

COLUMBIA COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM REQUEST FORM

Department: BCC Administration

Meeting Date: 10/1/2026

1. Nature and purpose of agenda item:

The Board requested an Addendum to all License Agreements to require the County's Insurance Agent to review all insurance policies.

2. Recommended Motion/Action:

Approve Addendum to License Agreement

3. Fiscal impact on current budget:

This item has no effect on the current budget.

ADDENDUM TO LICENSE AGREEMENT
_____ COMMUNITY CENTER

THIS ADDENDUM TO LICENSE AGREEMENT (“Addendum”) is made and entered into this ____ day of _____ 202__, between the **COLUMBIA COUNTY BOARD OF COUNTY COMMISSIONERS**, a political subdivision of the State of Florida, whose mailing address is Post Office Box 1529, Lake City, Florida 32056-1529, (herein “County”), and _____, whose mailing address is _____ (herein the “Community Center Board”), and amends the existing License Agreement between these parties dated _____.

RECITALS

WHEREAS, the parties entered into that certain License Agreement under which the Community Center Board operates the _____ Community Center; and

WHEREAS, the parties wish to amend, modify, and replace paragraph 5.F. of that agreement to revise the manner in which insurance coverages the Community Center Board is required to obtain and maintain are reviewed and approved.

NOW, THEREFORE, in consideration of the covenants of the parties herein contained, and other good and valuable consideration which each party acknowledges, County and Community Center Board agree as follows:

1. **RECITALS**. The above recitals are all true and correct and are incorporated herein and made a part of this Agreement.

2. **LICENSE AGREEMENT AMENDED**. Section 5.F. of the License Agreement is deleted, and in its place said section shall read as follows:

F. The Community Center Board shall provide its own general liability insurance in the amount of ONE MILLION and 00/100 DOLLARS (\$1,000,000), officers and directors insurance in the amount of ONE MILLION and 00/100 DOLLARS (\$1,000,000), and such other protective insurance as it may deem necessary. The policies of insurance required by this part shall be subject to review by the County’s designee who shall verify that said policies of insurance are complete, in effect, and structured in such a way as to protect the County. The County will provide casualty insurance for the premises, building and facilities, as well as property damage and general liability coverage for the County. It is the Community Center Board’s duty to ensure that any activity conducted by any third party pursuant to authorization of the Community Center Board is properly insured with the County as additional loss payee. The insurances provided under this part are a material consideration of this License Agreement, and any lapse in insurance

or other failure to maintain proper coverage may result in the immediate termination of the License Agreement.

3. **REMAINDER OF AGREEMENT UNCHANGED.** Other than section 5.F. as amended by this Addendum, the License Agreement shall remain in full force and effect.

4. **EFFECTIVE DATE.** The effective date of this Agreement is upon signing by all parties.

IN WITNESS WHEREOF, the parties have executed this License Agreement as of the day and year first above written.

Signed, sealed and delivered
in the presence of:

**COLUMBIA COUNTY, FLORIDA
BOARD OF COUNTY COMMISSIONERS**

Witness

By: _____
_____, Chairman

Print or type name

ATTEST: _____

Clerk of Courts

Witness

Print or type name

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

The foregoing instrument was acknowledged before me this _____ day of _____, 202__, by _____, as Chairman of the **BOARD OF COUNTY COMMISSIONERS OF COLUMBIA COUNTY, FLORIDA**, on behalf of the Board, who is personally known to me or who has produced a Florida driver's license as identification.

(NOTARIAL SEAL)

Notary Public, State of Florida

My Commission Expires: _____

Signed, sealed and delivered
in the presence of:

Witness

Print or type name

Witness

Print or type name

By: _____
_____, President

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

The foregoing instrument was acknowledged before me this _____ day of _____, 202__, by _____, as the _____ of _____, a Florida nonprofit corporation, who is personally known to me or who has produced a Florida driver's license as identification.

(NOTARIAL SEAL)

Notary Public, State of Florida

My Commission Expires: