

2010
FORT BEND COUNTY FY 2009
COMMISSIONERS COURT AGENDA REQUEST FORM

AGENDA ITEM 8

Return Completed Form by E-Mail to: Agenda Coordinator, County Judge's Office

Date Submitted: 9/14/2009 Submitted By: James Wenzel
Department: Commissioner Pct. 1
Court Agenda Date: 9/22/2009 Phone Number: 281.344.9400
10-20

SUMMARY OF ITEM:

Take all appropriate action to approve release for Convey Of Hope event to be held at the Fort Bend County Fairgrounds on November 21, 2009 for a public event.

RENEWAL AGREEMENT/APPOINTMENT YES ☐ NO ☐
REVIEWED BY COUNTY ATTORNEY'S OFFICE: YES ☐ NO ☐

List Supporting Documents Attached: Fort Bend Convoy Of Hope Request

FINANCIAL SUMMARY:

BUDGETED ITEM: YES ☐ NO ☐

FUNDNG SOURCE: Accounting Unit: Activity (If Applicable): Account Number:

DESCRIPTION OF LAWSOM ACCOUNT: _____

Instructions to submit Agenda Request Form:

- Completely fill out agenda form: incomplete forms will not be processed.
- Agenda Request Forms should be submitted by e-mail, fax, or inter-office mail, and all back-up information must be provided by Wednesday at 2:00 p.m. to all those listed below.
- All original back-up must be received in the County Judge's Office by 2:00 p.m. on Wednesday.

DISTRIBUTION:

Original Form Submitted with back up to County Judge's Office ☐ (✓ when completed)
If by E-Mail to ospindon@co.fort-bend.tx.us If by Fax to (281) 341-8609

Distribute copies with back-up to all listed below. If by fax, send to numbers below:

<input type="checkbox"/> Auditor (281-341-3774)	<input type="checkbox"/> Comm. Pct. 1 (281-342-0587)
<input type="checkbox"/> Budget Officer (281-344-3954)	<input type="checkbox"/> Comm. Pct. 2 (281-403-8009)
<input type="checkbox"/> Facilities/Planning (281-633-7022)	<input type="checkbox"/> Comm. Pct. 3 (281-242-9060)
<input type="checkbox"/> Purchasing Agent (281-341-8642)	<input type="checkbox"/> Comm. Pct. 4 (281-980-9077)
<input type="checkbox"/> Information Technology (281-341-4526)	<input type="checkbox"/> County Clerk (281-341-8697)
<input type="checkbox"/> Other:	<input type="checkbox"/> County Atty (281-341-4557)

RECOMMENDATION / ACTION REQUESTED:

Special Handling Requested (specify):

10-22-09 orig. ret. to James at Comm. Pct. 1

THE STATE OF TEXAS §
 § KNOW ALL MEN BY THESE PRESENTS:
COUNTY OF FORT BEND §

FULL RELEASE AND AUTHORIZATION FOR USE OF COUNTY PROPERTY

This Full Release is made and entered into by and between **Fort Bend County**, Texas, (hereinafter referred to as "County"), and **Fort Bend Convoy of Hope** (hereinafter referred to as "Convoy of Hope").

WHEREAS, the County desires to permit Convoy of Hope use of the following facilities and grounds at the Fort Bend County Fairgrounds: Building C, the Texas Pavilion, the Security/First Aid facility, and the fenced grounds (hereinafter referred to collectively as the "Property") on November 21, 2009, for a public purpose;

WHEREAS, Convoy of Hope desires to fully release County of any and all claims deriving or resulting from the use of the Property; and

WHEREAS, the Convoy of Hope desires to fully indemnify County from any and all claims deriving or resulting from the use of the Property; and

WHEREAS, the parties agree the purpose of the Release is to buy peace;

NOW THEREFORE, in consideration of the recitals set forth above, the parties agree as follows:

I.

Convoy of Hope and its officials, officers, employees, agents, servants, volunteers, and all persons in privity with Convoy of Hope, hereby agree to fully release, acquit, and forever discharge County, its officials, officers, employees, agents and servants, and all persons in privity with County, from any and all future claims or causes of action of any kind whatsoever, at common law, statutory or otherwise, that might arise, at any time, directly or indirectly attributable to Convoy of Hope's use of the Property on November 21, 2009.

II.

Convoy of Hope and its officials, officers, employees, agents, servants, volunteers, and all persons in privity with Convoy of Hope, hereby agree to indemnify and hold harmless County and its officials, officers, employees, agents and servants, and all persons in privity with County, from and against any and all claims, losses, damages, causes of action, suits, and liability of any kind, including all expenses of litigation, court costs, attorney's fees, bodily injury, sickness, disease or death, that might arise, at any time, directly or indirectly attributable to Convoy of Hope's use of the Property on November 21, 2009.

III.

Convoy of Hope shall be solely responsible for obtaining all necessary and proper law enforcement to aid in traffic control.

IV.

Prior to the date of use, Convoy of Hope shall furnish County with properly executed certificates of insurance which shall evidence all insurance required and provide that such insurance shall not be canceled, except on 30 days' prior written notice to the County. Convoy of Hope shall provide certified copies of insurance endorsements and/or policies if requested by County. Convoy of Hope shall maintain such insurance coverage for the entire period of the use of the Property. Convoy of Hope shall obtain such insurance written on an Occurrence form from such companies having Bests rating of A/VII or better, licensed or approved to transact business in the State of Texas, and shall obtain such insurance of the following types and minimum limits:

- (1) Commercial general liability insurance with a limit of not less than \$1,000,000 each occurrence and \$2,000,000 in the annual aggregate. Policy shall cover liability for bodily injury, personal injury, and property damage and products/completed operations arising out of the business operations of the policyholder.
- (2) Automobile Liability insurance with a combined Bodily Injury/Property Damage limit of not less than \$1,000,000 each accident.

All Liability insurance policies shall name County as an additional insured.

Convoy of Hope represents and warrants that the person executing below on behalf of Convoy of Hope is duly authorized to execute this Release.

EXECUTED this the 20 day of October, 2009.

FORT BEND COUNTY, TEXAS:


By:


Robert E. Hebert, County Judge

Date:

October 20, 2009

ATTEST:


Dianne Wilson, County Clerk

FORT BEND CONVOY OF HOPE

By: Rev. Samuel P. Tinsdale
(Authorized Representative)

Title: Coordinator Ft. Bend Convoy of Hope

Date: 10/04/09

ACORD TM **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

09/08/2009

PRODUCER **Janelle L Dorski**
Church Mutual Insurance Company
3000 Schuster Lane
Merrill WI 54452

If calling from Texas: 1-800-554-2642 Option 1

If calling from Outside Texas: 1-800-554-2642 Option 9, then area code 281

INSURED

FIRST ASSEMBLY OF GOD**2512 AVE N****ROSENBERG TX 77471**

Group

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.

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: Church Mutual Insurance Company

18767

INSURER B:

INSURER C:

INSURER D:

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
LTR	INSRD					
A	X	GENERAL LIABILITY	0136420-02-006580	02/04/2009	02/04/2012	EACH OCCURRENCE \$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea. occurrence) \$
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 10,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				PERSONAL & ADV INJURY \$ 1,000,000
		<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> LOCATION				GENERAL AGGREGATE \$ 3,000,000
		<input type="checkbox"/> PROJECT				PRODUCTS - COM/PO/ AGG \$ 1,000,000
						Property Damage Legal Liability (any one occurrence) \$ 300,000
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea. Accident) \$
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per Person) \$
		<input type="checkbox"/> ALL OWNED AUTOS				
		<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per Accident) \$
		<input type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE (Per Accident) \$
		<input type="checkbox"/> NON-OWNED AUTOS				AUTO ONLY - EA ACCIDENT \$
						OTHER THAN EA ACC \$
		GARAGE LIABILITY				AUTO ONLY: AGG \$
		<input type="checkbox"/> ANY AUTO				
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE \$
		<input type="checkbox"/> OCCURRENCE <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
		<input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION				\$
		\$				\$
		WORKERS COMPENSATION AND EMPLOYER'S LIABILITY				WC STATUTORY LIMITS
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				OTHER
		If yes, describe under SPECIAL PROVISIONS below				E.L. EACH ACCIDENT \$
						E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$
		OTHER				\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

Evidence of Liability Insurance for a charge-free 1 day Community Outreach held on Nov 18, 2009 - Nov 22, 2009. Outreach will include groceries, health services, chili cook-off and kids carnival, held at the Fort Bend County Fairgrounds - midway, Building C and refreshment center (any other activities going on inside the Fairgrounds are not associated with this event). Commercial General Liability Additional Insured= Fort Bend County Fairgrounds for a charge-free 1 day Community Outreach held on Nov 18, 2009 - Nov 22, 2009 (including set up and clean up). Outreach will include groceries, health services, chili cook-off and kids carnival, held at the Fort Bend County Fairgrounds - midway, Building C and refreshment center (any other activities going on inside the Fairgrounds are not associated with this event). Subject to the coverage provided by the referenced policy. 051 A220

CERTIFICATE HOLDER

Fort Bend County Fairgrounds
4310 Hwy 36 South
Rosenberg TX 77471

CANCELLATION

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



IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.