

D & A INSPECTIONS UNLIMITED  
P. O. Box 283  
Callahan, Florida 32011

Contract for Services

Whereas, the Municipality requires high quality professional building inspection services sensitive to community needs and,

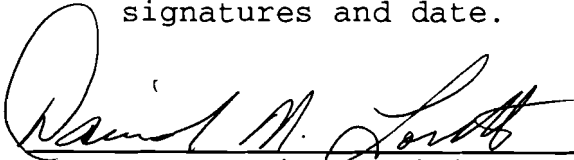
Whereas, D & A Inspections Unlimited, (The Agency), proposes to provide inspection, stop work orders and plan review services for the Municipality including inspections and meeting the Municipality's needs for such inspection services,

Now therefore, the parties, agree as follows:

1. The Agency will provide services for the Municipality, which shall include building inspections, necessary services related to contacts with residents and Municipal Officials, and all associated tasks necessary to meet the inspection needs of the Municipality.
2. The Inspector shall be certified in Construction, HVAC, Electrical, Plumbing, Commercial Construction, and Commercial Electrical as required by the State of Florida.
3. The Municipality shall provide:
  - A. Hourly Fees charged via invoice
  - B. Field Communication equipment.
  - C. Vehicle mileage to and from Callahan Residence for plan review (maximum 3 day per week)
4. The Agency shall provide:
  - A. Certificate of insurance showing all coverage
  - B. Bond Certificate for Nassau County \$2,000
  - C. Vehicle furnished by County to perform inspections
5. Except for cause, either the Municipality or the Agency may terminate this agreement upon 30 days written notice to the other party of the intention to terminate. Either party may terminate this agreement for cause. Cause shall be defined as failure to adhere to the terms of the agreement. Any notice to the Municipality shall be sent to the Municipal Authority directly in charge of Inspection Procedures.
6. As is customary in private contracting by municipalities for such services, the Municipality will provide liability and legal protection to the Agency and individual inspector for


any and all damages resulting from action on the part of the inspector, if such action is within the customary scope of the duties performed for the Municipality. The protection will be consistent with the limits currently in effect under existing Municipal insurance policies, but in no case less than One Million Dollars aggregate total, effective by the services commencement date, evidenced by a certificate of insurance.

7. The Municipality shall compensate the Agency for all enforcement duties and meetings occurring other than normal business hours at the rate of \$35.00 for each hour including travel time for meetings. No additional time shall be compensated by the Municipality unless approved by the Municipal leadership. The Agency will provide a minimum of 6 hours per day, 3 days per week at a rate of \$25.00 per hour for plan review/office work and \$27.00 per hour for inspections.
8. The Agency shall provide a statement for services rendered for each month. The Municipality shall compensate the Agency by the 15th of the month following the period services were rendered.
9. The Agency agrees to provide these services commencing the date of this document authentication as evidenced by signatures and date.

  
\_\_\_\_\_  
D & A Inspection Unlimited

10/11/95  
Date

Nassau County Board of County Commissioners  
Nassau County (Municipality)

  
\_\_\_\_\_  
(Signed) Vice Chairman

10-12-95  
Date

acknowledged and accepted and approved  
by the Board of County Commissioners on  
October 12, 1995

# CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

10/11/95

**PRODUCER**

AMELIA INSURANCE AGENCY  
 P. O. BOX 1098  
 2384 SADLER ROAD  
 FERNANDINA BEACH, FL 32035

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

### COMPANIES AFFORDING COVERAGE

COMPANY LETTER	<b>A</b>	COLONY INSURANCE COMPANY
COMPANY LETTER	<b>B</b>	
COMPANY LETTER	<b>C</b>	
COMPANY LETTER	<b>D</b>	
COMPANY LETTER	<b>E</b>	

**INSURED**

D&A INSPECTIONS UNLIMITED  
 C/O DAVID LOVETTE  
 P O BOX 283  
 CALLAHAN, FL 32011

**COVERAGES**

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
<b>A</b>	<b>GENERAL LIABILITY</b>	<b>BINDER</b>	10/11/95	10/11/96	GENERAL AGGREGATE \$ 300,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGGR. \$ 300,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR.				PERSONAL & ADV. INJURY \$ 300,000
	OWNER'S & CONTRACTOR'S PROT.				EACH OCCURRENCE \$ 300,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED. EXPENSE (Any one person) \$ 1,000
	<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT \$
	ANY AUTO				BODILY INJURY (Per person) \$
	ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS				PROPERTY DAMAGE \$
	HIRED AUTOS				
	NON-OWNED AUTOS				
	GARAGE LIABILITY				
	<b>EXCESS LIABILITY</b>				EACH OCCURENCE \$
	UMBRELLA FORM				AGGREGATE \$
	OTHER THAN UMBRELLA FORM				
	<b>WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY</b>				STATUTORY LIMITS
					EACH ACCIDENT \$
					DISEASE-POLICY LIMIT \$
					DISEASE-EACH EMPLOYEE \$
	<b>OTHER</b>				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**

**CERTIFICATE HOLDER**

NASSAU COUNTY BUILDING & ZONING DEPT  
 2290 S STATE RD 200  
 FERNANDINA BCH, FL 32034

**CANCELLATION**

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

AUTHORIZED REPRESENTATIVE

*Wayne S. White*

STATE OF FLORIDA  
**NASSAU COUNTY OCCUPATIONAL LICENSE**

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE  
SHOWING TRANSACTION NUMBER, DATE AND AMOUNT PAID.

THIS LICENSE IS FURNISHED IN PURSUANCE OF CHAPTER 205, FLORIDA  
STATUTES AND COUNTY ORDINANCE NO. 72-17.

New 1 Year

┌ D & A Inspections Unlimited ┐  
└ C/O David M. Lovette ┘  
119 S. Kings Road  
Callahan, Fl 32011  
┌ ┘

**1995-1996**

COUNTY \$ 11.00

PENALTY \$

ORIGINAL

AMOUNT DUE \$ 11.00

NOTE — A PENALTY IS IMPOSED FOR  
FAILURE TO KEEP THIS LICENSE EXHIBITED  
CONSPICUOUSLY AT YOUR ESTABLISHMENT  
OR PLACE OF BUSINESS.

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS,  
PROFESSION OR OCCUPATION AS STATED ABOVE FOR THE  
PERIOD BEGINNING AUGUST 1, 1995 AND ENDING ON  
SEPTEMBER 30, 1996.

**GWENDOLYN M. MILLER, C.F.C.**  
TAX COLLECTOR, NASSAU COUNTY  
P. O. BOX 708  
FERNANDINA BEACH, FLORIDA 32035-0708

TYPE OF BUSINESS CHAPTER 72-306.

THIS LICENSE IS VALID ONLY IF NO OTHER LAW OR ORDINANCE IS VIOLATED: ESPECIALLY ZONING

205.471 Building Inspections

7924 111

10/1/95

TOTAL

11.00

SS#251-58-8924 1-5 Empls,

WESTERN SURETY COMPANY • ONE OF AMERICA'S OLDEST BONDING COMPANIES



# Western Surety Company

## LICENSE AND PERMIT BOND

For County, City, Town or Village Only-Not Valid for Bonds Required by the State. Not Valid for Contract, Performance, Maintenance, Subdivision, Agent to Sell Hunting and Fishing Licenses or Utility Guarantee Bond.

KNOW ALL MEN BY THESE PRESENTS:

BOND No. L & P. 42683679

That we, David M. Lovette,  
of the Town of Callahan, State of Florida, as Principal,  
and WESTERN SURETY COMPANY, a Corporation duly licensed to do business in the State  
of Florida, as Surety, are held and firmly bound unto the  
County of Nassau, State of Florida, Obligee, in the amount  
(Valid only when a County, City, Town or Village is named as Obligee)  
of Two Thousand and 00/100s\*\* DOLLARS (\$2,000.00\*\*),  
(NOT VALID FOR MORE THAN \$25,000)

lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, That whereas, the Principal has been licensed as a Building Inspector

\_\_\_\_\_ by the Obligee.

NOW THEREFORE, if the Principal shall faithfully perform the duties and comply with the laws and ordinances (including all amendments), pertaining to the license or permit, then this obligation to be void, otherwise to remain in full force and effect for a period commencing on the 9th day of October, 1995, and ending on the 9th day of October, 1996, unless renewed by continuation certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing to the Obligee and to the Principal, in care of the Obligee or at such other address as the Surety deems reasonable, and at the expiration of thirty-five (35) days from the mailing of notice or as soon thereafter as permitted by applicable law, whichever is later, this bond shall terminate and the Surety shall be relieved from any liability for any subsequent acts or omissions of the Principal.

Dated this 9th day of October, 1995.

David M. Lovette  
Principal

Countersigned

By Glenda L. Smith  
Resident Agent

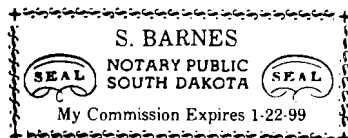
Principal  
WESTERN SURETY COMPANY  
By Joe Kirby  
President

### ACKNOWLEDGMENT OF SURETY (Corporate Officer)

STATE OF SOUTH DAKOTA }  
County of Minnehaha } ss

On this 9th day of October, 1995, before me, the undersigned officer, personally appeared Joe P. Kirby, who acknowledged himself to be the aforesaid officer of WESTERN SURETY COMPANY, a corporation, and that he as such officer, being authorized so to do, executed the foregoing instrument for the purpose therein contained, by signing the name of the corporation by himself as such officer.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.



S. Barnes  
Notary Public, South Dakota

Western Surety Company  
1-605-336-0850

ACKNOWLEDGMENT OF PRINCIPAL  
(Individual or Partners)

STATE OF Florida  
County of Nassau } ss

On this 9th day of October, 1995, before me personally appeared  
David M. Lovette

known to me to be the individual described in and who executed the foregoing instrument and  
acknowledged to me that he executed the same.

My commission expires

Raymond S. Aaron

Notary Public

ACKNOWLEDGMENT OF PRINCIPAL  
(Corporate Officer)

STATE OF \_\_\_\_\_ } ss  
County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me,  
personally appeared \_\_\_\_\_, who acknowledged himself to be the  
\_\_\_\_\_ of \_\_\_\_\_, a corporation,  
and that he as such officer being authorized so to do, executed the foregoing instrument for the pur-  
poses therein contained by signing the name of the corporation by himself as such officer.

My commission expires

Notary Public

Western Surety Company

License or Permit No. \_\_\_\_\_

LICENSE AND PERMIT  
BOND

As

of \_\_\_\_\_

State of \_\_\_\_\_

Name of Applicant

Address

Filed \_\_\_\_\_

Approved this \_\_\_\_\_

day of \_\_\_\_\_