

RTQ NO 2020-010
Professional Tennis Services
City of Coral Gables

Kevin Chow
12855 SW 76 Terrace
Miami, Florida 33183
(305) 794-4580
Kmc1975@yahoo.com

06/1/2020

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CITY OF CORAL GABLES, FL

2800 SW 72nd Avenue, Miami, FL 33155
 Finance Department / Procurement Division
 Tel: 305-460-5102 / Fax: 305-261-1601

PROFESSIONAL'S ACKNOWLEDGEMENT

<p>RTQ Title: Professional Tennis Instructors</p> <hr/> <p>RTQ No. 2020-010</p> <p>A cone of silence is in effect with respect to this RTQ. The Cone of Silence prohibits certain communication between potential vendors and the City. For further information, please refer to the City Code Section 2-1027 of the City of Coral Gables Procurement Code.</p>	<p>Electronic submittals must be received prior to 2:00 p.m., Wednesday June 17, 2020 via PublicPurchase; and are to remain valid for 120 calendar days. Submittals received after the specified date and time will not be opened.</p> <p>Contact: Letrice Y. Smith Title: Procurement Specialist Telephone: 305-460-5121 Email: Lsmith@coralgables.com /contracts@coralgables.com</p>
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Professional's Name: <i>KEVIN CHOW</i>	FEIN or SS Number: <i>589-42-1716</i>
Complete Mailing Address: <i>12855 SW 76 TER MIAMI, FL 33183</i>	Telephone No.:
Indicate type of organization below: Corporation: <input type="checkbox"/> Partnership: <input type="checkbox"/> Individual: <input checked="" type="checkbox"/> Other: <input type="checkbox"/>	Cellular No.: <i>305-794-4580</i>
	Fax No.:
	Email: <i>KMC1975@YAHOO.COM</i>

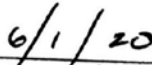
ATTENTION: THIS FORM ALONG WITH ALL REQUIRED RTQ FORMS MUST BE COMPLETED, SIGNED (PREFERABLY IN BLUE INK), AND SUBMITTED WITH THE RESPONSE PRIOR TO THE SUBMITTAL DEADLINE. FAILURE TO DO SO MAY DEEM PROFESSIONAL AS NON-RESPONSIVE.

THE PROFESSIONAL CERTIFIES THAT THIS SUBMITTAL IS BASED UPON ALL CONDITIONS AS LISTED IN THE RTQ DOCUMENTS AND THAT THE PROFESSIONAL HAS MADE NO CHANGES IN THE RTQ DOCUMENT AS RECEIVED. THE PROFESSIONAL FURTHER AGREES IF THE RESPONSE IS ACCEPTED, THE PROFESSIONAL WILL EXECUTE AN APPROPRIATE AGREEMENT FOR THE PURPOSE OF ESTABLISHING A FORMAL CONTRACTUAL RELATIONSHIP BETWEEN THE PROFESSIONAL AND THE CITY OF CORAL GABLES FOR THE PERFORMANCE OF ALL REQUIREMENTS TO WHICH THIS RTQ PERTAINS. FURTHER, BY SIGNING BELOW PREFERABLY IN BLUE INK, ALL RTQ PAGES ARE ACKNOWLEDGED AND ACCEPTED AS WELL AS ANY SPECIAL INSTRUCTION SHEET(S) IF APPLICABLE. THE UNDERSIGNED HEREBY DECLARES (OR CERTIFIES) ACKNOWLEDGEMENT OF THESE REQUIREMENTS AND THAT HE/SHE IS AUTHORIZED TO BIND PERFORMANCE OF THIS RTQ FOR THE ABOVE PROFESSIONAL.



 Authorized Name and Signature

 Title



 Date

SOLICITATION SUBMISSION CHECKLIST

Request to Qualify (RTQ) No. 2020-010

COMPANY NAME: (Please Print): KEVIN CHOW
Phone: 305-794-4530 Email: KMC1975@YAHOO.COM

Please provide the PAGE NUMBER in the blanks provided as to where compliance information is located in your Submittal for each of the required submittal items listed below:

SUBMITTAL - SECTION I: TITLE PAGE, TABLE OF CONTENTS, REQUIRED FORMS, AND MINIMUM QUALIFICATION REQUIREMENTS.

- 1) Title Page: Show the RTQ number and title, your full name, address, telephone number, contact information including telephone, e-mail address, and date. PAGE # 1
- 2) Provide a Table of Contents in accordance with and in the same order as the respective "Sections" listed below. Clearly identify the material by section and page number. PAGE # 2
- 3) Fill out, sign, and submit the Professional's Acknowledgement Form. PAGE # 3
- 4) Fill out and submit the Solicitation Submission Check List. PAGE # 4
- 5) Fill out, sign, notarize (as applicable), and submit the Professional's Affidavit and Schedules A through H. 5-6
- 6) Minimum Qualification Requirements: submit detailed verifiable information affirmatively documenting compliance with the Minimum Qualifications Requirements shown in Section 3. PAGE # 7-8
- 7) Indicate whether the Professional is a State of Florida and/or County Certified Small Business or Minority Business Enterprise. If so, indicate the certifying organization or jurisdiction and include a copy of the certification with your submittal. PAGE # 9

SUBMITTAL - SECTION II: EXPERIENCE AND QUALIFICATIONS

- 1) Provide a complete history and description of your experience with Tennis Employment, including, but not limited to; the number of years in tennis and list of places that you have worked/coached. Provide the names of at least three (3) references, not related to you that can verify your experience. Including their contact name, company name (if applicable), address, telephone number and email. PAGE # 10-13
- 2) Provide evidence of any and all Professional Certifications with any and all Tennis organizations, including the United States Professional Tennis Association (USPTA), United States Tennis Association (USTA), and the Professional Tennis Registry (PTR). Evidence can be in the form of certificate copies, organization correspondence, or other organization documents. PAGE # 13-17

PROFESSIONAL'S AFFIDAVIT


SOLICITATION: PROFESSIONAL TENNIS INSTRUCTORS – RTQ 2020-010

SUBMITTED TO: City of Coral Gables
Procurement Division
2800 SW 72 Avenue
Miami, Florida 33155

The undersigned acknowledges and understands the information contained in response to this solicitation and the referenced Schedules A through H shall be relied upon by Owner awarding the contract and such information is warranted by the Professional to be true and correct. The discovery of any omission or misstatements that materially affects the Professional's ability to perform under the contract shall be cause for the City to reject the solicitation submittal, and if necessary, terminate the award and/or contract. I further certify that the undersigned name(s) and official signatures of those persons are authorized as (*Owner, Partner, Officer, Representative or Agent of the Professional that has submitted the attached Response*). Schedules A through H are subject to Local, State and Federal laws (as applicable); both criminal and civil.

- SCHEDULE A - STATEMENT OF CERTIFICATION
- SCHEDULE B - NON-COLLUSION AND CONTINGENT FEE AFFIDAVIT
- SCHEDULE C - DRUG-FREE STATEMENT
- SCHEDULE D - PROFESSIONAL'S QUALIFICATION STATEMENT
- SCHEDULE E - CODE OF ETHICS, CONFLICT OF INTEREST, AND CONE OF SILENCE
- SCHEDULE F - AMERICANS WITH DISABILITIES ACT (ADA)
- SCHEDULE G - PUBLIC ENTITY CRIMES
- SCHEDULE H - ACKNOWLEDGEMENT OF ADDENDA

This affidavit is to be furnished to the City of Coral Gables with its RTQ response. It is to be filled in, executed by the Professional and notarized. If the response is made by a Corporation, then it should be executed by its Chief Officer. This document MUST be submitted with the response.



Authorized Name and Signature

Title

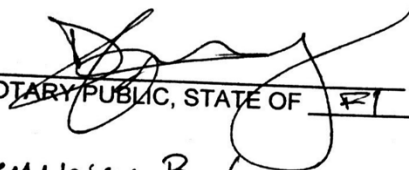
06/16/20

Date

STATE OF Florida
COUNTY OF Dade

On this 16 day of June, 2020, before me the undersigned Notary Public of
the State of FL, personally appeared Nevin M. Chow
(Name(s) of individual(s) who appeared before Notary

And whose name(s) is/are subscribes to within the instrument(s), and acknowledges it's
execution.


NOTARY PUBLIC, STATE OF FL
Dempsey B. Guerra
(Name of notary Public; Print, Stamp or
Type as Commissioned.)

Personally know to me, or Produced
Identification:

FLDZ
(Type of Identification Produced)

NOTARY PUBLIC
SEAL OF OFFICE:



DEMPSEY B GUERRA
Commission # GG 136704
Expires August 21, 2021
Bonded Thru Budget Notary Services

SCHEDULE "A" - CITY OF CORAL GABLES – STATEMENT OF CERTIFICATION

Neither I, nor the firm, hereby represented has:

- a. employed or retained for a commission, percentage brokerage, contingent fee, or other consideration, any firm or person (other than a bona fide employee working solely for me or the Professional) to solicit or secure this contract.
- b. agreed, as an express or implied condition for obtaining this contract, to employ or retain the services of any firm or person in connection with carrying out the contract, or
- c. paid, or agreed to pay, to any firm, organization or person (other than a bona fide employee working solely for me or the Professional) any fee, contribution, donation or consideration of any kind for, or in connection with, procuring or carrying out the contract except as here expressly stated (if any):

SCHEDULE "B" - CITY OF CORAL GABLES - NON-COLLUSION AND CONTINGENT FEE AFFIDAVIT

1. He/she is KEVIN CHOW
(Owner, Partner, Officer, Representative or Agent)

of the Professional that has submitted the attached response.

- 2. He/she is fully informed with respect to the preparation and contents of the attached response and of all pertinent circumstances respecting such response;
- 3. Said response is made without any connection or common interest in the profits with any other persons making any response to this solicitation. Said response is on our part in all respects fair and without collusion or fraud. No head of any department, any employee or any officer of the City of Coral Gables is directly or indirectly interested therein. If any relatives of Professional's officers or employees are employed by the City, indicate name and relationship below.

Name: _____ Relationship: _____

Name: _____ Relationship: _____

- 4. No lobbyist or other Professional is to be paid on a contingent or percentage fee basis in connection with the award of this Contract.

3. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:

1. A predecessor or successor of a person convicted of a public entity crime, or 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

4. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which Proposals or applies to Proposal on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

5. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **[Must indicate which statement below applies.]**

Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list.

[Attach a copy of the final order]

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

SCHEDULE "D" CITY OF CORAL GABLES - PROFESSIONAL'S QUALIFICATION STATEMENT

The undersigned declares the truth and correctness of all statements and all answers to questions made hereinafter:

GENERAL COMPANY INFORMATION:

Company Name: KEVIN CHOW

Address: 12555 SW 76 TERL MIAMI FL 33183
Street City State Zip Code

Telephone No: (305) 794-4580 Fax No: () Email: KMC1975@YAHOO.COM

How many years has your company been in business under its present name? 20 Years

If Professional is operating under Fictitious Name, submit evidence of compliance with Florida Fictitious Name Statue:

N/A

Under what former names has your company operated? _____

At what address was that company located? _____

Is your Company Certified? Yes No _____ If Yes, ATTACH COPY of Certification

Is your Company Licensed? Yes _____ No _____ If Yes, ATTACH COPY of License

Has your company or its senior officers ever declared bankruptcy?

Yes _____ No If yes, explain: _____

LEGAL INFORMATION:

Please identify each incident **within the last five (5) years** where a civil, criminal, administrative, other similar proceeding was filed or is pending, if such proceeding arises from or is a dispute concerning the Professional's rights, remedies or duties under a contract for the same or similar type services to be provided under this RTQ (A response is required. If applicable, please indicate "none" or list specific information related to this question. Please be mindful that responses provided for this question will be independently verified):

N/A

Has your company ever been debarred or suspended from doing business with any government entity?

If Yes _____ No If Yes, explain _____

Kevin Chow
12855 SW 76 Terrace
Miami, Fl 33183
(305) 794-4580
Kmc1975@yahoo.com

Summary of Objectives

Expert tennis professional with more than 30 years of experience within the U.S.A., Caribbean, and Canada. Conducting classes of instruction, program creation, tournament and camp management. Able to lead players as well as staff, to top performance through tailored skill development and accelerated team training as well as personalized coaching and mentoring. Seeking to work in a dynamic sports environment, recreation facility, as part of a team that shares the same passion for tennis as I do. My goal is to direct and formulate cutting-edge training programs, provide coaching and support, expand the club's current membership and teach others valuable life skills.

Experience

Tier One Tennis Academy

City of Coral Gables

March 2016-Current

High Performance Coordinator

Help organize and conduct all HP clinics. Encourage and promote tennis and the programs throughout the area. Work personally with players, members, and staff through private and group lessons. Help enforce all tennis facility policies, rules, and regulations. Worked with several Collegiate, US National, Sectional, and Designated champions.

Director of Chow Tennis Academy

Crossings Country Club

January 2003- February 2016

In charge of all tennis programming and tennis staff. Conducting private lessons for adults and junior members. Promote and encourage tennis programs in the area. Enforce all tennis facility rules, policies, and regulations. Quickly establish relationships and build trust with members, staff, and students. Worked with High performance juniors, top ranked in Florida, the US, and the world. Coached the Jamaica National Team. Worked with several US national champions.

Director of Tennis for Tamiami Tennis Center and JD Redd Park

January 2011- September 2015

Coordinated the implementation of all Adult and Junior tennis programs. In charge of recruiting, hiring, management of teaching professionals, and office staff. Managed all leagues and tournaments. Oversaw all junior team tennis at each facility. Promoted and generated new business which increased revenues throughout both facilities. Oversaw and ran training days for Special Olympics and worked with athletes representing the USA. Coached several top ranked World, national, sectional junior players.

Assistant Tennis Coach Men and Women Tennis

Saint Thomas University

1997-2005

My responsibilities included organizing practices. Worked closely with Head coach with scheduling matches and travel. In charge of new recruits which involved admission and eligibility. Developed workout routines and diet plans. Worked on goal setting for each player.

Coaching:

- Kelsey Laurente #1 in Florida 10's, 12's, 14's and Nationally, Top 5 nationally in 16's and 18's. Top 100 in ITF Juniors. Orange Bowl 16's Finalist 2009. Two-time Super National Champion. Current W.T.A. player and University of Miami Hurricane. Ranked In the top 30 in NCAA and #3 in NCAA Doubles.
- Chanelle Van Nguyen #1 in U.S.A. and Florida divisions. Orange Bowl 16 Champion in 2008. Four-time Super National Champion. Ranked #2 in NCAA Rankings. Played for UCLA and W.T.A. player.
- Monica Chow #1 in Florida in 10's, 12's, 14's, 16's, and #2 in 18's. Top 10 National ranking. A recent graduate Princeton Tiger.
- John Yetimoglu top 5 Florida 18's and top 20 Nationally. A recent graduate of Columbia University.

- Savannah Durkin #4 in Florida 16's, Top 5 in Florida 18's division, and top 500 ITF Junior. Recent graduate of Rice University.
- Juan Bologna #1 in Ecuador, #4 in South America, top 20 U.S.A. Former Clemson Tiger and University of Central Florida Knight.
- Evan Urbina #4 in Florida and Top 40 national ranking. Played #1 at BYU. Assistant Coach at Florida State University and current Assistant at Airforce.
- Jose Ortega top 5 in 10's, 12, 14's and currently #3 in Florida. 2015 High School State Champion. University of Southern Utah.
- Jordana Ossa #4 in 12's, #2 in Girls 16's and #4 in Girls 18's Florida. 2019 High School State Doubles Champion. Current Wisconsin Badger.
- Annie Carrera #25 in Florida and 2019 High School State Doubles Champion. Currently attending Saint Thomas University.
- Julen Morgan Currently Top 10 in the Florida Top 100 in U.S.A
- Carlos Ramirez top 15 in Florida.
- Dylan Chang Currently Top #5 in Florida Boys 14 and Top #50 in U.S.A.
- Brennon Chow Top 15 in Florida Boys 12's. Top 50 boys 14's.
- Caleb Chow Top 30 in Florida Boys 12's.

Playing Experience

- 6.0 NTRP playing rating
- Ranked ITF World Junior and Senior. Top 100 in Singles and #33 in Doubles
- Top 10 National U.S.T.A ranking in 30's, 35's, and 40's division.
- Varsity men's tennis player, St. Thomas University. Played at #1 and #2 singles and #1 doubles in the Florida Sun Conference.
- St. Thomas University ranked top 10 in the country in the (NAIA).
- State Closed Champion Men's 35's and 40's Division
- State Closed Doubles Champion
- Current member of Florida Cup Team. Champions in 2013, 2015, 2017, 2019. Captain in 2019 and 2020.

Education, Certification, and Awards

Bachelor of Art in Biology, St. Thomas University

Certified by Professional Tennis registry – Professional

Certified by the United States Professional Tennis Association – Professional

2020 U.S.P.T.A District Professional of the month for March

2013 U.S.T.A Florida Outstanding Tennis Facility

2014 U.S.P.T.A District Professional of the year

2014 USTA Florida Junior Competitive Coach of the year

Net Generation Certified

Red Cross Adult and Pediatric First Aid/CPR/AED Certified

Coach on Florida's Coaches Commission

USTA Florida Tournament Evaluator

References

Mark Dickson

Professional Tennis Operations Supervisor, Crandon Park Tennis Center

7300 Crandon Boulevard, Key Biscayne, FL

Work:305-365-2300

Cell: 941-356-2286

Bruce Carrington

Men and Woman Head Coach, St. Thomas University

16401 NW 37th Ave, Miami Gardens, FL 33054

Work: 305-474-6816

Cell: 305-496-0236

E-mail: bcarrington@stu.edu

Paige Yaroshuk-Tews

Women's Head Coach, University of Miami

1320 S Dixie Hwy, Coral Gables, FL 33146

Work: 305- 284-5174

Cell: 305-301-6863

E-mail: pyaroshuk@miami.edu



RECEIPT

Wednesday, June 26, 2019

Kevin Chow

12855 SW 76th Ter

Miami, FL 33183-4204

Member # 42639

Membership Expires: 08/31/2020

Additional Insurance: Sep 1, 2019 thru Aug 31, 2020	\$80.00
Membership: September 1, 2019 thru August 31, 2020	\$159.00
Liability Insurance: September 1, 2019 thru August 31, 2020	\$49.00

PAYMENT DATE: 06/26/2019

PAYMENT TYPE: VISA

CREDIT CARD NUMBER: *****8463

AUTHORIZATION #: 125760

AMOUNT: \$288.00

Professional Tennis Registry
PO Box 4739 Hilton Head Island SC 29938
843-785-7244 fax 843-686-2033 www.ptrtennis.org
ptr@ptrtennis.org



Thank you for your PTR membership.

PTR is the largest international tennis coaching organization and offers member the best training and educational opportunities available.

Take advantage of the many sponsor discounts and online resources for PTR members by using the membership number on your card.



PTR's mission is to educate, certify and service tennis teachers and coaches around the world in order to grow the game. The bearer of this card is a member of Professional Tennis Registry in good standing as noted on the front of this card.

Professional Tennis Registry
PO Box 4739, Hilton Head Island SC 29938 USA
phone 843.785.7244 • fax 843.686.2033
ptr@ptrtennis.org • www.ptrtennis.org



certifies that according to the guidelines and standards established

Kevin Chow

has completed all tests and examinations and aualifies for PTR Certification of

Professional

and is a member in good standing

May 2002 - August 2020


Karl Hale, President


Dan Santorum, CEO



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/29/2019

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 Coastal Plains Insurance PO Box 6869 Hilton Head Island SC 29938		CONTACT NAME: Erica James, AINS PHONE (A/C, No, Ext): (888) 668-8082 FAX (A/C, No): E-MAIL ADDRESS: erica@coastalplains.com	
INSURED Professional Tennis Registry Professional Pickleball Registry P. O. Box 4739 Hilton Head Island SC 29938		INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Indemnity Insurance Company NAIC # 18058 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL1971597044 **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	ADDITIONAL SUBROGATION	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. JECT <input type="checkbox"/> LOC OTHER:		PHPK2011024	09/01/2019	09/01/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ EXCLUDED PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		PHUB685688	09/01/2019	09/01/2020	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY AND EMPLOYERS' PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
42639- Certificate Holder is listed as Additional Insured #44 with respects to PTR Member#42639 Kevin Chow- 12855 SW 76th Ter, Miami, FL 33183-4204

CERTIFICATE HOLDER City of Coral Gables PO Box 100085- CE Duluth GA 30096	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 
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