



COLUMBIA COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM REQUEST FORM

The Board of County Commissioners meets the 1st and 3rd Thursday of each month at 5:30 p.m. in the Columbia County School Board Administrative Complex Auditorium, 372 West Duval Street, Lake City, Florida 32055. All agenda items are due in the Board's office one week prior to the meeting date.

Today's Date: 12/10/2019 Meeting Date: 12/19/2019

Name: Lacey Boatright Department: Public Works

Division Manager's Signature:

A handwritten signature in blue ink, appearing to be "Lacey Boatright", is written over the signature line.

1. Nature and purpose of agenda item:

BA 20-17 -- Insurance proceeds from 2013 John Deere Brush Cutter Fire, \$155,806.52.

2. Recommended Motion/Action:

Approve BA 20-17 allocating Insurance Proceeds from 2013 John Deere Brush Cutter Fire, \$155,806.52.

3. Fiscal impact on current budget.

This item is not budgeted. The proposed budget amendment to fund this request is provided below.

The budget amendment number is BA 20-17 using fund(s) 101-TRANSPORTATION TRUST.

FROM:	TO:	AMOUNT:
101-0000-369.10-00 MISC REVENUE / INSURANCE REIMB	101-4270-541.60-64 CAPITAL OUTLAY / EQUIPMENT PURCHASES	\$155,807.00



**ENGLE MARTIN
& ASSOCIATES**
Adjusters & Claims Administrators

1010 Jorie Boulevard
Suite 140
Oak Brook, IL 60523

O: 630.368.3710
F: 630.368.3711
TF: 800.818.5619

December 5, 2019

Columbia County Board of County Commissioners
135 NE. Hernando Avenue
Lake City, FL, 32055

Attention: Lacey Boatright, Director of Financial Management

RE: Member: Preferred Municipality- Columbia County Board of County Commissioners
Location of Loss: Lake City, FL 32055
Nature of Loss: Equipment Fire – 2013 John Deere Tractor
Date of Loss: October 31, 2019
Policy Number: PK2FL1 0121012 18-17
Our File Number: 1000283218
Claim Number: 361057

Dear Mrs. Boatright,

As you are aware, Engle Martin & Associates, Inc. is the designated adjusting firm assisting Preferred Governmental Insurance Trust (Preferred) with respect to this matter. We write on behalf of Preferred, subscribing to Policy Number PK2FL1 0121012 18-17, issued to the Named Member, Columbia County Board of County Commissioners.

Preferred writes to inform you they are issuing a payment, in the amount of **\$155,806.52**, for the above referenced claim regarding the inland marine equipment damages.

We appreciate your patience and cooperation throughout this matter.

Kindest regards,

ENGLE MARTIN & ASSOCIATES

Jason Agan

Jason Agan
National General Adjuster
jagan@englemartin.com
Cell Phone: (678) 850-0074

Enclosures:

ENGLE MARTIN & ASSOCIATES

Mike Fink
Executive General Adjuster
mfink@englemartin.com
Cell Phone: (404) 808-6226

10002832187

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1. Statement of Loss
2. Check

cc: Fred Tucker
PGCS c/o Preferred

Stanford Insurance Agency
202 Business Park Drive
Lynn Haven, FL 32444-5458



STATEMENT OF LOSS

Insured: Columbia County Board of Commissioners
Loss Location: Lake City, FL
Date of Loss: 10/31/2019
EMA File Number: 1000283218
Company Policy Number: PK2FL1 0121012 18-17
Company Claim Number: 361057

		Value	Loss	Claim
Scheduled Contractors' Equipment		155,450.00	155,450.00	155,450.00
Additional expenses		1,000,000.00	1,356.52	1,356.52
Loss:	156,806.52			
Deductible	(\$1,000.00)			
Subtotal	155,806.52			\$155,806.52
<hr/>				
Value, Loss, and Claim		1,155,450.00	156,806.52	155,806.52

Prepared by: Jason Agan
National General Adjuster
Engle Martin and Associates

PGIT COMBINED CLAIMS ACCOUNT

Regions Bank

63-466
631

ADMINISTERED BY: PREFERRED GOVERNMENTAL CLAIM SOLUTIONS

PO BOX 958456

LAKE MARY, FL 32795-8456

Claim Number: 361057

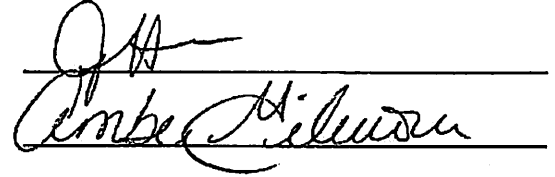
VOID AFTER 120 DAYS

DATE	CHECK NO.
12/6/2019	369005
AMOUNT	
\$155,806.52	

PAY One Hundred Fifty-Five Thousand Eight Hundred Six and 52/100 Dollars***

TO
THE
ORDER
OF

Columbia County Board Of County Commissioners
135 NE Hernando Avenue
Suite 203
Lake City, FL 32055



⑈0000369005⑈ ⑆063104668⑆ 0039462714⑈

Please cash or deposit the above check as soon as possible and retain this portion for your records

Description	From Date	To Date	Invoice #	Invoice Amt	Amount
Inland Marine				\$0.00	\$155,806.52

Claim Number: 361057

Claimant: Columbia County Board Of County Commissioners

Check Number: 369005 Total Check Amt: \$155,806.52 Event Date: 10/31/2019 Department: Columbia BoCC Columbia County Board Of C

Adjuster Name: Fred Tucker Adjuster Phone #: (321) 832-1400 Ext:4000 Event Number: EV2019344806 Control Number: 7091617

Memo: Payment minus deductible