Year:	
Vehicle License Plate #:		Vehicle Reg. Exp.:	



Acknowledgement, Release and Waiver of Liability (During COVID 19)

I hereby acknowledge the following:

1. Fisher Island has a speed limit of **19 miles per hour**. Violations will result in fines and, for habitual offenders, consideration of drive on privilege revocation.
2. Fisher Island Community Association reserves the right to conduct a criminal background check as part of my registration process.
3. Fisher Island Community Association reserves the right to deny access to Fisher Island property based on the results of a criminal background check.
4. I hereby release and forever discharge and hold harmless Fisher Island Community Association, Inc. and/or Fisher Island Holdings, LLC, and their respective officers, employees, board members, and agents, from any and all liability, claim, loss, judgment, settlement, damage, or expense of any kind with respect to any property damage or theft that may result from parking on property owned or controlled by Fisher Island Community Association, Inc. and/or Fisher Island Holdings, LLC.
5. Fisher Island Community Association reserves the right to search and inspect my vehicle and any personal property I may bring on Fisher Island property.
6. Possession of any type of weapon, ammunition or explosive material is not permitted on Fisher Island property.
7. Possession and/or distribution of illegal drugs or alcohol is not permitted on Fisher Island property.
8. Engaging in verbal threats or physical altercations (fighting) is not permitted on Fisher Island property.
9. You are responsible for transporting your personnel while on Fisher Island.
10. Protective masks and gloves will be worn at all times while on Fisher Island.
11. Social distancing will be practiced at all times while on Fisher Island.
12. The employee cafeteria and employee restrooms are for Fisher Island employees only and not to be utilized by contractors and their employees.
13. Employees will travel directly from the barge to the job site, and directly from the job site to the barge at the end of the workday, no stops in between.

**FAILURE TO COMPLY WITH ANY OF THE FOREGOING
WILL RESULT IN DENIED OR REVOKED ACCESS TO FISHER ISLAND**

[Signature]

[Date]

[Print Name]

[Telephone Number]

[Company Name]



Acuse de recibo, exoneración y renuncia de responsabilidad (Durante COVID-19)

Por la presente reconozco lo siguiente:

1. Fisher Island tiene un límite de velocidad de 19 millas por hora. Violaciones darán lugar a multas y, para los que no cumplan con las reglas, se les revocará sus privilegios de manejar en la isla.
2. Fisher Island Community Association se reserva el derecho a realizar verificación de antecedentes criminales como parte de mi proceso de registro.
3. Fisher Island Community Association se reserva el derecho a negar el acceso a las propiedades de la isla, basado en los resultados de la revisión de antecedentes penales.
4. Por la presente libero y exonero para siempre y libero a Fisher Island Community Association, Inc. y / o Fisher Island Holdings, LLC, y sus respectivos funcionarios, empleados, miembros del directorio y agentes, de cualquier y toda responsabilidad, reclamo, pérdida, resolución, transacción, daños o gastos de ningún tipo, con respecto a a cualquier daño a la propiedad o robo que pueda resultar del estacionarse en propiedad de, o controlada por Fisher Island Community Association, Inc., y / o de Fisher Island Holdings, LLC.
5. Fisher Island Community Association se reserva el derecho de revisar e inspeccionar mi vehículo y cualquier propiedad personal que haya traído a la propiedad de Fisher Island.
6. La posesión de cualquier tipo de armas, municiones o material explosivo no es permitida en la propiedad de Fisher Island.
7. La posesión y / o distribución de drogas ilegales o alcohol no está permitido en la propiedad de Fisher Island.
8. Participar en amenazas verbales o altercados físicos no está permitido en la propiedad de Fisher Island.
9. Usted es responsable de transportar a su personal mientras está en Fisher Island.
10. Se usarán máscaras y guantes protectores en todo momento, mientras esté en Fisher Island.
11. El distanciamiento social se practicará en todo momento mientras esté en Fisher Island.
12. La cafetería y los baños de los empleados son sólo para empleados de Fisher Island y no deben ser utilizados por los contratistas y sus empleados.
13. Los empleados viajarán directamente desde el "barge" al sitio de trabajo, y directamente desde el sitio de trabajo al "barge" al final de la jornada laboral, sin paradas intermedias.

NO CUMPLIR CON CUALQUIERA DE LOS ANTERIORES PUEDE RESULTAR LA NEGADA O REVOCACION DEL ACCESO A FISHER ISLAND

[Firma]

[Fecha]

[Nombre]

[Número de Teléfono]

[Nombre de la Compañía]



Use of Commercial Barge

All contractors must use the commercial barge located at Port Miami, Terminal J.

Hours of Operation

Monday – Friday: 6:00 a.m. to 6:00 p.m.

Last barge departs Port Miami to Fisher Island at 4:00 p.m.

Last barge departs Fisher Island to Port Miami at 6:30 p.m.

The barge does not operate on Saturdays, Sundays and Holidays

- All vehicles using the barge are subject to search.
- Contractors must present a valid form of photo identification to enter Fisher Island and maintain possession of identification while on Fisher Island property.
- Contractors are allowed to drive to the building where they are conducting work to drop off tools, materials and workers.
- A shuttle bus is available for transport around the island.
- Contractors may not operate a unit owner's golf cart without written authorization from the unit owner. Contractors may contact the Public Safety Office to inquire about the registration process for contractor golf carts.

FAILURE TO COMPLY WITH ANY OF THE FOREGOING MAY RESULT IN DENIED OR REVOKED ACCESS TO FISHER ISLAND

I understand, acknowledge and agree to the foregoing.

[Signature]

[Date]

First: _____

Last: _____

[Print Name]

[Telephone Number]

[Company Name]



El uso del BARGE COMMERCIAL

Todos los contratistas deben utilizar El Barge Commercial ubicado en el Puerto de Miami, Terminal J.

Horas de Operación:

Lunes - Viernes: 06 a.m.-06:00 p.m.

Último Barge sale del Puerto de Miami Fisher Island a las 4:00 p.m.

Último Barge sale de Fisher Island al Puerto de Miami a las 6:30 p.m.

El Barge no opera los sábados, domingos y Días Festivos

- Todos los vehículos que utilizan El Barge están sujetos a revisión.
- Los contratistas deben presentar una forma válida de identificación con foto para ingresar a Fisher Island y mantener la misma, mientras estén en la propiedad de Fisher Island.
- Los contratistas se les permite conducir al edificio donde se están llevando a cabo trabajos para dejar las herramientas, materiales y trabajadores.
- Un servicio de autobús está disponible para el transporte alrededor de la isla.
- Los contratistas no pueden operar carrito de golf sin la autorización por escrito del propietario de la unidad.

Los contratistas pueden ponerse en contacto con la Oficina de Seguridad Pública para informarse sobre el proceso de registro para poder operar los carros de golf para el uso de su trabajo de construcción.

NO CUMPLIR CON CUALQUIERA DE LOS ANTERIORES PUEDE RESULTAR EN LA NEGADA O REVOCACION A FISHER ISLAND.

Yo entiendo, reconozco y estoy de acuerdo con lo anterior.

[Signature]

[Date]

[Print Name]

[Telephone Number]

[Company Name]

SECTION 7
VISITING CONTRACTORS AND SUBCONTRACTORS

1. Visiting Contractors and Subcontractors are those who are on the island to perform a particular scope of work, including but not limited to, renovations, repairs or maintenance of buildings, lots or units. Prior to beginning their scopes of work, the Visiting Contractors and Subcontractors must provide to the Licensed Community Association Manager (LCAM) or Club CEO designee, which manages the Owner's property, condominium association property, homeowner's association property, or Club Property, the following documentation, which shall be maintained on file by the condominium or homeowners' association LCAM or Club CEO for purposes of protecting those associations in the case of insurance claims and legal or labor disputes.
 - (a) An executed copy of the agreement between the resident and the contracting entity which specifically identifies the nature of the work to be performed;
 - (b) If the scope of work in an association is "interior" with no visible impact outside the affected space, the LCAM or CEO Designee will provide FICA with a copy of the condo association approval or homeowner's association approval so that the Public Safety Department can respond to complaints, water leaks, improper waste management, etc., in those hours when the association property manager and building technician are not on the island;
 - (c) A projected schedule of the work, the names and contact information of the General Contractor, and the names and contact information of Subcontractors so that the Public Safety Department can respond during emergencies and to complaints, and so that the Transportation Department can plan the numbers of barges required on certain days;
 - (d) A copy of the business and contractor's licenses;
 - (e) Proof of general liability insurance, automobile liability, and workers compensation insurance. FICA must be listed as "Additional Insured" on any project not on Club Property. Any project on Club Property requires that "Fisher Island Club" be listed as "Additional Insured, as well as FICA. The general liability insurance minimum for a Visiting Contractor is \$1,000,000; for Workers' Compensation, the minimum is \$1,000,000. Automobile liability should be no less than 100/300/100 per vehicle. Failure to provide a Certificate of Insurance showing the Association as a Certificate Holder or Additional Insured, if required, will cause the Association to deny Clearance;
 - (f) A signed Contractor Acknowledgement of FICA and condominium association, homeowner's association or Club construction rules, parking rules and traffic rules.
2. If the Association disapproves the Contractor because of (a) history of leaving residents with mechanics liens, (b) violation of condominium association, homeowner's association, Club or FICA Rules and Regulations or (c) has a criminal record, the Owner, Club CEO, condominium association or homeowner's association will be notified of such disapproval and the Visiting Contractor or Subcontractor will be denied use of the Transportation System. If the Association approves the Visiting Contractor or Subcontractor, the Visiting Contractor and/or Subcontractor will be informed that they must use the contractor's barge, which is presently located at the Port of Miami but may be relocated from time to time. Contractors performing construction are not authorized to utilize the Association's ferry or recreational facilities under any circumstances. Moreover, if approved by the Association, Visiting Contractors and Subcontractors will only be permitted ingress and egress access to and from the unit/lot for which the work has been approved.

3. Visiting Contractors and Subcontractors must pay to use the island's transportation system. The Board of Directors will determine the fee structure, pursuant to Exhibit A. The Association may issue to the Property Management Company of an association a "Clearance Number" which must be used to clear vehicles on to the barge, which upon the Owner's written approval, may be delegated to the General Contractor, which may generate fees, with advance notice, to either the Visiting Contractor or Subcontractor, or to the Owner, condominium association, homeowners' association or Club; however, such fees will, if imposed, be added to the Owner's FICA account.
4. Any Owner providing false clearance through the Public Safety Department's access control unit will be fined and denied use of the Common Areas for up to 60 days per occurrence. For habitual offenders, the Association may require the offending Owner to appear in person at the Public Safety office to sign affidavits to provide clearance.
5. Construction guidelines which may be modified by individual associations, except that FICA is not obligated to provide barge or commercial ferry use, with the exception of emergency or necessary repairs and improvements to Units and Lots, prior to April 15 or after November 15, or on Saturdays or Holidays, are as follows:
 - (a) Construction is only permitted from April 15 to November 15;
 - (b) No work will be allowed on the following days: Memorial Day, Independence Day, Labor Day, Thanksgiving Day, the day after Thanksgiving, and between December 20 and January 2;
 - (c) Hours: 9:00 a.m. – 4:00 p.m., Monday – Friday (Owners, Property Management Companies or any other representative will be held responsible for any contractors who remain on Island past 5:30 p.m.);
 - (d) Loud noise will only be permitted between 11:00 am – 4:00 pm in any occupied structure (defined as demolition of stone, demolition of walls, core drilling into concrete slabs, saw cutting of concrete or stone, use of air-hammers, jack hammers or air screw drivers);
 - (e) All clean up must be completed and Contractor must be off the jobsite by 5:00 p.m. All construction materials and tools must be stored out of plain sight;
 - (f) Transportation is provided throughout the Island via Island Transportation trolleys
 - (g) Saw cutting of materials is not permitted in any Common Areas, Limited Common Elements (balconies, terraces, common corridors, or garages. Furthermore, any construction for a unit may not be performed within the Common Areas of FICA or the common areas of any association;
 - (h) Any paved pathways are intended only to be used for walking, bicycling or golf carts. No vehicles, trucks or cranes are to be used without the expressed written consent of FICA and supervision by FICA, which shall be provided to the Visiting Contractor or Subcontractor for fee.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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).

PRODUCER Insurance Agent/Broker Name Insurance Agent/Broker Street Address or P.O. Box Insurance Agent/Broker City, State & Zip Code Contact City & Phone Number		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: FAX (A/C, No):																						
INSURED Vendor Name Vendor Street Address or P.O. Box Vendor City, State & Zip Code		<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td colspan="2">Name of Insurance Company</td> </tr> <tr> <td>INSURER B:</td> <td colspan="2">Name of Insurance Company (if applicable)</td> </tr> <tr> <td>INSURER C:</td> <td colspan="2">Name of Insurance Company (if applicable)</td> </tr> <tr> <td>INSURER D:</td> <td colspan="2"></td> </tr> <tr> <td>INSURER E:</td> <td colspan="2"></td> </tr> <tr> <td>INSURER F:</td> <td colspan="2"></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Name of Insurance Company		INSURER B:	Name of Insurance Company (if applicable)		INSURER C:	Name of Insurance Company (if applicable)		INSURER D:			INSURER E:			INSURER F:		
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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	GENERAL LIABILITY			Policy Number			EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	<input type="checkbox"/>	<input type="checkbox"/>				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input type="checkbox"/>	<input type="checkbox"/>				MED EXP (Any one person)	\$ N/A
	GEN'L AGGREGATE LIMIT APPLIES PER:							PERSONAL & ADV INJURY
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						GENERAL AGGREGATE	\$ 2,000,000
B	AUTOMOBILE LIABILITY		<input type="checkbox"/>	Policy Number			COMBINED SINGLE LIMIT (Ea accident)	\$
	<input checked="" type="checkbox"/> ANY AUTO	<input type="checkbox"/>	<input type="checkbox"/>				BODILY INJURY (Per person)	\$ 100,000
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/>	<input type="checkbox"/>				BODILY INJURY (Per accident)	\$ 300,000
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/>	<input type="checkbox"/>				PROPERTY DAMAGE (Per accident)	\$ 100,000
	<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS							\$
	UMBRELLA LIAB		<input type="checkbox"/>	Policy Number			EACH OCCURRENCE	\$
	EXCESS LIAB	<input type="checkbox"/>	<input type="checkbox"/>				AGGREGATE	\$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$							\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		<input type="checkbox"/>	Policy Number			WC STATUTORY LIMITS	OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>	N/A				E.L. EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

SAMPLE

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

Certificate holder and (BUILDING ASSOCIATION, SEE ATTACHED LIST) are listed as additional insured with regards to both general and automobile liability.

Workers compensation in the amount of \$1,000,000 applies to certified general contractors, sub-contractors are required to provide \$100,000.

CERTIFICATE HOLDER Fisher Island Community Association, Inc. One Fisher Island Drive Fisher Island, FL 33109	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 AUTHORIZED AGENT SIGNATURE/ENDORSEMENT
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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PRODUCER Insurance Agent/Broker Name Insurance Agent/Broker Street Address or P.O. Box Insurance Agent/Broker City, State & Zip Code Contact City & Phone Number		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: FAX (A/C, No):															
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INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			Policy Number			EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	<input type="checkbox"/>	<input type="checkbox"/>				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input type="checkbox"/>	<input type="checkbox"/>				MED EXP (Any one person) \$ N/A
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY \$ 1,000,000
B	AUTOMOBILE LIABILITY	<input type="checkbox"/>	<input type="checkbox"/>	Policy Number			GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> ANY AUTO	<input type="checkbox"/>	<input type="checkbox"/>				PRODUCTS - COMP/OP AGG \$ 1,000,000
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/>	<input type="checkbox"/>				\$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/>	<input type="checkbox"/>				COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
B	UMBRELLA LIAB	<input type="checkbox"/>	<input type="checkbox"/>	Policy Number			BODILY INJURY (Per person) \$
	EXCESS LIAB	<input type="checkbox"/>	<input type="checkbox"/>				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> CLAIMS-MADE	<input type="checkbox"/>	<input type="checkbox"/>				PROPERTY DAMAGE (Per accident) \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	<input type="checkbox"/>	<input type="checkbox"/>	Policy Number			\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/>	<input type="checkbox"/>				EACH OCCURRENCE \$ 1,000,000
		<input type="checkbox"/>	<input type="checkbox"/>				AGGREGATE \$
		<input type="checkbox"/>	<input type="checkbox"/>				\$

SAMPLE

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

Certificate holder and (BUILDING ASSOCIATION, SEE ATTACHED LIST) are listed as additional insured with regards to both general and automobile liability.

Workers compensation in the amount of \$1,000,000 applies to certified general contractors, sub-contractors are required to provide \$100,000.

CERTIFICATE HOLDER**CANCELLATION**

Fisher Island Community Association, Inc. One Fisher Island Drive Fisher Island, FL 33109	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
	AUTHORIZED AGENT SIGNATURE/ENDORSEMENT

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**If the unit where the work is being performed begins with the below numbers,
the Association name to the right is how it should be displayed on the Certificate of Insurance**

BUILDING #	ASSOCIATION NAME
20	Bayside Village East Condominium Association, Inc.
21	Bayside Village East Condominium Association, Inc.
22	Bayside Village Condominium Association, Inc.
23	Bayside Village Condominium Association, Inc.
24	Bayside Village Condominium Association, Inc.
25	Bayside Village Condominium Association, Inc.
40	Marina Village Gardens at Fisher Island Condominium No. Two Association, Inc.
41	Marina Village Condominium Association, Inc.
42	Marina Village at Fisher Island Condominium No. Three Association, Inc.
45-47	Harborview at Fisher Island Condominium Association, Inc.
48	Bayview at Fisher Island Condominium No. One Association, Inc.
49	Bayview at Fisher Island Condominium No. One Association, Inc.
50	5000 Bayview at Fisher Island Condominium Association, Inc.
51	5100 Bayview at Fisher Island Condominium Association, Inc.
52	Bayview at Fisher Island Condominium No. Three Association, Inc.
53	Bayview at Fisher Island Condominium No. Two Association, Inc.
69	Valencia Estates Homeowners' Association, Inc.
70	Palazzo del Sol / della Luna at Fisher Island Condominium Association, Inc.
71	Palazzo del Mare at Fisher Island Condominium No. One Association, Inc.
72	Oceanside at Fisher Island Condominium No. Five Association, Inc.
74	7400 Oceanside at Fisher Island Condominium Association, Inc.
76	7600 Oceanside at Fisher Island Condominium Association, Inc.
77	Oceanside at Fisher Island Condominium No. Four Association, Inc.
78	Oceanside at Fisher Island Condominium No. Three Association, Inc.
79	Oceanside at Fisher Island Condominium No. Two Association, Inc.
80	Oceanside at Fisher Island Condominium Association, Inc.
151-159	Seaside Villas Condominium Association, Inc.
191-192	Seaside at Fisher Island Condominium Association, Inc.



UNITED STATES COAST GUARD MANDATED SAFETY MEASURES

In February of this year, the United States Coast Guard (USCG) Commander issued a temporary suspension of the condition that previously granted our ferry operation the special consideration to maintain all vehicle engines on while aboard the ferry.

The USCG mandate requires all passengers to set their emergency brakes on and turn their vehicle engines off. Vehicle engines must remain off until the ferry lands and is tied up at the terminal.

The Captain of the vessel has the authority and obligation to either remove any vehicle that does not comply with the USCG mandate or he can decide not to leave the terminal until 100 percent compliance is achieved. Captains and Deckhands are continuously reminding all passengers to set their emergency brakes on and turn their vehicle engines off. Additionally, signs in all points of entries are in place to remind all drivers to set their emergency brakes on and shut off their engines.

Failure to comply with the USCG Mandate will result in denial of drive on access to the Transportation System.

Acknowledged By:

Signature

Employee Name

Date Signed

Company Name



GUARDIA COSTERA DE LOS ESTADOS UNIDOS MEDIDAS DE SEGURIDAD OBLIGATORIAS

En febrero de este año, el comandante de la Guardia Costera de los Estados Unidos (USCG) emitió una suspensión temporal de la condición que anteriormente le otorgaba a nuestra operación de ferry la consideración especial de mantener todos los motores de los vehículos encendidos mientras estaba a bordo del ferry.

El mandato de la USCG requiere que todos los pasajeros activen los frenos de emergencia y apaguen los motores de sus vehículos. Los motores de los vehículos deben permanecer apagados hasta que el ferry aterrice y esté amarrado en la terminal.

El Capitán de la embarcación tiene la autoridad y la obligación de retirar cualquier vehículo que no cumpla con el mandato de la USCG o puede decidir no abandonar la terminal hasta que se logre el 100% de cumplimiento. Los capitanes y marineros recuerdan continuamente a todos los pasajeros que activen los frenos de emergencia y apaguen los motores de sus vehículos. Además, hay letreros en todos los puntos de entrada para recordar a todos los conductores que deben activar los frenos de emergencia y apagar los motores.

El incumplimiento del Mandato de la USCG resultará en la denegación de conducir en el acceso al Sistema de Transporte.

Reconocido Por:

Firma

Nombre del empleado

Fecha firmada

Nombre de la empresa



CONTRACTOR COVID PROTOCOL

Each project will need to provide a comprehensive plan and acknowledgement that the provided guidelines will be adhered to. This applies to all vendors, condo associations, & individual units. Association managers will be responsible for ensuring all safe practices are taking place for all projects, including individual units, within their buildings. The purpose of this plan and acknowledgment is to ensure that everyone's health and safety remains priority #1.

Information to be Provided:

- Vendors will not be permitted to walk from one building to another on Fisher Island. They will be required to provide their own transportation to and from the barge/ferry and the project site, no deviation from the pre-approved buildings you are approved to visit.
- Bathroom Plan - Vendors will not be permitted to use public or employee bathrooms on Fisher Island. Each project needs to demonstrate that they have a place where vendors/contractors have access to a bathroom.
- Meal Plan - Vendors will not be permitted to use employee cafeteria or the island market. Please provide a plan that will ensure vendors/contractors have a place to eat at the project site.

Required Guidelines that must always be adhered to while on Fisher Island:

- All workers must attest that they themselves and their household members are not currently ill and have not exhibited any symptoms whatsoever for at least 14 days prior.
- All vendors must always wear gloves and masks
- All vendors will always practice social distancing
- Vendors/Contractors must provide their own means of transportation from barge to job site
- Vendors will not be permitted to walk anywhere on the island.
- Vendors will not be permitted to enter the employee cafeteria
- Each job must provide a bathroom for all visiting Vendors, as they will not be permitted to use public bathrooms around the island.
- Vendors must always remain in vehicle while waiting for ferry/barge.
- Vendors may not smoke while in cue waiting for ferry/barge

I acknowledge and agree to the above requirements.

Date: _____

Print Name: _____

Signature: _____